IMPLEMENTATION PLAN

Addressing Community Health Needs



**Lewistown, Montana**

**2019-2022**

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# The Implementation Planning Process

The implementation planning committee – comprised of Central Montana Medical Center (CMMC) leadership team– participated in an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through their community health needs assessment (CHNA) process.

The CHSD community health needs assessment was performed in the winter of 2019 to determine the most important health needs and opportunities for Fergus County, Montana. “Needs” were identified as the top issues or opportunities rated by respondents during the CHSD survey process or during focus groups (see page 12 for a list of “Needs Identified and Prioritized”). For more information regarding the needs identified, as well as the assessment process/approach/methodology, please refer to the facility’s assessment report, which is posted on the facility’s website (<https://www.cmmc.health> ).

The community steering and implementation planning committees identified the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives representing the broad interest of the community, including those with public health expertise (see page 10 for additional information regarding input received from community representatives).

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

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

1. Access to Behavioral Health Services
2. Access to Healthcare Services
3. Healthcare Billing, Insurance, and Financial Navigation
4. Population Health

In addressing the aforementioned issues, CMMC seeks to:

1. Improve access to healthcare services
2. Enhance the health of the community
3. Advance medical or health knowledge

**Central Montana Medical Center’s Mission:**

To be the leader in assuring community-based quality healthcare.

**Central Montana Medical Center’s Vision:**

* Be the healthcare provider for our region;
* Dedicate ourselves to innovative excellence in care;
* Collaborate care for economical services with other agencies;
* Be the leader in providing health education, prevention, and wellness services to promote individual responsibility for healthy outcomes;
* Provide financial stewardship for economic health care;
* Create an environment in which all participants feel valued and respected;
* Embrace change while exploring tomorrow’s needs today.

**Central Montana Medical Center’s Values:**

*Compassion*- We will be aware and respectful of the life situation of others and treat them with compassion and consideration

*Accountability*- With integrity, knowledge, action, and trust

*Respect*- For dignity, care, and concern for all

*Excellence*- As a team in all we do

**Implementation Planning Committee Members:**

* Alan Aldrich, Interim Co-CEO, CFO - Central Montana Medical Center (CMMC)
* Laura Bennett, MD, Interim Co-CEO, Clinic Services Director- CMMC
* Rick Poss, Ancillary Services Director- CMMC
* Torie Poser, Clinic/Organizational Development Director- CMMC
* Joanie Slaybaugh, HR Manager- CMMC
* Karin White, Chief Nursing Officer- CMMC
* Abby Wichman, Lab/Compliance Manager- CMMC
* Joan McMahon, MD, Chief Medical Officer- CMMC
* Ann Tuss, Foundation Manager- CMMC

# Prioritizing the Community Health Needs

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

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

## CMMC’s Existing Presence in the Community

* Central Montana Medical Center (CMMC) provides a range of specialty/consulting physician services to the community, including chemotherapy (infusion services), various rehabilitation services, occupational services and sleep studies.
* CMMC offers discounted screenings and health education to community members.
* The facility offers a cardiovascular disease and diabetes prevention program, as well as a diabetes education program, to community members who are at risk for cardiovascular disease and/or diabetes or who are currently suffering from diabetes.
* The CMMC Fitness Center offers community members the space and equipment to meet their fitness/conditioning needs.
* CMMC staff performs discounted sports physicals for community members on a quarterly basis.
* The facility sponsors/hosts a booth at the high school’s “Career Day” in order to encourage local students to pursue a career in health care.
* CMMC is a WWAMI clinical site and also hosts Targeted Rural Underserved Track (TRUST) scholars, as well as students participating in the WWAMI Rural Integrated Training Experience (WRITE) program.
* The facility hosts a Research and Explore Awesome Careers in Healthcare (REACH) camp on an annual basis in order to encourage students to pursue a career in health care.
* CMMC is an active partner of the Providence Nursing program and hosts nursing students in the facility.
* CMMC’s Judith Peak Rehab offers Sports Enhancement summer camp for teens wanting to improve overall physical fitness and agility.
* CMMC joined forces with Love, Hope & Strength Foundation offering Central Montanans to become potential bone marrow donors.
* CMMC’s Safe Sitter class has a big influence in the community –teaching young sitters CPR, Business of Babysitting, First Aid and much more.
* Occupational Health provides preventative and lifestyle enhancement services to our business community.
* CMMC EMS partners with rural ambulances through lift assist program.
* CMMC and Lewistown City Fire provides Safety event offering free bike helmets and stop the bleed kits to the community.
* CMMC Foundation serves on the not-for-profit Fair board, participating in annual fair.
* CMMC volunteers’ employees to help serve lunches at Council on Aging.
* CMMC Foundation grants funds to non-profits in the community and nine rural towns.
* CMMC and Medical Center Foundation collaborate to offer high school EMT credited course.

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

* The Central Montana Community Health Center (CMCHC) provides access to quality, affordable, preventative, and primary healthcare to all family members in the Central Montana community.
* Central Montana Family Planning provides quality, affordable, and preventative healthcare to women, as well as education for both men and women on sexually transmitted infections (STI).
* Montana State University (MSU) – Northern provides assistance in placing nursing students at the Central Montana Medical Center.
* The Central Montana Youth Mentoring Program (CMYMP) was created to match high school students with grade school students to provide a positive influence on the youth in the community.
* Alcohol and Drug Services of Central Montana provides substance abuse treatment services on an outpatient basis to those affected by alcohol/substance abuse.
* The Eastern Montana Area Health Education Center (AHEC) organizes and runs Research and Explore Awesome Careers in Healthcare (REACH) camps on behalf of rural communities interested in fostering local children’s interest in pursuing healthcare careers.
* The Central Montana Foundation is dedicated to improving the quality of life in Central Montana communities.
* The Women of the Moose organization is dedicated to caring for young and old and bringing communities closer together through community service.
* Montana Connections/AHEC Recruitment Program assists in recruiting primary care physicians to rural areas.
* WWAMI (Washington, Wyoming, Alaska, Montana, and Idaho) serves as a model program for training physicians and other health professionals for rural areas.
* Fergus High School provides partnership opportunities with the hospital for students interested in pursuing health careers.
* Montana Nutrition and Physical Activity program (NAPA) can assist with initiatives associated with health and wellness.
* The Agency for Healthcare Research & Quality (AHRQ) provides research to assist providers and patients with making informed healthcare decisions and improving the quality of healthcare services.
* Partner with the schools for mental health and substance abuse prevention.
* Lewistown News Argus, Lewistown's local newspaper, offers advertising and communication opportunities.
* KXLO/KLCM Radio, offers advertising, press release and live radio talk shows for marketing purposes.
* DUI Task Force partners with CMMC staff to educate the community to not drive under the influence.
* Central Montana Senior Center provides meals, wellness services, and activities to seniors in the area.
* Fergus County Council on Aging provides a wide variety of programs and services to seniors
* Ortho Montana offers a continuum of care within an integrated healthcare network.
* Together Our Recovery Center Heals (TORCH) promotes recovery from alcohol and other drug addiction through advocacy, education and service.
* Central Montana Community Health Center offers quality, affordable services including medical, dental and behavioral health care for family members of all ages in the Central Montana Community.
* Family Medicine Residency of Western Montana (FMRWM) is a family medicine residency program sponsored by The University of Montana in Missoula.
* Montana Family Medicine Residency (MFMR) was founded to address the shortage of family physicians in rural areas and among underserved populations.
* Billings Clinic Internal Medicine Residency Program
* Montana Hospital Association (MHA) is the principal advocate for the interests of members in their efforts to improve the health status of the communities they serve.
* CMMC’s ACO Network, Mountain West ACO, a Medicare approved accountable care organization including 11 other hospitals.
* Lewistown Drug Task Force
* Health Resources and Services Administration (HRSA) offers many grant opportunities regarding rural and behavioral health.
* Montana Healthcare Foundation (MHF) makes strategic investments to improve the health and well-being of all Montanans.
* Insight is a telepsychiatry service provider organization with a mission to increase access to behavioral health care.
* Lewistown Police Department offers safe and secure prescription drug drop off location.
* Montana Office of Rural Health (MORH) provides technical assistance to rural health systems and organizations.
* Relay for Life’s American Cancer Society and CMMC team up to support a special event: A survivor’s dinner for local cancer survivors and their families.
* Diabetes Prevention Program (DPP).
* Central Montana Youth Challenge partners (CMMC included) offer key-note speakers to local and outlying schools on teen risk behaviors, etc.
* CMMC serves on the Workforce board helping to meet the work force soft-skills and employment challenges in community.
* CMMC serves and participates in Port Authority events.

## Fergus County Indicators

Population Demographics

* 25% of Fergus County’s population is 65 years and older
* 9.4% of Fergus County’s population has Veteran status
* 15.7% of Fergus County’s population has disability status

Size of County and Remoteness

* 11,586 people in Fergus County
* 2.7 people per square mile

Socioeconomic Measures

* 14.7% of persons are below the federal poverty level
* 11% of adults (age<65) are uninsured; 5% of children less than age 18, are uninsured
* 22.6% of children live in poverty; 30.3% receiving WIC benefits
* 7.2% of the population is enrolled in Medicaid

Select Health Measures

* 25.7% of children (2-5 years of age) are overweight or obese
* 27% of adults are considered obese
* 21% of the adult population report physical inactivity
* 16% of the adult population report smoking
* 19% of the adult population report excessive drinking
* Unintentional injury death rate (per 100,000 population) is 50.5 compared to 41.3 for Montana
* Suicide rate (per 100,000 population) is 23.2

Nearest Major Hospital

* Benefis Health System, Great Falls, MT – 103 miles from Central Montana Medical Center
* St. Vincent’s Health Care, Billings, MT – 110 miles from Central Montana Medical Center

## Public Health and Underserved Populations Consultation Summaries

Public Health Consultation

Shandi Songer, Health Promotion Specialist, Central Montana Health District; Pattie Carr, Population Health Coordinator – CMMC 10/30/2018

* There are a lot of service organizations in our community that have done or have to do a CHNA [Community Health Needs Assessment]. Has there been collaboration or coordination? Do we share results? How do we work off the collective information?
* A population that is sometimes missed in a lot of assessments is the Hutterite communities.
* Suicide rates in our community are awful
* Un-intentional death rates are really high in Montana
* Important to include on the survey cover letter that the information collected will be used for planning health services in the future.
* The Human Services Coalition at HRDC would be a good group to reach out to- Wednesday nights

Underserved Population – Low-Income, Underinsured

Carol Seilstad– Fergus County Commissioner; Michelle Foy, CEO – Lewistown Community Health Center 10/30/2018

* How do we determine who in our community will receive surveys?
* We need to be mindful of who might respond to these types of surveys. Making sure we are reaching out to community groups for focus groups that might not fill out a survey.
* VA services should be included in available resources for our community.
* District 6 HRDC is a great resource and information dissemination

Underserved Population – Seniors

Shandi Songer, Health Promotion Specialist, Central Montana Health District 10/30/2018

* Transportation and mental health services.
* Adult care services (day care services)
* Would be great to reach out to Kiwanis, Rotary or there are senior men’s coffee groups.
* Senior center lunches in our service area communities or Council on Aging would be great to reach out to and get feedback from.

Underserved Population – Youth and Young Adults

Sue Irving, Director – Family Planning 10/30/2018

* Teen pregnancy and child maternal health information may be available at the state.

# Needs Identified and Prioritized

## *Prioritized Needs to Address*

1. Survey respondents identified the community’s top health concerns as: Alcohol abuse/substance abuse; Cancer; Overweight/obesity.
2. 13.4% of survey respondents indicated they experienced periods of depression in the past three years.
3. 18.2% of survey respondents who reported they had experienced depression, reported they were unable to see a mental health professional or primary care provider to address their needs.
4. Focus group respondents indicated a desire for improved outreach regarding mental health and addiction services that are available in the community.
5. Secondary data shows Fergus County has a higher suicide rate (per 100,000 population) compared to state and nation.
6. Alzheimer’s and dementia care and health issues related to the aging population were frequently mentioned by focus group participants. Participants felt additional outreach and education related to these senior care areas would be helpful.
7. Survey respondents indicated the top 5 ways to improve the community’s access to healthcare: Walk-in clinic; More primary care providers; More specialists; More information about available services; Outpatient services expanded hours.
8. 33% of survey respondents reported they delayed or did not receive needed medical services in the past 3 years. Top reasons for delay/not receiving needed services were “It costs too much” and “Could not get an appointment”.
9. Focus group participants noted a need for additional primary care providers and expanded access.
10. Focus group participants indicated a desire for expanded specialty service offerings (ex. Orthopedic surgeon, dermatologist, internist, radiology).
11. 27.4% of survey respondents reported their knowledge of available health services as “Fair” or “Poor”.
12. Survey respondents indicated most interest in educational classes/programs related to weight loss, health insurance (Medicare, Medicaid/private), and fitness.
13. Focus group participants felt providing patients and community at large healthcare billing and insurance education/assistance would help the community in accessing and navigating the healthcare system.
14. 55.4% of survey respondents rated the community as “Somewhat healthy”.
15. Survey respondents felt the top three most important components of a healthy community were: Access to health care and other services; Good jobs and a healthy economy; Healthy behaviors and lifestyles.
16. 39.5% of survey respondents rated their personal health as “Somewhat healthy or unhealthy”.
17. Survey respondent reported physical activity has been significantly declining since 2013.
18. Secondary data shows Fergus County has a higher rate of adult obesity than the state or nation.
19. A desire for health education and more opportunities to be fit were mentioned at every focus group.

*Needs Unable to Address*

*(See page 32 for additional information)*

1. Secondary data shows Fergus County has a higher unintentional injury death rate (per 100,000 population) compared to state and nation. Additionally, significantly more 2019 survey respondents felt that “Work/farm/ranch related accidents/injuries” were a serious health concern.
2. 12.5% of survey respondents indicated cost had prohibited them from getting or taking their prescription medication regularly.
3. Top reason identified for survey respondents who delayed or not receive needed care was cost (33.3%).

# Executive Summary

The following summary briefly represents the goals and corresponding strategies and activities which the facility will execute to address the prioritized health needs (from page 12). For more details regarding the approach and performance measures for each goal, please refer to the Implementation Plan Grid section, which begins on page 17.

**Goal 1:** Expandaccess to behavioral health services at Central Montana Medical Center

**Strategy 1.1:** Develop a workforce and processes to support CMMC’s behavioral health activities

**Activities:**

* + Explore feasibility of additional staff positions (social worker, licensed addiction counselor, other)
  + Expand number of M.A.T. trained providers in clinic and ED

**Strategy 1.2**: Support local community efforts that address behavioral health needs in the CMMC service area

**Activities:**

* Continue to participate in the Lewistown Dementia Friendly Community workgroup
* Continue to assist local support groups (dementia support, care givers support, cancer, etc.)
* Explore opportunities to expand health educational offerings in the CMMC area (at CMMC or with community partners)

**Strategy 1.3:** Ensure sustainability of collaborative care efforts at CMMC which help screen and provide resources for behavioral health needs

**Activities:**

* Explore feasibility of expanding behavioral health telemedicine services at CMMC
* Explore best practices/models to address behavioral health needs/population health metrics: implementation of suicide screenings in clinic and ED; domestic violence; OUD/SUD resources

**Goal 2:** Increase access to healthcare services at Central Montana Medical Center.

**Strategy 2.1:** Increase access to primary care services at CMMC

**Activities:**

* Conduct feasibility study of expanded clinic hours, urgent care, or walk-in clinic models
* Expand primary care workforce at CMMC (hire new providers)
* Explore feasibility of offering outreach clinic services in CMMC service areas
* Develop educational/marketing materials for community related to capabilities and skills to promote role of NP/PA as a part of the primary care team and services
* Explore hosting a facility open house to introduce community to CMMC NP providers

**Strategy 2.2:** Increase access to specialty care services at CMMC

**Activities:**

* Create community education and outreach on available CMMC specialty services, schedule, and how to make an appointment
* Explore feasibility of specialty care service expansion (ortho, cardiology, radiology)
* Create community education and outreach on telemedicine (technology/uses)
* Explore hosting a telemedicine open house to introduce community to CMMC telemedicine services

**Goal 3:** Enhance patient understanding of healthcare billing, insurance, and navigation of patient financial programs.

**Strategy 3.1:** Improve CMMC education and outreach efforts related to billing, insurance and financial health

**Activities:**

* Create outreach to assist community in understanding changes in patient billing and transition to Cerner
* Explore development of a “How to Interpret My Bill” tab/resource on CMMC website
* Create education and marketing on how to access new website resource for CMMC community and staff
* Convene community partners (insurance, Council on Aging, etc.) to develop and support community financial education (topics may include health insurance education, personal finance, estate planning, financial assistance programs, etc.)

**Goal 4:** Enhance population health education and outreach in the CMMC service area.

**Strategy 4.1:** Continue population health related outreach through CMMC

**Activities:**

* Assess and promote current CMMC classes and programs that promote health and wellness
* Explore offering health additional education classes and programs that promote prevention, health, and chronic disease management (diabetes management, COPD, parenting, financial education, stress management, cancer support, etc.)
* Continue to support physical health and healthy behaviors in the CMMC service area (community fun runs, sponsoring various events, etc.)

**Strategy 4.2:** Develop community resource to increase knowledge of available health and wellness opportunities

**Activities:**

* Convene community partners to assess and catalogue available resources
* Collaborate with community partners to develop and promote health and wellness resource

# Implementation Plan Grid

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Goal 1:** Expandaccess to behavioral health services at Central Montana Medical Center. | | | | | |
| **Strategy 1.1:** Develop a workforce and processes to support CMMC’s behavioral health activities. | | | | | |
| **Activities** | **Responsibility** | **Timeline** | **Final Approval** | **Partners** | **Potential Barriers** |
| Explore feasibility of additional staff positions (social worker, licensed addiction counselor, other) | Clinic Medical Director/Clinic Director/CNO | 3rd Quarter  2021 | CEO’s | Behavioral Health Grant/North Cent MT Health Alliance/Billings Clinic | Workforce limitations  Financial limitations |
| Expand number of M.A.T. trained providers in clinic and ED | Clinic Medical Director/Clinic Director/Grant Manager/ED Medical Director | 3rd Quarter 2021 | Clinic Medical Director | Behavioral Health Grant/North Cent MT Health Alliance/Billings Clinic | Financial limitations  Resource limitations |
| **Needs Being Addressed by this Strategy:**   * #1: Survey respondents identified the community’s top health concerns as: Alcohol abuse/substance abuse; Cancer; Overweight/obesity. * #2: 13.4% of survey respondents indicated they experienced periods of depression in the past three years. * #3: 18.2% of survey respondents who reported they had experienced depression, reported they were unable to see a mental health professional or primary care provider to address their needs. * #4: Focus group respondents indicated a desire for improved outreach regarding mental health and addiction services that are available in the community. * #5: Secondary data shows Fergus County has a higher suicide rate (per 100,000 population) compared to state and nation. | | | | | |
| **Anticipated Impact(s) of these Activities:**   * Increase access to mental health services * Service, policy, and resource development | | | | | |
| **Plan to Evaluate Anticipated Impact(s) of these Activities:**   * Number of Behavioral Health Referrals * Number of Screens * Number of Referrals in ED and Clinic * New type of screens implemented | | | | | |
| **Measure of Success:** CMMC expands BH workforce and thus services and resources available in Fergus County. | | | | | |

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| --- | --- | --- | --- | --- | --- |
| **Goal 1:** Expandaccess to behavioral health services at Central Montana Medical Center. | | | | | |
| **Strategy 1.2:** Support local community efforts that address behavioral health needs in the CMMC service area | | | | | |
| **Activities** | **Responsibility** | **Timeline** | **Final Approval** | **Partners** | **Potential Barriers** |
| Continue to participate in the Lewistown Dementia Friendly Community workgroup | CMMC Staff (various) Departments/ Population Health | 1st Quarter  2020 | Clinic Medical Director/ PQORY Grant | Council on Aging/Billings Clinic/Population Health | Scheduling conflicts  Resource limitations |
| Continue to assist local support groups (dementia support, care givers support, cancer, etc.) | CMMC Staff (various) Departments/ Population Health | Ongoing  Monthly | Clinic Medical Director | Council on Aging/Billings Clinic/Population Health | Scheduling conflicts  Resource limitations |
| Explore opportunities to expand health educational offerings in the CMMC area (at CMMC or with community partners) | Population Health | Ongoing  Annually | Clinic Medical Director | Council on Aging/Billings Clinic/Population Health/Extended Community Resources | Resource limitations |
| **Needs Being Addressed by this Strategy:**   * #1: Survey respondents identified the community’s top health concerns as: Alcohol abuse/substance abuse; Cancer; Overweight/obesity. * #2: 13.4% of survey respondents indicated they experienced periods of depression in the past three years. * #3: 18.2% of survey respondents who reported they had experienced depression, reported they were unable to see a mental health professional or primary care provider to address their needs. * #4: Focus group respondents indicated a desire for improved outreach regarding mental health and addiction services that are available in the community. * #5: Secondary data shows Fergus County has a higher suicide rate (per 100,000 population) compared to state and nation. * #6: Alzheimer’s and dementia care and health issues related to the aging population were frequently mentioned by focus group participants. Participants felt additional outreach and education related to these senior care areas would be helpful. | | | | | |
| **Anticipated Impact(s) of these Activities:**   * Increase access to behavioral health resources * Strengthen community partnerships * Build community capacity * Increased community knowledge of resources | | | | | |
| **Plan to Evaluate Anticipated Impact(s) of these Activities:**   * Number of participants * Number of group meetings | | | | | |
| **Measure of Success:** CMMC continues to explore and expand support group opportunities. | | | | | |

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| --- | --- | --- | --- | --- | --- |
| **Goal 1:** Expandaccess to behavioral health services at Central Montana Medical Center. | | | | | |
| **Strategy 1.3:** Ensure sustainability of collaborative care efforts at CMMC which help screen and provide resources for behavioral health needs | | | | | |
| **Activities** | **Responsibility** | **Timeline** | **Final Approval** | **Partners** | **Potential Barriers** |
| Explore feasibility of expanding behavioral health telemedicine services at CMMC | Care Coordination/Clinic Behavior Health | Ongoing  Annually | CEO’s | National MT Healthcare Alliance/Billings Clinic/Behavioral Health Grant/Billings Clinic | Financial limitations  Resource limitations |
| Explore best practices/models to address behavioral health needs/population health metrics: implementation of suicide screenings in clinic and ED; domestic violence; OUD/SUD resources | Care Coordination/Clinic Behavior Health | Ongoing  Annually | Clinic Medical Director | National MT Healthcare Alliance/Billings Clinic/Behavioral Health Grant/Billings Clinic | Resource limitations |
| **Needs Being Addressed by this Strategy:**   * #1: Survey respondents identified the community’s top health concerns as: Alcohol abuse/substance abuse; Cancer; Overweight/obesity. * #2: 13.4% of survey respondents indicated they experienced periods of depression in the past three years. * #3: 18.2% of survey respondents who reported they had experienced depression, reported they were unable to see a mental health professional or primary care provider to address their needs. * #4: Focus group respondents indicated a desire for improved outreach regarding mental health and addiction services that are available in the community. * #5: Secondary data shows Fergus County has a higher suicide rate (per 100,000 population) compared to state and nation. | | | | | |
| **Anticipated Impact(s) of these Activities:**   * Increase access to mental health services * Service, policy, and resource development | | | | | |
| **Plan to Evaluate Anticipated Impact(s) of these Activities:**   * Number of referrals * Patient miles saved in travel; reduced travel burden * Number of follow-up scans preformed to enhance continuity | | | | | |
| **Measure of Success:** CMMC will see an increase in referrals; patient interactions with Behavioral Health Diagnosis via Telemedicine. | | | | | |

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| **Goal 2:** Increase access to healthcare services at Central Montana Medical Center. | | | | | |
| **Strategy 2.1:** Increase access to primary care services at CMMC | | | | | |
| **Activities** | **Responsibility** | **Timeline** | **Final Approval** | **Partners** | **Potential Barriers** |
| Conduct feasibility study of expanded clinic hours, urgent care, or walk-in clinic models | Organizational Developer/  CFO | 1st Quarter  2021 | CEO’s | Billings Clinic | Resource limitations |
| Expand primary care workforce at CMMC (hire new providers) | Organizational Developer/  Clinic Medical Director | Ongoing  Annually | CEO’s | Residency Programs | Workforce limitations  Financial limitations |
| Explore feasibility of offering outreach clinic services in CMMC service areas | Organizational Developer/  CFO | Ongoing  Annually | CEO’s | St. Vincent/Billings Clinic/ Benefis | Financial limitations  Resource limitations |
| Develop educational/marketing materials for community related to capabilities and skills to promote role of NP/PA as a part of the primary care team and services | Marketing/Advanced Practice Providers | Ongoing  Annually | CEO’s |  | Resource limitations |
| Explore hosting a facility open house to introduce community to CMMC NP providers | Marketing | Ongoing  Annually | CEO’s |  | Resource limitations |
| **Needs Being Addressed by this Strategy:**   * #7: Survey respondents indicated the top 5 ways to improve the community’s access to healthcare: Walk-in clinic; More primary care providers; More specialists; More information about available services; Outpatient services expanded hours. * #8: 33% of survey respondents reported they delayed or did not receive needed medical services in the past 3 years. Top reasons for delay/not receiving needed services were “It costs too much” and “Could not get an appointment”. * #9: Focus group participants noted a need for additional primary care providers and expanded access. | | | | | |
| **Anticipated Impact(s) of these Activities:**   * Increase access to primary care services * Increased community knowledge of services * Improved health outcomes | | | | | |
| **Plan to Evaluate Anticipated Impact(s) of these Activities:**   * Feasibility studies conducted and outcome determined * Workforce expanded * Hosting open house to introduce providers/service lines | | | | | |
| **Measure of Success:** CMMC will see an increase in utilization in Advanced Practice Providers in specified area, i.e.: expanding hours; expanding care with home visits. | | | | | |

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| **Goal 2:** Increase access to healthcare services at Central Montana Medical Center. | | | | | |
| **Strategy 2.2:** Increase access to specialty care services at CMMC | | | | | |
| **Activities** | **Responsibility** | **Timeline** | **Final Approval** | **Partners** | **Potential Barriers** |
| Create community education and outreach on available CMMC specialty services, schedule, and how to make an appointment | Marketing/  Clinic Manager | 3rd Quarter  2020 | CEO’s | Organizational Developer | Resource limitations |
| Explore feasibility of specialty care service expansion (ortho, cardiology, radiology) | Organizational Developer/ Clinic Medical Director/ CFO | Ongoing  Annually | CEO’s & Governing Board | Billings Clinic | Workforce limitations  Scheduling conflicts  Financial limitations  Resource limitations |
| Create community education and outreach on telemedicine (technology/uses) | Marketing | Ongoing  Annually | CEO’s |  | Resource limitations |
| Explore hosting a telemedicine open house to introduce community to CMMC telemedicine services | Marketing | Ongoing  Annually | CEO’s |  | Scheduling conflicts  Resource limitations |
| **Needs Being Addressed by this Strategy:**   * #7: Survey respondents indicated the top 5 ways to improve the community’s access to healthcare: Walk-in clinic; More primary care providers; More specialists; More information about available services; Outpatient services expanded hours. * #10: Focus group participants indicated a desire for expanded specialty service offerings (ex. Orthopedic surgeon, dermatologist, internist, radiology). * #11: 27.4% of survey respondents reported their knowledge of available health services as “Fair” or “Poor”. | | | | | |
| **Anticipated Impact(s) of these Activities:**   * Increase access to specialty care services * Increased community knowledge of services * Improved health outcomes | | | | | |
| **Plan to Evaluate Anticipated Impact(s) of these Activities:**   * Number of telemedicine consults * Number of new patient telemedicine consults * Number of new/expanded telemedicine services | | | | | |
| **Measure of Success:** CMMC offers expanded services available via Telemedicine. | | | | | |

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| **Goal 3:** Enhance patient understanding of healthcare billing, insurance, and navigation of patient financial programs. | | | | | |
| **Strategy 3.1:** Improve CMMC education and outreach efforts related to billing, insurance and financial health | | | | | |
| **Activities** | **Responsibility** | **Timeline** | **Final Approval** | **Partners** | **Potential Barriers** |
| Create outreach to assist community in understanding changes in patient billing and transition to Cerner | Marketing/Business Office Manager/HIM | 3rd Quarter  2020 | CFO | Billings Clinic Affiliates | Resource limitations |
| Explore development of a “How to Interpret My Bill” tab/resource on CMMC website | Marketing/Business Office Manager | 3rd Quarter  2020 | CFO | Billings Clinic Affiliates/Cerner | Resource limitations |
| Create education and marketing on how to access new website resource for CMMC community and staff | Marketing | 2nd Quarter  2020 | CEO’s |  | Resource limitations |
| Convene community partners (insurance, Council on Aging, etc.) to develop and support community financial education (topics may include health insurance education, personal finance, estate planning, financial assistance programs, etc.) | Marketing/Business Office Manager/CFO/Population Health | Ongoing  Annually | CEO’s/CFO | Council on Aging/Insurance Companies/Estate Planners | Scheduling conflicts  Resource limitations |
| **Needs Being Addressed by this Strategy:**   * #7: Survey respondents indicated the top 5 ways to improve the community’s access to healthcare: Walk-in clinic; More primary care providers; More specialists; More information about available services; Outpatient services expanded hours. * #12: Survey respondents indicated most interest in educational classes/programs related to weight loss, health insurance (Medicare, Medicaid/private), and fitness. * #13: Focus group participants felt providing patients and community at large healthcare billing and insurance education/assistance would help the community in accessing and navigating the healthcare system. | | | | | |
| **Anticipated Impact(s) of these Activities:**   * Strengthen community partnerships * Build community capacity * Increased community knowledge of resources | | | | | |
| **Plan to Evaluate Anticipated Impact(s) of these Activities:**   * Number of website hits (pre/post launch) * Number of new patient education resources on website | | | | | |
| **Measure of Success:** CMMC will see an increase in community/patient utilization of enhanced website resource. | | | | | |

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| **Goal 4:** Enhance population health education and outreach in the CMMC service area. | | | | | |
| **Strategy 4.1:** Continue population health related outreach through CMMC | | | | | |
| **Activities** | **Responsibility** | **Timeline** | **Final Approval** | **Partners** | **Potential Barriers** |
| Assess and promote current CMMC classes and programs that promote health and wellness | Population Health/Marketing | 3rd Quarter  2020 | Clinic Medical Director | Community | Resource limitations |
| Explore offering health additional education classes and programs that promote prevention, health, and chronic disease management (diabetes management, COPD, parenting, financial education, stress management, cancer support, etc.) | Population Health/Marketing | 2nd Quarter  2021 | Clinic Medical Director |  | Resource limitations  Financial limitations |
| Continue to support physical health and healthy behaviors in the CMMC service area (community fun runs, sponsoring various events, etc.) | Population Health/Marketing | 1st Quarter  2021 | Clinic Medical Director | Community | Resource limitations  Financial limitations  Scheduling conflicts |
| **Needs Being Addressed by this Strategy:**   * #1: Survey respondents identified the community’s top health concerns as: Alcohol abuse/substance abuse; Cancer; Overweight/obesity. * #11: 27.4% of survey respondents reported their knowledge of available health services as “Fair” or “Poor”. * #12: Survey respondents indicated most interest in educational classes/programs related to weight loss, health insurance (Medicare, Medicaid/private), and fitness. * #14: 55.4% of survey respondents rated the community as “Somewhat healthy”. * #15: Survey respondents felt the top three most important components of a healthy community were: Access to health care and other services; Good jobs and a healthy economy; Healthy behaviors and lifestyles. * #16: 39.5% of survey respondents rated their personal health as “Somewhat healthy or unhealthy”. * #17: Survey respondent reported physical activity has been significantly declining since 2013. * #18: Secondary data shows Fergus County has a higher rate of adult obesity than the state or nation. * #19: A desire for health education and more opportunities to be fit were mentioned at every focus group. | | | | | |
| **Anticipated Impact(s) of these Activities:**   * Enhance community’s knowledge of health and wellness resources * Reduce disease burden * Empower community to make healthful lifestyle choices | | | | | |
| **Plan to Evaluate Anticipated Impact(s) of these Activities:**   * Number of programs offered * Number of referrals * Number of presentations in community | | | | | |
| **Measure of Success:** CMMC continues to provide updated resources on services available in community. | | | | | |

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| **Goal 4:** Enhance population health education and outreach in the CMMC service area. | | | | | |
| **Strategy 4.2:** Develop community resource to increase knowledge of available health and wellness opportunities | | | | | |
| **Activities** | **Responsibility** | **Timeline** | **Final Approval** | **Partners** | **Potential Barriers** |
| Convene community partners to assess and catalogue available resources | Population Health/Marketing | Ongoing  Yearly | Clinic Medical Director | Community | Scheduling conflicts  Resource limitations |
| Collaborate with community partners to develop and promote health and wellness resource | Population Health/Marketing | Ongoing  Yearly | Clinic Medical Director | Community | Resource limitations |
| **Needs Being Addressed by this Strategy:**   * #1: Survey respondents identified the community’s top health concerns as: Alcohol abuse/substance abuse; Cancer; Overweight/obesity. * #12: Survey respondents indicated most interest in educational classes/programs related to weight loss, health insurance (Medicare, Medicaid/private), and fitness. * #14: 55.4% of survey respondents rated the community as “Somewhat healthy”. * #15: Survey respondents felt the top three most important components of a healthy community were: Access to health care and other services; Good jobs and a healthy economy; Healthy behaviors and lifestyles. * #16: 39.5% of survey respondents rated their personal health as “Somewhat healthy or unhealthy”. * #17: Survey respondent reported physical activity has been significantly declining since 2013. * #18: Secondary data shows Fergus County has a higher rate of adult obesity than the state or nation. * #19: A desire for health education and more opportunities to be fit were mentioned at every focus group. | | | | | |
| **Anticipated Impact(s) of these Activities:**   * Strengthen community partnerships * Increased community knowledge of resources | | | | | |
| **Plan to Evaluate Anticipated Impact(s) of these Activities:**   * Number of community partner meetings * Number of community partners participating * Development and dissemination of resource | | | | | |
| **Measure of Success:** In partnership with community stakeholders, a catalog of resources developed, and an implementation plan created. | | | | | |

# Needs Not Addressed and Justification

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| **Identified health needs unable to address**  **by CMMC** | **Rationale** |
| 1. Secondary data shows Fergus County has a higher unintentional injury death rate (per 100,000 population) compared to state and nation. Additionally, significantly more 2019 survey respondents felt that “Work/farm/ranch related accidents/injuries” were a serious health concern. | * CMMC did not address this specifically in our IP- however we will work to gather data re: type of injury, and present safety/prevention education to community. \*A Successful “Ideal Health Need” is difficult to curb with Agricultural Community set-in. |
| 1. 12.5% of survey respondents indicated cost had prohibited them from getting or taking their prescription medication regularly. | * CMMC will initiate a Social Determinate Survey (Annual Physical Screen/Form); Continue to participate in 340-B Program; and Drug Company Coupon Discount Distribution to assist community in accessing prescription medications. |
| 1. Top reason identified for survey respondents who delayed or not receive needed care was cost (33.3%). | * CMMC continues to report Charity Care; Market our Sliding Fee/Charity Care Program; explore expanded hours and educate on the importance of Wellness Checks. |

# Dissemination of Needs Assessment

Central Montana Medical Center “CMMC” disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on their website (<https://www.cmmc.health>)as well as having copies available at the facility should community members request to view the community health needs assessment or the implementation planning documents.

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

Furthermore, the board members of CMMC will be directed to the hospital’s website to view the complete assessment results and the implementation plan. CMMC board members approved and adopted the plan on **September 24, 2019**. Board members are encouraged to familiarize themselves with the needs assessment report and implementation plan, so they can publicly promote the facility’s plan to influence the community in a beneficial manner.

Written comments on this 2019-2022 Central Montana Medical Center Community Benefit Strategic Plan can be submitted to the Foundation Manager at CMMC:

CMMC Foundation

Central Montana Medical Center

408 Wendell Avenue

Lewistown, MT 59457

Contact Central Montana Medical Center’s Foundation Manager at (406) 535-6309 or [atuss@cmmccares.com](mailto:atuss@cmmccares.com) with any questions.