

# IMPLEMENTATION PLAN

## *Addressing Community Health Needs*



***Malta, Montana***

***2024-2027***

## Table of Contents

Implementation Planning Process .....	3
Prioritizing the Community Health Needs .....	5
PCH’s Existing Presence in the Community .....	5
List of Available Community Partnerships and Facility Resources to Address Needs.....	6
Phillips County Indicators .....	7
Public Health and Underserved Populations Consultation Summaries .....	8
Needs Identified and Prioritized .....	10
Prioritized Needs to Address .....	10
Needs Unable to Address.....	11
Executive Summary.....	12
Implementation Plan Grid.....	15
Needs Not Addressed and Justification .....	27
Dissemination of Needs Assessment .....	28

## 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 Community Health Services Development’s CHNA was performed in early 2024 to determine the most important health needs and opportunities for Phillips County, Montana. The CHSD project is administrated by the Montana Office of Rural Health (MORH) and funded in part through the Montana Health Research and Education Foundation (MHREF) Flex Grant. “Needs” were identified as the top issues or opportunities rated by respondents during the CHSD survey process or during key informant interviews (see page 10 for a list of “Needs Identified and Prioritized”). For more information regarding the assessment process/approach/methodology, please refer to the facility’s assessment report, which is posted on the facility’s website ([pchospital.us](http://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:

- Long-term care
- Awareness of health resources
- Access to health care

In addressing the aforementioned issues, PCH seeks to:

- Enhance long-term care services at Phillips County Hospital
- Improve awareness of resources and services available in Phillips County
- Ensure continued access to current and improved health care services at PCH

**Facility Mission:** To Make a Difference in Health Care

**Facility Vision:** To be a Leader in Health Care

**Implementation Planning Committee Members:**

- Donny Bagley – Lab/X-Ray Manager, PCH
- Susan Bibbs – Director of Revenue Services, PCH
- Angela Reynolds, RN – DON, PCH
- Jo Tharp – CEO, PCH
- Dara Wilke – Operation Specialist, PCH
- Maggie Young, LPN – Clinic Manager

## 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 continued to be engaged with the Local Emergency Preparedness Council on a monthly basis.
- PCH staff are actively engaged in Local Advisory Council on mental/behavioral health.
- PCH is engaged in ongoing education, events, and conversations on Suicide Prevention
- PCH is engaged and actively involved in PhillCo Economic Growth Council as well as the Malta Chamber of Commerce.
- PCH is engaged with Local colleges for educational/clinical opportunities to help grow healthcare workforce.
- PCH contributes too many different local groups and fundraising activities.

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

- Benefis Health System
- Billings Clinic
- Central Montana Medical Center (CMMC)
- Coalition for Healthy Choices – community awareness and prevention
- County/Public Health Nurse – for population and chronic care health aims
- Dr. Cade Taylor, Chiropractor – local independent/private practice Chiropractor
- Eastern Montana Mental Health Center
- Eastern Montana Telemedicine Network & REACH Montana Telehealth Network
- Frances Mahon Deaconess Hospital
- Kalispell Regional Medical Center
- Malta Local Emergency Planning Committee (LEPC)
- Malta Medical Associates, Dr. Edwin Medina – local independent/private practice
- Malta Trails
- Montana Hospital Association
- Montana Health Network
- Montana State University (MSU) Extension
- Montana Rural Health Initiative
- North Central Montana Healthcare Alliance
- Phillips County Council on Aging
- Phillips County EMS/Ambulance service
- Phillips County Library
- Phillips County Parks and Recreation
- Phillips County Schools
- Phillips County Community Needs Group
- 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
- Phillips County Suicide Prevention Committee
- Phillips County Trauma Committee
- River's Bend Assisted Living – local, independently owned and operated, yet physically attached to Phillips County Hospital
- St. Peter's Health

## Phillips County Indicators

### Population Demographics

- 89.7% of Phillips County's population white, and 13.7% 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
- 17.0% of adults (age<65) are uninsured; 10.0% of children (age<18) are uninsured
- 10.1% of the population is enrolled in Medicaid

### Select Health Measures

- 36.0% of adults are considered obese
- 34.0% of the adult population report physical inactivity
- 41% of adults living in frontier Montana report two or more chronic conditions
- Montana's suicide rate (per 100,000 population) is 23.9 compared to 14.1 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

November 2, 2023

Jo Tharp – CEO, Phillips County Hospital (PCH)  
 Randi Kelly – Operations, PCH  
 Mendy Estill – HR, PCH  
 Angela Wotring – Director of Nursing, PCH  
 Susan Bibbs – Director of Revenue, PCH  
 Morgan Streeter – Mental Health Counselor, PCH  
 Dina Meneely – Board Member, PCH  
 Rick Starkey – Board Member, PCH  
 Kaitlyn Inderland – Counselor, Malta Jr High/High School  
 Philip Munoz – Community Member  
 Betty Hasler – Manager, Phillips Transit-Transportation  
 Steve Anderson – Pastor, Little White Church  
 Jenny Tollefson – Nurse, Malta County Public Health Dept  
 Gina Lamb – Kids Club, Malta

### Public and Community Health

- Alcohol use is really high
- The numbers for physical inactivity is high
- Our unemployment rate is high too
- The fertility rate in our county is high!
- Sexually transmitted diseases is incredibly high in Montana
- We should include a question in the survey related to transportation

### Population: Low-Income, Underinsured

- We should include job search support or job readiness as a class or program people might be interested in.
- Include Medicaid enrollment as a service that's needed locally. Especially since we lost the Office of Public Assistance a few years ago



- Did we include a question related to food insecurity?

Population: Seniors

- Include Medicare enrollment as a service that's needed locally. Especially since we lost the Office of Public Assistance a few years ago.

Population: Veterans

- Important to add VA as locations to seek services for both primary care and hospitalization.

Population: Tribal/American Indian

- Important to add IHS as locations to seek services for both primary care and hospitalization.

## Needs Identified and Prioritized

### Prioritized Needs to Address

1. Top components of a healthy community were “Access to healthcare services” (57.7%), “Good jobs and a healthy economy” (37.1%), “Healthy behaviors and lifestyles” (33.1%), and “Strong family life” (33.1%).
2. 51.1% of respondents said they have “Good” knowledge of health services offered at PCH; 33.9% said they had “Fair” knowledge and 4.6% said their knowledge was “Poor.”
3. Respondents indicated that they learned about health services through “Word of mouth/reputation” (60.7%), “Friends/family” (59.0%), and “Newspaper” (43.9%).
4. Respondents felt that access to healthcare would be improved by “More primary care providers” (50.9%), “More specialists” (50.9%), “Improved quality of care” (37.1%), and “More information about available services” (32.3%).
5. 24.0% of respondents indicated they desired a “Nursing home” in the community.
6. 5.9% of respondents had not seen a primary care provider in the past three years.
7. Key informants identified the need for more staffing and resources around senior care services, saying that the demand currently outweighs the supply of services in Phillips County.
8. Key informants expressed desire for more long term care options to be available in Phillips County.
9. 61.8% of respondents thought their community was “Somewhat healthy.”
10. The top health concerns in the community were “Alcohol/substance use” (47.7%), “Cancer” (29.3%), “Mental health issues” (27.0%), and “Lack of access to healthcare” (24.7%).
11. Education around “Mental health” was desired by 26.4% of respondents.
12. “Mental health services (counseling)” received an approval rating of 2.3 out of 4.0.
13. 13.9% of respondents indicated that they felt depressed on most days for three consecutive months in the last three years.
14. 57.9% of respondents rated their mental health as “Good,” 19.3% rated theirs as “Fair,” and 4.1% rated theirs as “Poor.”
15. 53.5% of respondents felt lonely or isolated “Occasionally” or “Sometimes” within the last year.
16. Most respondents indicated they had “Moderate” stress levels (46.5%), and 15.3% said they had “High” stress levels.
17. 43.2% of respondents have been impacted to some degree by their own or someone else’s substance use issues.
18. Key informant interviews identified the need for more mental health services and providers in the community.
19. Key informants voiced the desire for more prevention and treatment resources relating to alcohol and substance use, particularly for young people in the community.
20. “Blood pressure check” was the most utilized preventive service (54.2%) and “Flu shot/immunizations” was a close second at 53.0%. “Health fair” utilization declined from 8.9% in 2021 to 7.7% in 2024.

21. The most interest in educational classes/programs was expressed for “Health and wellness” at 40.3%, then “Women’s health” at 32.6%, “Weight loss” at 31.3%, and “Fitness” at 29.2%.
22. 35.3% of respondents were physically active for more than 20 minutes less than 3-5 in the last month.
23. Key informants expressed the desire for more opportunities for fitness and exercise.
24. “Dentist” and “Optometry” were tied for the most desired health service at 70.8% each. “Chiropractor” was third at 29.2%.
25. 77.6% of respondents have seen specialty care services in the last three years, and 42% of them utilized Billings Clinic for those services. Most people saw the “Dentist” (28.5%), then “Orthopedic surgeon” (26.2%), then “Optometrist” (23.8%).
26. Key informants identified the need for more specialty services to be available in Phillips County.
27. 38.1% of respondents indicated they delayed getting medical services, and the top reasons for delays were “Could not get an appointment” (26.6%), “Qualified provider not available” (26.6%), “It cost too much” (25.0%), and “Too long to wait for an appointment” (23.4%).
28. 13.5% of respondents said that they has missed a medical appointment due to a transportation issue.
29. 94.1% of respondents had seen a primary care provider in the last three years, and 30.4% saw that provider at “Phillips County Family Health Clinic – Malta.” Most people chose their primary care clinic based on “Prior experience with clinic” (39.9%), though “Closest to home” was also popular (38.0%).
30. 63.4% of respondents have received hospital care in the last three years, and 26.9% went to PCH. Most respondents chose a hospital because of “Prior experience with hospital” (49.1%), “Closest to home” (35.2%), or “Referred by physician or other provider” (34.3%).
31. Clinic services received an approval rating of 2.9 out of 4.0.
32. Key informant interviews highlighted the need for more medical personnel to support current PCH staff and provide adequate care for the community.

### Needs Unable to Address

(See page 27 for additional information)

1. 40.6% of survey respondents indicated that there are not adequate and affordable housing options available in the community.
2. 25.0% of respondents indicated that they had delayed receiving medical services because “It cost too much,” and 50.9% were either unaware of or unsure of the presence of health cost assistance programs.

## 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: Enhance long-term care services at Phillips County Hospital.

**Strategy 1.1:** Explore logistics and resources associated with expanding swing bed capacity to increase long-term care possibilities.

- Conduct a marketing campaign to increase community awareness of newly increased capacity and services.
- Institute educational programming for seniors regarding PCH process of care and Medicare services.
- Explore effective ways to increase awareness of existing resources for seniors (e.g. PALS program).
- Improve establishment of primary care for seniors with PCH providers to ease transition into PCH long-term care.

### Goal 2: Improve awareness of resources and services available in Phillips County through enhancements to community outreach and education.

**Strategy 2.1:** Champion opportunities to enhance county-wide mental and behavioral health resources through programming and community partnership.

- Continue to partner with and support existing mental & behavioral health groups (e.g. REACT, PC Coalition for Healthy Choices, Local Advisory Council, local suicide prevention specialist).
- Continue to explore pathways to support youth mental health in schools through outreach and support of school counselors and other employees.
- Explore restarting the MAT program to address substance use in Phillips County.

**Strategy 2.2: Increase community education surrounding health services offered in Phillips County.**

- Re-establish health fair to showcase services available at PCH and other community organizations, such as PC health Department, local OTs, EMS, PC Fire Department, Billings Clinic, USFS, Border & Highway Patrol, River's Bend, National Guard, etc.
- Explore best ways to communicate with community about available resources and services.
- Consider utilizing the newspaper to publish hospital/community notes or a hospital spotlight to increase community awareness of general hospital activities.
- Increase advertisement for bloodwork done through PCH and ensure community knows this service is now available all year long.

**Strategy 2.3: Increase opportunities for physical activity and exercise in Phillips County.**

- Explore attendance at currently-offered health and fitness events and determine what more diverse activities are desired by the community.
- Pool list of exercise programs and activities currently being offered throughout the county and incorporate into current resource database.
- Explore supporting River's Bend Assisted Living in increasing fitness offerings available to the community and seniors especially.
- Consider partnering with the current Health Department Biggest Loser competition and/or the creation of a similar program put on by PCH to increase sustained community fitness.

**Goal 3: Ensure continued access to current and improved health care services at PCH.**

**Strategy 3.1: Increase specialty services offered through Phillips County Hospital.**

- Implement visits from a general surgery specialist to enhance pre- and post-op care in Phillips County.
- Explore options for offering a visiting or PCH-sponsored mobile optometry clinic.

**Strategy 3.2: Continue PCH's promotion of transit services in Phillips County.**

- Explore new ways to improve access to hospital through utilization of and partnership with Phillips County Transit.
- Explore ways to determine who could benefit from need-based fare assistance with PC Transit.
- Develop plan to roll out new transportation offerings to the community.

**Strategy 3.3: Explore expanding relationships between PCH and other major health care resources locally and regionally.**

- Explore potential to develop relationships with health care teaching institutions to increase student/provider presence at PCH and contribute to development of more rural health practitioners.
- Explore partnering with entities to make yearly health screenings available through PCH.

### Implementation Plan Grid

#### Goal 1: Enhance long-term care services at Phillips County Hospital.

**Strategy 1.1:** Explore logistics and resources associated with expanding swing bed capacity to increase long-term care possibilities.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Conduct a marketing campaign to increase community awareness of newly increased capacity and services.	CEO	Ongoing	PCH Board	Internal	Financial limitations
Institute educational programming for seniors regarding PCH process of care and Medicare services.	PCH Family Health Clinic	Quarterly	PCH Leadership	PC Council on Aging PC Health Department	Resource Limitations Financial Limitations
Explore effective ways to increase awareness of existing resources for seniors (e.g. PALS program).	PCH Leadership	Quarterly	CEO	PC Council on Aging PC Health Department	Resource Limitations
Improve establishment of primary care for seniors with PCH providers to ease transition into PCH long-term care.	PCH Family Health Clinic	Monthly	PCH Leadership	Internal	Resource Limitations

#### Needs Being Addressed by this Strategy:

- 1. Top components of a healthy community were “Access to healthcare services” (57.7%), “Good jobs and a healthy economy” (37.1%), “Healthy behaviors and lifestyles” (33.1%), and “Strong family life” (33.1%).
- 2. 51.1% of respondents said they have “Good” knowledge of health services offered at PCH; 33.9% said they had “Fair” knowledge and 4.6% said their knowledge was “Poor.”
- 3. Respondents indicated that they learned about health services through “Word of mouth/reputation” (60.7%), “Friends/family” (59.0%), and “Newspaper” (43.9%).
- 4. Respondents felt that access to healthcare would be improved by “More primary care providers” (50.9%), “More specialists” (50.9%), “Improved quality of care” (37.1%), and “More information about available services” (32.3%).

- 5. 24.0% of respondents indicated they desired a “Nursing home” in the community.
- 6. 5.9% of respondents had not seen a primary care provider in the past three years.
- 7. Key informants identified the need for more staffing and resources around senior care services, saying that the demand currently outweighs the supply of services in Phillips County.
- 8. Key informants expressed desire for more long term care options to be available in Phillips County.

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

- Increased resources for seniors and senior care in Phillips County
- Enhanced knowledge of available resources for seniors
- Improved health outcomes for seniors

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

- Implement marketing campaign for newly-available resources
- Track impact of marketing campaign
- Implement educational programming for seniors
- Track educational programming offerings and participants
- Conduct survey or scan to explore effective ways of increasing awareness of resources
- Track number of seniors receiving primary care at PCH

**Measure of Success:** Implementation of increased swing bed capacity for long-term care, educational programming for seniors, and marketing campaign to increase knowledge of available resources by May 2026.



## Goal 2: Improve awareness of resources and services available in Phillips County through enhancements to community outreach and education.

**Strategy 2.1:** Champion opportunities to enhance county-wide mental and behavioral health resources through programming and community partnership.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Continue to partner with and support existing mental & behavioral health groups (e.g. REACT, PC Coalition for Healthy Choices, Local Advisory Council, local suicide prevention specialist).	PC Hospital and Family Health Clinic	Ongoing	CEO	Internal	Resource Limitations Financial Limitations
Continue to explore pathways to support youth mental health in schools through outreach and support of school counselors and other employees.	CEO	Monthly	PCH Board	EMMHC Prevention Specialist PCH LCSW	Resource Limitations
Explore restarting the MAT program to address substance use in Phillips County.	PCH Practitioners	Quarterly	CEO	Internal	Financial Limitations Resource Limitations Scheduling conflicts

### Needs Being Addressed by this Strategy:

- 1. Top components of a healthy community were “Access to healthcare services” (57.7%), “Good jobs and a healthy economy” (37.1%), “Healthy behaviors and lifestyles” (33.1%), and “Strong family life” (33.1%).
- 9. 61.8% of respondents thought their community was “Somewhat healthy.”
- 10. The top health concerns in the community were “Alcohol/substance use” (47.7%), “Cancer” (29.3%), “Mental health issues” (27.0%), and “Lack of access to healthcare” (24.7%).
- 11. Education around “Mental health” was desired by 26.4% of respondents.
- 12. “Mental health services (counseling)” received an approval rating of 2.3 out of 4.0.
- 13. 13.9% of respondents indicated that they felt depressed on most days for three consecutive months in the last three years.
- 14. 57.9% of respondents rated their mental health as “Good,” 19.3% rated theirs as “Fair,” and 4.1% rated theirs as “Poor.”

- 15. 53.5% of respondents felt lonely or isolated “Occasionally” or “Sometimes” within the last year.
- 16. Most respondents indicated they had “Moderate” stress levels (46.5%), and 15.3% said they had “High” stress levels.
- 17. 43.2% of respondents have been impacted to some degree by their own or someone else’s substance use issues.
- 18. Key informant interviews identified the need for more mental health services and providers in the community.
- 19. Key informants voiced the desire for more prevention and treatment resources relating to alcohol and substance use, particularly for young people in the community.

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

- Increased mental health resources available in Phillips County
- Enhanced cooperation and communication with community partners
- Enhanced knowledge of mental and behavioral health services offered
- Improved health outcomes
- Enhanced access to mental and behavioral health services

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

- Track current and ongoing partnerships relating to mental and behavioral health
- Track PCH support of local mental and behavioral health resources
- Communicate with school counselors and employees to determine effective support mechanisms
- Track participants of MAT program when it restarts

**Measure of Success:** PCH will observe an increase in community awareness and word of mouth referrals to local services, increase in supportive relationships between PCH and mental and behavioral services providers, increase in access to behavioral health services.

## Goal 2: Improve awareness of resources and services available in Phillips County through enhancements to community outreach and education.

**Strategy 2.2:** Increase community education surrounding health services offered in Phillips County.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Re-establish health fair to showcase services available at PCH and other community organizations, such as PC health Department, local OTs, EMS, PC Fire Department, Billings Clinic, USFS, Border & Highway Patrol, River's Bend, National Guard, etc.	CEO	Yearly	PCH Board	PC Health Department, PC EMS, PC Fire Department, River's Bend	Scheduling Conflicts Resource Limitations
Explore best ways to communicate with community about available resources and services.	PCH Leadership	Ongoing	CEO	Internal	Resource Limitations
Consider utilizing the newspaper to publish hospital/community notes or a hospital spotlight to increase community awareness of general hospital activities.	CEO	Monthly	PCH Board	PC Newspaper KMMR Mustang Radio	Resource Limitations Financial Limitations
Increase advertisement for bloodwork done through PCH and ensure community knows this service is now available all year long.	CEO	Quarterly	PCH Board	PC News, KMMR, Social Media	Financial Limitations

### Needs Being Addressed by this Strategy:

- 1. Top components of a healthy community were "Access to healthcare services" (57.7%), "Good jobs and a healthy economy" (37.1%), "Healthy behaviors and lifestyles" (33.1%), and "Strong family life" (33.1%).
- 2. 51.1% of respondents said they have "Good" knowledge of health services offered at PCH; 33.9% said they had "Fair" knowledge and 4.6% said their knowledge was "Poor."
- 3. Respondents indicated that they learned about health services through "Word of mouth/reputation" (60.7%), "Friends/family"

(59.0%), and “Newspaper” (43.9%).

- 4. Respondents felt that access to healthcare would be improved by “More primary care providers” (50.9%), “More specialists” (50.9%), “Improved quality of care” (37.1%), and “More information about available services” (32.3%).
- 20. “Blood pressure check” was the most utilized preventive service (54.2%) and “Flu shot/immunizations” was a close second at 53.0%. “Health fair” utilization declined from 8.9% in 2021 to 7.7% in 2024.

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

- Increased health resources available to community
- Enhanced community knowledge of available resources
- Enhanced relationships and communication between PCH and the community
- Improved health outcomes

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

- Re-implement health fair
- Track participants and attendants of health fair
- Conduct survey or scan to determine best methods of communicating available resources
- Track efforts to utilize newspaper to increase awareness of resources
- Track advertisement of bloodwork services

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

## Goal 2: Improve awareness of resources and services available in Phillips County through enhancements to community outreach and education.

**Strategy 2.3:** Increase opportunities for physical activity and exercise in Phillips County.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Explore attendance at currently-offered health and fitness events and determine what more diverse activities are desired by the community.	PCH Leadership	Quarterly	CEO	Internal	Resource Limitations

Pool list of exercise programs and activities currently being offered throughout the county and incorporate into current resource database.	PCH Leadership	Quarterly	CEO	Internal	Resource Limitations
Explore supporting River's Bend Assisted Living in increasing fitness offerings available to the community and seniors especially.	CEO	Quarterly	PCH Board	PC Council on Aging River's Bend	Resource Limitations Scheduling conflicts
Consider partnering with the current Health Department Biggest Loser competition and/or the creation of a similar program put on by PCH to increase sustained community fitness.	PCH C2C Committee	January 2025	CEO	PC Health Department	Resource Limitations
<b>Needs Being Addressed by this Strategy:</b> <ul style="list-style-type: none"> <li>1. Top components of a healthy community were "Access to healthcare services" (57.7%), "Good jobs and a healthy economy" (37.1%), "Healthy behaviors and lifestyles" (33.1%), and "Strong family life" (33.1%).</li> <li>9. 61.8% of respondents thought their community was "Somewhat healthy."</li> <li>21. The most interest in educational classes/programs was expressed for "Health and wellness" at 40.3%, then "Women's health" at 32.6%, "Weight loss" at 31.3%, and "Fitness" at 29.2%.</li> <li>22. 35.3% of respondents were physically active for more than 20 minutes less than 3-5 in the last month.</li> <li>23. Key informants expressed the desire for more opportunities for fitness and exercise.</li> </ul>					
<b>Anticipated Impact(s) of these Activities:</b> <ul style="list-style-type: none"> <li>Improved health outcomes</li> <li>Enhanced knowledge of available resources regarding exercise and fitness</li> <li>Increased fitness offerings available</li> </ul>					

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

- Compile list of fitness activities offered throughout the community
- Create resource database to share offerings with the community
- Communicate with River’s Bend about increasing fitness offerings
- Track work being done on Biggest Loser competition, either with HD or by PCH

**Measure of Success:** PCH will observe a sustained utilization of health and wellness opportunities in Phillips County, increased level of healthy levels and lifestyles.

### Goal 3: Ensure continued access to current and improved health care services at PCH.

#### Strategy 3.1: Increase specialty services offered through Phillips County Hospital.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Implement visits from a general surgery specialist to enhance pre- and post-op care in Phillips County.	CEO	Monthly	CEO	FMDH	Scheduling conflicts Resource limitations
Explore options for offering a visiting or PCH-sponsored mobile optometry clinic.	CEO	Quarterly	PCH Board	Internal	Resource limitations Financial limitations

#### Needs Being Addressed by this Strategy:

- 1. Top components of a healthy community were “Access to healthcare services” (57.7%), “Good jobs and a healthy economy” (37.1%), “Healthy behaviors and lifestyles” (33.1%), and “Strong family life” (33.1%).
- 4. Respondents felt that access to healthcare would be improved by “More primary care providers” (50.9%), “More specialists” (50.9%), “Improved quality of care” (37.1%), and “More information about available services” (32.3%).
- 24. “Dentist” and “Optometry” were tied for the most desired health service at 70.8% each. “Chiropractor” was third at 29.2%.
- 25. 77.6% of respondents have seen specialty care services in the last three years, and 42% of them utilized Billings Clinic for those services. Most people saw the “Dentist” (28.5%), then “Orthopedic surgeon” (26.2%), then “Optometrist” (23.8%).
- 26. Key informants identified the need for more specialty services to be available in Phillips County.

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

- Improved health outcomes
- Increased access to specialty services

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

- Track general surgery specialist visits
- Track patients seen by general surgery specialist
- Track efforts made to implement visiting/mobile optometry clinic

**Measure of Success:** PCH will observe an increase in community members utilizing local health care services as well as outreach services provided by PCH.

### Goal 3: Ensure continued access to current and improved health care services at PCH.

#### Strategy 3.2: Continue PCH's promotion of transit services in Phillips County.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Explore new ways to improve access to hospital through utilization of and partnership with Phillips County Transit.	PCH Leadership	Quarterly	CEO	Phillips County Transit	Resource limitations
Explore ways to determine who could benefit from need-based fare assistance with PC Transit.	CEO	Quarterly	PCH Board	Phillips County Transit	Financial Limitations
Develop plan to roll out new transportation offerings to the community.	CEO	Yearly	PCH Board	Internal Phillips County Transit	Resource Limitations Scheduling conflicts

#### Needs Being Addressed by this Strategy:

- 1. Top components of a healthy community were “Access to healthcare services” (57.7%), “Good jobs and a healthy economy” (37.1%), “Healthy behaviors and lifestyles” (33.1%), and “Strong family life” (33.1%).
- 10. The top health concerns in the community were “Alcohol/substance use” (47.7%), “Cancer” (29.3%), “Mental health issues” (27.0%), and “Lack of access to healthcare” (24.7%).
- 27. 38.1% of respondents indicated they delayed getting medical services, and the top reasons for delays were “Could not get an appointment” (26.6%), “Qualified provider not available” (26.6%), “It cost too much” (25.0%), and “Too long to wait for an appointment” (23.4%).
- 28. 13.5% of respondents said that they has missed a medical appointment due to a transportation issue.
- 29. 94.1% of respondents had seen a primary care provider in the last three years, and 30.4% saw that provider at “Phillips County Family Health Clinic – Malta.” Most people chose their primary care clinic based on “Prior experience with clinic” (39.9%), though “Closest to home” was also popular (38.0%).



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

- Improved access to health care services in Phillips County
- Enhanced communication and coordination between PCH and Phillips County Transit
- Improved health outcomes
- Increased awareness of PCH/PCT collaboration

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

- Track communication with PCT about partnership
- Conduct scan to determine demand for need-based transit assistance
- Determine effective methods of communicating transportation offerings to community
- Track reach of communication methods

**Measure of Success:** Decrease in missed appointments due to lack of transportation, increase in access to services due to access to transportation services, increase in relationship between PCH and PC Transit.

**Goal 3: Ensure continued access to current and improved health care services at PCH.**

**Strategy 3.3:** Explore expanding relationships between PCH and other major health care resources locally and regionally.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Explore potential to develop relationships with health care teaching institutions to increase student/provider presence at PCH and contribute to development of more rural health practitioners.	CEO	Quarterly	PCH Board	Internal	Resource Limitations Financial Limitations Scheduling Conflicts
Explore partnering with entities to make yearly health screenings available through PCH.	PCH Leadership	Yearly	CEO	Phillips County Health Department	Resource Limitations Financial Limitations

**Needs Being Addressed by this Strategy:**

- 1. Top components of a healthy community were “Access to healthcare services” (57.7%), “Good jobs and a healthy economy” (37.1%), “Healthy behaviors and lifestyles” (33.1%), and “Strong family life” (33.1%).
- 4. Respondents felt that access to healthcare would be improved by “More primary care providers” (50.9%), “More specialists” (50.9%), “Improved quality of care” (37.1%), and “More information about available services” (32.3%).

- 10. The top health concerns in the community were “Alcohol/substance use” (47.7%), “Cancer” (29.3%), “Mental health issues” (27.0%), and “Lack of access to healthcare” (24.7%).
- 20. “Blood pressure check” was the most utilized preventive service (54.2%) and “Flu shot/immunizations” was a close second at 53.0%. “Health fair” utilization declined from 8.9% in 2021 to 7.7% in 2024.
- 27. 38.1% of respondents indicated they delayed getting medical services, and the top reasons for delays were “Could not get an appointment” (26.6%), “Qualified provider not available” (26.6%), “It cost too much” (25.0%), and “Too long to wait for an appointment” (23.4%).
- 29. 94.1% of respondents had seen a primary care provider in the last three years, and 30.4% saw that provider at “Phillips County Family Health Clinic – Malta.” Most people chose their primary care clinic based on “Prior experience with clinic” (39.9%), though “Closest to home” was also popular (38.0%).
- 29. 94.1% of respondents had seen a primary care provider in the last three years, and 30.4% saw that provider at “Phillips County Family Health Clinic – Malta.” Most people chose their primary care clinic based on “Prior experience with clinic” (39.9%), though “Closest to home” was also popular (38.0%).
- 30. 63.4% of respondents have received hospital care in the last three years, and 26.9% went to PCH. Most respondents chose a hospital because of “Prior experience with hospital” (49.1%), “Closest to home” (35.2%), or “Referred by physician or other provider” (34.3%).
- 31. Clinic services received an approval rating of 2.9 out of 4.0.
- 32. Key informant interviews highlighted the need for more medical personnel to support current PCH staff and provide adequate care for the community.

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

- Increased appointment availability
- Improved health outcomes
- Enhanced access to care
- Increased health offerings provided through PCH

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

- Track efforts to increase providers at PCH
- Track efforts to partner with entities about yearly health screenings

**Measure of Success:** PCH will observe a sustained utilization of health care services as well as increase in participation of preventative health screenings.

### Needs Not Addressed and Justification

Identified health needs unable to address by PCH	Rationale
1. 40.6% of survey respondents indicated that there are not adequate and affordable housing options available in the community.	<ul style="list-style-type: none"> <li>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.</li> </ul>
2. 25.0% of respondents indicated that they had delayed receiving medical services because “It cost too much,” and 50.9% were either unaware of or unsure of the presence of health cost assistance programs.	<ul style="list-style-type: none"> <li>PCH will address this need as part of the marketing campaign that will explain the health cost assistance program opportunities to our community.</li> </ul>

## 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](http://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 **October 29<sup>th</sup>, 2024**. 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 2024-2027 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.