IMPLEMENTATION PLAN

Addressing Community Health Needs

PHILLIPS COUNTY HOSPITAL & FAMILY HEALTH CLINIC

Malta, Montana

2021-2024

Disclaimer: The Montana Office of Rural Health strongly encourages an accounting professional's review of this document before submission to the IRS. As of this publishing, this document should be reviewed by a qualified tax professional. Recommendations on its adequacy in fulfillment of IRS reporting requirements are forthcoming.

Table of Contents

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Implementation Planning Process

The implementation planning committee – comprised of Phillips County Hospital's (PCH) 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 February 2021 to determine the most important health needs and opportunities for Phillips 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 10 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 (pchospital.us).

The community steering and implementation planning committees identified the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives of the broad interest of the community, including those with public health expertise (see page 8 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 PCH's parameters of resources and limitations. The committee then prioritized the needs/opportunities using the additional parameters of the organizational vision, mission, and values, as well as existing and potential community partners. Participants then created a goal to achieve through strategies and activities, as well as the general approach to meeting the stated goal (i.e. staff member responsibilities, timeline, potential community partners, anticipated impact(s), and performance/evaluation measures).

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

- **Mental and behavioral health**
- **Access to health care services**
- **Youth and family resources**

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In addressing the aforementioned issues, PCH seeks to:

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

Facility Mission: To Make a Difference in Health Care

Facility Vision: To be a Leader in Health Care

Implementation Planning Committee Members:

- Steph Denham- CFO, Phillips County Hospital (PCH)
- Susan Bibbs- Director of Revenue Services, PCH
- Andrew Riggin- CEO, PCH
- Dave Skiff- Board Member, PCH
- Mike Sjostrom- Board Member, PCH
- Terry Skones- Board Chair, PCH
- Vicki Eggebrecht- Board Vice Chair, PCH
- Rick Starkey, Board Member
- Gil Johson, Consultant

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

PCH's Existing Presence in the Community

- PCH has taken the lead with the Local Emergency Preparedness Council on a monthly basis.
- PCH staff are actively engaged in Local Advisory Council on mental/behavioral health.
- PCH in conjunction with the Public Health Nurse have engaged and has taken the lead with a community wide conversation on Suicide Prevention.
- PCH provides safety/trauma education and in-services to community groups and community through and with its' Trauma Committee.
- PCH is engaged and actively involved in PhillCo Economic Growth Council as well as the Malta Chamber of Commerce.
- PCH contributes to many different local groups and fundraising activities.

List of Available Community Partnerships and Facility Resources to Address Needs

- Hi-Line Retirement Center – local, independently owned, and operated yet physically attached to PCH - Nursing home, Assisted Living, and Independent Apartment facility
- County/Public Health Nurse – for population and chronic care health aims
- Coalition for Healthy Choices – community awareness and prevention
- Phillips County EMS/Ambulance service
- Phillips County Library
- Phillips County Parks and Recreation
- Phillips County Schools
- Phillips County Community Needs Group
- Phillips County EMS
- Phillips County Local Action Committee on Mental Health and Suicide
- Phillips County Fire Department
- Phillips County Boys and Girls Club
- Phillips County Chamber of Commerce
- PhillCo Economic Growth Council
- Malta Local Emergency Planning Committee (LEPC)
- Phillips County Suicide Prevention Committee
- Phillips County Trauma Committee
- Montana Hospital Association
- Montana Health Network
- Montana State University (MSU) Extension
- Montana Rural Health Initiative
- Malta Trails
- Benefis Health System
- Central Montana Medical Center (CMMC)
- Frances Mahon Deaconess Hospital
- Kalispell Regional Medical Center
- Billings Clinic
- St. Peter's Health
- North Central Montana Healthcare Alliance
- Eastern Montana Mental Health Center
- Eastern Montana Telemedicine Network & REACH Montana Telehealth Network

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Phillips County Indicators

Population Demographics

- 84.4% of Phillips County's population white, and 9.4% is American Indian or Alaska Native
- 17.8% of Phillips County's population has disability status
- 22.3% of Phillips County's population is 65 years and older
- 11.2% of Phillips County's population has Veteran status
- 39.5% of Phillips County's population is a High School graduate as their highest degree attained; 27.9% have some college, no degree

Size of County and Remoteness

- 4,077 people in Phillips County
- 0.8 people per square mile

Socioeconomic Measures

- 9.9% of children live in poverty
- 12.4% of persons are below the federal poverty level
- 16% of adults (age<65) are uninsured; 11% of children less than age 18, are uninsured
- 9.2% of the population is enrolled in Medicaid

Select Health Measures

- 35% of adults are considered obese
- 30% of the adult population report physical inactivity
- Acute Myocardial Infarction (MI) Hospitalization rate (per 100,000 population) is 118.5 compared to 118.1 for Montana
- 41% of adults living in frontier Montana report two or more chronic conditions
- Montana's suicide rate (per 100,000 population) is 22.5 compared to 13.9 for the U.S.

Nearest Major Hospital

- Billings Clinic Hospital in Billings, MT is 207 miles from Phillips County Hospital

Public Health and Underserved Populations Consultation Summaries

Name/Organization

Steph Denham– CFO, Phillips County Hospital — January 14, 2021
Susan Bibbs – Phillips County Hospital
Jenny Tollefson – Public Health Nurse, Phillips County
John Demarais – Mayor of Malta
Rhei Tharp – EMS Coordinator
Gina Lamb – Let's Face It and Coalition for Healthy Choices
Janean Brookie – Director, Phillips County Library
Jerry Lytle – Phillips County Sheriff

Public and Community Health

- We have high immunization rates! Jenny, the public health nurse in Phillips County, does a good job and is pretty active with the community.
- We don't really have any mental health providers in Phillips County – even traveling mental health professionals.
- Mental health is one of our top health needs. I think there are some telehealth options or providers in other counties, but if someone is in a mental health crisis, they may not have the funds or time to figure out transportation.
- One area that we could really improve on is prevention. It's challenging to get buy in on preventive services and programs. Someone might get a diabetes diagnosis, but there aren't support programs here. We also don't really have any wellness or diabetes prevention management programs, but they could be useful.
- Also, our dentist just passed away, so we don't have any permanent oral health care providers.
- Currently, a dentist from Lewistown comes up once a month, and a hygienist may come up a couple of times per month.
- Like all rural areas, keeping providers is hard.
- I think it's important to add Alcoholics Anonymous and/or AL-Anon as a resource used in the last three years.
- Narcotics Anonymous started with great participation a while ago, and then participation dropped off. I'm not sure, but it may have stopped completely.
- We have a chiropractor that travels from Circle. They always have a line. It would be nice to have a chiropractor that lives in the County or even one with more appointment times.

- It would be interesting to gauge how COVID-19 has impacted our community's ability to access health care.
- A lot of people in Phillips County have to travel to Kalispell for specialty care.

Population: Low-Income & Underinsured

- I think it is important to have survey respondents generally rate aspects in Phillips County such as health care availability, safety in-home/community, and financial resources to meet basic needs.
- There is a satellite WIC office (Glasgow) and VFC program that operate through the health department. The VFC program provides qualifying children vaccines free of charge.

Population: Seniors

- I think our community could really benefit from more in-home wellness checks (blood pressure, etc.). Right now, we just don't have the staffing for paramedicine to go check on blood pressure in houses, but I know there is a need.

Population: Youth

- It looks like nearly all children in the County are on free and reduced lunch. If a school has 75% of students eligible for free and reduced lunch, it's sometimes easier to have everyone apply.
- The Boys and Girls Club offers affordable programming during school year and summer. I think they provide some meals to kids during the summer too.
- It's a bit surprising that there is such a high rate of students carrying a weapon on school property.

Population: Tribal/American Indian

- Phillips County is close to the Fort Belknap reservation.

Needs Identified and Prioritized

Prioritized Needs to Address

1. Top health concerns of survey respondents included “Alcohol/substance abuse” (52.1%), “Cancer” (36.3%), “lack of affordable dental care” (21.6%), and “Overweight/obesity” (18.9%)
2. Survey respondents indicated that “access to healthcare services” (57.9%), “Good jobs and a healthy economy” (44.7%), “Good schools” and “Strong family life” (26.8% each) are components of a health community.
3. 33% of respondents rated their knowledge of health services available at Phillips County Hospital as fair or poor.
4. Top suggestions to improve the community's access to health care included “More primary care providers” (53.7%), “More specialists” (48.4%), and “More information about available services” (31.1%)
5. Key informant interview participants expressed a desire for extra support, collaborations or partnerships to enhance the volunteer ambulance service.
6. Survey respondents indicated an interest in the following classes or programs: “Health and wellness” (31.1%), “Weight loss” (30.5%), and “Women’s health” (27.4%)
7. Key informant interview participants indicated that preventive health education, particularly for nutrition, is needed in the community.
8. The top preventive services utilized in the last year included: “Flu shot/ immunizations” (62.1%), “Blood pressure check” (59.5%) and “Dental check” (51.1%)
9. 35% of survey respondents indicated they delayed or did not receive needed healthcare services; reasons for delay included “It cost too much” (31.1%), and “Could not get an appointment” and “COVID-19 barriers (26.2% each)
10. 19% of respondents indicated they had experienced periods of at least three consecutive months in the past three years where they felt depressed on most days.
11. 52% of respondents described their stress level over the past year as moderate.
12. 21.9% of survey respondents were negatively affected a little by their own or someone else’s substance abuse issues, including alcohol, prescription, or other drugs.
13. During the last year, 5.3% of survey respondents were worried that they would not have enough food to eat.
14. 27.9% of respondents are not aware of programs that help people pay for healthcare bills.
15. Key informant interview participants noted that more collaboration among local services as well as more advertising and awareness of local services are needed in the community.
16. Key informant participants noted that recruitment and retention of permanent nurses and providers is a concern in the community.

Needs Unable to Address

(See page 27 for additional information)

1. 29.8% of survey respondents indicated that there are not adequate and affordable housing options available in the community.
2. 12.2% of survey respondents indicated that prescription cost had prohibited them from getting a prescription or taking their medication regularly.

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 10). For more details regarding the approach and performance measures for each goal, please refer to the Implementation Plan Grid section, which begins on page 15.

Goal 1: Improve access to mental and behavioral health resources in Phillips County.

Strategy 1.1: Continue robust participation, collaboration, and awareness efforts with local committees/programs that address mental and behavioral health issues.

- Continue involvement in community coalitions that address mental health and suicide prevention.
- Continue promotion and partnering on community events that address alcohol/substance use among youth.
- Explore the feasibility of partnering with the local health department on outreach and awareness efforts associated with tele-mental health services.
- Sustain support and promotion of referral protocol with licensed addictions counselors (LAC) in Havre.

Strategy 1.2: Explore opportunities to enhance PCH behavioral health resources and services.

- Continue exploring the feasibility of recruiting a licensed clinical social worker (LCSW).
- Explore MORH/AHEC's Behavioral health training pertinence to PCH staff and area providers in enhancing mental and behavioral health skills, knowledge, and training (http://healthinfo.montana.edu/bhwet/trainings.html).

Goal 2: Ensure continued access to health care services in Phillips County.

Strategy 2.1: Enhance access to health care services.

- Recruit a primary care provider to expand appointment availability in the clinic.
- Champion and improve awareness of available telehealth services to enhance access and reduce travel and other burdens for our community.
- Sustain a strong relationship with the Phillips County Transit to enhance access to transportation in Phillips County.
- Work with County to provide reserved local parking for local area EMS to enhance timely EMS response in Phillips County.

Strategy 2.2: Expand PCH's presence in the community as a source for health education, outreach, and resources.

- Work with partners to disseminate the community resource booklet to ensure the accuracy of current local health services and enhance community reach.
- Continue to build on outreach efforts highlighting patient resources, timely health information, and important community announcements. Work with PCH departments (ex. PT, nutrition) to develop a Healthy Living social media series.
- Improve patient access to health records through the migration of electronic health records (EHR) system. Create a community education campaign to assist in patient navigation and utilization of the new EHR patient portal.

Goal 3: Improve access to resources for youth and families in Phillips County.

Strategy 3.1: Enhance PCH's relationship with and presence in the local schools.

- Determine the feasibility of partnering with the local schools to reinvigorate the backpack food program improving access to nutritious foods to area families.
- Continue to provide clinical shadowing experiences with local high school students interested in pursuing a career in the health sciences
- Continue unwavering presence at the high school career fair (i.e., all career levels and all departments).
- Explore the viability of providers providing pertinent health education at local schools (e.g., handwashing, STEM presentations).

Strategy 3.2: Continue PCH's promotion of health and wellness efforts in Phillips County.

- Continue to promote and sponsor community health and wellness activities such as a Fun Run with the Rec Department.
- Partner with the Physical Therapy department on their established healthy eating and active living initiatives. Develop social media campaign highlighting Health Living efforts.

Implementation Plan Grid

Goal 1: Improve access to mental and behavioral health resources in Phillips County.					
Strategy 1.1: Continue robust participation, collaboration, and awareness efforts with local committees/programs that address mental and behavioral health issues.					
Activities	**Responsibility**	**Timeline**	**Final Approval**	**Partners**	**Potential Barriers**
Continue involvement in community coalitions that address mental health and suicide prevention.	Licensed Addictions Counselor (LAC)	On going	Steering Committee	Phillips County Health Department	Resource limitations Scheduling conflicts
Continue promotion and partnering on community events that address alcohol/substance use among youth.	Boys & Girls Club	On going	PCH Leadership	Boys & Girls Club	Resource limitations
Explore the feasibility of partnering with the local health department on outreach and awareness efforts associated with tele-mental health services.	PCH Family Health Clinic	Quarterly	PCH Leadership	Phillips County Health Department	Resource limitations Financial limitations
Sustain support and promotion of referral protocol with licensed addictions counselors (LAC) in Havre.	PCH Practitioners	Monthly	PCH Leadership	Internal	Resource limitations

Needs Being Addressed by this Strategy:

- 1. Top health concerns of survey respondents included “Alcohol/substance abuse” (52.1%), “Cancer” (36.3%), “lack of affordable dental care” (21.6%), and “Overweight/obesity” (18.9%)
- 3. 33% of respondents rated their knowledge of health services available at Phillips County Hospital as fair or poor.
- 4. Top suggestions to improve the community's access to health care included “More primary care providers” (53.7%), “More specialists” (48.4%), and “More information about available services” (31.1%)
- 10. 19% of respondents indicated they had experienced periods of at least three consecutive months in the past three years where they

felt depressed on most days.
- 11. 52% of respondents described their stress level over the past year as moderate.
- 12. 21.9% of survey respondents were negatively affected a little by their own or someone else's substance abuse issues, including alcohol, prescription, or other drugs.
- 15. Key informant interview participants noted that more collaboration among local services as well as more advertising and awareness of local services are needed in the community.

Anticipated Impact(s) of these Activities:
- Increase access to mental and behavioral health services.
- Increase community knowledge of mental and behavioral health services.
- Improve mental and behavioral health outcomes.
- Strengthen community partnerships.
- Decrease alcohol and substance abuse among youth.
- Decrease societal stigma associated with accessing mental and behavioral health resources.

Plan to Evaluate Anticipated Impact(s) of these Activities:
- Track PCH involvement in community coalitions that address mental health and suicide prevention.
- Track tele-mental health utilization post outreach and awareness efforts.
- Track the utilization of referral protocol for LAC in Havre.
- Track mental and behavioral health access measures in subsequent CHNA

Measure of Success: PCH will observe an improvement in awareness and utilization of mental and behavioral health resources in the community.

Goal 1: Improve access to mental and behavioral health resources in Phillips County.

Strategy 1.2: Explore opportunities to enhance PCH behavioral health resources and services.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Continue exploring the feasibility of recruiting a licensed clinical social worker (LCSW).	CEO	Quarterly	PCH Board	Internal	Resource limitations Financial limitations
Explore MORH/AHEC's Behavioral health training pertinence to PCH staff and area providers in enhancing mental and behavioral health skills, knowledge, and training (http://healthinfo.montana.edu/bhwet/trainings.html).	PCH Leadership	Quarterly	PCH Leadership	Internal	Resource limitations Workforce limitations

Needs Being Addressed by this Strategy:

- 2. Survey respondents indicated that "access to healthcare services" (57.9%), "Good jobs and a healthy economy" (44.7%), "Good schools" and "Strong family life" (26.8% each) are components of a health community.
- 4. Top suggestions to improve the community's access to health care included "More primary care providers" (53.7%), "More specialists" (48.4%), and "More information about available services" (31.1%)
- 10. 19% of respondents indicated they had experienced periods of at least three consecutive months in the past three years where they felt depressed on most days.
- 11. 52% of respondents described their stress level over the past year as moderate.
- 12. 21.9% of survey respondents were negatively affected a little by their own or someone else's substance abuse issues, including alcohol, prescription, or other drugs.
- 15. Key informant interview participants noted that more collaboration among local services as well as more advertising and awareness of local services are needed in the community.

Anticipated Impact(s) of these Activities:

- Increased access to behavioral health resources and services.
- Improved behavioral health outcomes.

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

- Track progress towards recruiting a licensed clinical social worker (LCSW).
- Track mental and behavioral health access measures in subsequent CHNA.
- Catalog PCH staff that complete MORH/AHEC's behavioral health trainings.

Measure of Success: PCH will support new opportunities that enhance local behavioral health resources and services.

Goal 2: Ensure continued access to health care services in Phillips County.					
Strategy 2.1: Enhance access to health care services.					
Activities	**Responsibility**	**Timeline**	**Final Approval**	**Partners**	**Potential Barriers**
Recruit a primary care provider to expand appointment availability in the clinic.	CEO	Monthly	PCH Board	Critical Access Hospitals (CAH) Solutions Group	Resource limitations Financial limitations
Champion and improve awareness of available telehealth services to enhance access and reduce travel and other burdens for our community.	PCH Practitioners	On going	CEO	Internal	Resource limitations Financial limitations Scheduling conflicts
Sustain a strong relationship with the Phillips County Transit to enhance access to transportation in Phillips County.	CEO	Monthly	PCH Board	Phillips County Transit	Resource limitations
Work with County to provide reserved local parking for local area EMS to enhance timely EMS response in Phillips County.	CEO	Quarterly	Phillips County & CEO	Phillips County & EMS	Resource limitations Financial limitations

Needs Being Addressed by this Strategy:

- 2. Survey respondents indicated that “access to healthcare services” (57.9%), “Good jobs and a healthy economy” (44.7%), “Good schools” and “Strong family life” (26.8% each) are components of a health community.
- 4. Top suggestions to improve the community's access to health care included “More primary care providers” (53.7%), “More specialists” (48.4%), and “More information about available services” (31.1%)
- 5. Key informant interview participants expressed a desire for extra support, collaborations or partnerships to enhance the volunteer ambulance service.
- 8. The top preventive services utilized in the last year included: “Flu shot/ immunizations” (62.1%), “Blood pressure check” (59.5%) and “Dental check” (51.1%)

- 9. 35% of survey respondents indicated they delayed or did not receive needed healthcare services; reasons for delay included "It cost too much" (31.1%), and "Could not get an appointment" and "COVID-19 barriers (26.2% each)
- 14. 27.9% of respondents are not aware of programs that help people pay for healthcare bills.
- 15. Key informant interview participants noted that more collaboration among local services as well as more advertising and awareness of local services are needed in the community.
- 16. Key informant participants noted that recruitment and retention of permanent nurses and providers is a concern in the community.

Anticipated Impact(s) of these Activities:

- Improved access to primary care services.
- Reduce travel burden associated with accessing health care services.
- Enhanced EMS response in Phillips County.

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

- Track utilization of new primary care provider.
- Track the awareness efforts related to the tele-mental health services.
- Track utilization of the tele-mental health services.
- Track utilization of the Phillips County Transit.
- Track progress towards providing reserved local parking for local area EMS.

Measure of Success: PCH will observe an increase in community members utilizing local health care services.

Goal 2: Ensure continued access to health care services in Phillips County.					
Strategy 2.2: Expand PCH's presence in the community as a source for health education, outreach, and resources.					
Activities	**Responsibility**	**Timeline**	**Final Approval**	**Partners**	**Potential Barriers**
Work with partners to disseminate the community resource booklet to ensure the accuracy of current local health services and enhance community reach.	Steering Committee	Yearly	Steering Committee	Internal	Resource limitations Financial limitations
Continue to build on outreach efforts highlighting patient resources, timely health information, and important community announcements. Work with PCH departments (ex. PT, nutrition) to develop a Healthy Living social media series.	Steering Committee	Yearly	Steering Committee	Internal	Resource limitations Financial limitations
Improve patient access to health records through the migration of electronic health records (EHR) system. Create a community education campaign to assist in patient navigation and utilization of the new EHR patient portal.	PCH Leadership	Yearly	PCH Leadership	CPSI (EHR software company)	Resource limitations Financial limitations

Needs Being Addressed by this Strategy:

- 2. Survey respondents indicated that "access to healthcare services" (57.9%), "Good jobs and a healthy economy" (44.7%), "Good schools" and "Strong family life" (26.8% each) are components of a health community.
- 3. 33% of respondents rated their knowledge of health services available at Phillips County Hospital as fair or poor.
- 4. Top suggestions to improve the community's access to health care included "More primary care providers" (53.7%), "More specialists" (48.4%), and "More information about available services" (31.1%)
- 6. Survey respondents indicated an interest in the following classes or programs: "Health and wellness" (31.1%), "Weight loss" (30.5%),

and “Women’s health” (27.4%)

- 7. Key informant interview participants indicated that preventive health education, particularly for nutrition, is needed in the community.
- 14. 27.9% of respondents are not aware of programs that help people pay for healthcare bills.
- 15. Key informant interview participants noted that more collaboration among local services as well as more advertising and awareness of local services are needed in the community.

Anticipated Impact(s) of these Activities:

- Enhance access to preventive education and screenings
- Reduce disease burden and improved health outcomes.
- Empower community to make healthful lifestyle choices.
- Service, policy, and resources development.
- Improve access to high quality, coordinated care.
- Shift community attitudes and beliefs around healthy living.

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

- Track the dissemination of the community resource booklet.
- Track utilization of healthcare services resulting from community resource booklet listing.
- Track the engagement resulting from outreach efforts highlighting patient resources, timely health information, and important community announcements.
- Track progress of developing a Healthy Living social media series.
- Track number of Healthy Living social media postings and community participation/engagement.
- Track engagement of Healthy Living social media series.
- Track engagement with the EHR community education campaign.
- Track utilization of EHR patient portal.

Measure of Success: PCH will observe an increase in engagement and empowerment among community members regarding their health.

Goal 3: Improve access to resources for youth and families in Phillips County.					
Strategy 3.1: Enhance PCH's relationship with and presence in the local schools.					
Activities	**Responsibility**	**Timeline**	**Final Approval**	**Partners**	**Potential Barriers**
Determine the feasibility of partnering with the local schools to reinvigorate the backpack food program improving access to nutritious foods to area families.	PCH C2C Committee	Quarterly	Malta Elementary School	MES	Resource limitations
Continue to provide clinical shadowing experiences with local high school students interested in pursuing a career in the health sciences	PCH Leadership	Quarterly	PCH Leadership	Malta High School (MHS)	Resource limitations Scheduling conflicts
Continue unwavering presence at the high school career fair (i.e., all career levels and all departments).	PCH Leadership	Quarterly	PCH Leadership	Internal	Resource limitations Scheduling conflicts
Explore the viability of providers providing pertinent health education at local schools (e.g., handwashing, STEM presentations).	CEO	Quarterly	CEO	Internal	Resource limitations

Needs Being Addressed by this Strategy:

- 1. Top health concerns of survey respondents included "Alcohol/substance abuse" (52.1%), "Cancer" (36.3%), "lack of affordable dental care" (21.6%), and "Overweight/obesity" (18.9%)
- 2. Survey respondents indicated that "access to healthcare services" (57.9%), "Good jobs and a healthy economy" (44.7%), "Good schools" and "Strong family life" (26.8% each) are components of a health community.
- 3. 33% of respondents rated their knowledge of health services available at Phillips County Hospital as fair or poor.
- 4. Top suggestions to improve the community's access to health care included "More primary care providers" (53.7%), "More specialists" (48.4%), and "More information about available services" (31.1%)
- 7. Key informant interview participants indicated that preventive health education, particularly for nutrition, is needed in the

community.

- 13. During the last year, 5.3% of survey respondents were worried that they would not have enough food to eat.

Anticipated Impact(s) of these Activities:

- Increase access to nutritious food options for area families.
- Strengthen community partnerships.
- Empower local adolescents to pursue a career in health sciences.
- Build community capacity.
- Service and resources development.
- Increase community knowledge of healthful behaviors.

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

- Track the utilization of the reinvigorated backpack food program.
- Catalog the clinical shadowing experiences.
- Conduct a post-shadowing experience interview to gain insight on usefulness of opportunity.
- Track the engagement and attendance at high school career fair.
- Track number of health education opportunities.
- Track attendance of health education opportunities.

Measure of Success: PCH will develop a strong relationship with the local schools that promotes healthy behaviors and serves as a pipeline for adolescents entering health-related job fields.

Goal 3: Improve access to resources for youth and families in Phillips County.					
Strategy 3.2: Continue PCH's promotion of health and wellness efforts in Phillips County.					
Activities	**Responsibility**	**Timeline**	**Final Approval**	**Partners**	**Potential Barriers**
Continue to promote and sponsor community health and wellness activities such as a Fun Run with the Rec Department.	PCH Leadership	Yearly	PCH C2C Committee	Phillips County Recreation Department	Resource limitations Financial limitations Scheduling conflicts
Partner with the Physical Therapy department on their established healthy eating and active living initiatives. Develop social media campaign highlighting Healthy Living efforts.	PCH Leadership	Quarterly	PCH Leadership	Internal	Resource limitations

Needs Being Addressed by this Strategy:

- 1. Top health concerns of survey respondents included "Alcohol/substance abuse" (52.1%), "Cancer" (36.3%), "lack of affordable dental care" (21.6%), and "Overweight/obesity" (18.9%)
- 3. 33% of respondents rated their knowledge of health services available at Phillips County Hospital as fair or poor.
- 6. Survey respondents indicated an interest in the following classes or programs: "Health and wellness" (31.1%), "Weight loss" (30.5%), and "Women's health" (27.4%)
- 7. Key informant interview participants indicated that preventive health education, particularly for nutrition, is needed in the community.
- 15. Key informant interview participants noted that more collaboration among local services as well as more advertising and awareness of local services are needed in the community.

Anticipated Impact(s) of these Activities:

- Increase access to health and wellness opportunities.
- Strengthen community partnerships.
- Build community capacity.
- Service and resources development
- Increased adoption of healthful behaviors among community members.

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

- Track number of sponsored health and wellness activities.
- Track attendance at health and wellness activities.
- Track engagement of Healthy Living social media series.

Measure of Success: PCH will observe a sustained utilization of health and wellness opportunities in Phillips County.

Needs Not Addressed and Justification

Identified health needs unable to address by PCH	Rationale
1. 29.8% of survey respondents indicated that there are not adequate and affordable housing options available in the community.	• Housing affordability is a challenging issue. As time allows in the future, PCH would be open to working with community partners to address this need.
2. 12.2% of survey respondents indicated that prescription cost had prohibited them from getting a prescription or taking their medication regularly.	• PCH cannot control prescription costs but will continue to reassess and explore opportunities to alleviate this burden in the future including sharing more information about the 340B program in partnership with Valley Drug.

Dissemination of Needs Assessment

Phillips County Hospital "PCH" disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on their website (pchospital.us) 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 PCH is utilizing their input. The Steering Committee, as well as the Board of Directors, will be encouraged to act as advocates in Phillips County as the facility seeks to address the healthcare needs of their community.

Furthermore, the board members of PCH will be directed to the hospital's website to view the complete assessment results and the implementation plan. PCH board members approved and adopted the plan on **June 29, 2021**. 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 2021-2024 Phillips County Hospital Community Benefit Strategic Plan can be submitted to:

Phillips County Hospital
Administration
PO Box 640
Malta, MT 59538

Please reach out to PCH's Administration Office at 406-654-1100 with questions.