



2023

COMMUNITY HEALTH NEEDS ASSESSMENT

Circle, Montana

*Assessment conducted by **McCone County Health Center** in cooperation with the Montana Office of Rural Health*



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INTRODUCTION

Introduction

McCone County Health Center (MCHC) in Circle, Montana is a licensed 25-bed Critical Access Hospital (CAH) and rural health clinic. The CAH's 25-beds may be used interchangeably for acute or swing bed services. MCHC utilizes approximately 21 beds for long-term care residents. Besides primary care services provided through the McCone County Rural Health Clinic, other services include the following: inpatient, outpatient, emergency, acute, skilled nursing facility, nursing facility (long-term care), observation, in-patient pharmacy, x-ray, laboratory, physical therapy and telehealth.



McCone County is the owner of the facilities housing McCone County Health Center, which include McCone County Rural Health Clinic and the surrounding grounds. McCone County contracts management and operation of such facilities to MCHC. MCHC has a service area of just over 2,600 square miles and offers medical services to the McCone County population of approximately 1,701 people.

McCone County Health Center's primary service area includes the communities of Circle, Brockway, Vida and Richey; and residents living in Dawson County along US 200. McCone County has a low population density and is considered a frontier (six or less people per square mile) by the US



Department of Health and Human Services. For further demographic, socioeconomic and other related county and state data, please see Appendix C to review the Secondary Data Analysis.

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.

McCone County Health Center participated in the Community Health Services Development (CHSD) Project administrated by the Montana Office of Rural Health (MORH) and funded in part through the Montana Health Research and Education Foundation (MHREF) Flex Grant. Community involvement in steering committee meetings and key informant interviews enhance community engagement in the assessment process.

In April 2023, MCHC's was surveyed about its healthcare system. This report shows the results of the survey in both narrative and chart formats. A copy of the survey instrument is included as the end of this report (Appendix E). Readers are invited to familiarize themselves with the survey instrument and the subsequent findings. The narrative report touches on the highlights while the charts present data for every question asked. Please note we are able to compare some of the 2023 survey data with data

from previous surveys conducted in partnership with the Montana Office of Rural Health in 2017 and 2020. If any statistical significance exists, it will be reported. The significance level was set at 0.05.

Health Assessment Process

A steering committee was convened to assist McCone County Health Center in conducting CHSD. A diverse group of community members representing various organizations and populations within the community (ex. public health, elderly, young families, uninsured) came together in March 2023. For a list of all steering committee members and their affiliations, see Appendix A. The Steering Committee met twice during the CHSD process; first to discuss health concerns in the community and offer their perspective in designing the survey instrument, and again to review results of the CHNA and to assist in the prioritization of health needs.



Survey Methodology

Survey Instrument

In April 2023, surveys were mailed out to the residents in the MCHC service area. Survey respondents had the ability to complete the survey mailed to them, or via an online survey hosted at Montana State University’s HELPS Lab web portal. The survey was based on a design that has been used extensively in the states of Washington, Wyoming, Alaska, Montana, and Idaho. The survey was designed to provide each facility with information from local residents regarding:

- Demographics of respondents
- Hospitals, primary care providers, and specialists used, plus reasons for selection
- Local healthcare provider usage
- Services preferred locally
- Perception and satisfaction of local healthcare

Sampling

McCone County Health Center provided an aggregated list of outpatient and inpatient admissions and information regarding service area zip codes. Those zip codes with the greatest number of admissions were selected to be included in the survey. A random list of 630 residents was then selected with the assistance of the MSU HELPS lab. Residence was stratified in the initial sample selection so that each area would be represented in proportion to the overall served population and the proportion of past admissions. Note: although the survey samples were proportionately selected, actual surveys returned from each population area varied, which may result in slightly less proportional results. See table on the following page for the survey distribution.

Zip Code	Population ¹	Community Name	Total Distribution	# Male	# Female
59215	588	Circle	378	199	179
59259	165	Richey	116	58	58
59214	140	Brockway	54	32	22
59274	287	Vida	32	16	16
59201	2611	Wolf Point	20	10	10
59339	162	Lindsay	18	9	9
59337	351	Jordan	8	4	4
59349	566	Terry	4	2	2
Total			630	330	300

¹ US Census Bureau - American Community Survey (2019)

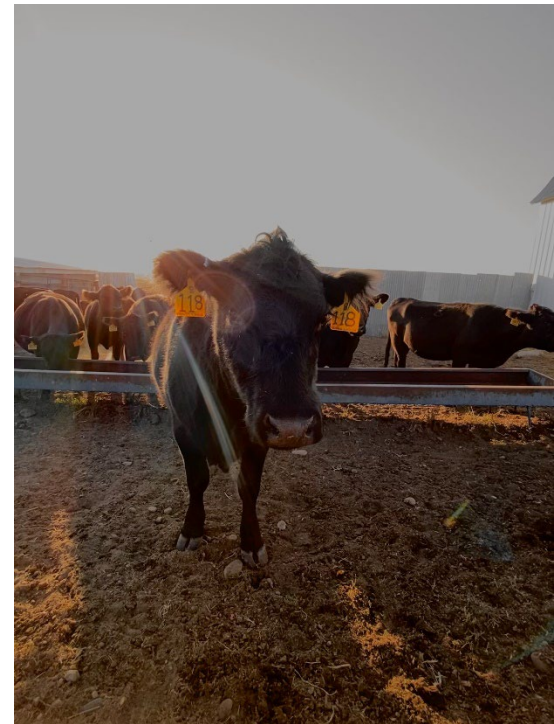
Key informant interviews were conducted to identify important local healthcare issues, how to improve the health of the community, and gaps in health services. It was intended that this research would help determine the awareness of local programs and services, as well as the level of satisfaction with local services, providers, and facilities.

Information Gaps- Data

It is a difficult task to define the health of rural and frontier communities in Montana due to the large geographic size, economic and environmental diversity, and low population density. Obtaining reliable, localized health status indicators for rural communities continues to be a challenge in Montana.

There are many standard health indices used to rank and monitor health in an urban setting that do not translate as accurately in rural and frontier areas. In the absence of sufficient health indices for rural and frontier communities in Montana, utilizing what is available is done with an understanding of access to care in rural and frontier Montana communities and barriers of disease surveillance in this setting.

The low population density of rural and frontier communities often requires regional reporting of many major health indices, including chronic disease burden and behavior health indices. The Montana BRFS (Behavioral Risk Factor Surveillance System), through a cooperative agreement with the Center for Disease Control and Prevention (CDC), is used to identify regional trends in health-related behaviors. The fact that many health indices for rural and frontier counties are reported regionally makes it impossible to set the target population aside from the five more-developed Montana counties.



Limitations in Survey and Key Informant Interview Methodology

A common approach to survey research is the mailed survey. However, this approach is not without limitations. There is always the concern of non-response as it may affect the representativeness of the sample. Thus, a mixture of different data collection methodologies is recommended.

Conducting key informant interviews in addition to the random sample survey allows for a more robust sample, and ultimately, these efforts help to increase the community response rate. Partnering with local community organizations such as public health, community health centers, and senior centers, just to name a few, assists in reaching segments of the population that might not otherwise respond to a survey.

While key informant interview data can offer invaluable insight into the perception of a community or group of individuals, qualitative data can be difficult to analyze. For this reason, key informant interview data are grouped into common themes based on our interpretation of the transcript. To better understand these themes, please review the full transcripts in Appendix I. MORH staff facilitated the key informant interviews for McCone County Health Center to ensure impartiality. However, given the small size of the community, key informant interview participants may still be hesitant to express their opinions freely. Personal identifiers are not included in the transcripts.



Survey Implementation

In April 2023, a survey, cover letter with the MCHC CEO's signature, and a postage paid envelope were mailed to 630 randomly selected residents in the hospital's service area. A news release was sent to the local newspaper as well as social media postings prior to the survey distribution announcing that McCone County Health Center would be conducting a community health needs assessment survey throughout the region in cooperation with the Montana Office of Rural Health.

One-hundred fifty-nine surveys were returned out of 630. Of those 630 surveys, 56 surveys were returned undeliverable for a 27.7% response rate. From this point on, the total number of surveys will be out of 574. Based upon the sample size, we can be 95% confident that the responses to the survey questions are representative of the service area population, plus or minus 7.6%.

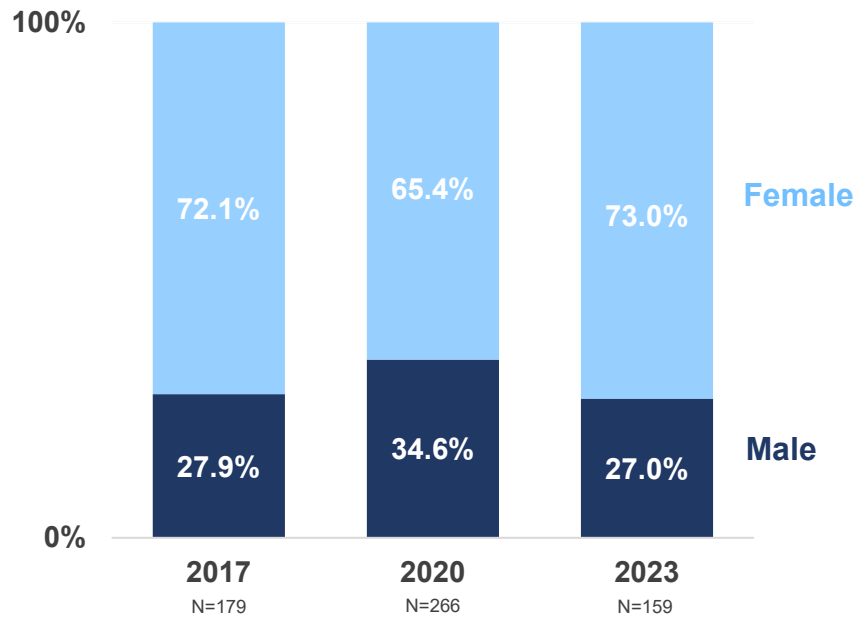
Survey Respondent Demographics

A total of 630 surveys were distributed throughout the MCHC service area. One-hundred fifty-nine surveys were completed for a 27.7% response rate. The following table and graphs indicate the demographic characteristics of the survey respondents. Information on location, gender, age, and employment is included. Percentages indicated on the tables and graphs are based upon the total number of responses for each individual question, as some respondents did not answer all questions.

Place of Residence	2017 % (n)	2020 % (n)	2023 % (n)
Number of respondents	186	268	159
59215 Circle	84.4% (157)	70.1% (188)	71.1% (113)
59259 Richey	4.8% (9)	12.7% (34)	15.1% (24)
59214 Brockway	5.4% (10)	6.0% (16)	4.4% (7)
59274 Vida	3.8% (7)	5.6% (15)	3.8% (6)
59339 Lindsay	1.6% (3)	2.2% (6)	2.5% (4)
59201 Wolf Point		0.0% (0)	1.9% (3)
59337 Jordan	0.0% (0)	0.0% (0)	0.6% (1)
59349 Terry		0.0% (0)	0.0% (0)
Other	0.0% (0)	3.4% (9)	0.6% (1)
TOTAL	100.0% (186)	100.0% (268)	100.0% (159)

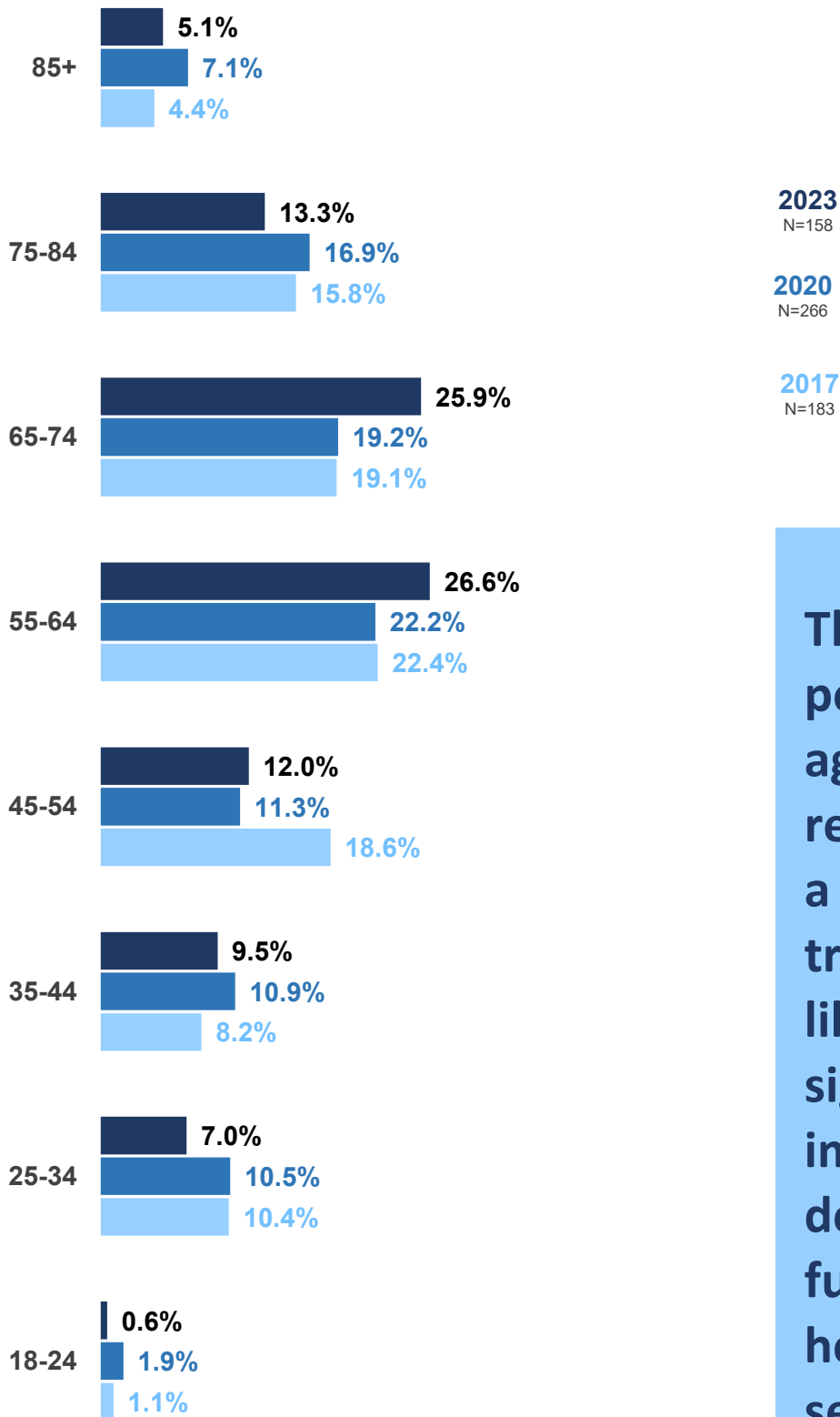
Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year.

Gender



Women are frequently the healthcare decision makers for their families and more likely to respond to a health-related survey.

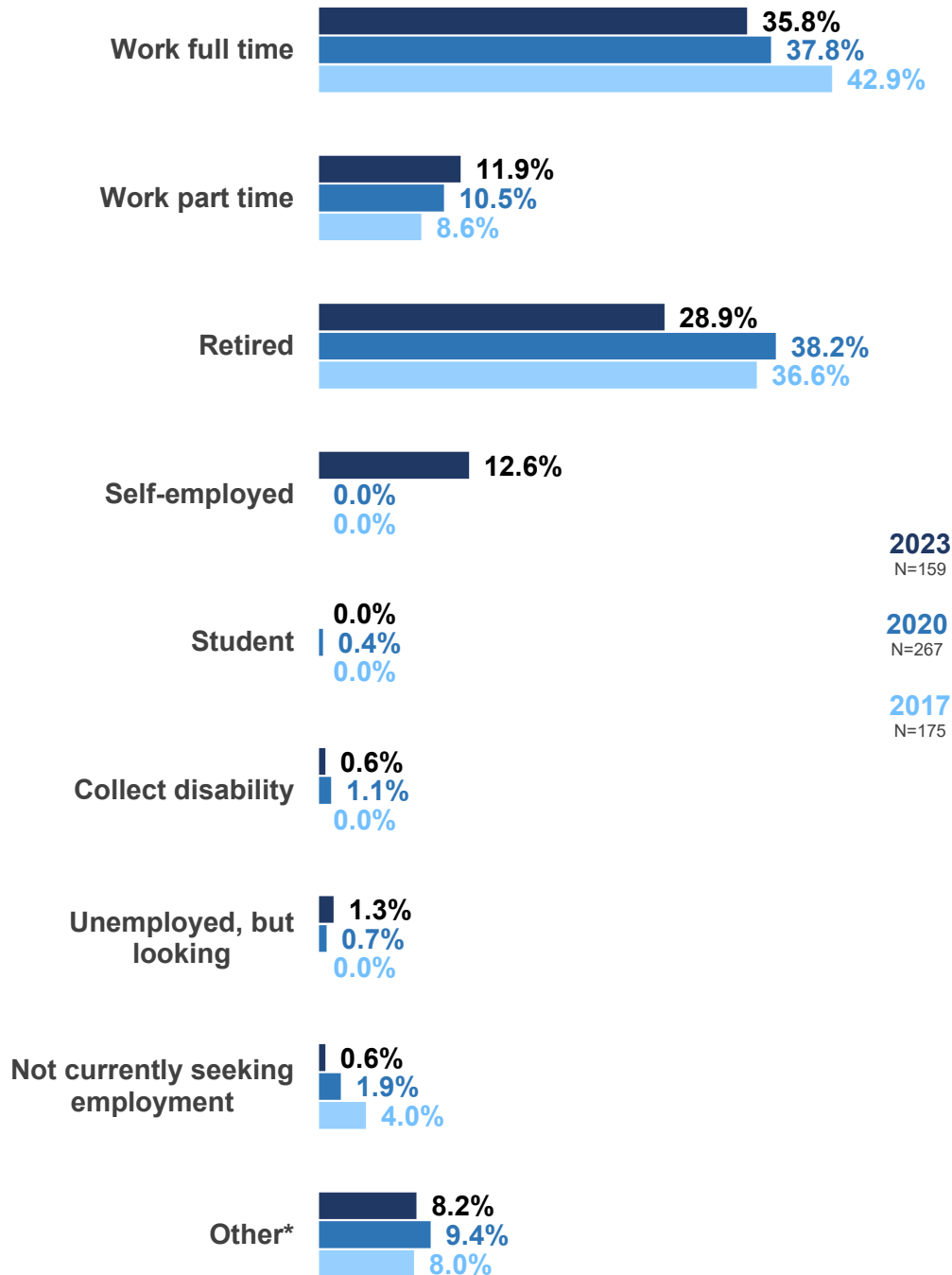
Age of respondents for all years of the survey



The increasing percentage of aging rural residents is a statewide trend and will likely have a significant impact on demand for future healthcare services.

Employment status

The majority of 2023 respondents work full time.



*Respondents (N=11) who selected over the allotted amount were moved to "Other."

"Other" comments included: Stay at home provider and Housewife



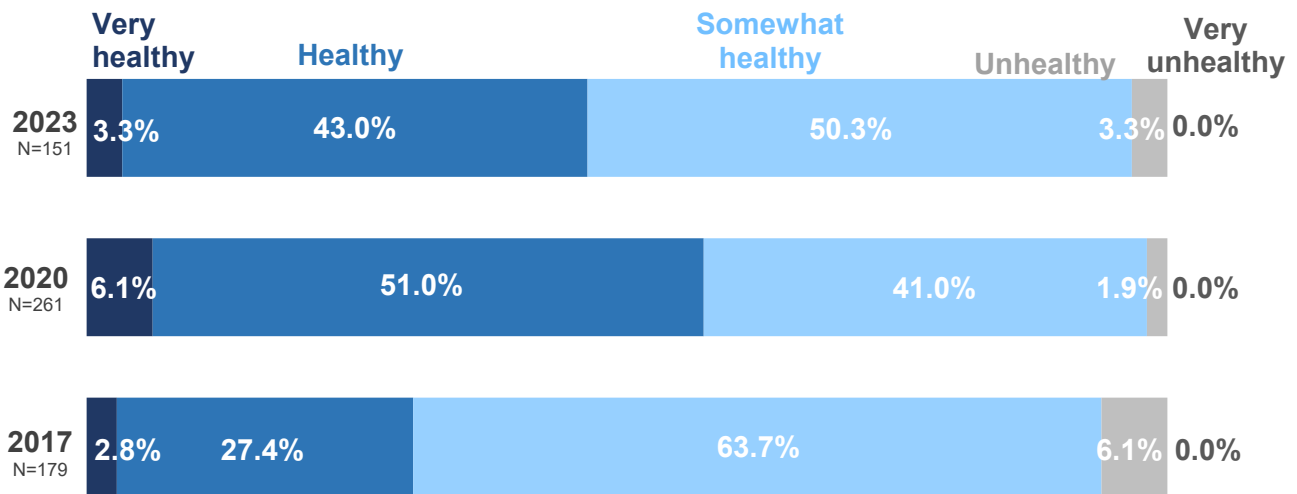
SURVEY RESULTS

Survey Results

Rating of Healthy Community (Question 1)

Respondents were asked to indicate how they would rate the general health of their community. Fifty-point three percent of respondents (n=76) rated their community as “Somewhat healthy,” and 43.0% of respondents (n=65) felt their community was “Healthy.” Three point three percent of respondents (n=5, each) indicated they felt their community was “Very healthy” or “Unhealthy.” No respondents rated their community as “Very unhealthy.”

More 2023 respondents rate their community as somewhat healthy compared to 2020.



Half of survey respondents feel their community is somewhat healthy.

Health Concerns for Community (Question 2)

Respondents were asked what they felt the three most serious health concerns were in their community. The top identified health concern was “Cancer” at 54.8% (n=86), which experienced a significant change over the last three assessments. “Alcohol abuse” was also a high priority at 24.8% (n=39).

“Other” comments included: Old population and I don’t know
 (View all comments in Appendix G)

Health Concern	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	186	272	157	
Cancer	78.0% (145)	41.2% (112)	54.8% (86)	■
Alcohol abuse			24.8% (39)	□
Overweight/obesity	26.9% (50)	25.7% (70)	22.3% (35)	□
Heart disease	31.2% (58)	24.6% (67)	19.7% (31)	■
Depression/anxiety	24.7% (46)	14.7% (40)	18.5% (29)	■
Diabetes	16.7% (31)	21.3% (58)	18.5% (29)	□
Lack of access to healthcare	10.2% (19)	15.4% (42)	17.8% (28)	□
Alzheimer’s/dementia		7.4% (20)	17.2% (27)	■
Lack of dental care	15.6% (29)	14.3% (39)	14.0% (22)	□
Social isolation/loneliness		9.6% (26)	13.4% (21)	□
Mental health issues	7.0% (13)	9.6% (26)	12.1% (19)	□
Tobacco use (cigarettes, vaping/ e-cigarettes, smokeless)	9.1% (17)	13.2% (36)	12.1% (19)	□
Work/economic stress		14.3% (39)	9.6% (15)	□
Lack of exercise	14.5% (27)	9.2% (25)	8.9% (14)	□
Stroke	8.1% (15)	7.0% (19)	7.0% (11)	□
Respiratory issues/illness		6.6% (18)	4.5% (7)	□
Work related accidents/injuries	3.8% (7)	4.0% (11)	3.2% (5)	□
Substance abuse			2.5% (4)	□
Recreation related accidents/injuries	1.1% (2)	1.8% (5)	1.9% (3)	□
Motor vehicle accidents	4.3% (8)	3.3% (9)	1.3% (2)	□
Suicide		1.5% (4)	1.3% (2)	□
Child abuse/neglect	0.5% (1)	0.0% (0)	0.6% (1)	□
Domestic violence	0.5% (1)	0.4% (1)	0.0% (0)	□
Hunger		0.0% (0)	0.0% (0)	□

Table continued on the next page.

Other	1.1% (2)	3.7% (10)	1.3% (2)	<input type="checkbox"/>
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A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three serious health concerns, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

Components of a Healthy Community (Question 3)

Respondents were asked to identify the three most important things for a healthy community. Fifty point six percent of respondents (n=80) indicated that “Access to healthcare services” is important for a healthy community, followed by “Good jobs and a healthy economy” and “Strong family life” at 35.4% (n=56, each).

Components of a Healthy Community	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	186	272	158	
Access to healthcare services	73.1% (136)	57.7% (157)	50.6% (80)	<input checked="" type="checkbox"/>
Good jobs and a healthy economy	36.0% (67)	44.1% (120)	35.4% (56)	<input type="checkbox"/>
Strong family life	32.8% (61)	29.8% (81)	35.4% (56)	<input type="checkbox"/>
Good schools	24.2% (45)	22.1% (60)	28.5% (45)	<input type="checkbox"/>
Religious or spiritual values	32.8% (61)	30.5% (83)	27.8% (44)	<input type="checkbox"/>
Healthy behaviors and lifestyles	38.7% (72)	29.0% (79)	25.9% (41)	<input checked="" type="checkbox"/>
Access to healthy foods		17.3% (47)	17.7% (28)	<input type="checkbox"/>
Low crime/safe neighborhoods	18.3% (34)	10.3% (28)	12.0% (19)	<input checked="" type="checkbox"/>
Access to childcare/after school programs		7.4% (20)	11.4% (18)	<input type="checkbox"/>
Affordable housing	13.4% (25)	7.0% (19)	11.4% (18)	<input type="checkbox"/>
Community involvement	7.0% (13)	8.5% (23)	10.8% (17)	<input type="checkbox"/>
Clean environment	8.6% (16)	5.9% (16)	8.2% (13)	<input type="checkbox"/>
Opportunities for physical activity		5.1% (14)	6.3% (10)	<input type="checkbox"/>
Low death and disease rates	5.4% (10)	2.6% (7)	3.8% (6)	<input type="checkbox"/>
Tolerance for diversity	1.1% (2)	1.8% (5)	3.2% (5)	<input type="checkbox"/>
Transportation services		4.0% (11)	1.9% (3)	<input type="checkbox"/>
Low level of domestic violence	0.0% (0)	1.1% (3)	0.6% (1)	<input type="checkbox"/>
Arts and cultural events	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>

Table continued on the next page.

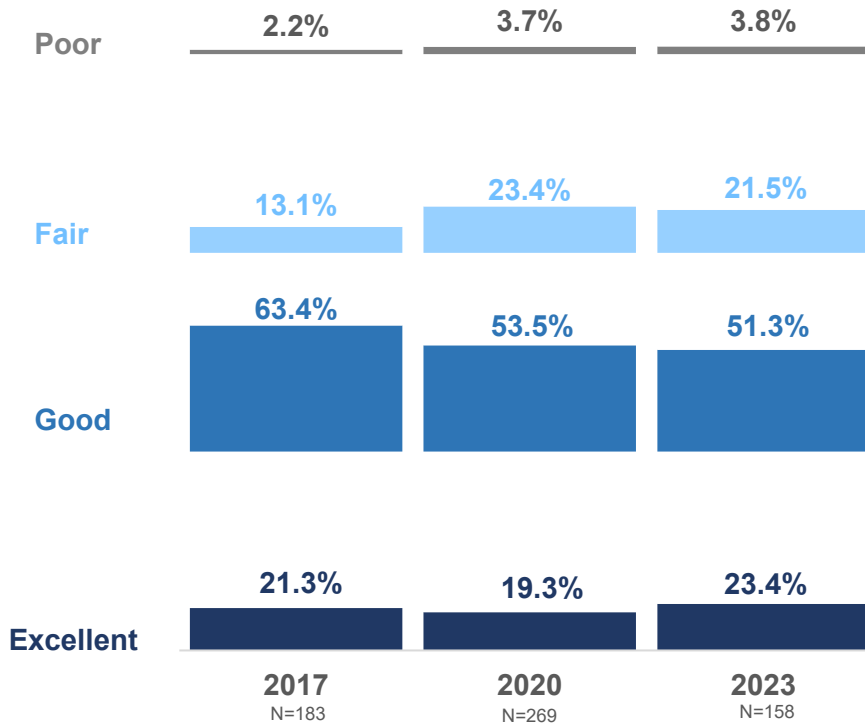
Parks and recreation	5.4% (10)	0.4% (1)	0.0% (0)	■
Other*	1.1% (2)	2.2% (6)	1.9% (3)	□

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three components of a healthy community, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=2) who selected over the allotted amount were moved to "Other."

Knowledge of Health Services (Question 4)

Respondents were asked to rate their knowledge of the health services available through McCone County Health Center. Fifty-one point three percent of respondents (n=81) rated their knowledge of health services as "Good." "Excellent" was selected by 23.4% percent (n=37), "Fair" was chosen by 21.5% of respondents (n=34), and "Poor" was selected by 3.8% (n=6).

Nearly 3/4 of 2023 respondents rated their knowledge of services as **Good or Excellent**



How Respondents Learn of Health Services in the Community (Question 5)

When asked how survey respondents learn about health services available in the community, the most frequently indicated method of learning was “Word of mouth/reputation” at 61.4% (n=97), which experienced a significant change over the last three assessments.

How Respondents Learn about Community Health Services	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	186	272	158	
Word of mouth/reputation	67.2% (125)	52.6% (143)	61.4% (97)	■
Friends/family	62.4% (116)	52.6% (143)	57.0% (90)	□
Circle Banner		56.6% (154)	46.2% (73)	■
Healthcare provider	54.3% (101)	46.0% (125)	39.9% (63)	■
Social media/Facebook		37.9% (103)	27.8% (44)	■
Public Health	15.1% (28)	23.2% (63)	20.3% (32)	□
Senior Center	22.6% (42)	21.3% (58)	13.9% (22)	□
Newspaper	45.7% (85)	15.1% (41)	11.4% (18)	■
Billboards/posters		8.5% (23)	8.9% (14)	□
Mailings/newsletter	9.7% (18)	12.9% (35)	7.0% (11)	□
Website/internet	10.2% (19)	8.1% (22)	3.2% (5)	■
Radio	4.8% (9)	4.8% (13)	2.5% (4)	□
Presentations	2.2% (4)	2.2% (6)	1.3% (2)	□
Other	3.8% (7)	2.6% (7)	3.8% (6)	□

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate all methods of receiving information, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: I've lived here all my life, so I know what's available; Homestead Health "Latoya"; and I am an EMT [Emergency Medical Technician]

View a cross tabulation of how respondents learn with how they rate their knowledge on p. 80

Utilized Community Health Resources (Question 6)

Respondents were asked which community health resources, other than the hospital or hospital clinic, they had used in the last three years. “Chiropractor” was the most frequently utilized community health resource cited by respondents at 47.7% (n=63). “Public Health” was utilized by 36.4% (n=48) of respondents followed by “Eye doctor” at 30.3% (n=40).

Use of Community Health Resources	2017 % (n)	2020 % (n)	2023 % (n)
Number of respondents	186	272	132
Chiropractor	39.8% (74)	36.4% (99)	47.7% (63)
Public Health	31.2% (58)	33.8% (92)	36.4% (48)
Eye doctor		48.5% (132)	30.3% (40)
Senior Center	30.1% (56)	23.9% (65)	26.5% (35)
Dentist (Pediatric school program)		47.4% (129)	22.7% (30)
Massage Therapy	24.7% (46)	21.3% (58)	14.4% (19)
Studio U (Fitness Center)			6.8% (9)
Homestead (Home health services)			5.3% (7)
Meals on Wheels	3.2% (6)	7.4% (20)	5.3% (7)
Mental Health	2.2% (4)	3.3% (9)	3.0% (4)
Conroy Care (Assisted living)			1.5% (2)
Other	7.0% (13)	7.7% (21)	6.1% (8)

Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents were asked to select all other community health resources used, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: None (3); Nursing home and physical therapy; and Physical therapy

Improve Community’s Access to Healthcare (Question 7)

Respondents were asked to indicate what they felt would improve their community’s access to healthcare. The majority of respondents (55.9%, n=81) reported that “More primary care providers” would make the greatest improvement. Forty-nine percent of respondents (n=71) indicated that an “More visiting specialists” would improve access.

More primary care providers would make the greatest improvement to healthcare access.

What Would Improve Community Access to Healthcare	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	186	272	145	
More primary care providers	43.5% (81)	41.5% (113)	55.9% (81)	■
More visiting specialists	23.1% (43)	44.5% (121)	49.0% (71)	■
More information about available services		22.8% (62)	33.1% (48)	■
Improved quality of care	11.8% (22)	11.8% (32)	22.8% (33)	■
Telemedicine	20.4% (38)	24.3% (66)	20.7% (30)	□
Outpatient services expanded hours	12.9% (24)	13.6% (37)	18.6% (27)	□
Expanded mental health services			16.6% (24)	□
Transportation assistance	14.0% (26)	10.7% (29)	13.8% (20)	□
Greater health education services	10.2% (19)	9.6% (26)	9.0% (13)	□
Payment assistance programs (healthcare expenses)		11.4% (31)	9.0% (13)	□
Cultural sensitivity	0.0% (0)	0.4% (1)	0.0% (0)	□
Interpreter services		1.1% (3)	0.0% (0)	□
Other	4.8% (9)	7.7% (21)	9.7% (14)	□

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to select any items that would improve community access to healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: Pharmacy (2), Recognize the limitations of clinic resources, Mental health expertise, Natural health, Keep our primary care providers here, and Better communication

Interest in Educational Classes/Programs (Question 8)

Respondents were asked which topics they would be most interested in learning about. The most frequently selected topic was “Weight loss” at 37.9% (n=47).

Interest in Classes or Programs	2017 % (n)	2020 % (n)	2023 % (n)
Number of respondents	186	272	124
Weight loss	35.5% (66)	30.9% (84)	37.9% (47)
Health and wellness	37.1% (69)	27.2% (74)	32.3% (40)
Women’s health	29.0% (54)	27.6% (75)	32.3% (40)
Fitness	33.9% (63)	27.2% (74)	27.4% (34)
First aid/CPR	16.7% (31)	23.2% (63)	25.0% (31)
Living will	17.7% (33)	21.7% (59)	24.2% (30)
Nutrition	25.3% (47)	20.2% (55)	24.2% (30)
Therapist (mental health)	8.6% (16)	11.8% (32)	21.8% (27)
Cancer	15.6% (29)	12.1% (33)	15.3% (19)
Diabetes	11.3% (21)	13.2% (36)	15.3% (19)
Alzheimer’s	14.0% (26)	11.4% (31)	13.7% (17)
Caregiver support		5.9% (16)	13.7% (17)
Men’s health	8.1% (15)	12.9% (35)	12.9% (16)
Heart disease	9.7% (18)	11.0% (30)	9.7% (12)
Grief counseling	6.5% (12)	5.5% (15)	8.9% (11)
Support groups	4.3% (8)	6.6% (18)	7.3% (9)
Smoking/tobacco cessation	3.2% (6)	2.9% (8)	4.0% (5)
Parenting	4.8% (9)	7.4% (20)	3.2% (4)
Lactation/breastfeeding support		1.5% (4)	1.6% (2)
Alcohol/substance abuse	1.6% (3)	4.0% (11)	0.8% (1)
Prenatal	2.2% (4)	2.9% (8)	0.0% (0)
Other	1.1% (2)	1.8% (5)	2.4% (3)

Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents were asked to pick all classes or programs that are of interest, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

Desired Local Health Services (Question 9)

Respondents were asked to indicate which additional services they would utilize if available locally. Respondents indicated the most interest in “Pharmacy” at 69.8% (n=104). Fifty-nine point seven percent (n=89) of respondents were interested in “Dental services,” followed closely by “Vision services (eye doctor)” at 59.1% (n=88).

Desired Local Services	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	186	272	149	
Pharmacy	65.6% (122)	65.4% (178)	69.8% (104)	<input type="checkbox"/>
Dental services	54.8% (102)	62.9% (171)	59.7% (89)	<input type="checkbox"/>
Vision services (eye doctor)	49.5% (92)	59.9% (163)	59.1% (88)	<input type="checkbox"/>
Visiting dermatologist			48.3% (72)	<input type="checkbox"/>
Visiting orthopedics			20.1% (30)	<input type="checkbox"/>
Visiting OB/GYN			18.8% (28)	<input type="checkbox"/>
Mental health therapists (pediatrics and adults)			15.4% (23)	<input type="checkbox"/>
Visiting pediatrics			9.4% (14)	<input type="checkbox"/>
Other	1.6% (3)	3.3% (9)	4.0% (6)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick all desired local healthcare services that are of interest, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: Orthopedics, Holistic dentistry, and I would rather stay local for everything if possible.

Desired Senior Services (Question 10)

Respondents were asked if they or a household member would utilize additional senior services if available locally. Respondents indicated the most interest in having “In home personal assistance” available locally at 56.2% (n=41). “Senior retirement housing/community” was selected by 41.1% (n=30) of respondents.

Desired senior services	2020 % (n)	2023 % (n)
Number of respondents	272	73
In home personal assistance	20.6% (56)	56.2% (41)
Senior retirement housing/community	19.1% (52)	41.1% (30)
Transportation services	11.0% (30)	35.6% (26)
Senior respite care	3.7% (10)	19.2% (14)
Other	5.5% (15)	8.2% (6)

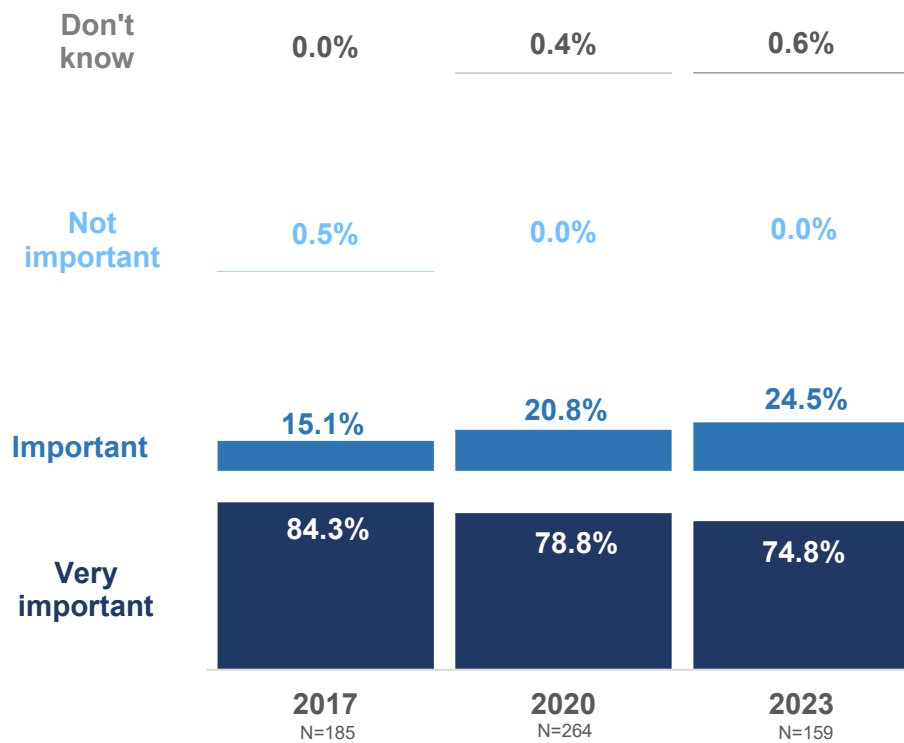
Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents could select any of the listed senior services, so percentages do not equal 100%.

“Other” comments included: N/A (2), Not currently in that stage in life, Housekeeping, and “All of the above, but not with additional tax burdens.”

Economic Importance of Healthcare (Question 11)

The majority of respondents (74.8%, n=119), indicated that local healthcare providers and services (i.e. hospitals, clinics, nursing homes, assisted living, etc.) are “Very important” to the economic well-being of the area. Twenty-four point five percent of respondents (n=39) indicated they are “Important,” and 0.6% (n=1) “Don’t know.” No respondents felt they are not important to the economic well-being of the area.

99.3% of 2023 respondents thought local healthcare providers and services were Very important or Important to the economic well-being of the area.



Utilization of Preventive Services (Question 12)

Respondents were asked if they had utilized any of the preventive services listed in the past year. “Blood pressure check” was selected by 63.6% of respondents (n=98). Fifty-four point five percent of respondents (n=84) indicated they received a “Vision check,” and 53.2% of respondents (n=82) had a “Health checkup.”

Use of Preventive Services	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	186	272	154	
Blood pressure check	39.2% (73)	63.2% (172)	63.6% (98)	■
Vision check		56.3% (153)	54.5% (84)	□
Health checkup	56.5% (105)	51.1% (139)	53.2% (82)	□
Dental check		54.4% (148)	51.3% (79)	□
Health fair (labs)		48.5% (132)	49.4% (76)	□
Flu shot/immunizations	53.8% (100)	59.9% (163)	48.7% (75)	□
Cholesterol check	43.0% (80)	40.8% (111)	43.5% (67)	□
Mammography	27.4% (51)	29.8% (81)	37.7% (58)	□
Prostate (PSA)	21.0% (39)	25.0% (68)	26.6% (41)	□
Skin check		17.6% (48)	22.7% (35)	□
Pap test	21.0% (39)	20.6% (56)	19.5% (30)	□
Hearing check		14.7% (40)	14.3% (22)	□
Colonoscopy	14.0% (26)	17.6% (48)	13.6% (21)	□
Children’s checkup/Well baby	9.1% (17)	13.2% (36)	12.3% (19)	□
Mental health therapist			7.1% (11)	□
Allergy test			6.5% (10)	□
None	5.9% (11)	2.6% (7)	4.5% (7)	□
Other	14.0% (26)	1.8% (5)	5.2% (8)	■

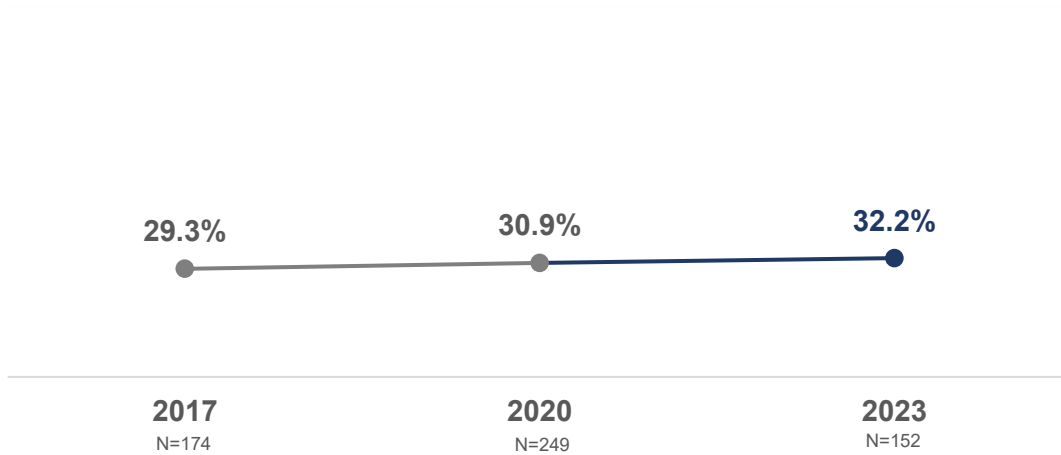
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents could select any of the preventive services listed, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: Emergency room (2), COVID vaccinations, and Breast MRI

Delay of Services (Question 13)

Thirty-two point two percent of respondents (n=49) reported that they or a member of their household thought they needed healthcare services but did not get them or had to delay getting them. Sixty-seven point eight percent of respondents (n=103) felt they were able to get the healthcare services they needed without delay.

More 2023 respondents delayed or did not receive needed services compared to the previous assessments



View a cross tabulation of where respondents live and 'delay of healthcare services' on p. 81

Reason for Not Receiving/Delaying Needed Services (Question 14)

Among survey respondents who indicated they were unable to receive or had to delay services (n=49), the top three reasons for not receiving or delaying needed services was that “Could not get an appointment with my provider of choice” (34.7%, n=17).

Reasons for Delay in Receiving Needed Healthcare	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	51	77	49	
Could not get an appointment with my provider of choice		31.2% (24)	34.7% (17)	<input type="checkbox"/>
Too long to wait for an appointment	52.9% (27)	28.6% (22)	28.6% (14)	<input checked="" type="checkbox"/>
Could not get an appointment	58.8% (30)	32.5% (25)	18.4% (9)	<input checked="" type="checkbox"/>
Didn't know where to go	2.0% (1)	5.2% (4)	16.3% (8)	<input checked="" type="checkbox"/>
It cost too much	19.6% (10)	16.9% (13)	14.3% (7)	<input type="checkbox"/>
Office wasn't open when I could go	19.6% (10)	10.4% (8)	14.3% (7)	<input type="checkbox"/>
It was too far to go	9.8% (5)	9.1% (7)	12.2% (6)	<input type="checkbox"/>
Don't like medical providers	11.8% (6)	2.6% (2)	10.2% (5)	<input type="checkbox"/>
My insurance didn't cover it	15.7% (8)	10.4% (8)	10.2% (5)	<input type="checkbox"/>
Not treated with respect	5.9% (3)	2.6% (2)	8.2% (4)	<input type="checkbox"/>
Want to see a doctor (MD/DO)	9.8% (5)	6.5% (5)	8.2% (4)	<input type="checkbox"/>
No insurance	5.9% (3)	6.5% (5)	6.1% (3)	<input type="checkbox"/>
Could not get off work	7.8% (4)	9.1% (7)	4.1% (2)	<input type="checkbox"/>
Had no childcare	0.0% (0)	2.6% (2)	4.1% (2)	<input type="checkbox"/>
Too nervous or afraid	5.9% (3)	1.3% (1)	4.1% (2)	<input type="checkbox"/>
Don't understand healthcare system		1.3% (1)	2.0% (1)	<input type="checkbox"/>
Transportation problems	2.0% (1)	1.3% (1)	2.0% (1)	<input type="checkbox"/>
Unsure if services were available	3.9% (2)	3.9% (3)	2.0% (1)	<input type="checkbox"/>
Language barrier		0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other*	7.8% (4)	18.2% (14)	12.2% (6)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate the top three reasons for a delay in seeking or receiving healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=4) who selected over the allotted amount were moved to “Other.”

“Other” comments included: Too busy and Lost in the system

Difficulty Getting or Obtaining Prescriptions (Question 15)

Respondents were asked to indicate if during the last year they or a member of their household had difficulty getting a prescription or taking a prescription regularly. Twenty-five percent of respondents (n=38) indicated that in the last year they had difficulty getting a prescription or taking their medication regularly. Seventy-five percent of respondents (n=114) indicated that they did not have trouble getting/taking prescriptions.



Reason for Difficulty Obtaining Prescriptions (Question 16)

Thirty seven of the 38 respondents who indicated they or a member of their household had difficulty getting or taking a prescription regularly shared their top three reasons. The reason most cited was “Pharmacy did not have prescription when I arrived” (48.6%, n=18).

Reasons for Difficulty in Obtaining Prescription	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	65	37	
Pharmacy did not have prescription when I arrived	32.3% (21)	48.6% (18)	<input type="checkbox"/>
It was too far to go	21.5% (14)	37.8% (14)	<input type="checkbox"/>
Mail-order prescriptions took too long	40.0% (26)	37.8% (14)	<input type="checkbox"/>
Pharmacy wasn’t open when I could go	13.8% (9)	35.1% (13)	<input checked="" type="checkbox"/>
It cost too much	15.4% (10)	16.2% (6)	<input type="checkbox"/>
My insurance didn’t cover it	13.8% (9)	13.5% (5)	<input type="checkbox"/>
Had trouble remembering to take pills	1.5% (1)	5.4% (2)	<input type="checkbox"/>
Transportation problems	1.5% (1)	5.4% (2)	<input type="checkbox"/>
No insurance	3.1% (2)	0.0% (0)	<input type="checkbox"/>
Other	24.6% (16)	13.5% (5)	<input type="checkbox"/>

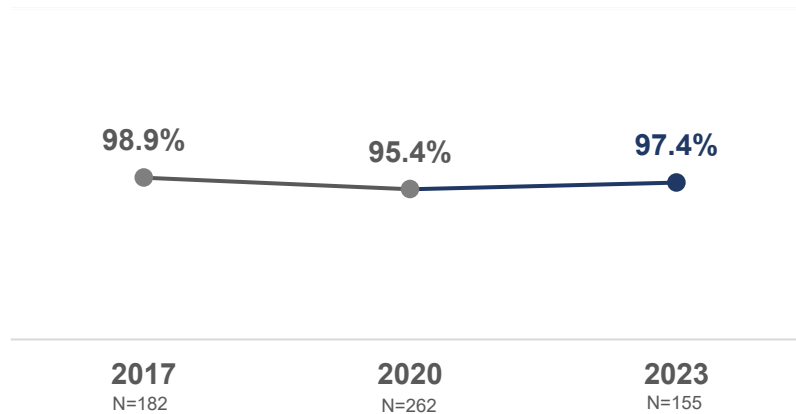
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate the top three reasons for delay not getting or taking their prescription regularly, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: Pharmacy screwed it up and Mix up between doctor office and the pharmacy

Primary Care Services (Question 17)

Ninety-seven point four percent of respondents (n=151) indicated they or someone in their household had been seen by a primary care provider (such as a family physician, physician assistant, or nurse practitioner) for healthcare services in the past three years. Two point six percent of respondents (n=4) indicated they had not received primary care.

Primary care utilization has increased since the 2020 assessment



Location of Primary Care Services (Question 18)

Among survey respondents who indicated receiving primary care services in the previous three years (n=151), the majority of respondents (51.0%, n=77) reported receiving care in Circle and 16.6% of respondents (n=25) received care in Miles City. Eighteen respondents were moved to “other” due to selecting more than one primary care provider location.

Location of Primary Care Provider	2017 % (n)	2020 % (n)	2023 % (n)
Number of respondents	158	250	151
Circle	73.4% (116)	61.2% (153)	51.0% (77)
Miles City	5.1% (8)	13.2% (33)	16.6% (25)
Glendive	5.1% (8)	4.0% (10)	6.6% (10)
Sidney	1.3% (2)	4.4% (11)	6.6% (10)
Wolf Point			3.3% (5)
Glasgow			2.6% (4)
Billings	6.3% (10)	2.0% (5)	1.3% (2)
Other*	8.9% (14)	15.2% (38)	11.9% (18)
TOTAL	100.0% (158)	100.0% (250)	100.0% (151)

Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. *Respondents (N=18) who selected over the allotted amount were moved to “Other.”

“Other” comments included: Jordan, Telehealth, and Poplar

View a cross tabulation of where respondents live with where they utilize primary care services on p. 82

Reasons for Primary Care Provider Selection (Question 19)

One-hundred forty-eight of the 151 respondents who indicated they or someone in their household had been seen by a primary care provider within the past three years, shared why they chose that primary care provider. “Closest to home” was the most frequently selected reason at 54.1% (n=80), which experienced a significant change over the last three assessments, followed by “Prior experience with clinic/provider” at 50.7% (n=75).

Reasons for Selecting Primary Care Provider	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	180	250	148	
Closest to home	68.9% (124)	63.2% (158)	54.1% (80)	■
Prior experience with clinic/provider	56.7% (102)	48.4% (121)	50.7% (75)	□
Clinic/provider’s reputation for quality	25.0% (45)	38.0% (95)	41.2% (61)	■
Appointment availability	27.2% (49)	30.4% (76)	33.1% (49)	□
Recommended by family or friends	7.2% (13)	12.4% (31)	17.6% (26)	■
Wanted to see a doctor (MD/DO)	8.9% (16)	12.4% (31)	14.9% (22)	□
Provider’s specialty			12.2% (18)	□
Privacy/confidentiality		13.6% (34)	10.8% (16)	□
Referred by physician or other provider	5.0% (9)	6.8% (17)	7.4% (11)	□
Requiring higher level of care/resources			5.4% (8)	□
Length of waiting room time	5.0% (9)	6.8% (17)	4.7% (7)	□
Required by insurance plan	3.9% (7)	0.8% (2)	4.1% (6)	□
VA/Military requirement	1.7% (3)	1.2% (3)	3.4% (5)	□
Cost of care	6.1% (11)	6.4% (16)	1.4% (2)	□
Indian Health Services	0.0% (0)	0.4% (1)	1.4% (2)	□
Other	6.7% (12)	5.2% (13)	3.4% (5)	□

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick the reasons for selection of their primary care provider, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

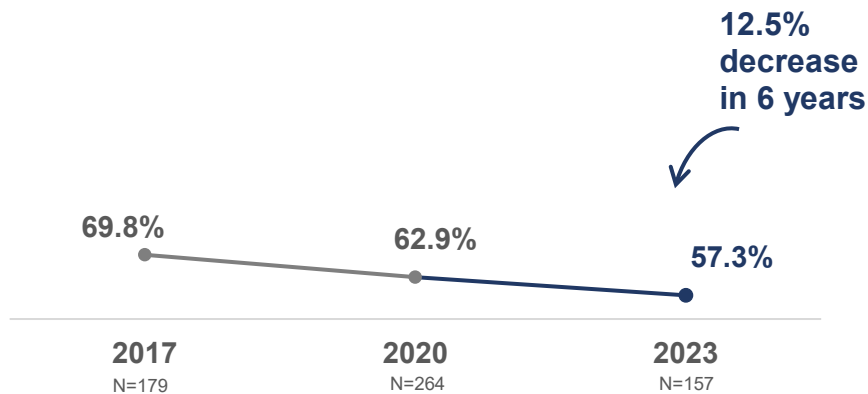
“Other” comments included: Wanted female provider and “My choice – they’ve been my doctor for years”

View a cross tabulation of where respondents utilize primary care services with their reasons for selecting their provider on p. 83

Hospital Care Services (Question 20)

Respondents were asked if they or someone in their household had received hospital care in the last three years. Hospitalization was quantified as hospitalized overnight, day surgery, obstetrical care, rehabilitation, radiology, or emergency care. Fifty-seven point three percent of respondents (n=90) reported that they or a member of their family had received hospital care during the previous three years, and 42.7% (n=67) had not received hospital services.

Utilization of hospital services has consistently declined since the 2017 assessment



Location of Hospital Services (Question 21)

Of the survey respondents who indicated receiving hospital care in the last three years (n=90), the majority (24.4%, n=22) report utilizing “McCone County Health Center (Circle)” most often. Twelve respondents were moved to “Other” for selecting more than one hospital location.

Hospital Used Most Often	2017 % (n)	2020 % (n)	2023 % (n)
Number of respondents	104	160	90
McCone County Health Center (Circle)	40.4% (42)	22.5% (36)	24.4% (22)
Holy Rosary Healthcare (Miles City)	14.4% (15)	16.3% (26)	14.4% (13)
Billings Clinic (Billings)	19.2% (20)	15.6% (25)	13.3% (12)
Sidney Health Center (Sidney)	2.9% (3)	5.0% (8)	13.3% (12)
Glendive Medical Center (Glendive)	2.9% (3)	10.6% (17)	12.2% (11)
St. Vincent’s (Billings)	13.5% (14)	13.1% (21)	4.4% (4)
Frances Mahon Deaconess Hospital (Glasgow)	2.9% (3)	1.9% (3)	3.3% (3)
Other*	3.8% (4)	15.0% (24)	14.4% (13)
TOTAL	100.0% (104)	100.0% (160)	100.0% (90)

Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. *Respondents (N=12) who selected over the allotted amount were moved to “Other.”

View a cross tabulation of where respondents live with where they utilize hospital services on p. 84

Reasons for Hospital Selection (Question 22)

Of the survey respondents who indicated receiving hospital care in the last three years (n=90), the majority of respondents (44.4%, n=40) stated that “Prior experience with hospital” was their top reason for selecting the facility they used most often. “Closest to home” and “Referred by physician or other provider” were selected by 43.3% of the respondents (n=39, each).

Reasons for Selecting Hospital	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	125	166	90	
Prior experience with hospital	40.8% (51)	40.4% (67)	44.4% (40)	<input type="checkbox"/>
Closest to home	49.6% (62)	41.6% (69)	43.3% (39)	<input type="checkbox"/>
Referred by physician or other provider	41.6% (52)	39.2% (65)	43.3% (39)	<input type="checkbox"/>
Emergency, no choice	28.0% (35)	29.5% (49)	25.6% (23)	<input type="checkbox"/>
Hospital’s reputation for quality	22.4% (28)	25.9% (43)	24.4% (22)	<input type="checkbox"/>
Recommended by family or friends	9.6% (12)	10.8% (18)	11.1% (10)	<input type="checkbox"/>
Closest to work	2.4% (3)	1.8% (3)	6.7% (6)	<input type="checkbox"/>
Privacy/confidentiality		2.4% (4)	6.7% (6)	<input type="checkbox"/>
Cost of care	1.6% (2)	1.8% (3)	2.2% (2)	<input type="checkbox"/>
Required by insurance plan	1.6% (2)	2.4% (4)	2.2% (2)	<input type="checkbox"/>
VA/Military requirement	2.4% (3)	3.0% (5)	2.2% (2)	<input type="checkbox"/>
Financial assistance programs		1.2% (2)	0.0% (0)	<input type="checkbox"/>
Other*	4.0% (5)	6.0% (10)	7.8% (7)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three reasons for selecting a hospital, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=2) who selected over the allotted amount were moved to “Other.”

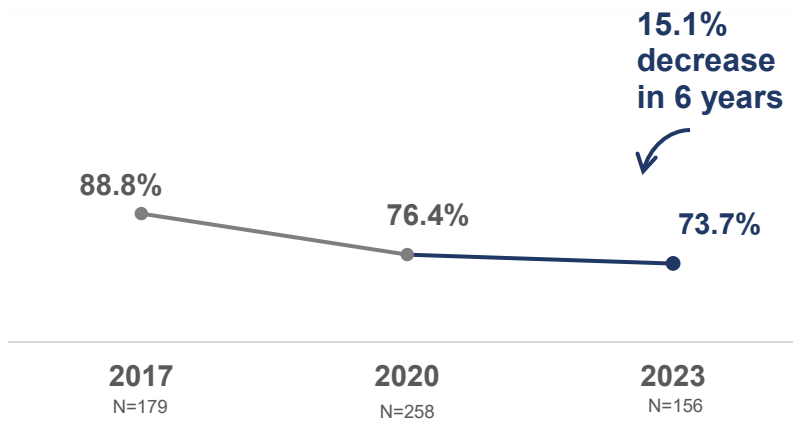
“Other” comments included: Trust, Has diagnostic equipment, and Where my primary care is done

View a cross tabulation of where respondents utilize hospital services with their reasons for selecting that facility p. 85

Specialty Care Services (Question 23)

Seventy-three point seven percent of the respondents (n=115) indicated they or a household member had seen a healthcare specialist during the past three years, while 26.3% (n=41) indicated they had not.

Specialty care utilization has consistently declined among survey respondents since the 2017 assessment



Location of Healthcare Specialist(s) (Question 24)

One -hundred fourteen of the 115 respondents who indicated they saw a healthcare specialist in the past three years, shared the location of the healthcare specialist. The top location among survey respondents (44.7%, n=51) was Billings Clinic (Billings). Glendive Medical Center (Glendive) was utilized by 38.6% of respondents (n=44), which experienced a significant increase over the last three assessments. Respondents could select more than one location, so percentages do not equal 100%.

Location of Specialist	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	159	197	114	
Billings Clinic (Billings)	48.4% (77)	42.1% (83)	44.7% (51)	<input type="checkbox"/>
Glendive Medical Center (Glendive)	27.0% (43)	25.4% (50)	38.6% (44)	<input checked="" type="checkbox"/>
Holy Rosary Healthcare (Miles City)	28.9% (46)	34.0% (67)	28.1% (32)	<input type="checkbox"/>
St. Vincent’s (Billings)	22.6% (36)	22.3% (44)	21.1% (24)	<input type="checkbox"/>
Sidney Health Center (Sidney)	8.8% (14)	16.2% (32)	17.5% (20)	<input type="checkbox"/>
Billings Clinic (Miles City)	22.0% (35)	18.3% (36)	16.7% (19)	<input type="checkbox"/>
Ortho Montana (Orthopedic surgery)		24.9% (49)	15.8% (18)	<input type="checkbox"/>
Telemedicine consult (Circle)	5.0% (8)	4.1% (8)	9.6% (11)	<input type="checkbox"/>
Frances Mahon Deaconess Hospital (Glasgow)	6.3% (10)	6.1% (12)	5.3% (6)	<input type="checkbox"/>
Other	22.0% (35)	17.8% (35)	15.8% (18)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate the location of any specialist seen in the past three years, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

Type of Healthcare Specialist Seen (Question 25)

The survey respondents (n=115) saw a wide array of healthcare specialists in the past three years. The most frequently indicated specialist was a “Dermatologist” with 31.3% of respondents (n=36) having utilized their services. “Dentist” was the second most utilized specialist at 27.0% (n=31), which has experienced a significant decrease over the last three assessments. Respondents were asked to choose all that apply, so percentages do not equal 100%.

Type of Specialists Seen	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	159	197	115	
Dermatologist	24.5% (39)	22.8% (45)	31.3% (36)	<input type="checkbox"/>
Dentist	66.7% (106)	28.9% (57)	27.0% (31)	<input checked="" type="checkbox"/>
Orthopedic surgeon	30.2% (48)	28.9% (57)	25.2% (29)	<input type="checkbox"/>
Radiologist	18.9% (30)	17.8% (35)	25.2% (29)	<input type="checkbox"/>
Cardiologist	23.9% (38)	26.9% (53)	20.9% (24)	<input type="checkbox"/>
ENT (ear/nose/throat)	14.5% (23)	11.7% (23)	19.1% (22)	<input type="checkbox"/>
Chiropractor	35.8% (57)	12.2% (24)	18.3% (21)	<input checked="" type="checkbox"/>
Physical therapist	20.8% (33)	16.2% (32)	17.4% (20)	<input type="checkbox"/>
General surgeon	20.8% (33)	15.7% (31)	15.7% (18)	<input type="checkbox"/>
OB/GYN	18.9% (30)	13.7% (27)	15.7% (18)	<input type="checkbox"/>
Optometrist		17.8% (35)	14.8% (17)	<input type="checkbox"/>
Gastroenterologist	5.0% (8)	12.7% (25)	12.2% (14)	<input checked="" type="checkbox"/>
Oncologist	6.3% (10)	8.1% (16)	12.2% (14)	<input type="checkbox"/>
Neurologist	11.9% (19)	10.2% (20)	11.3% (13)	<input type="checkbox"/>
Ophthalmologist	17.6% (28)	10.7% (21)	11.3% (13)	<input type="checkbox"/>
Internal medicine			10.4% (12)	<input type="checkbox"/>
Urologist	13.2% (21)	14.2% (28)	10.4% (12)	<input type="checkbox"/>
Mental health therapist	5.0% (8)	6.6% (13)	8.7% (10)	<input type="checkbox"/>
Pediatrician	5.7% (9)	8.1% (16)	8.7% (10)	<input type="checkbox"/>
Podiatrist	7.5% (12)	5.6% (11)	7.8% (9)	<input type="checkbox"/>
Audiologist		7.6% (15)	7.0% (8)	<input type="checkbox"/>

Table continued on the next page.

Allergist	5.7% (9)	4.1% (8)	5.2% (6)	<input type="checkbox"/>
Endocrinologist	6.3% (10)	6.6% (13)	5.2% (6)	<input type="checkbox"/>
Neurosurgeon	3.1% (5)	3.0% (6)	5.2% (6)	<input type="checkbox"/>
Rheumatologist	8.2% (13)	3.6% (7)	5.2% (6)	<input type="checkbox"/>
Occupational therapist	2.5% (4)	4.6% (9)	3.5% (4)	<input type="checkbox"/>
Pulmonologist	5.7% (9)	5.6% (11)	3.5% (4)	<input type="checkbox"/>
Naturopath			2.6% (3)	<input type="checkbox"/>
Psychiatrist (M.D.)	4.4% (7)	3.0% (6)	2.6% (3)	<input type="checkbox"/>
Dietician	3.1% (5)	1.0% (2)	1.7% (2)	<input type="checkbox"/>
Acupuncturist			0.9% (1)	<input type="checkbox"/>
Nephrologist		3.6% (7)	0.9% (1)	<input type="checkbox"/>
Speech therapist	6.3% (10)	1.5% (3)	0.9% (1)	<input checked="" type="checkbox"/>
Geriatrician	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Psychologist	2.5% (4)	1.0% (2)	0.0% (0)	<input type="checkbox"/>
Social worker	1.9% (3)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Substance abuse counselor	2.5% (4)	0.5% (1)	0.0% (0)	<input type="checkbox"/>
Other	3.1% (5)	7.6% (15)	6.1% (7)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate each type of specialist seen, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

Overall Quality of Care of Services in McCone County (Question 26)

Respondents were asked to rate various services available in McCone County using the scale of 4= Excellent, 3= Good, 2= Fair, 1=Poor, and Don't know/Haven't used. The services that received the highest score were "Ambulance services," "Senior Center," "Assisted living," and "Laboratory" (3.4 out of 4.0). Overall, the average rating on quality and availability of the health services listed was 3.3 out of 4.0.

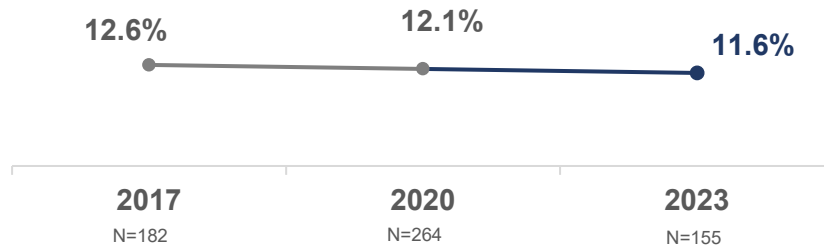
Quality of Care Rating in McCone County	2017 Average (n)	2020 Average (n)	2023 Average (n)	SIGNIFICANT CHANGE
Total number of respondents	176	235	142	
Ambulance services	3.3 (79)	3.5 (107)	3.4 (68)	<input type="checkbox"/>
Senior Center	3.4 (84)	3.6 (86)	3.4 (60)	<input type="checkbox"/>
Assisted living			3.4 (45)	<input type="checkbox"/>
Laboratory	3.5 (159)	3.5 (198)	3.4 (123)	<input type="checkbox"/>
Emergency room	3.3 (131)	3.3 (162)	3.3 (90)	<input type="checkbox"/>
X-Rays	3.2 (126)	3.2 (145)	3.3 (88)	<input type="checkbox"/>
Physical Therapy	3.1 (59)	3.1 (79)	3.3 (53)	<input type="checkbox"/>
Public Health	3.0 (113)	3.2 (124)	3.2 (85)	<input type="checkbox"/>
Inpatient/hospital care	3.2 (74)		3.1 (39)	<input type="checkbox"/>
Home Health		3.2 (37)	3.1 (21)	<input type="checkbox"/>
Clinic services	3.2 (165)	3.3 (223)	3.1 (133)	<input type="checkbox"/>
Long-Term Care (nursing home)	2.9 (44)		2.8 (30)	<input type="checkbox"/>
Overall average	3.3 (176)	3.4 (235)	3.3 (142)	<input type="checkbox"/>

Respondents were asked to rate the quality of hospital services on a 4-point Likert Scale, with 1 corresponding with poor, 2 corresponding with Fair, 3 corresponding with Good, and 4 corresponding with Excellent. A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Grayed out cells indicate the question was not asked that year.

Prevalence of Depression (Question 27)

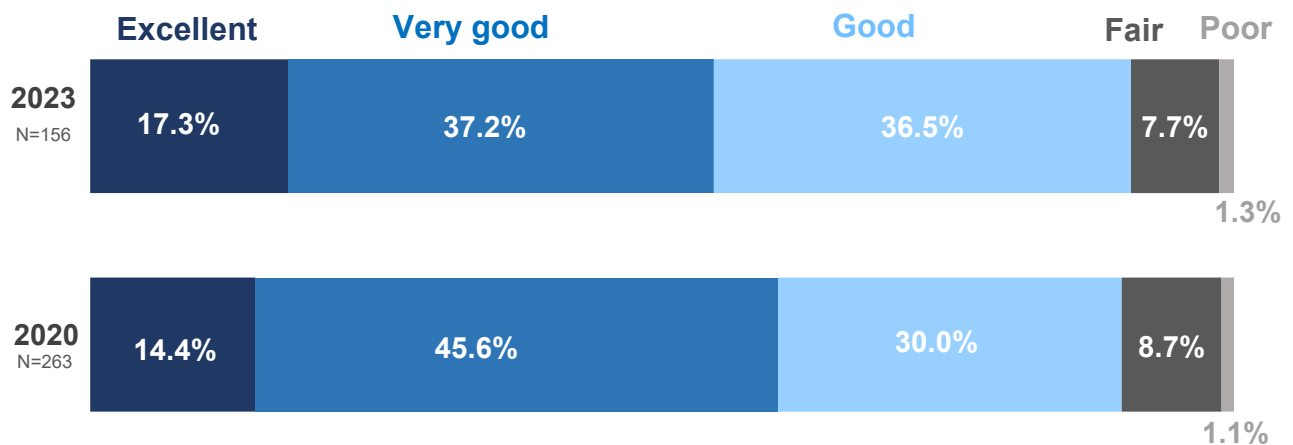
Respondents were asked to indicate if there were periods of at least three consecutive months in the past three years where they felt depressed on most days. Eleven point six percent of respondents (n=18) indicated they had experienced periods of depression, and 88.4% of respondents (n=137) indicated they had not.

Fewer respondents report experiencing periods of depression since the last assessment



Rating of Mental Health (Question 28)

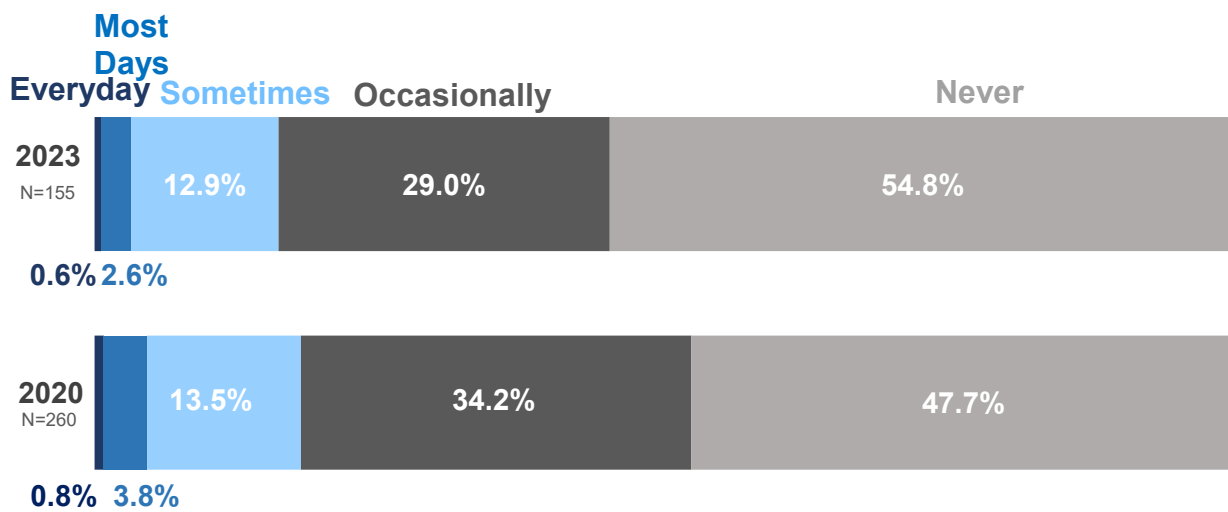
Respondents were asked to indicate how they would describe their mental health in general when considering stress, anxiety, depression, and emotional problems. Thirty-seven point two percent of respondents (n=58) felt their mental health was “Very good,” 36.5% (n=57) rated their mental health as “Good,” 17.3% of respondents (n=27) felt their mental health was “Excellent,” 7.7% (n=12) rated their mental health and “Fair,” and 1.3% of respondents (n=2) rated their mental health as “Poor.”



Social Isolation (Question 29)

Respondents were asked to indicate how often they felt lonely or isolated in the past year. Fifty-four point eight percent of respondents (n=85) indicated they never felt lonely or isolated, and 29.0% of respondents (n=45) indicated they “Occasionally (1-2 days per month)” felt lonely or isolated. Twelve point nine percent (n=20) reported they felt lonely or isolated “Sometimes (3-5 days per month),” 2.6% (n=4) indicated they felt lonely or isolated on “Most days (3-5 days per week),” and 0.6% (n=1) reported they felt lonely or isolated “Everyday.”

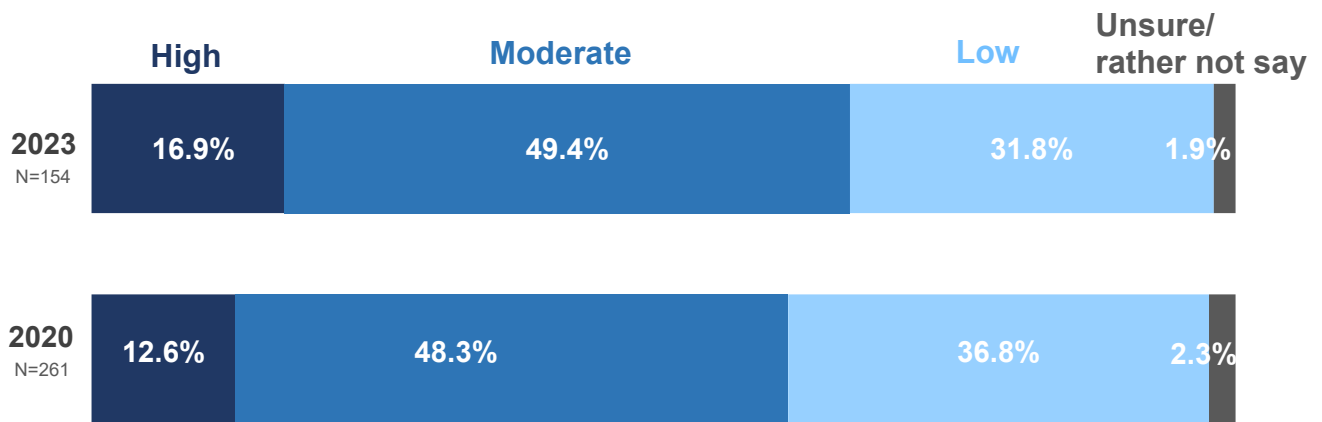
Over half of survey respondents report never feeling lonely or isolated in the past year



Perception of Stress (Question 30)

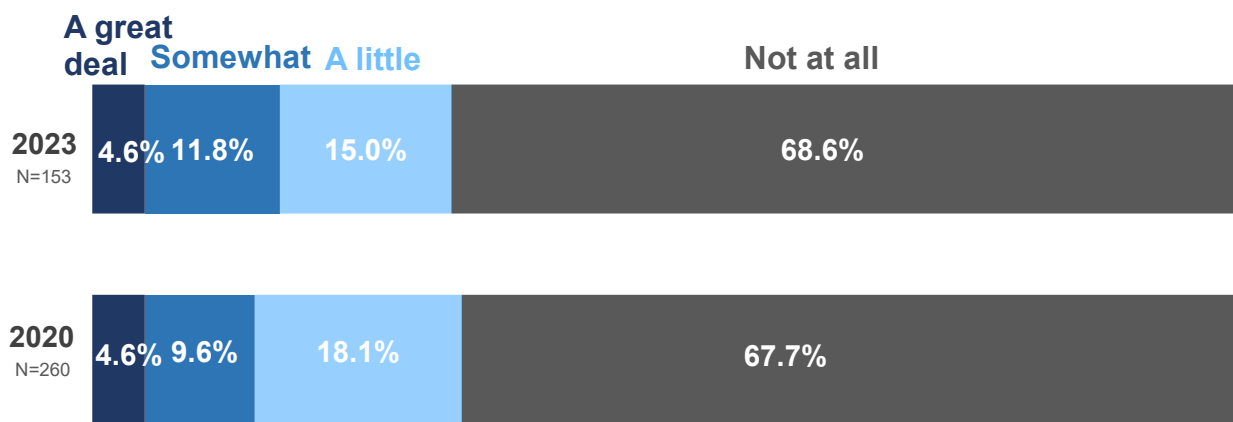
Respondents were asked to indicate how they would describe their stress level over the past year. Forty-nine point four percent of respondents (n=76) indicated they experienced a “moderate” level of stress, 31.8% (n=49) had a “low” level of stress, 16.9% of respondents (n=26) indicated they had experienced a “high” level of stress. One point nine percent of respondents (n=3) indicated they were “Unsure/rather not say.”

Survey respondents report experiencing higher stress in the past year compared to the 2020 assessment



Impact of Substance Abuse (Question 31)

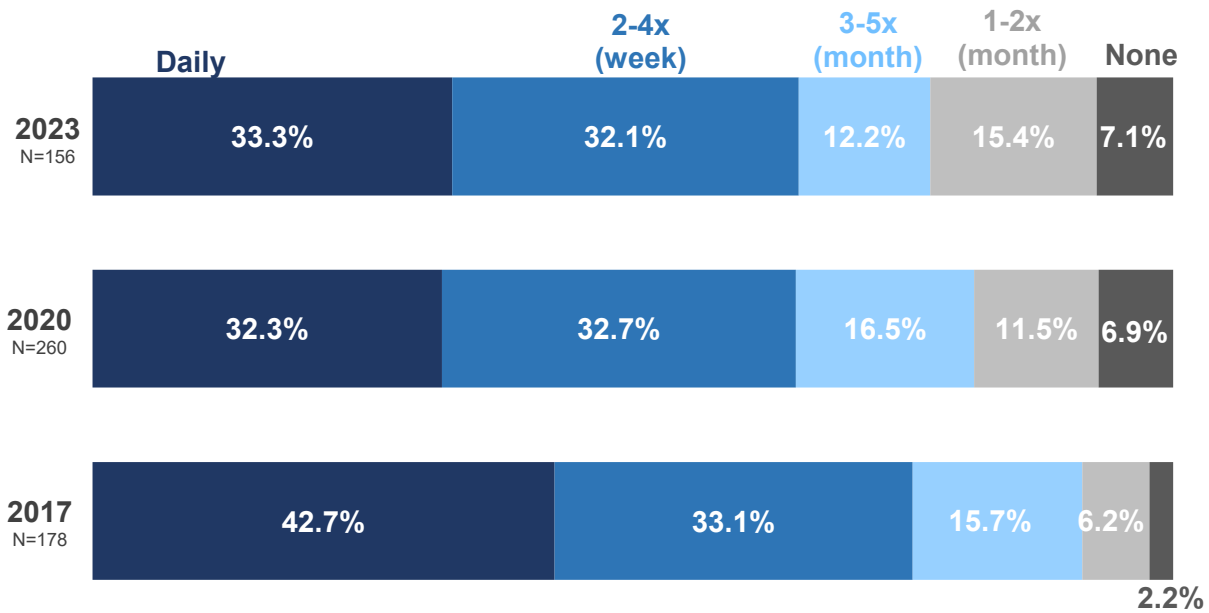
Respondents were asked to indicate to what degree their life has been negatively affected by their own or someone else’s substance abuse issues including alcohol, prescription, or other drugs. Sixty-eight point six percent of respondents (n=105) indicated their life was “Not at all” affected. Fifteen percent (n=23) were “A little” affected, 11.8% (n=18) were “Somewhat” affected, and 4.6% (n=7) were “A great deal” negatively affected.



Physical Activity (Question 32)

Respondents were asked to indicate how frequently they had physical activity for at least twenty minutes over the past month. Thirty-three point three percent of respondents (n=52) indicated they had physical activity “Daily,” and 32.1% (n=50) indicated they had physical activity “2-4 times per week.” Fifteen point four percent of respondents (n=24) indicated they had physical activity “1-2 times per month,” 12.2% (n=19) indicated they had physical activity “3-5 times per month,” and 7.1% (n=11) indicated they had “No physical activity.”

Respondents report being less physically active in 2023 compared to 2020



Food Insecurity (Question 33)

Respondents were asked to indicate if, during the last year, they had worried that they would not have enough food to eat. The majority, 98.1% (n=153), were not worried, but 1.9% (n=3) were concerned about not having enough to eat.

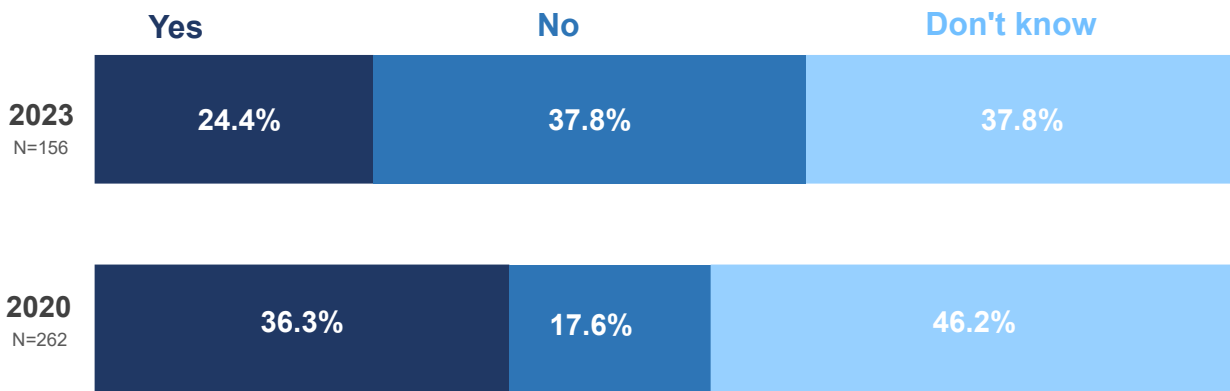
The majority of respondents did not worry about having enough food



Housing (Question 34)

Respondents were asked to indicate if they felt the community has adequate and affordable housing options available. Thirty-seven point eight percent of respondents (n=59, each) indicated that they feel there are not or don't know if there are adequate and affordable housing options available in the community. Twenty-four point four percent of survey respondents (n=38) felt there are adequate and affordable options available.

More survey respondents **do not feel like there are adequate and affordable housing options available compared to the 2020 assessment**



Health Insurance Type (Question 35)

Respondents were asked to indicate what type of health insurance covers the majority of their medical expenses. Thirty-two point nine percent (n=52) indicated they have “Medicare” coverage. Twenty-six point six percent (n=42) indicated they have “Employer sponsored” coverage. Nineteen respondents were moved to “Other” for selecting over the allotted one health insurance type.

Type of Health Insurance	2017 % (n)	2020 % (n)	2023 % (n)
Number of respondents	153	264	158
Medicare	32.0% (49)	28.4% (75)	32.9% (52)
Employer sponsored	37.9% (58)	34.1% (90)	26.6% (42)
Health Insurance Marketplace	7.2% (11)	6.8% (18)	10.1% (16)
Private insurance/private plan	9.8% (15)	3.0% (8)	5.7% (9)
Healthy MT Kids	1.3% (2)	3.8% (10)	3.2% (5)
VA/military	1.3% (2)	1.9% (5)	2.5% (4)
None/pay out of pocket	2.6% (4)	1.9% (5)	2.5% (4)
Health Savings Account	0.0% (0)	0.8% (2)	1.9% (3)
Medicaid	4.6% (7)	2.7% (7)	1.9% (3)
Indian Health	0.0% (0)	0.0% (0)	0.6% (1)
State/Other	1.3% (2)		
Other*	2.0% (3)	16.7% (44)	12.0% (19)
TOTAL	100.0% (153)	100.0% (264)	100.0% (158)

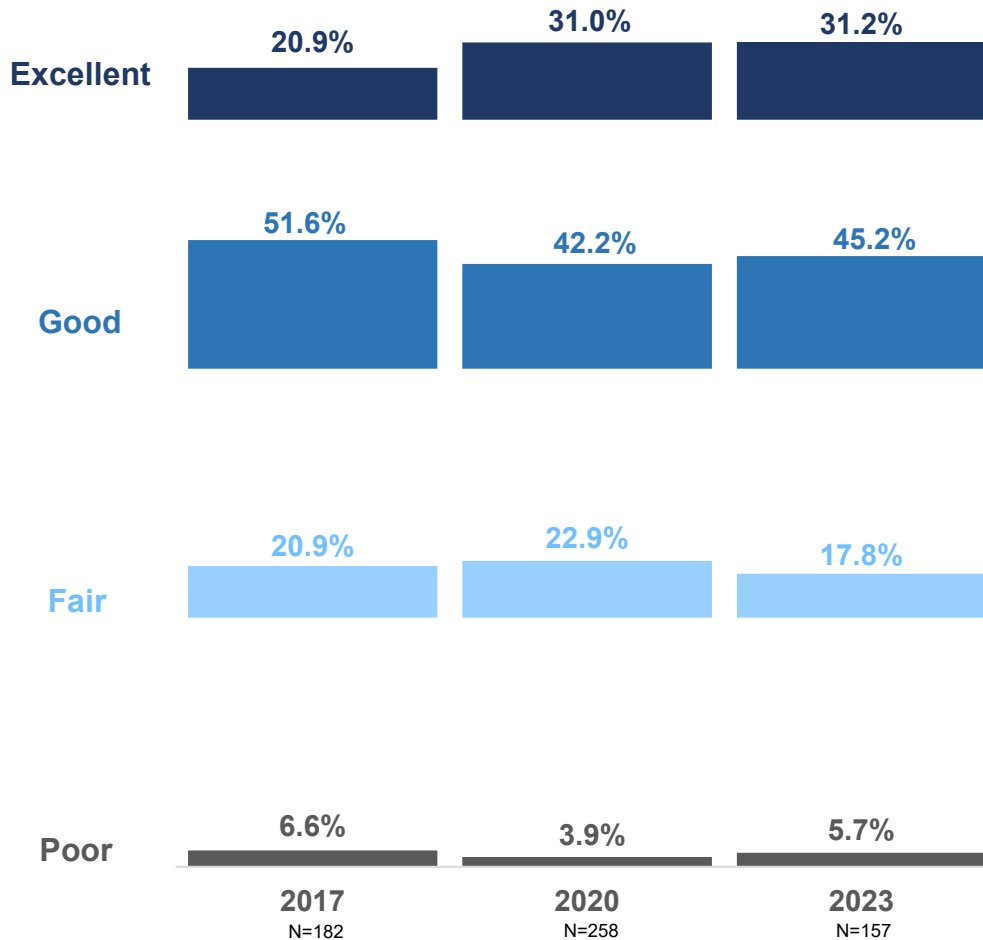
Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. *Respondents (N=19) who selected over the allotted amount were moved to “Other.”

“Other” comments included: Blue Cross Blue Shield, Supplement to Medicare, and Medicare supplement

Insurance and Healthcare Costs (Question 36)

Respondents were asked to indicate how well they feel their health insurance covers their healthcare costs. Forty-five point two percent of respondents (n=71) indicated they felt their insurance covers a “Good” amount of their healthcare costs. Thirty-one point two percent of respondents (n=49) indicated they feel their insurance was “Excellent,” 17.8% of respondents (n=28) indicated they felt their insurance was “Fair,” and 5.7% (n=9) feel their health insurance covers a “Poor” amount of their healthcare costs.

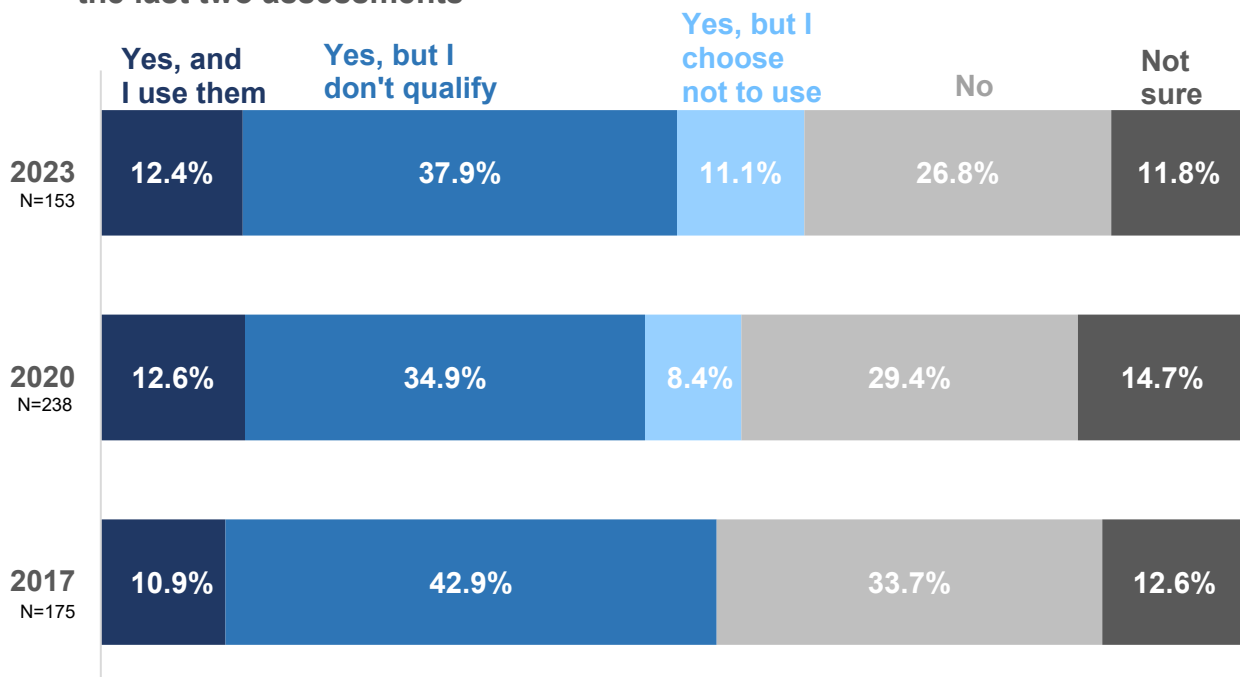
3/4 of 2023 respondents feel that their health insurance offers excellent or good coverage



Awareness of Health Cost Assistance Programs (Question 37)

Respondents were asked to indicate their awareness of programs that help people pay for healthcare expenses. The majority of respondents (37.9%, n=58) shared that they are aware of these programs but do not qualify. Twenty-six point eight percent of respondents (n=41) indicated they were not aware of these programs, 12.4% (n=19) were aware of these programs and use them, 11.8% (n=18) were not sure if they were aware of health cost assistance programs, 11.1% (n=17) were aware of the programs, but choose not to utilize them.

More 2023 survey respondents are aware to some degree of programs that help people pay for healthcare expenses compared to the last two assessments



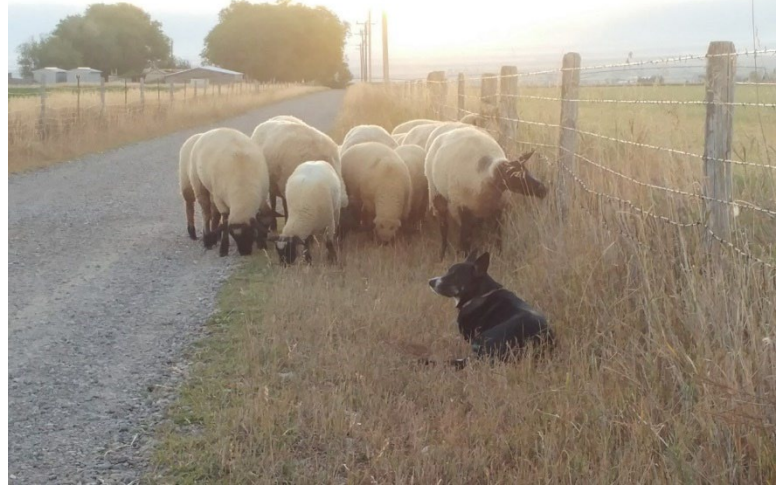


KEY INFORMANT INTERVIEW RESULTS

Key Informant Interview Methodology

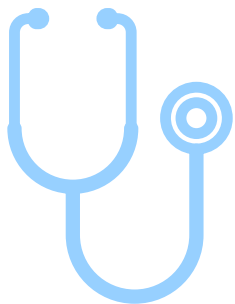
Three key informant interviews were conducted between April and May 2023. Participants were identified as people living in McCone County Health Center’s service area.

The interviews were conducted over the telephone. The meetings lasted up to 15 minutes in length and followed the same line of questioning. Interview transcripts can be found in Appendix I. Interviews were facilitated by Montana Office of Rural Health staff.



Key Informant Interview Themes

The following key findings, themes, and health needs emerged from the responses which participants gave to the line of questioning found in Appendix H.

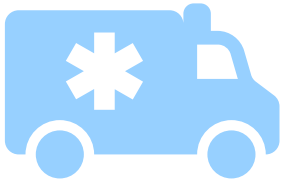


HEALTHCARE RECRUITMENT & RETENTION

The most common thread of interviews was a concern for the retention of healthcare workforce. Overall, interview participants were grateful for having access to and ensuring the success of McCone County Health Center. While community members were generally happy with the quality of care, they shared a concern that a long term local provider may be retiring in the near future. Particularly in a rural area like McCone County, it is important to residents to establish care and develop a relationship with a consistent primary care provider.

Similarly, there was conversation about healthcare workforce recruitment and retention strategies. One community member shared that some of the local Certified Nurse Aide’s (CNA) travel outside of the area for work to earn a higher wage. They commented that “it would be nice if there were a way to pay our local’s an adequate wage so they don’t have to travel for that higher wage and they can instead stay locally and care for their community.”

AMBULANCE SERVICES



The top concern expressed in the interviews was related to the volunteer ambulance service. Due to the expanse of McCone County, nearly all of the participants described the challenges facing the service including limited volunteers, funding, and resources. One participant highlighted the paramedicine program in neighboring Prairie County and felt as though it could be a resource for an aging population like McCone County.

Ultimately, community members were very appreciative of the volunteers but hoped the service could be enhanced through additional support and resources.

SERVICES & RESOURCES NEEDED IN THE COMMUNITY



- Dentist
- Eye doctor
- Full pharmacy
- Primary care provider
- EMS sustainability (i.e., funding, volunteers, training, etc.)
- Paramedicine program
- MRI/CT scan
- Mental health services
- Substance use support and resources
- Expanded hours at Senior Center
- Healthcare workforce



EXECUTIVE SUMMARY

Executive Summary

The table below shows a summary of results from the McCone County Health Center Community Health Needs Assessment. Areas of opportunity were determined after consideration of various criteria, including a comparison to data from local, state, and federal sources (Secondary data); survey results; those issues of greatest concern identified by the community partners through key informant interviews; and the potential impact of a given issue.

Areas of Opportunity	Secondary Data	Survey	Interviews
Access to Healthcare Services			
Barriers to access			
Primary care	⊗	✓	☑
Specialty services (i.e., eye doctor, dentist, dermatologist, OB/GYN, pediatrics, orthopedics, etc.)	⊗	✓	☑
Pharmacy		✓	☑
Awareness of health services and resources		✓	☑
Senior Services			
High percentage of population 65+	⊗	✓	☑
Enhanced aging in place services (i.e., housing transportation, etc.)		✓	☑
Chronic Disease Management & Prevention			
Cancer	⊗	✓	
Diabetes		✓	
Healthy behaviors and lifestyles- weight loss, fitness, health & wellness, nutrition	⊗	✓	☑
Mental and Behavioral Health			
More mental and behavioral health services/resources	⊗	✓	☑
Alcohol/substance use	⊗	✓	☑



NEXT STEPS & RESOURCES

Prioritization of Health Needs

The community steering committee, comprised of staff leaders from McCone County Health Center and community members from McCone County, convened to begin an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through the Community Health Services Development (CHSD) Process.

The community steering committee determined the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives representing the broad interest of the community, including those with public health expertise (see Appendix B for additional information regarding input received from community representatives). The prioritized health needs as determined through the assessment process and which the collaborators will be addressing over the next three years relates to the following healthcare issues:

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

McCone County Health Center will determine which needs or opportunities could be addressed considering their organization's parameters of resources and limitations. The committee will prioritize the needs/opportunities using the additional parameters of the organizational vision, mission, and/or values, as well as existing and potential community partners.

The participants will create goals 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). This plan will be documented and posted along with the CHSD assessment report.

Available Community Resources

In prioritizing the health needs of the community, the following list of potential community partners and resources in which to assist in addressing the needs identified in this report were identified. As the steering committee continues to meet, more resources will continue to be identified, therefore, this list is not exhaustive.

- The McCone County Public Health Department provides health and prevention services to the area.
- The McCone County Senior Center enhances the lives of senior citizens living in the community. The center provides educational resources and serves as a gathering place for community members of all ages.
- The Circle Chamber of Commerce is a voluntary organization created to meet and advance the civic needs of the community. The Chamber organizes the annual Town and Country Day event in the community, as well as other events throughout the year.
- 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.
- Billings Clinic provides educational resources, reference lab services, x-ray overread services and Group Purchasing to MCHC.
- Holy Rosary Healthcare provides educational resources and support to MCHC.
- Rocky Mountain Health Network (RMHN) is a Montana, tax paying, not-for-profit company organized as a Physician Hospital Organization offering administrative services to its members. MCHC is a member of RMHN.
- 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 Montana Hospital Association (MHA) is a nonprofit organization and offers a variety of services, including advocacy of members' interests with state and federal governmental agencies and legislative bodies, regulatory assistance, comparative data products, purchasing programs, education and communications.
- 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.
- Montana Facility Finance Authority provides tax-exempt bond financing, low interest loans and limited planning grants for non-for-profit healthcare organizations.
- 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 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 & 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.
- Homestead Health provides home health services to the McCone County and the surrounding counties. Provide skilled nursing care in your home.
- Revive and Thrive is a new mobile IV therapy service in McCone County and services the surrounding counties. Offers a selection of infusions from immune therapy, rehydration, etc.

Evaluation of Previous CHNA & Implementation Plan

McCone County Health Center (MCHC) provided the Montana Office of Rural Health with an update on their Implementation Plan activities from their previous CHNA process. The MCHC Board of Directors approved its previous implementation plan on November 17, 2020. The plan prioritized the following health issues:

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

The following tables include completed activities, accomplishments and impacts/outcomes within the facility’s proposed goals. To view the full Implementation Plan visit: mcconehealth.org.

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

	Activities	Accomplishments/ Community Impact/Outcomes
Strategy 1.1: Expand/sustain available mental health services at MCHC	Continue to offer new onsite mental health services.	MCHC is setup to use Dr. Arzubi for mental health services, but no appointments have been initiated to date.
	Continue to offer pain management services and try to reduce travel for area residents by utilizing telehealth.	MCHC offers pain management services. MCHC uses Surescripts so the patient can go directly to the pharmacy to pick up their prescription and do not have to come to the clinic.
	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.	MCHC had no patients utilizing this work, so the grant was discontinued.

	<p>Explore opportunities to partner with local youth/schools to provide mental health programming (mental health 1st aid: http://healthinfo.montana.edu/bhwet/trainings.html)</p>	
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Goal 2: Improve access healthcare services in McCone County

	Activities	Accomplishments/ Community Impact/Outcomes
<p>Strategy 2.1: Improve knowledge of available primary care services at MCHC</p>	Expand clinical rotation capacity to bring on physician assistant students.	MCHC had a physicians assistant (PA) student do a rotation in the clinic in 2020.
	Create new provider (PA/PA student) welcome/outreach to introduce providers to community -continually utilizing Facebook and local newspaper.	MCHC uses locum providers and submit the schedule to the local newspaper monthly to keep patients up to date on who is in.
	Expand clinic availability to include Urgent Care services two days a week.	This activity was not feasible due to workforce shortage.
	Create outreach and improve community knowledge of new Urgent Care services.	This activity was not feasible due to workforce shortage.
<p>Strategy 2.2: Improve community awareness of community transportation & pharmacy resources</p>	Reach out to Senior Center to learn of new transportation program. Work with partners to improve knowledge available services.	MCHC partners with the Senior Center’s transportation program for delivering prescriptions.
	Provide training to providers and nursing staff on available transportation/pharmacy resources in community.	MCHC providers and nurses are trained on the available resources.

	Continue working with CEOs from Eastern Montana CAHs and Montana Health Network to bring pharmacy services to our rural communities.	MCHC continues to partner with CEO's from Eastern Montana CAHs and Montana Health Network to bring pharmacy services to our rural communities.
Strategy 2.2: 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).	MCHC continues to share timely information with the community.
	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.	MCHC continues to develop education on telehealth (i.e., accessing, benefits, etc.).

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

	Activities	Accomplishments/ Community Impact/Outcomes
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).	Due to short staff, MCHC has not been able to compile a quarterly article yet but will continue to try and develop this.
	Sponsor or co-host Studio U class/program for area residents.	This activity hasn't been feasible due to a lack of involvement.
	Develop a fitness challenge for area residents and MCHC staff by offering subsidized membership fee or month membership as prize.	MCHC has utilized Healthy is Wellness in 2022.



APPENDICES

Appendix A- Steering Committee

<i>Steering Committee Member</i>	<i>Organization Affiliation</i>
<i>Jacque Gardner</i>	CEO, McCone County Health Center
<i>Alan Stempel</i>	Commissioner McCone County
<i>Kandi Holland</i>	Director McCone County Senior Center
<i>Sue Good</i>	Public Health RN McCone County Public Health Department
<i>LaToya Gardner</i>	Director of Nursing/RN, McCone County Health Center and Owner, Homestead Health
<i>Kim Bradley</i>	President & EMT, Redwater Valley Ambulance Service
<i>Tami Gunsch</i>	Dietary Manager, McCone County Health Center
<i>Bridget Loudon</i>	Office Manager, McCone County Health Center
<i>Keri Taylor</i>	DES Coordinator, McCone County
<i>Tara Hubing</i>	Counselor, Circle High School
<i>Kaylen Lehner</i>	Community member
<i>Kacie Sikveland</i>	Owner, The Bin and 41 Grains



Appendix B- Public Health & Populations Consultation

Public Health & Populations Consultation - a leader or representative of populations such as medically underserved, low-income, minority and/or populations with chronic disease.

Name/Organization

Jacque Gardner, CEO – McCone County Health Center (MCHC)
Alan Stempel, Commissioner – McCone County
Kandi Holland, Director – McCone County Senior Center
Sue Good, Public Health RN – McCone County Public Health Department
LaToya Gardner, Director of Nursing/RN (MCHC) and Owner (Homestead Health)
Kim Bradley, President & EMT – Redwater Valley Ambulance Service
Tami Gunsch, Dietary Manager – MCHC
Bridget Loudon, Office Manager – MCHC
Keri Taylor, DES Coordinator – McCone County
Tara Hubing, Counselor – Circle High School
Kaylen Lehner – Community member
Kacie Sikveland, Owner – The Bin and 41 Grains

Type of Consultation (Steering Committee Meetings, Key Informant Interviews, etc.)

First Steering Committee Meeting	April 4, 2023
Key Informant Interviews	April - May 2023
Second Steering Committee Meeting	July 14, 2023

Public and Community Health

- I think we have a larger issue in our community with alcohol, but others might see issues with drug abuse. It would be interesting to have the community rate them as separate health concerns on the survey so we know where to allocate resources.
- Even though we offer a walk in clinic/urgent care option, community members continued to use the ER.
- Mental health seems to be such an issue across the state, but also throughout McCone County. We do not have any mental health providers outside of telemedicine services available through MCHC, so we should evaluate the community’s desire for expanded mental health services.

- How can we avoid the stigma associated with accessing mental health services in a small community? Many people prefer to go out of town for those services to avoid that stigma. It is very difficult for children to utilize that telemed service so expanding those services to better address children's needs is important.
- Maybe using the term "therapist" with "mental health services" might give people a better idea of what services could be brought to the community.
- I've heard of a lot of community members participating in a sleep study which is such a pain to travel for. How feasible would a sleep study be in our community?
- I'd like to highlight traveling specialists we'd like to see come to the area such as pediatrics, orthopedics, dermatology, etc.
- A success since the last CHNA is that we've been able to establish a relationship with a podiatrist in Sidney to visit and provide these services.
- We should add "Therapist/mental health services," "Chiropractor," and "Allergy testing" as preventive services that people may have used in the past year.
- I have heard of a few community members traveling to Glasgow and Wolf Point for primary care, so we should include those on the survey.
- Naturopath and acupuncturist are other specialists that community members utilize.
- We should add home health and assisted living to the rating of MCHC services.
- We also have a new fitness center called Studio U in Circle.
- We do not have a dentist in the area anymore.

Population: Seniors

- Hospice care is such a need in rural areas like McCone County. Unfortunately, facilities like MCHC can not offer hospice as it's a requirement to have two medical doctors (MDs) and a chaplain on staff.
- Homestead home health services is a new community resource.
- We also have an assisted living facility in town called Conroy Care.
- The senior center provides transportation during the week but we do not have any transportation over weekends.

Population: Veterans

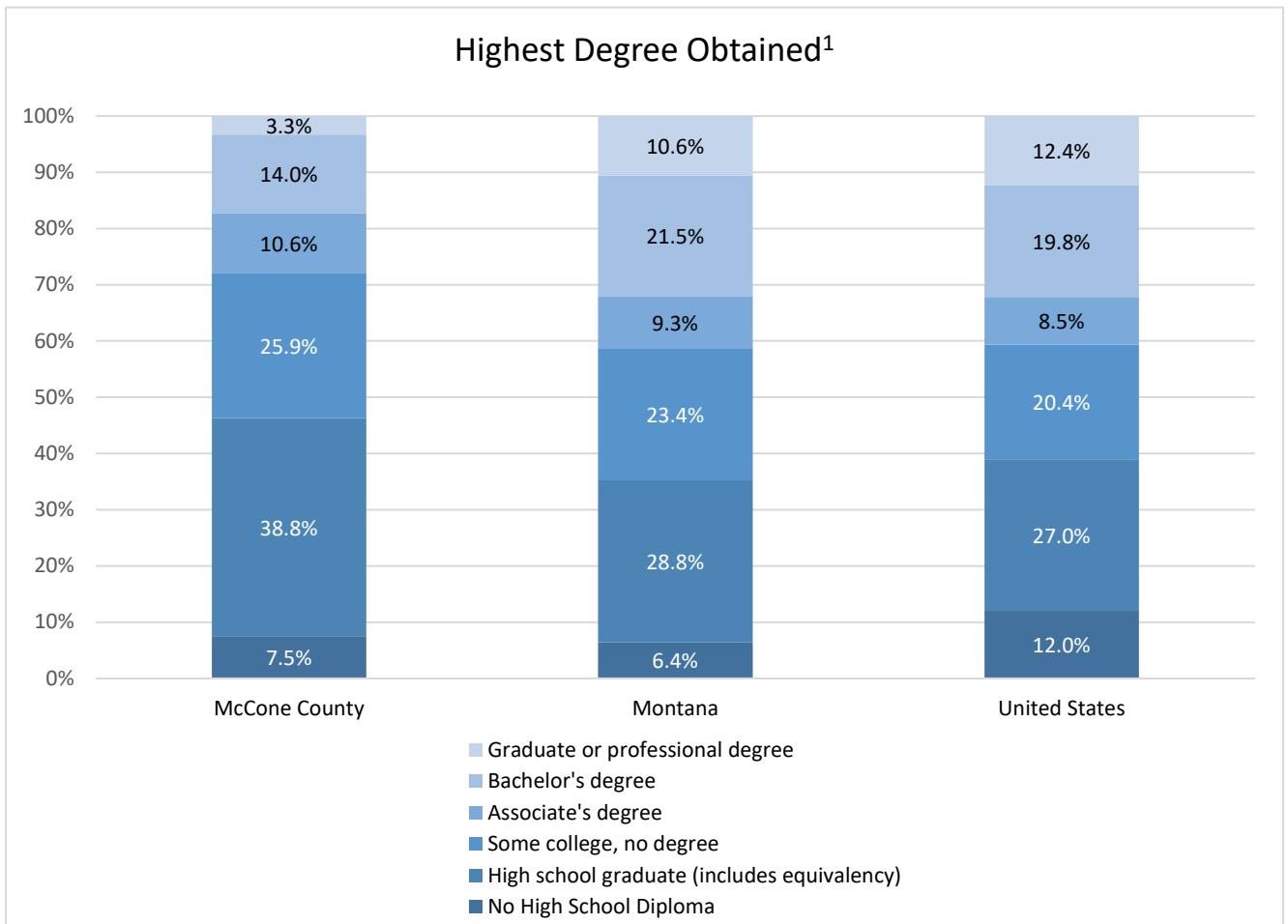
- Depression/anxiety should be separate from mental health issues as I think some demographics like our veteran population might respond to "mental health issues" but not necessarily "depression/anxiety."

Appendix C- McCone Co. Secondary Data

Demographic Measure (%)		County			Montana			Nation		
Population ¹		1,790			1,050,649			324,697,795		
Population Density ¹		0.7			7.1			85.5		
Veteran Status ¹		7.9%			10.4%			7.3%		
Disability Status ¹		13.3%			13.6%			12.6%		
Age ¹		<5	18-64	65+	<5	18-64	65+	<5	18-64	65+
		6.5%	51.4%	25.1%	5.8%	60.1%	18.2%	6.1%	61.7%	15.6%
Gender ¹		Male		Female	Male		Female	Male		Female
		50.4%		49.6%	50.3%		49.7%	49.2%		50.8%
Race/Ethnic Distribution ¹		White			91.4%			75.3%		
		American Indian or Alaska Native			8.3%			1.7%		
		Other [†]			3.7%			26.5%		

¹ US Census Bureau - American Community Survey (2019)

[†] Black, Asian/Pacific Islanders, Hispanic & Non-Hispanic Ancestry



¹ US Census Bureau - American Community Survey (2019)

Socioeconomic Measures (%)	County	Montana	Nation
Median Income ¹	\$49,701	\$54,970	\$62,843
Unemployment Rate ¹	0.9%	4.0%	5.3%
Persons Below Poverty Level ¹	6.2%	13.1%	13.4%
Children in Poverty ¹	3.0%	15.8%	18.5%
Internet at Home ²	75.8%	81.5%	-
Households with Population Age 65+ Living Alone ²	98	52,166	-
Households Without a Vehicle ²	0	21,284	-
Households Receiving SNAP ²	3	56,724	-
Eligible Recipients of Free or Reduced Price Lunch ³ <i>2019/2020 school year</i>	34.3%	42.9%	-
Enrolled in Medicaid ^{4, 1}	5.0%	9.7%	19.8%
Uninsured Adults ^{5, 6} <i>Age <65</i>	15.0%	12.0%	12.1%
Uninsured Children ^{5, 6} <i>Age <18</i>	16.0%	6.0%	5.1%

¹ US Census Bureau - American Community Survey (2019), ² US Census Bureau - COVID-19 Impact Planning Report (2021), ³ Kids Count Data Center, Annie E. Casey Foundation (2020), ⁴ Medicaid Expansion Dashboard, MT-DPHHS (2020), ⁵ County Health Ranking, Robert Wood Johnson Foundation (2020), ⁶ Health Insurance Coverage, Centers for Disease Control and Prevention (CDC) (2019)

Maternal Child Health	County	Montana	Nation
General Fertility Rate* ⁷ <i>Per 1,000 Women 15-44 years of age (2017-2019)</i>	80.8	59.3	-
Preterm Births ⁷ <i>Born less than 37 weeks (2017-2019)</i>	NA	9.4%	-
Adolescent Birth Rate ⁷ <i>Per 1,000 years females 15-19 years of age (2017-2019)</i>	NA	18.3	-
Smoking during pregnancy ^{3, 8}	NA	16.5%	7.2%
Kotelchuck Prenatal Care** ⁷ <i>Adequate or Adequate-Plus (2017-2019)</i>	75.0%	75.7%	-
Low and very low birth weight infants ⁷ <i>Less than 2500 grams (2017-2019)</i>	NA	7.6%	-
Childhood Immunization Up-To-Date (UTD) ^{§ 9}	42.9%	64.8%	-

⁷ IBIS Birth Data Query, MT-DPPHS (2020), ³ Kids Count Data Center, Annie E. Casey Foundation (2020), ⁸ National Center for Health Statistics (NCHS), CDC (2016), ⁹ Clinic Immunization Results, MT-DPHHS (2020)

* General fertility rate is the number of live births per 1,000 females of childbearing age between the ages of 15-44 years.

**The Kotelchuck Index, also called the Adequacy of Prenatal Care Utilization (APNCU) Index, uses two crucial elements obtained from birth certificate data-when prenatal care began (initiation) and the number of prenatal visits from when prenatal care began until delivery (received services). The Kotelchuck index classifies the adequacy of initiation as follows: pregnancy months 1 and 2; months 3 and 4; months 5 and 6; and months 7 to 9. A ratio of observed to expected visits is calculated and grouped into four categories: Inadequate (received less than 50% of expected visits); Intermediate (50%-79%); Adequate (80%-109%); Adequate Plus (110% or more).

§ UTD = 4 DTaP, 3 Polio, 1 MMR, 3/4 Hib, 3 Hep B, 1 Var, 4 PCV by 24 – 35-month-old children.

Behavioral Health	County	Montana	Nation
Adult Smoking ⁵	20.0%	19.0%	16.0%
Excessive Drinking ⁵	24.0%	22.0%	15.0%
Adult Obesity ⁵	31.0%	27.0%	26.0%
Poor Mental Health Days ⁵ (Past 30 days)	4.1	3.9	3.8
Physical Inactivity ⁵	28.0%	22.0%	19.0%
Do NOT wear seatbelts ¹⁰ State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	10.3%	6.3%
Drink and Drive ¹⁰ State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	3.7%	3.1%

⁵ County Health Ranking, Robert Wood Johnson Foundation (2020), ¹⁰ Behavioral Risk Factor Surveillance System, CDC (2019)

Cancer prevention & screening	County	Montana	Nation
Human Papillomavirus (HPV) vaccination UTD ^{†† 11, 12} Adolescents 13-17 years of age (2020)	9.5%	54.4%	58.6%
Cervical cancer screening in past 3 years ^{13, 10} Age adjusted (county/state) and crude (nation) prevalence among adult women aged 21–65 years (2018)	84.5%	76.8%	80.1%
Mammography in past 2 years ^{13, 10} Age adjusted (county/state) and crude (nation) prevalence among women 50-74 years (2018)	68.3%	73.4%	78.3%
Colorectal Cancer Screening ^{13, 10} Age adjusted (county) and crude (state/nation) prevalence among adults age 50-75 years (2018)	61.4%	64.5%	69.7%

¹¹ Adolescent Immunization Coverage by County, MT-DPHHS (2020), ¹² National Center for Immunization and Respiratory Diseases, CDC (2021), ¹³ PLACES Project, CDC (2020), ¹⁰ Behavioral Risk Factor Surveillance System, CDC (2019)

^{††} An up-to-date HPV vaccination measure assesses the completion of the HPV vaccine series (2 doses separated by 5 months [minus 4 days] for immunocompetent adolescents initiating the HPV vaccine series before their 15th birthday, and 3 doses for all others).

Infectious Disease Incidence Rates ¹⁴ Per 100,000 people (2015-2017)	County	Montana
Enteric Diseases *	688.6	80.1
Hepatitis C virus	60.3	93.4
Sexually Transmitted Diseases (STD) †	531.2	551.6
Vaccine Preventable Diseases (VPD) §	393.5	91.5

¹⁴ IBIS Community Snapshot, MT-DPPHS

* Foodborne illness † STD analyses include chlamydia, gonorrhea, and primary/secondary syphilis

§ VPD analyses include: Chickenpox, *Haemophilus influenzae*, Meningococcal disease, Mumps, Pertussis, *Streptococcus pneumoniae*, Tetanus

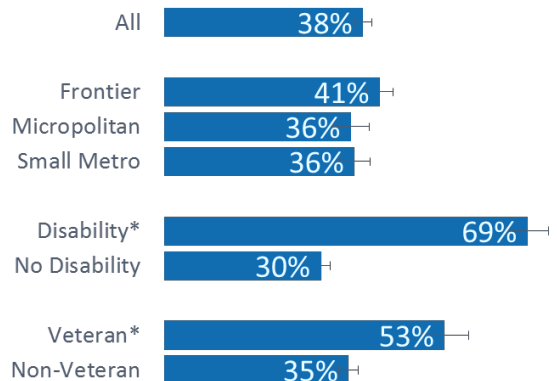
Chronic Conditions ¹⁰	County	Montana	Nation
Cardiovascular Disease (CVD) prevalence <i>Adults aged 18 years and older (2014-2016)</i>	**	7.9	8.6
Chronic Obstructive Pulmonary Disease (COPD) prevalence <i>Adults aged 18 years and older (2014-2016)</i>	**	6.6	6.4
Diabetes Prevalence <i>Adults aged 18 years and older (2014-2016)</i>	**	8.3	10.6
Breast Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	125.0	124.1
Cervical Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	7.9	7.4
Colon and Rectum Cancer (CRC) Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	37.1	38.9
Lung Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	52.2	60.0
Melanoma Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	26.3	21.0
Prostate Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	109.6	103.0

¹⁴ IBIS Community Snapshot, MT-DPPHS
 ** Data were suppressed to protect privacy.

Montana Adults with Self-Reported Chronic Condition ¹⁰	
1. Arthritis	29.0%
2. Depression	24.1%
3. Asthma	10.0%
4. Diabetes	7.6%
5. COPD	6.8%
6. Cardiovascular disease	3.9%
7. Kidney disease	2.4%

¹⁰ Behavioral Risk Factor Surveillance System, CDC (2019)

Percent of Montana Adults with Two or More Chronic Conditions



Mortality	County	Montana	Nation
Suicide Rate¹⁵ <i>Per 100,000 population (2009-2018)</i>	**	23.9	-
Veteran Suicide Rate¹⁵ <i>Per 100,000 population (2009-2018)</i>	-	65.7	38.4
Alzheimer's Disease Mortality Rate¹⁶ <i>Age-Adjusted per 100,000 population (2017- 2019)</i>	-	21.7	-
Pneumonia/Influenza Mortality Rate¹⁷ <i>Age-Adjusted per 100,000</i>	-	10.5	12.3
Leading Causes of Death^{16, 18}	-	1. Heart Disease 2. Cancer 3. Chronic Lower Respiratory Disease (CLRD)	1. Heart Disease 2. Cancer 3. Unintentional injuries

¹⁵ Suicide in Montana, MT-DPHHS (2021), ¹⁶ IBIS Mortality Query, MT- DPPHS (2019), ¹⁷ Kaiser State Health Facts, National Pneumonia Death Rate (2019), ¹⁸ National Vital Statistics, CDC (2019)

** Data were suppressed to protect privacy.

Montana Health Disparities ¹⁰	White, non-Hispanic	American Indian/Alaska Native	Low Income*
14+ Days when physical health status was NOT good <i>Crude prevalence (2019)</i>	13.0%	17.9%	28.9%
14+ Days when mental health status was NOT good <i>Crude prevalence (2019)</i>	13.2%	19.2%	30.0%
Current smoker <i>Crude prevalence (2019)</i>	14.5%	41.5%	32.9%
Routine checkup in the past year <i>Crude prevalence (2019)</i>	72.8%	74.1%	81.1%
No personal doctor or health care provider <i>Crude prevalence (2019)</i>	26.5%	28.8%	23.8%
No dental visit in the last year for any reason <i>Crude prevalence (2020)</i>	34.9%	41.6%	48.1%
Consumed fruit less than one time per day <i>Crude prevalence (2019)</i>	40.5%	46.8%	49.5%
Consumed vegetables less than one time per day <i>Crude prevalence (2019)</i>	16.7%	18.0%	22.0%
Does not always wear a seat belt <i>Crude prevalence (2020)</i>	10.8%	15.9%	16.0%

¹⁰ Behavioral Risk Factor Surveillance System, CDC (2019)

*Annual household income < \$15,000

Youth Risk Behavior ¹⁹	Montana		Nation
	White, non-Hispanic	American Indian/Alaska Native	
Felt Sad or Hopeless <i>Almost every day for two weeks or more in a row, during the past 12 months</i>	35.3%	39.6%	36.7%
Attempted Suicide <i>During the past 12 months</i>	8.7%	15.4%	8.9%
Lifetime Cigarette Use <i>Students that have ever tried smoking</i>	28.3%	48.9%	24.1%
Currently Drink Alcohol <i>Students that have had at least one drink of alcohol on at least one day during the past 30 days</i>	34.3%	25.3%	29.2%
Lifetime Marijuana Use <i>Students that have used marijuana one or more times during their life</i>	36.9%	58.9%	36.8%
Texting and Driving <i>Among students who drove a car in the past 30 days</i>	55.2%	39.6%	39.0%
Carried a Weapon on School Property <i>In the last 30 days</i>	7.2%	3.2%	2.8%

¹⁹ Montana Youth Risk Behavior Survey (2019)

Secondary Data – Healthcare Workforce Data 2021

Health Professional Shortage Area & Medically Underserved Areas/Populations

The uneven geographic distribution of health system resources has long been a problem in the United States. As a result, many individuals do not have adequate access to health services in their community. State and Federal programs have been put in place to attempt to ameliorate this problem and reduce the barriers to access healthcare. The Health Professional Shortage Area (HPSA) program and the Medically Underserved Areas/Populations (MUA/P) are among the tools used to increase the supply, capacity, and distribution of health professionals to areas of greatest need. HPSA designations indicate shortages of healthcare professionals who provide primary care, dental, and mental health services. Designation may help communities attract new healthcare workforce and it may increase Medicare and Medicaid reimbursement to already existing healthcare providers.

Health Professional Shortage Area Designation ¹ – McCone County, Montana		
Discipline	HPSA Score	HPSA
Primary Care	11	✓ Geographic
Dental Health	15*	✓ Low income population
Mental Health	18 [§]	✓ High needs geographic population
HPSA Scores range from 0 to 25 (primary care and mental health) and 0 to 26 (dental health) where the higher the score, the greater the priority		

¹ Health Resources and Services Administration (2021)

* Proposed for withdrawal - updated 8/5/2021

§ HPSA score for Eastern Montana (Carter, Custer, Daniels, Dawson, Fallon, Garfield, McCone, Phillips, Powder River, Prairie, Richland, Roosevelt, Rosebud, Sheridan, Treasure, Valley and Wibaux counties)

Provider Supply and Access to Care ²				
Measure	Description	McCone Co. (N=1) **	Montana (N=49) **	National (N=1347) **
Primary care physicians	Ratio of population to primary care physicians	1:0	1349:1	1050:1
Other primary care providers	Ratio of population to other primary care providers including nurse practitioners, physician assistants, and clinical nurse specialists	1718:1	878:1	726:1
Dentists	Ratio of population to dentists	1:0	1388:1	1260:1
Mental health providers	Ratio of population to mental health providers	-	356:1	310:1

² Critical Access Hospital Measurement and Performance Assessment System (CAHMPAS) - FLEX Monitoring (2019)

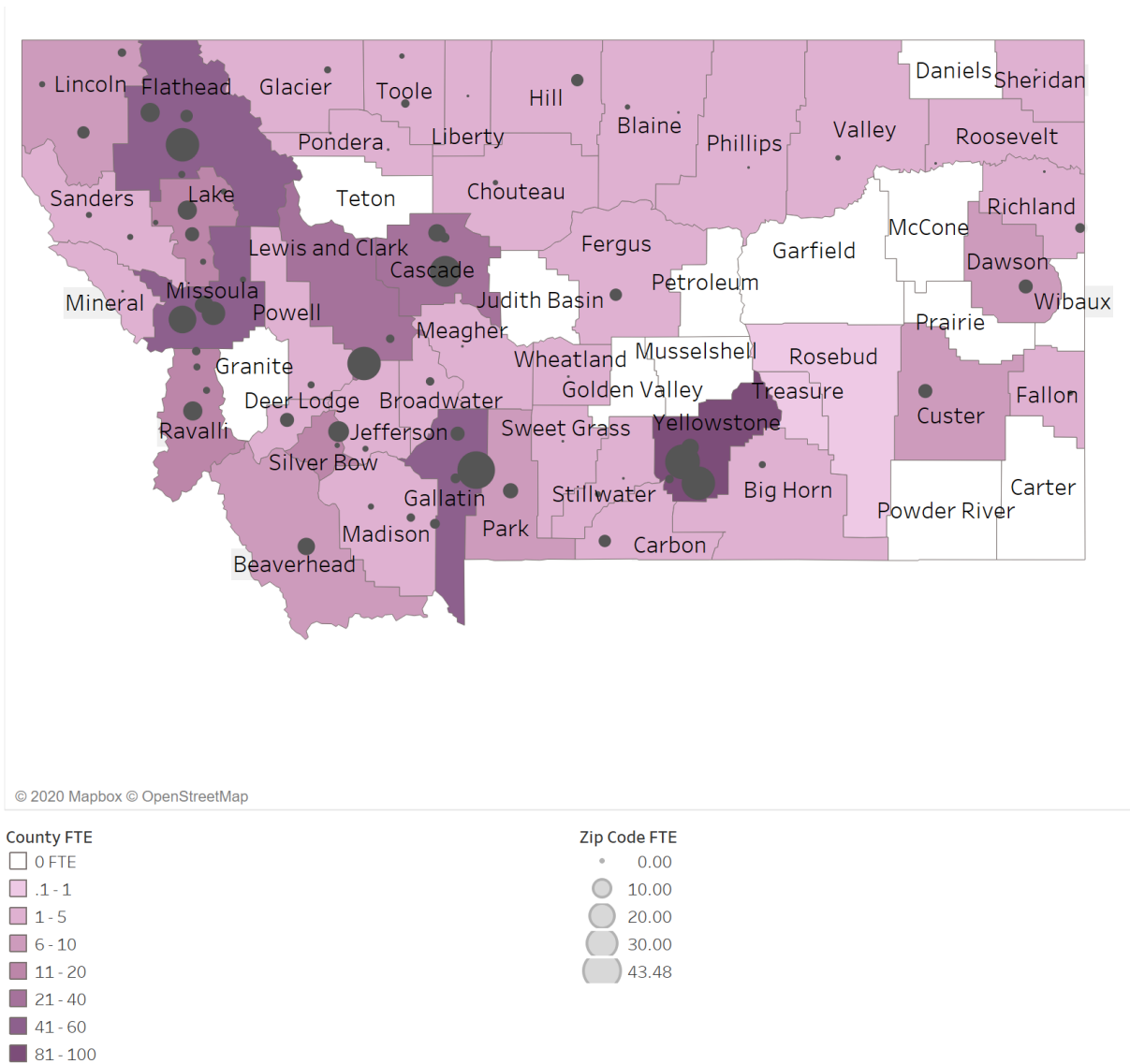
** Total number of CAHs in region

Healthcare workforce Distribution Maps

WIM Tracking is a Montana-based health workforce research company. WIM Tracking proactively monitors the movement of healthcare professionals in Wyoming, Idaho and Montana and maintains the data within a relational database.

- Counts only include actively practicing providers.
- Counts do not include providers at limited access facilities (VA, Malmstrom AFB, Indian Health Services, Montana State Prison, Montana State Hospital, therapeutic boarding schools)
- Counts only include primary practice locations. Locum Tenens providers are not included.
- Primary Care specialties include Family Medicine, Internal Medicine and Pediatrics.

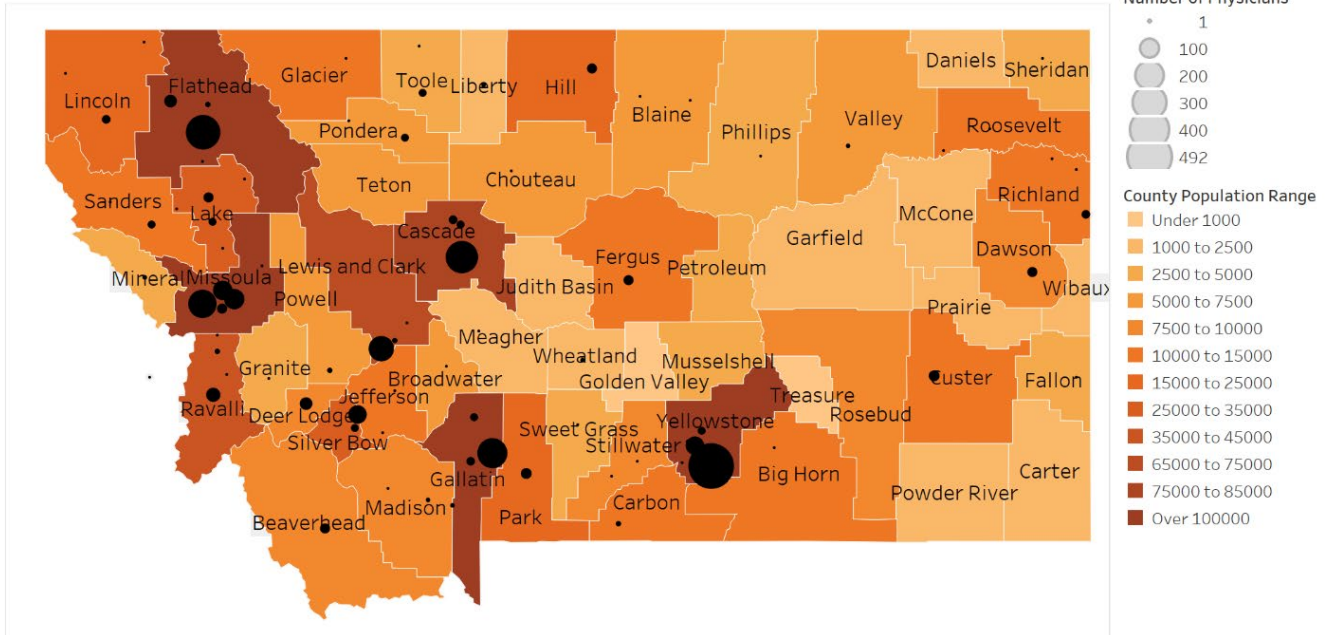
Primary Care Physician FTE: Practice Locations Plotted by Zip Code



Data Source: Montana Primary Care Office data (2020) compiled and analyzed by WIM Tracking (Sept. 2020)

*Note: Does not include IHS or Tribal Health physicians.

Physicians (All Specialties) by County Population Range



Data Source: Montana Primary Care Office data (2020) and WIM Tracking (Sept. 2020)

*Note: Does not include IHS or Tribal Health physicians.

Appendix D- Survey Cover Letter

McCone County Health Center

Website: www.mcconehealth.org

April 21, 2023

Dear [LASTNAME] household:

Participate in our Community Health Needs Assessment survey for a chance to
Win one of two (2) \$50 Visa gift cards

McCone County Health Center (MCHC) in Circle, Montana is partnering with the Montana Office of Rural Health (MORH) to administer a community health needs assessment survey. The purpose of the survey is to obtain information from a wide range of participants to assist in planning our programs, services, and facilities to best serve our community. Your help is critical in determining health priorities and planning for future needs.

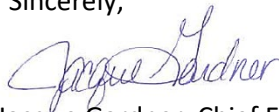
Your name has been randomly selected as a resident who lives in the MCHC service area. The survey covers topics such as: use of health care services, awareness of services, community health, health insurance, and demographics. We know your time is valuable, so we have made an effort to keep the survey to about 15 minutes. Participating in this survey is completely voluntary and your identity and answers will remain confidential.

1. Due date to complete survey: May 26, 2023
2. Complete the enclosed survey and return it in the envelope provided - no stamp needed.
3. You can also access the survey at <http://helpslab.montana.edu/survey.html>. Select "McCone County Health Center Survey." Your access code is [CODED]
4. The winners of the \$50 Visa gift cards will be contacted the week of June 5th.

All survey responses will go to HELPS Lab at Montana State University in Bozeman, Montana, the organization that is assisting MORH with this project. If you have any questions about the survey, please call MORH at 406-994-6986. We believe, with your help, we can continue to improve health care services in our region.

Thank you for your assistance. We appreciate your time.

Sincerely,



Jacquie Gardner, Chief Executive Officer

605 Sullivan Avenue
P. O. Box 48
Circle, Montana 59215
jgardner@mcconehealth.org

Telephone #
406-485-3381
Fax #
406-485-3383

Appendix E- Survey Instrument

Community Health Needs Assessment Survey Circle, Montana

INSTRUCTIONS: Please complete this survey by marking the appropriate boxes and then return it in the enclosed postage-paid envelope. If you need assistance, please contact the Montana Office of Rural Health at 406-994-6986. Participation is voluntary, and your responses will remain confidential. You can choose not to answer any question and can stop at any time.

1. How would you rate the general health of our community?

- Very healthy Healthy Somewhat healthy Unhealthy Very unhealthy

2. In the following list, what do you think are the **three most serious** health concerns in our community? (**Select ONLY 3**)

- | | | |
|---|--|---|
| <input type="checkbox"/> Alcohol abuse | <input type="checkbox"/> Lack of access to healthcare | <input type="checkbox"/> Social isolation/loneliness |
| <input type="checkbox"/> Alzheimer's/dementia | <input type="checkbox"/> Lack of dental care | <input type="checkbox"/> Stroke |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Lack of exercise | <input type="checkbox"/> Substance abuse |
| <input type="checkbox"/> Child abuse/neglect | <input type="checkbox"/> Mental health issues | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Depression/anxiety | <input type="checkbox"/> Motor vehicle accidents | <input type="checkbox"/> Tobacco use (cigarettes/cigars, vaping, smokeless) |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Overweight/obesity | <input type="checkbox"/> Work/economic stress |
| <input type="checkbox"/> Domestic violence | <input type="checkbox"/> Recreation related accidents/injuries | <input type="checkbox"/> Work related accidents/injuries |
| <input type="checkbox"/> Heart disease | <input type="checkbox"/> Respiratory issues/illness | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Hunger | | |

3. Select the **three** items below that you believe are **most important** for a healthy community (**select ONLY 3**):

- | | | |
|--|---|--|
| <input type="checkbox"/> Access to childcare/after school programs | <input type="checkbox"/> Good jobs and a healthy economy | <input type="checkbox"/> Opportunities for physical activity |
| <input type="checkbox"/> Access to healthcare services | <input type="checkbox"/> Good schools | <input type="checkbox"/> Religious or spiritual values |
| <input type="checkbox"/> Access to healthy foods | <input type="checkbox"/> Healthy behaviors and lifestyles | <input type="checkbox"/> Strong family life |
| <input type="checkbox"/> Affordable housing | <input type="checkbox"/> Low crime/safe neighborhoods | <input type="checkbox"/> Tolerance for diversity |
| <input type="checkbox"/> Arts and cultural events | <input type="checkbox"/> Low death and disease rates | <input type="checkbox"/> Transportation services |
| <input type="checkbox"/> Clean environment | <input type="checkbox"/> Low level of domestic violence | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Community involvement | <input type="checkbox"/> Parks and recreation | |

4. How do you rate your knowledge of the health services that are available through McCone County Health Center?

- Excellent Good Fair Poor

5. How do you learn about the health services available in our community? (**Select ALL that apply**)

- | | | |
|--|--|---|
| <input type="checkbox"/> Billboards/posters | <input type="checkbox"/> Newspaper | <input type="checkbox"/> Social media/Facebook |
| <input type="checkbox"/> Circle Banner | <input type="checkbox"/> Presentations | <input type="checkbox"/> Website/internet |
| <input type="checkbox"/> Friends/family | <input type="checkbox"/> Public Health | <input type="checkbox"/> Word of mouth/reputation |
| <input type="checkbox"/> Healthcare provider | <input type="checkbox"/> Radio | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Mailings/newsletter | <input type="checkbox"/> Senior Center | |

6. Which community health resources, other than the hospital or clinic, have you used in the last three years? (**Select ALL that apply**)

- | | | |
|---|---|--|
| <input type="checkbox"/> Conroy Care (Assisted living) | <input type="checkbox"/> Homestead (Home health services) | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Chiropractor | <input type="checkbox"/> Massage Therapy | <input type="checkbox"/> Senior Center |
| <input type="checkbox"/> Dentist (Pediatric school program) | <input type="checkbox"/> Meals on Wheels | <input type="checkbox"/> Studio U (Fitness Center) |
| <input type="checkbox"/> Eye doctor | <input type="checkbox"/> Mental Health | <input type="checkbox"/> Other: _____ |

7. In your opinion, what would improve our community's access to healthcare? **(Select ALL that apply)**
- | | |
|--|--|
| <input type="checkbox"/> Cultural sensitivity | <input type="checkbox"/> More visiting specialists |
| <input type="checkbox"/> Expanded mental health services | <input type="checkbox"/> Outpatient services expanded hours |
| <input type="checkbox"/> Greater health education services | <input type="checkbox"/> Payment assistance programs (healthcare expenses) |
| <input type="checkbox"/> Improved quality of care | <input type="checkbox"/> Telemedicine |
| <input type="checkbox"/> Interpreter services | <input type="checkbox"/> Transportation assistance |
| <input type="checkbox"/> More information about available services | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> More primary care providers | |
8. If any of the following classes/programs were made available to the community, which would you be most interested in attending? **(Select ALL that apply)**
- | | | |
|--|--|--|
| <input type="checkbox"/> Alcohol/substance abuse | <input type="checkbox"/> Health and wellness | <input type="checkbox"/> Prenatal |
| <input type="checkbox"/> Alzheimer's | <input type="checkbox"/> Heart disease | <input type="checkbox"/> Smoking/tobacco cessation |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Lactation/breastfeeding support | <input type="checkbox"/> Support groups |
| <input type="checkbox"/> Caregiver support | <input type="checkbox"/> Living will | <input type="checkbox"/> Weight loss |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Men's health | <input type="checkbox"/> Women's health |
| <input type="checkbox"/> First aid/CPR | <input type="checkbox"/> Therapist (mental health) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Fitness | <input type="checkbox"/> Nutrition | |
| <input type="checkbox"/> Grief counseling | <input type="checkbox"/> Parenting | |
9. What additional healthcare services would you use if available locally? **(Select ALL that apply)**
- | | | |
|---|---|---|
| <input type="checkbox"/> Dental services | <input type="checkbox"/> Visiting dermatologist | <input type="checkbox"/> Vision services (eye doctor) |
| <input type="checkbox"/> Mental health therapists (pediatrics and adults) | <input type="checkbox"/> Visiting pediatrics | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Pharmacy | <input type="checkbox"/> Visiting OB/GYN | |
| | <input type="checkbox"/> Visiting orthopedics | |
10. Would you or a family member be interested in any of the following senior services if they were made available in the Circle area? **(Select ALL that apply)**
- | | |
|--|--|
| <input type="checkbox"/> In home personal assistance | <input type="checkbox"/> Transportation services |
| <input type="checkbox"/> Senior respite care | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Senior retirement housing/community | |
11. How important are local healthcare providers and services (i.e.: hospitals, clinics, nursing homes, assisted living, etc.) to the economic well-being of the area?
- | | | | |
|---|------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Very important | <input type="checkbox"/> Important | <input type="checkbox"/> Not important | <input type="checkbox"/> Don't know |
|---|------------------------------------|--|-------------------------------------|
12. Which of the following preventive services have you or someone in your household used in the past year? **(Select ALL that apply)**
- | | | |
|--|--|---|
| <input type="checkbox"/> Allergy test | <input type="checkbox"/> Dental check | <input type="checkbox"/> Pap test |
| <input type="checkbox"/> Blood pressure check | <input type="checkbox"/> Flu shot/immunizations | <input type="checkbox"/> Prostate (PSA) |
| <input type="checkbox"/> Children's checkup/ Well baby | <input type="checkbox"/> Health checkup | <input type="checkbox"/> Skin check |
| <input type="checkbox"/> Chiropractor | <input type="checkbox"/> Health fair (labs) | <input type="checkbox"/> Vision check |
| <input type="checkbox"/> Cholesterol check | <input type="checkbox"/> Hearing check | <input type="checkbox"/> None |
| <input type="checkbox"/> Colonoscopy | <input type="checkbox"/> Mammography | <input type="checkbox"/> Other: _____ |
| | <input type="checkbox"/> Mental health therapist | |

13. In the past three years, was there a time when you or a member of your household thought you needed healthcare services but did NOT get or delayed getting medical services?
- Yes No (If no, skip to question 15)
14. If yes, what were the **three** most important reasons why you did not receive healthcare services? (Select ONLY 3)
- | | | |
|--|---|--|
| <input type="checkbox"/> Could not get an appointment | <input type="checkbox"/> Had no childcare | <input type="checkbox"/> Office wasn't open when I could go |
| <input type="checkbox"/> Could not get an appointment with my provider of choice | <input type="checkbox"/> It cost too much | <input type="checkbox"/> Too long to wait for an appointment |
| <input type="checkbox"/> Could not get off work | <input type="checkbox"/> It was too far to go | <input type="checkbox"/> Too nervous or afraid |
| <input type="checkbox"/> Didn't know where to go | <input type="checkbox"/> Language barrier | <input type="checkbox"/> Transportation problems |
| <input type="checkbox"/> Don't like medical providers | <input type="checkbox"/> My insurance didn't cover it | <input type="checkbox"/> Unsure if services were available |
| <input type="checkbox"/> Don't understand healthcare system | <input type="checkbox"/> No insurance | <input type="checkbox"/> Want to see a doctor (MD/DO) |
| | <input type="checkbox"/> Not treated with respect | <input type="checkbox"/> Other: _____ |
15. In the past year, was there a time when you or a member of your household had difficulty getting a prescription or taking a prescription regularly?
- Yes No (If no, skip to question 17)
16. What were the **three** most important reasons why you or a member of your household did not get or take your medications/prescriptions (as prescribed by your provider)? (Select ONLY 3)
- | | | |
|--|---|---|
| <input type="checkbox"/> Pharmacy did not have prescription when I arrived | <input type="checkbox"/> It was too far to go | <input type="checkbox"/> Pharmacy wasn't open when I could go |
| <input type="checkbox"/> Had trouble remembering to take pills | <input type="checkbox"/> Mail-order prescriptions took too long | <input type="checkbox"/> Transportation problems |
| <input type="checkbox"/> It cost too much | <input type="checkbox"/> My insurance didn't cover it | <input type="checkbox"/> Other: _____ |
| | <input type="checkbox"/> No insurance | |
17. In the past three years, have you or a member of your household seen a primary healthcare provider such as a family physician, physician assistant or nurse practitioner for healthcare services?
- Yes No (If no, skip to question 20)
18. Where is the primary healthcare provider that your household uses MOST located? (Select ONLY 1)
- | | | | |
|-----------------------------------|-----------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Circle | <input type="checkbox"/> Glasgow | <input type="checkbox"/> Miles City | <input type="checkbox"/> Wolf Point |
| <input type="checkbox"/> Billings | <input type="checkbox"/> Glendive | <input type="checkbox"/> Sidney | <input type="checkbox"/> Other: _____ |
19. Why did you select the primary care provider you are currently seeing? (Select ALL that apply)
- | | |
|---|---|
| <input type="checkbox"/> Appointment availability | <input type="checkbox"/> Provider's specialty |
| <input type="checkbox"/> Clinic/provider's reputation for quality | <input type="checkbox"/> Recommended by family or friends |
| <input type="checkbox"/> Closest to home | <input type="checkbox"/> Referred by physician or other provider |
| <input type="checkbox"/> Cost of care | <input type="checkbox"/> Required by insurance plan |
| <input type="checkbox"/> Indian Health Services | <input type="checkbox"/> Requiring higher level of care/resources |
| <input type="checkbox"/> Length of waiting room time | <input type="checkbox"/> VA/Military requirement |
| <input type="checkbox"/> Prior experience with clinic/provider | <input type="checkbox"/> Wanted to see a doctor (MD/DO) |
| <input type="checkbox"/> Privacy/confidentiality | <input type="checkbox"/> Other: _____ |
20. In the past three years, has anyone in your household received care in a hospital? (i.e., hospitalized overnight, day surgery, obstetrical care, rehabilitation, radiology or emergency care)
- Yes No (If no, skip to question 23)

21. If yes, which hospital does your household use MOST for hospital care? (Select ONLY 1)

- | | |
|---|--|
| <input type="checkbox"/> McCone County Health Center (Circle) | <input type="checkbox"/> Holy Rosary Healthcare (Miles City) |
| <input type="checkbox"/> Billings Clinic (Billings) | <input type="checkbox"/> Sidney Health Center (Sidney) |
| <input type="checkbox"/> Glendive Medical Center (Glendive) | <input type="checkbox"/> St. Vincent's (Billings) |
| <input type="checkbox"/> Frances Mahon Deaconess Hospital (Glasgow) | <input type="checkbox"/> Other: _____ |

22. Thinking about the hospital you were at most frequently, what were the **three most important reasons for selecting that hospital? (Select ONLY 3)**

- | | | |
|--|--|--|
| <input type="checkbox"/> Closest to home | <input type="checkbox"/> Hospital's reputation for quality | <input type="checkbox"/> Referred by physician or other provider |
| <input type="checkbox"/> Closest to work | <input type="checkbox"/> Prior experience with hospital | <input type="checkbox"/> Required by insurance plan |
| <input type="checkbox"/> Cost of care | <input type="checkbox"/> Privacy/confidentiality | <input type="checkbox"/> VA/Military requirement |
| <input type="checkbox"/> Emergency, no choice | <input type="checkbox"/> Recommended by family or friends | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Financial assistance programs | | |

23. In the past three years, have you or a household member seen a healthcare specialist (other than your primary care provider/family doctor) for healthcare services?

- Yes No (If no, skip to question 26)

24. Where was the healthcare specialist seen? (Select ALL that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Telemedicine consult (Circle) | <input type="checkbox"/> Frances Mahon Deaconess Hospital (Glasgow) | <input type="checkbox"/> Ortho Montana (Orthopedic surgery) |
| <input type="checkbox"/> Billings Clinic (Billings) | <input type="checkbox"/> Glendive Medical Center (Glendive) | <input type="checkbox"/> Sidney Health Center (Sidney) |
| <input type="checkbox"/> Billings Clinic (Miles City) | <input type="checkbox"/> Holy Rosary Healthcare (Miles City) | <input type="checkbox"/> St. Vincent's (Billings) |
| | | <input type="checkbox"/> Other: _____ |

25. What type of healthcare specialist was seen? (Select ALL that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Acupuncturist | <input type="checkbox"/> Internal medicine | <input type="checkbox"/> Physical therapist |
| <input type="checkbox"/> Allergist | <input type="checkbox"/> Mental health therapist | <input type="checkbox"/> Podiatrist |
| <input type="checkbox"/> Audiologist | <input type="checkbox"/> Naturopath | <input type="checkbox"/> Psychiatrist (M.D.) |
| <input type="checkbox"/> Cardiologist | <input type="checkbox"/> Nephrologist | <input type="checkbox"/> Psychologist |
| <input type="checkbox"/> Chiropractor | <input type="checkbox"/> Neurologist | <input type="checkbox"/> Pulmonologist |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Neurosurgeon | <input type="checkbox"/> Radiologist |
| <input type="checkbox"/> Dermatologist | <input type="checkbox"/> OB/GYN | <input type="checkbox"/> Rheumatologist |
| <input type="checkbox"/> Dietician | <input type="checkbox"/> Occupational therapist | <input type="checkbox"/> Social worker |
| <input type="checkbox"/> Endocrinologist | <input type="checkbox"/> Oncologist | <input type="checkbox"/> Speech therapist |
| <input type="checkbox"/> ENT (ear/nose/throat) | <input type="checkbox"/> Ophthalmologist | <input type="checkbox"/> Substance abuse counselor |
| <input type="checkbox"/> Gastroenterologist | <input type="checkbox"/> Optometrist | <input type="checkbox"/> Urologist |
| <input type="checkbox"/> General surgeon | <input type="checkbox"/> Orthopedic surgeon | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Geriatrician | <input type="checkbox"/> Pediatrician | |

26. The following services are available in McCone County. Please rate the overall quality for each service by circling your answer. **(Please circle N/A if you have not used the service)**

	Excellent	Good	Fair	Poor	Haven't used/ Don't know
Assisted living	4	3	2	1	N/A
Ambulance services	4	3	2	1	N/A
Clinic services	4	3	2	1	N/A
Emergency room	4	3	2	1	N/A
Home Health	4	3	2	1	N/A
Inpatient/hospital care	4	3	2	1	N/A
Long-Term Care (nursing home)	4	3	2	1	N/A
Laboratory	4	3	2	1	N/A
Physical Therapy	4	3	2	1	N/A
Public Health	4	3	2	1	N/A
Senior Center	4	3	2	1	N/A
X-Rays	4	3	2	1	N/A

27. In the past three years, have there been periods of at least three consecutive months where you felt depressed on most days?

- Yes No

28. Thinking about your mental health (which includes stress, anxiety, depression and problems with emotions), how would you rate your mental health in general?

- Excellent Very good Good Fair Poor

29. In the past year, how often have you felt lonely or isolated?

- Everyday Sometimes (3-5 days per month) Never
 Most days (3-5 days per week) Occasionally (1-2 days per month)

30. Thinking over the past year, how would you describe your stress level?

- High Moderate Low Unsure/rather not say

31. To what degree has your life been negatively affected by your own or someone else's substance abuse issues, including alcohol, prescription or other drugs?

- A great deal Somewhat A little Not at all

32. Over the past month, how often have you had physical activity for at least 20 minutes?

- Daily 3-5 times per month No physical activity
 2-4 times per week 1-2 times per month

33. In the past year, did you worry that you would not have enough food?

- Yes No

34. Do you feel that the community has adequate and affordable housing options available?

- Yes No Don't know

35. What type of health insurance covers the **majority** of your household's medical expenses? (**Select ONLY 1**)

- | | | |
|---|---|---|
| <input type="checkbox"/> Employer sponsored | <input type="checkbox"/> Indian Health | <input type="checkbox"/> VA/Military |
| <input type="checkbox"/> Health Insurance Marketplace | <input type="checkbox"/> Medicaid | <input type="checkbox"/> None/pay out of pocket |
| <input type="checkbox"/> Health Savings Account | <input type="checkbox"/> Medicare | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Healthy MT Kids | <input type="checkbox"/> Private insurance/private plan | |

36. How well do you feel your health insurance covers your healthcare costs?

- Excellent Good Fair Poor

37. Are you aware of programs that help people pay for healthcare expenses?

- Yes, and I use them Yes, but I do not qualify Yes, but choose not to use No Not sure

Demographics

All information is kept confidential and your identity is not associated with any answers.

38. Where do you currently live, by zip code?

- | | | |
|---|--|---|
| <input type="checkbox"/> 59215 Circle | <input type="checkbox"/> 59274 Vida | <input type="checkbox"/> 59349 Terry |
| <input type="checkbox"/> 59214 Brockway | <input type="checkbox"/> 59337 Jordan | <input type="checkbox"/> 59201 Wolf Point |
| <input type="checkbox"/> 59259 Richey | <input type="checkbox"/> 59339 Lindsay | <input type="checkbox"/> Other: _____ |

39. What is your gender?

- Male Female Prefer to self-describe: _____

40. What age range represents you?

- | | | |
|--------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 45-54 | <input type="checkbox"/> 75-84 |
| <input type="checkbox"/> 25-34 | <input type="checkbox"/> 55-64 | <input type="checkbox"/> 85+ |
| <input type="checkbox"/> 35-44 | <input type="checkbox"/> 65-74 | |

41. What is your employment status?

- | | |
|---|---|
| <input type="checkbox"/> Work full time | <input type="checkbox"/> Collect disability |
| <input type="checkbox"/> Work part time | <input type="checkbox"/> Unemployed, but looking |
| <input type="checkbox"/> Retired | <input type="checkbox"/> Not currently seeking employment |
| <input type="checkbox"/> Self-employed | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Student | |

[CODED]

Please return in the postage-paid envelope enclosed with this survey or mail to:

HELPS Lab
Montana State University
PO Box 172245
Bozeman, MT 59717

THANK YOU VERY MUCH FOR YOUR TIME
Please note that all information will remain confidential

Appendix F- Cross Tabulation Analysis

Knowledge Rating of McCone County Health Center by How Respondents Learn About Healthcare Services

	Excellent	Good	Fair	Poor	Total
Word of mouth/reputation	26.0% (25)	45.8% (44)	22.9% (22)	5.2% (5)	96
Friends/family	23.3% (21)	52.2% (47)	20.0% (18)	4.4% (4)	90
Circle Banner	23.3% (17)	57.5% (42)	19.2% (14)	-	73
Healthcare provider	27.4% (17)	61.3% (38)	8.1% (5)	3.2% (2)	62
Social media/Facebook	20.5% (9)	50.0% (22)	27.3% (12)	2.3% (1)	44
Public Health	34.4% (11)	56.3% (18)	9.4% (3)	-	32
Senior Center	19.0% (4)	66.7% (14)	14.3% (3)	-	21
Newspaper	29.4% (5)	29.4% (5)	35.3% (6)	5.9% (1)	17
Billboards/posters	21.4% (3)	42.9% (6)	28.6% (4)	7.1% (1)	14
Mailings/newsletter	-	54.5% (6)	36.4% (4)	9.1% (1)	11
Website/internet	20.0% (1)	40.0% (2)	40.0% (2)	-	5
Radio	-	25.0% (1)	25.0% (1)	50.0% (2)	4
Presentations	50.0% (1)	50.0% (1)	-	-	2
Other	-	66.7% (4)	33.3% (2)	-	6

Delay or Did Not Get Need Healthcare Services by Residence

	Yes	No	Total
59215 Circle	38.3% (41)	61.7% (66)	107
59259 Richey	16.7% (4)	83.3% (20)	24
59214 Brockway	-	100.0% (6)	6
59274 Vida	33.3% (2)	66.7% (4)	6
59339 Lindsay	50.0% (2)	50.0% (2)	4
59201 Wolf Point	-	100.0% (3)	3
59337 Jordan	-	100.0% (1)	1
Other	-	100.0% (1)	1
TOTAL	32.2% (49)	67.8% (103)	152

59349 Terry removed from residence (first column) due to non-response.

Location of primary care clinic most utilized by residence

	Circle	Billings	Glasgow	Glendive	Miles City	Sidney	Wolf Point	Other	TOTAL
59215 Circle	56.9% (62)	0.9% (1)	2.8% (3)	5.5% (6)	20.2% (22)	2.8% (3)	0.9% (1)	10.1% (11)	109
59259 Richey	36.4% (8)	-	-	13.6% (3)	-	31.8% (7)	-	18.2% (4)	22
59214 Brockway	50.0% (3)	-	-	-	33.3% (2)	-	-	16.7% (1)	6
59274 Vida	60.0% (3)	-	20.0% (1)	-	-	-	20.0% (1)	-	5
59339 Lindsay	25.0% (1)	25.0% (1)	-	-	25.0% (1)	-	-	25.0% (1)	4
59201 Wolf Point	-	-	-	-	-	-	100.0% (3)	-	3
59337 Jordan	-	-	-	-	-	-	-	100.0% (1)	1
Other	-	-	-	100.0% (1)	-	-	-	-	1
TOTAL	51.0% (77)	1.3% (2)	2.6% (4)	6.6% (10)	16.6% (25)	6.6% (10)	3.3% (5)	11.9% (18)	151

59349 Terry removed from residence (first column) due to non-response.

Location of primary care provider most utilized by reasons for clinic/provider selection

	Circle	Billings	Glasgow	Glendive	Miles City	Sidney	Wolf Point	Other	TOTAL
Closest to home	80.0% (64)	-	-	3.8% (3)	2.5% (2)	2.5% (2)	1.3% (1)	10.0% (8)	80
Prior experience with clinic/provider	54.7% (41)	1.3% (1)	5.3% (4)	2.7% (2)	21.3% (16)	2.7% (2)	2.7% (2)	9.3% (7)	75
Clinic/provider's reputation for quality	54.1% (33)	-	4.9% (3)	3.3% (2)	18.0% (11)	3.3% (2)	4.9% (3)	11.5% (7)	61
Appointment availability	53.1% (26)	-	6.1% (3)	4.1% (2)	20.4% (10)	6.1% (3)	2.0% (1)	8.2% (4)	49
Recommended by family or friends	38.5% (10)	-	3.8% (1)	3.8% (1)	23.1% (6)	7.7% (2)	7.7% (2)	15.4% (4)	26
Want to see a doctor (MD/DO)	45.5% (10)	-	-	13.6% (3)	13.6% (3)	9.1% (2)	4.5% (1)	13.6% (3)	22
Provider's specialty	5.6% (1)	-	16.7% (3)	5.6% (1)	27.8% (5)	16.7% (3)	-	27.8% (5)	18
Privacy/confidentiality	31.3% (5)	-	-	6.3% (1)	31.3% (5)	6.3% (1)	-	25.0% (4)	16
Referred by physician or other provider	27.3% (3)	-	27.3% (3)	-	18.2% (2)	18.2% (2)	-	9.1% (1)	11
Requiring higher level of care/resources	-	-	25.0% (2)	-	50.0% (4)	12.5% (1)	-	12.5% (1)	8
Length of waiting room time	28.6% (2)	-	-	14.3% (1)	14.3% (1)	14.3% (1)	14.3% (1)	14.3% (1)	7
Required by insurance plan	33.3% (2)	-	-	-	50.0% (3)	-	-	16.7% (1)	6
VA/Military requirement	-	-	-	40.0% (2)	-	-	-	60.0% (3)	5
Cost of care	50.0% (1)	-	-	-	-	50.0% (1)	-	-	2
Indian Health Services	-	-	-	-	-	-	50.0% (1)	50.0% (1)	2
Other	20.0% (1)	-	-	-	40.0% (2)	20.0% (1)	20.0% (1)	-	5

Location of most utilized hospital by residence

	McCone County Health Center (Circle)	Billings Clinic (Billings)	Glendive Medical Center (Glendive)	Frances Mahon Deaconess Hospital (Glasgow)	Holy Rosary Healthcare (Miles City)	Sidney Health Center (Sidney)	St. Vincent's (Billings)	Other	Total
59215 Circle	29.7% (19)	6.3% (4)	14.1% (9)	3.1% (2)	17.2% (11)	7.8% (5)	4.7% (3)	17.2% (11)	64
59259 Richey	14.3% (2)	14.3% (2)	7.1% (1)	-	7.1% (1)	42.9% (6)	7.1% (1)	7.1% (1)	14
59214 Brockway	20.0% (1)	60.0% (3)	-	-	20.0% (1)	-	-	-	5
59274 Vida	-	-	-	33.3% (1)	-	33.3% (1)	-	33.3% (1)	3
59337 Jordan	-	100.0% (1)	-	-	-	-	-	-	1
59339 Lindsay	-	100.0% (1)	-	-	-	-	-	-	1
59201 Wolf Point	-	100.0% (1)	-	-	-	-	-	-	1
Other	-	-	100.0% (1)	-	-	-	-	-	1
TOTAL	24.4% (22)	13.3% (12)	12.2% (11)	3.3% (3)	14.4% (13)	13.3% (12)	4.4% (4)	14.4% (13)	90

59349 Terry removed from residence (first column) due to non-response.

Location of most recent hospitalization by reasons for hospital selection

	McCone County Health Center (Circle)	Billings Clinic (Billings)	Glendive Medical Center (Glendive)	Frances Mahon Deaconess Hospital (Glasgow)	Holy Rosary Healthcare (Miles City)	Sidney Health Center (Sidney)	St. Vincent's (Billings)	Other	Total
Prior experience with hospital	20.0% (8)	15.0% (6)	10.0% (4)	5.0% (2)	22.5% (9)	20.0% (8)	2.5% (1)	5.0% (2)	40
Closest to home	46.2% (18)	-	23.1% (9)	2.6% (1)	2.6% (1)	10.3% (4)	-	15.4% (6)	39
Referred by physician or other provider	17.9% (7)	25.6% (10)	20.5% (8)	5.1% (2)	7.7% (3)	5.1% (2)	10.3% (4)	7.7% (3)	39
Emergency, no choice	21.7% (5)	13.0% (3)	26.1% (6)	4.3% (1)	8.7% (2)	8.7% (2)	4.3% (1)	13.0% (3)	23
Hospital's reputation for quality	18.2% (4)	18.2% (4)	-	4.5% (1)	40.9% (9)	13.6% (3)	-	4.5% (1)	22
Recommended by family or friends	30.0% (3)	-	10.0% (1)	10.0% (1)	30.0% (3)	10.0% (1)	-	10.0% (1)	10
Closest to work	50.0% (3)	-	16.7% (1)	-	-	16.7% (1)	-	16.7% (1)	6
Privacy/confidentiality	-	16.7% (1)	-	-	66.7% (4)	16.7% (1)	-	-	6
Cost of care	100.0% (2)	-	-	-	-	-	-	-	2
Required by insurance plan	-	-	-	-	50.0% (1)	50.0% (1)	-	-	2
VA/Military requirement	-	50.0% (1)	-	-	-	-	-	50.0% (1)	2
Other	14.3% (1)	-	14.3% (1)	-	14.3% (1)	14.3% (1)	-	42.9% (3)	7

Financial assistance programs removed from reason hospital selected (first column) due to non-response.

Appendix G- Responses to Other & Comments

2. In the following list, what do you think are the **three most serious** health concerns in our community? (Select ONLY 3)

- Old population
- I don't know

3. Select the **three** items below that you believe are **most important** for a healthy community (select ONLY 3):

- All of the above

*Responses when more than 3 were selected (2 participants):

- Access to healthcare services (1)
- Access to healthy foods (1)
- Clean environment (1)
- Good jobs and a healthy economy (1)
- Good schools (1)
- Healthy behaviors and lifestyles (1)
- Parks and recreation (1)
- Opportunities for physical activity (1)
- Religious or spiritual values (2)
- Strong family life (2)

5. How do you learn about the health services available in our community? (Select ALL that apply)

- I've lived here all my life, so I know what's available.
- Personal and family usage
- Contract with personnel
- Homestead Health "Latoya"
- I am an EMT [Emergency Medical Technician]

6. Which community health resources, other than the hospital or clinic, have you used in the last three years? (Select ALL that apply)

- None (3)
- Nursing home; physical therapy
- Physical therapy
- Most in Wolf Point
- Have to travel for all of these
- Glendive for a mammogram

7. In your opinion, what would improve our community's access to healthcare? (Select ALL that apply)

- Pharmacy (2)
- Recognize the limitations of clinic resources
- Natural health
- Keep our primary care providers here
- Mental health expertise
- They don't need to improve
- A medical doctor on staff
- Home health
- Better communication
- A friendly voice when making an appointment.
- McCone Health offers a great service.
- A new permanent healthcare provider
- I think we are lucky, and have what we can afford!

8. If any of the following classes/programs were made available to the community, which would you be most interested in attending? (Select ALL that apply)

- None
- Reproductive
- Pharmaceutical local availability

9. What additional healthcare services would you use if available locally? (Select ALL that apply)

- Orthopedics
- Holistic dentistry
- None
- Occupational and speech therapies
- I would rather stay local for everything if possible.

10. Would you or a family member be interested in any of the following senior services if they were made available in the Circle area? (Select ALL that apply)

- N/A (2)
- Not currently in that stage in life
- Possibly if closer
- Housekeeping
- All of the above, but not with additional tax burdens.

12. Which of the following preventive services have you or someone in your household used in the past year? (Select ALL that apply)

- Oncology; post surgical care
- COVID vaccinations
- Breast MRI
- X-ray
- MRI
- Asthma
- Emergency room (2)

14. If yes, what were the **three** most important reasons why you did not receive healthcare services? (Select ONLY 3)

- They asked if I could come back to the emergency room the next day
- Too busy
- Lost in the system

*Responses when more than 3 were selected (4 participants):

- Could not get an appointment (2)
- Could not get an appointment with my provider of choice (2)
- Didn't know where to go (1)
- Don't understand healthcare system (2)
- It cost too much (1)
- It was too far to go (3)
- Not treated with respect (1)
- Too long to wait for an appointment (4)
- Transportation problems (2)
- Want to see a doctor (MD/DO) (1)

16. What were the three most important reasons why you or a member of your household did not get or take your medications/prescriptions (as prescribed by your provider)? (Select ONLY 3)

- Pharmacy does NOT get orders from our rural clinic – I've been told it's a lack of computer updates.
- It wasn't called in, poor communication
- Mix up between doctor office and the pharmacy
- Pharmacy screwed it up
- We need a local pharmacy

18. Where is the primary healthcare provider that your household uses MOST located? (Select ONLY 1)

- Jordan
- Telahealth
- Poplar

*Responses when more than 1 was selected (18 participants):

- Circle (12)
- Billings (8)
- Glasgow (1)
- Glendive (8)
- Miles City (8)
- Sidney (4)
- Wolf Point (1)

19. Why did you select the primary care provider you are currently seeing? (Select ALL that apply)

- My choice – they've been my doctor for years
- Transfer medical from another state
- Convenience - Worked at hospital
- Lived in in another town at the time
- Wanted female provider

21. Which hospital does your household use MOST for hospital care? (Select ONLY 1)

- Denver University if necessary
- Trinity Hospital in Wolf Point, MT
- Poplar
- Sanford - Bismarck ND
- Billings Clinic (Miles City) and Mayo Clinic
- IHS

*Responses when more than 1 was selected (12 participants):

- McCone County Health Center (Circle) (5)
- Billings Clinic (Billings) (7)
- Glendive Medical Center (Glendive) (4)
- Frances Mahon Deaconess Hospital (Glasgow) (1)
- Holy Rosary Healthcare (Miles City) (2)
- Sidney Health Center (Sidney) (1)
- St. Vincent's (Billings) (6)

22. Thinking about the hospital you were at most frequently, what were the **three** most important reasons for selecting that hospital? (Select ONLY 3)

- Where my primary care is done
- Trust
- They are good in the specialty area we need
- Doctor on duty
- Has diagnostic equipment

*Responses when more than 3 were selected (2 participants):

- Closest to home (1)
- Closest to work (1)
- Emergency, no choice (1)
- Hospital's reputation for quality (2)
- Prior experience with hospital (2)
- Privacy/confidentiality (1)
- Referred by physician or other provider (1)
- Required by insurance plan

24. Where was the healthcare specialist seen? (Select ALL that apply)

- ENT [Ear, nose, throat] - Billings
- Bismarck
- Eye Clinic of North Dakota
- Circle Chiropractor; Casper, WY; University of Denver
- ENT - Missoula
- Cardiologist and Dermatologist in Billings
- Garfield County Health Center
- Sanford Dickinson
- Dentist in Miles City
- Billings - Dermatology
- Circle, Glendive, Wolf Point
- Wagner Chiropractic (Miles City), Glendive Eyecare, Aye Dental, Fink Dental, Sidney Eyecare
- Yellowstone Naturopathic
- Mayo Clinic - Rochester, MN
- St. Vincent Cancer Center
- Glendive, Miles City
- Mayo Clinic

25. What type of healthcare specialist was seen? (Select ALL that apply)

- Sleep Specialist
- Eye doctor; dentist; dental surgeon; oncology
- Doctor to help neurosurgeon for back surgery
- Hematologist
- Urogynecology
- Diabetes
- Vascular surgeon

**35. What type of health insurance cover the majority of your household's medical expenses?
(Select ONLY 1)**

- Blue Cross Blue Shield
- Supplement to Medicare
- Medicare supplement
- "Private pay"

***Responses when more than 1 was selected (19 participants):**

- Employer sponsored (4)
- Health Insurance Marketplace (1)
- Health Savings Account (1)
- Healthy MT Kids (2)
- Indian Health (1)
- Medicaid (3)
- Medicare (14)
- Private insurance/private plan (7)
- VA/Military (3)

38. Where do you currently live, by zip code?

- 59315 Bloomfield

39. What is your gender? Prefer to self-describe:

- (No "prefer to self-describe" responses)

41. What is your employment status?

- Stay at home provider
- Housewife

***Responses when more than 1 was selected (11 participants):**

- Work full time (4)
- Work part time (6)
- Retired (4)
- Self-employed (8)

General comments

- (Q1)
 - Did not select any choices and wrote “Don’t know” next to it.
 - Selected “Somewhat healthy” and wrote “Average age is quite old so not fault of anything/anyone specifically.”
- (Q3)
 - Selected “Access to healthy foods” and wrote “affordable” next to it.
- (Q4)
 - Selected both “Good” and “Fair” and drew a line between them.
 - Did not select any choices and wrote “Don’t know” next to the choices.
- (Q5)
 - Selected “Newspaper” and drew an arrow to “Circle Banner” (not selected).
- (Q7)
 - Selected “More primary care providers” and crossed out “More” and wrote “keep our primary care providers here” next to it.
- (Q9)
 - Selected “Visiting dermatologist” and wrote “yes” next to it.
 - Did not select “Dental services” and wrote “already have” next to it.
- (Q12)
 - Selected “Dental check”, “Hearing check”, “Mammography”, and “Vision check” and wrote “Not in McCone Health Clinic”
- (Q26)
 - For “Assisted living” selected “1” and wrote “Poor Care!” Need more EMT’s and make it essential!
 - For “Public Health” selected “1” and wrote “Won’t even give out birth control or condoms”
 - For “X-rays” selected “2” and wrote “Poor quality!”
- (Q29)
 - Selected “Most days (3-5 days per week)” and wrote “I know it is not truly accurate – but I do feel that way.”
- (Q34)
 - Selected “No” and wrote “Part of the reason we can’t hire at the school.”
- (Q35)
 - Selected “Employer sponsored” and wrote “parents” next to it as well as “Healthy MT Kids” and wrote “kids” next to it.
- (Q36)
 - Selected “Excellent” and wrote “After \$14,000 family deductible – it is very ridiculous – family premium is over \$31,000 annually and employer pays it.”
- General:
 - “Circle needs a pharmacy or more prescriptions in stock.”

Appendix H –Key Informant Interview - Questions

Purpose: The purpose of key informant interviews are to identify motives of local residents when selecting healthcare providers and why people may leave the community to seek health services. This market research will help determine the awareness of local programs and services, as well as satisfaction or dissatisfaction with local services, providers, and facilities.

1. How do you feel about the general health of your community?

2. What are your views/opinions about these local services:
 - Hospital/clinic
 - EMS Services (ER/Ambulance)
 - Public/County Health Department
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - Services for Low-Income Individuals/Families

3. What do you think are the most important local healthcare issues?

4. What other healthcare services are needed in the community?

5. What would make your community a healthier place to live?

Appendix I – Key Informant Interviews - Transcripts

Key Informant Interview #1

Thursday, April 27, 2023

Anonymous –Via phone interview

1. How do you feel about the general health of your community?

- Our biggest challenge is probably that we are primarily an aging community. There are a lot of health issues associated with an aging population.
- In the last year and a half, it seems that our area has been on a bit of a health kick, which is good to see. We now have a gym!

2. What are your views/opinions about these local services:

- Hospital/clinic:
 - o I think the local hospital is good, but it's hard not knowing which provider is going to be there. That can be especially hard to rely on if you're seeking to treat a particular condition and need a certain provider.
- EMS Services (ER/Ambulance)
 - o I think these services are awesome! But the local EMS service is very shorthanded. It's a completely volunteer-based service and everyone has full-time jobs. It can be hard for them to come up with funds to host training for new EMT's.
 - o For the most part, they seem to coordinate well with the regional health organizations.
- Public/County Health Department
 - o They do fine work, but sometimes they seem to get a little pushy with their personal opinion.
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - o I think all of our local senior services do really well!
 - o I think a paramedicine program could really help. It's cool to see what Prairie County is doing – it would fill such a need here.
 - o The senior center does well with providing things like meals, tax preparation support, phones, fall alerts, etc.
- Services for Low-Income Individuals/Families
 - o I think some of these services have the tendency to be abused. Which is unfortunate for those that really need them, such as someone with a disability. In the case of those with a disability, it's hard for them to access necessary services and resources due to all of the hoops in place to reduce misuse.

- The senior center has a food bank!

3. What do you think are the most important local healthcare issues?

- From my view, I think we need MRI/CT scan capabilities locally. A lot of cases have to be transferred to Glendive for this service and then to be flown elsewhere. Flights used to be easier to coordinate, but now you need MRI to prove what's going on before they will transport.

4. What other healthcare services are needed in the community?

- The new home health program is really helping this area!
- As I mentioned earlier, I think paramedicine would be great to have locally.

5. What would make your community a healthier place to live?

- Being that we are an aging area, much of our population is on a fixed income. So a lot of our health issues are associated with cost. Many individuals choose not to seek health services and support even when they're desperately needed out of fear that insurance may not cover an adequate amount of the cost.

Key Informant Interview #2

Wednesday, May 3, 2023

Anonymous –Via phone interview

1. How do you feel about the general health of your community?

- We have an older population in Circle. With that comes a need for good access to healthcare services, many of which can't be provided locally. There are a lot that need to drive to an appointment, but cannot drive.
- We don't have an eye doctor or dentist here.
- We now have physical therapy, which has been such a good addition.
- We have a limited pharmacy available through McCone County Health Center.
- We're just generally lacking in specialty services locally.

2. What are your views/opinions about these local services:

- Hospital/clinic:
 - I think we offer a wide range of services locally which is great for our community.
 - My main concern is that our long term, local provider is retiring soon. We have some physicians assistants (PA) that rotate in, but I'm concerned with the continuity of care. I don't see that the traveling providers do as

- good a job at ensuring the continuity of care as a consistent local provider does.
 - Other than this, I think we do well here. We have great lab services, physical therapy, and pharmacy.
- EMS Services (ER/Ambulance)
 - I think the emergency room does fairly well. They do well triaging and treating patients. They're quick to get them out the door – either home or transferred for a higher level of care.
 - Our ambulance service is good, but it's hard for them to maintain an adequate number of volunteers. It's hard to get people to stick with it since it's a lot to ask. Considering how far our ambulance has to drive for calls, I think they have good response times.
- Public/County Health Department
 - I think they're fantastic – they do a good job. I don't think they get along with well with the hospital, but they both do such a good job.
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - In general, I think our services for seniors are good.
 - The senior center offers a lot of activities, meals, and even a meal delivery program. They delivered a lot of meals during COVID in particular.
 - I've heard good things about the assisted living facility.
 - There's some sort of free home visiting program, I believe through the public health department that does things like blood pressure checks, medication management, wound care, etc. It's a really neat service for our community.
 - I think there's another new home health program in the area, but I don't know much about it.
- Services for Low-Income Individuals/Families
 - As far as I know, I think these services are adequate for our community.
 - I think we offer as much as we can. That is to say, I don't think anyone is neglected. We just take care of people here.
 - The senior center also has food bank.

3. What do you think are the most important local healthcare issues?

- One of our biggest challenges is how isolated we are here in McCone County. People often have to travel very far to reach what they need, some of which shouldn't be driving, but it's the nature of where we live.
- As I mentioned earlier, I think another notable concern is the retiring provider. Hopefully it'll resolve itself.

4. What other healthcare services are needed in the community?

- It would be great to have a dentist, eye doctor, and full pharmacy. Currently, you must use the health center to access pharmacy.

5. What would make your community a healthier place to live?

- This is a hard one question since we can't control how isolated we are.
- I guess I would reiterate that my biggest concern is getting a long term provider to provide routine, consistent care for our area.

Key Informant Interview #3

Thursday, May 4, 2023 - Anonymous –Via phone interview

1. How do you feel about the general health of your community?

- I feel pretty good about the health in McCone County. It feels pretty typical for a rural area.
- My biggest concerns are probably a lack of exercise and increased alcohol use.
- But overall, I think the local health center and public health department work really hard to provide the support and resources to keep our elderly community members at home as long as possible.

2. What are your views/opinions about these local services:

- Hospital/clinic:
 - o I use both the hospital and clinic and I recommend them to others. I'm never quite sure why people go out of town for services that are available here.
 - o You may have heard this from others already, but because we only have one local provider, it can take some time to get an appointment with her. But there are several locums that could be seen instead.
- EMS Services (ER/Ambulance)
 - o I think both the emergency room (ER) and ambulance are fabulous. The health department supports training for new EMT's.
 - o Our ambulance is volunteer-based, so it's a whole different ball game than a paid service out of a more populated area like Billings.
- Public/County Health Department
 - o The public health department does their best. There's been a lot of not so good things said about them that wouldn't have necessarily been said or acceptable before COVID. They're really been vilified in our community.
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - o There's long term care available through McCone County Health Center.
 - o The assisted living facility is full, but I think I heard that they're expanding.

- I wish the senior center was open more. Currently they only do congregate meals on Tuesdays and Fridays. On the other days, there's a Meals on Wheels delivery program so it's not like people are going unfed. I wish our elderly community had more opportunities to gather at the senior center outside of the two days per week.
- Brockway has a Sunday meal for community members which is nice to see.
- Services for Low-Income Individuals/Families
 - We don't have any local offices to help community members enroll and navigate Medicaid. Quite some time ago, we used to have someone come up from Terry and help with this.
 - We have someone from the Women, Infant and Children (WIC) program that comes to the area quarterly.
 - Vaccinations are provided through the public health department regardless of income and insurance coverage.
 - Outside of these services, I don't know much more.

3. What do you think are the most important local healthcare issues?

- Most important thing on the community's radar is one of our long term physicians assistants (PA) is planning to retire. She really understands our community, which is rare for rural areas. I'm not sure if they've found a replacement, so I believe locums would then be covering after her departure.
- We have a typical rural area where people don't do change easily, if you know what I mean.

4. What other healthcare services are needed in the community?

- I think we already have everything we can afford to sustain and staff.
- Sure, it'd be helpful to have mental health services and a dentist, but that just doesn't seem reasonable to bring to a rural area like ours. We understand the limitations of living in rural Montana.

5. What would make your community a healthier place to live?

- Shutting down the bars.
- If not that, maybe some Alcoholics Anonymous (AA) classes and meetings.
- Community members used to be able to walk in gym over the noon hour in inclement weather. I think there was a lack of interest and liability concerns that led to it's discontinuation. I think it would be nice to get it back up and running, though.
- Outside of that, I think it would be helpful to increase the local qualified staffing for CNAs, LPNs, etc. A lot of our local CNA's travel elsewhere because they can

earn a higher wage. It would be nice if there were a way to pay our local's an adequate wage so they don't have to travel for that higher wage and they can instead stay locally and care for their community.

- In general, it seems that we have workforce shortages across the board – from local businesses to health organizations.
- Overall, I think we do really good here in McCone County – we take care of our own. A lot of our limitations come down to funding and workforce.

Appendix J – Request for Comments

Written comments on this 2023 Community Health Needs Assessment (CHNA) Report can be submitted to McCone County Health Center at:

McCone County Health Center

Administration
PO Box 48
605 Sullivan Avenue
Circle, MT 59215

Please contact MCHC's CEO Jacque Gardner (jgardner@mcconehealth.org), Director of Nursing (DON) LaToya Gardner (lgardner@mcconehealth.org), or Office Manager Bridget Loudon (bloudon@mcconehealth.org) at 406-485-3381 or email with questions.

