IMPLEMENTATION PLAN

Addressing Community Health Needs



Big Horn Hospital · Big Horn Senior Living

CHOOSE HEALTH

Hardin, Montana 2019-2022

Table of Contents

The Implementation Planning Process	3
Prioritizing the Community Health Needs	5
BHHA's Existing Presence in the Community	5
List of Available Community Partnerships and Facility Resources to Address Needs	6
Big Horn County Indicators	6
Public Health and Underserved Populations Consultation Summaries	7
Needs Identified and Prioritized	
Prioritized Needs to Address	
Needs Unable to Address	
Executive Summary	
Implementation Plan Grid	
Needs Not Addressed and Justification	22
Dissemination of Needs Assessment	23

The Implementation Planning Process

The implementation planning committee – comprised of Big Horn Hospital Association (BHHA) leadership team – participated in an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through their community health needs assessment (CHNA) process.

The CHSD community health needs assessment was performed in the spring of 2019 to determine the most important health needs and opportunities for Big Horn 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 (bighornhospital.org).

The community steering and implementation planning committees identified the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives representing 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 BHHA'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:

- 1. Access to healthcare services
- 2. Behavioral health
- 3. Social determinants of health

In addressing the aforementioned issues, BHHA seeks to:

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

<u>Big Horn Hospital Association's Mission:</u> Big Horn Hospital Association provides quality services and promotes responsible choices to enhance the health of our communities.

<u>Big Horn Hospital Association's Vision:</u> Big Horn Hospital Association will individualize the healthcare experience, embodying an organization of people working together, promoting a culture of personal accountability to improve the health and well-being of those we serve.

Big Horn Hospital Association's Values:

- Compassion: We treat our patients, communities, and colleagues with sensitivity and empathy.
- Accountability: We promote individual and organizational responsibility.
- Respect: We honor the dignity of patients, communities and colleagues.
- Empowering: We create an environment for individuals to make confident decisions and health choices.

Implementation Planning Committee Members:

- Kristi Gatrell, CEO- Big Horn Hospital Association (BHHA)
- Bill Hodges, Foundation/Outreach Director- BHHA
- Roxie Cain, Hospital Controller- BHHA
- Paula Small Plenty, LTC Administrator- BHHA
- Kristin Willoughby, Director of Nursing/Hospital-BHHA
- Joe Purcell, Director of Nursing/LTC- BHHA

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

BHHA's Existing Presence in the Community

- BHHA provides meeting space for AA and ALANON groups
- Big Horn Hospital Association manages an assisted living and long-term care facility for the senior population in the community.
- The facility hosts a 'High School Job Shadow Day' in order to promote health careers to youth in the community. along with Area Health Education Activities.
- BHHA sponsors and organizes an annual Rainbow Girls Breast Cancer Walk in order to provide support for the early detection and prevention of breast cancer.
- BHHA is a community stakeholder in a county "Cardiac Readiness" initiative with funding from DPHHS.
- Certified Nurse Assistant classes for interested members of the public.

List of Available Community Partnerships and Facility Resources to Address Needs

- Alcoholics Anonymous & ALANON
- Big Horn Council on Aging & Big Horn Senior Center
- Hardin Revitalization Group
- Big Horn County Public Health
- County EMS services
- Big Horn Valley Pharmacy
- Local Mental Health Advisory Council
- Big Horn County Extension Office
- Big Horn Valley Health Center (BHVHC)
- SCL Health Clinic
- Indian Health Service (IHS)
- Hardin Kiwanis
- Hardin Public Schools
- Hardin Community Activity Center
- Montana Office of Rural Health and Area Health
 Education Center (MORH/AHEC)
- Montana Department of Health and Human Services
 (MT DPHHS)
- Billings Clinic

- Eastern Montana Service Area Authority (ESAA-Mental Health)
- Behavioral Health Council/AMDD
- St. Vincent Healthcare
- Hardin Chamber of Commerce
- Avera eCARE
- Big Horn County Sheriff's department
- Rural Health Opioid Prevention Consortium
- City of Hardin
- Big Horn County Commissioners
- City/County Planning Board
- Hardin "Helping Hands" Food Bank
- Big Horn Hospital Auxiliary
- Big Horn Hospital Association Foundation
- Big Horn Senior Living Auxiliary
- River Valley Farmer's Market
- Hardin Senior Center
- National Alzheimer's Association
- Hardin Revitalization Group

Big Horn County Indicators

Population Demographics

- 64.8% of Big Horn County's population is American Indian
- 13.7% of Big Horn County's population has disability status
- 10.9% of Big Horn County's population is 65 years or older
- 8.7% of Big Horn County's population has Veteran status

Size of County and Remoteness

- 12,865 people in Big Horn County
- 2.6 people per square mile

Socioeconomic Measures

- 26.8% of persons are below the federal poverty level
- 25% of adults (age<65) are uninsured; 8% of children less than age 18, are uninsured
- 34.3% of children live in poverty; 59% receiving WIC benefits
- 17% of the population is enrolled in Medicaid

Select Health Measures

- 37% of adults are considered obese; 36.1% of children (2-5 years of age) are overweight or obese
- 22% of the adult population report physical inactivity
- 26% of the adult population report smoking
- Unintentional injury death rate (per 100,000 pop.) is 110.7 (Montana is 41.3)
- Drug use hospitalization rate (per 100,000 pop.) is 684.0 (Montana is 372.5)
- Diabetes hospitalization rate (per 100,000 pop.) is 3,089.8 (Montana is 1,058.9)
- COPD emergency department visit rate (per 100,000 pop.) is 1,080.2 (Montana is 669.9)
- Stroke hospitalization rate (per 100,000 pop.) is 210.3 (Montana is 152)
- Acute myocardial infarction hospitalization rate (per 100,000 pop.) is 165.8 (Montana is 118.1)

Nearest Major Hospital

• Billings Clinic- Billings, MT- 44 miles from Big Horn Hospital Association

Disclaimer: The Montana Office of Rural Health and the National Rural Health Resource Center strongly encourage 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.

Public Health and Underserved Populations Consultation Summaries

Public Health Consultation

Bill Hodges – Big Horn County Public Health; Harry Kautzman, City Councilman- Ward 3; Shelly Sutherland, Ed.D CCDO, Chief Community Development Officer- Big Horn Valley Health Center 01/30/2019

- Poor mental health days. How do we quantify this?
- Substance abuse and chemical abuse was really high in the last few surveys/CHNAs and that has been a real challenge for our county to address because we lack resources.
- It seems like the excessive drinking rate is very low too (in the secondary data). I feel that number should be much higher.
- We see high rates of adult obesity and diabetes in this county.
- Do we have any data on substance use disorder rates? I wonder if law enforcement would have numbers on number of substance abuse arrests.
- We should add something about substance abuse treatment on the survey.
- We should add a question about how important it is for people to live in a healthy community. I think it's important for us to gage the importance of this from very important to not at all important.
- I recently learned that alcohol and meth use are still above opioid use. The kids prefer opioids though, so this is expected to change in our state too.

Underserved Population – Low-Income, Underinsured

Shirly Margheim – Auxillary Board, Heritage Acres

01/30/2019

- The unemployment rate seems very low for the county. We're usually high for the state. We have a high unemployment rate.
- People may not understand "medical insurance" on the survey so we should change it to "Health insurance"
- I am wondering if we should ask about housing. It seems like homelessness is an issue in the community.
- A lot of kids in the community 'couch surf" I think that falls under the definition of homeless. Some of their housing situations may not be safe.
- It would be nice to show some economic information on homeless to back this up.
- Healthy Hardin Coalition meets regularly, and they would be a great group to engage with to get some information.

Underserved Population – Seniors

Bill Hodges - Big Horn County Public Health; Harry Kautzman, City Councilman- Ward 3; Kristi Gatrell, CEO- BHHA; Gail Flack, President- BHHA Auxilary 01/30/2019

- We're interested in what senior services are needed in the community. This is still an issue.
- We're losing a lot of seniors to Yellowstone county because they can't get a bed here the waitlist is too long.
- One thing I'm hearing a lot of is more needed care giving for seniors, and support for those who are aging and their care givers.
- There are a lot of lonely seniors out there. Those who deliver the meals-on-wheels have mentioned this. We should ask if people would be interesting in social services for seniors.
- We should also ask about having pharmacy services and groceries delivered-things that help seniors stay in their home safely.

Needs Identified and Prioritized

Prioritized Needs to Address

- 1. 27.5% of survey respondents rated the health of the community as "Unhealthy" or "Very unhealthy."
- 2. Survey respondents indicated the top three components of a healthy community are "Good jobs and a healthy economy", Healthy behaviors and lifestyles" and "Access to health care and other services."
- 3. Survey respondents indicated they top ways to improve the community's access to healthcare are "More primary care providers" (significantly higher of a priority over the last three assessments), "Availability of walk-in clinic/longer hours" and "Availability of visiting specialist."
- 4. 39.8% of survey respondents delayed or did not receive needed healthcare services within the last three years. Top two reasons for delay/not receiving care were "Could not get an appointment" (significantly higher of a priority over the last three assessments) and "Too long to wait for an appointment."
- 5. Focus group participants indicated a large concern regarding availability/access to primary healthcare services.
- 6. Top three identified health concerns for the community were "Alcohol/substance abuse", "Diabetes", and "Overweight/obesity."
- 7. 12.9% of survey respondents reported experiencing periods of depression of at least three consecutive months in the past three years.
- 8. Focus group participants indicated a need for additional mental health services available locally.
- 9. 34.2% of survey respondents reported having "Fair" or "Poor" knowledge of available services at Big Horn Hospital Association.
- 10. Focus group participants indicated that alcohol and drug abuse are major concerns within the community.
- 11. 57.9% of survey respondents indicated they feel the community does not have adequate and affording housing available.
- 12. Focus group participants reported a need for additional respite care and living units for seniors in the community.
- 13. 44.4% of survey respondents felt there was a need for a "Senior retirement housing/community" available locally.
- 14. 18.3% of survey respondents felt "Lack of affordable and safe housing" was a serious health concern.
- 15. Survey respondents reported most interest in educational classes and programs related to "Fitness", "Health and wellness", and "Weight loss."
- 16. 15.7% of survey respondents indicated they engage in physical activity of at least 20 minutes in the last month "1-2 times per month" or "No physical activity."
- 17. Focus group participants discussed a desire for more opportunities to be fit, programs that encourage physical activity, and health and wellness education
- 18. Focus group participants noted Alzheimer's and dementia care as well as services to assist the community to age in place would be beneficial to the area.

Needs Unable to Address

(See page 22 for additional information)

- 1. 46% of survey respondents reported a need for additional pharmacy services available locally.
- 2. 43.2% of survey respondents indicated they did not know or were unsure of programs that help people pay for healthcare bills.
- 3. Big Horn County has higher rates of chlamydia, hepatitis C, and pertussis than the state of Montana.
- 4. Big Horn County's Unintentional Injury Death Rate (per 100,000 population) is 110.7 compared to 41.3 for Montana.

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 14.

Goal 1: Improve access to healthcare services in Big Horn County.

Strategy 1.1: Enhance primary care service availability in Big Horn County **Activities:**

- Explore feasibility of enhancing primary care services in Big Horn County (walk-in clinic, expanded hours, etc.)
- Convene community primary care provider partners to create education and outreach on appropriate utilization of healthcare services and capability of healthcare provider team (where to go/when/for what)
- Enhance BHHA healthcare workforce training (CNA courses, CPR/First Aid, ACLS, Stop the Bleed, etc.) opportunities for community partners and stakeholders

Goal 2: Enhance access to and knowledge of behavioral health services in Big Horn County.

Strategy 2.1: Expand awareness and availability of behavioral health resources in Big Horn County **Activities:**

- Convene community mental/behavioral/substance abuse partners to assess current community services and create a resource for community and area stakeholders
- Explore feasibility of offering behavioral health services at BHHA via telemedicine
- Continue to promote, provide, and explore opportunities to expand education for local youth related to substance use prevention, suicide prevention, and promoting healthy metal health practices (Senior night, Mental Health 1st Aid, "YAM" Youth Awareness of Mental Health, etc.)
- Continue to host and chair Mental Health Local Advisory Council

Strategy 2.2: Strengthen substance use disorder programs and services in Big Horn County **Activities:**

- Explore opportunities to encourage safe medication and need exchange/disposal programs in Big Horn County
- Continue to participate in the Rural Health Opioid Prevention (RHOP) consortium to enhance opioid prevention and training in Big Horn County

Goal 3: Engage in efforts to address the social determinants of health in Big Horn County.

Strategy 3.1: Enhance Big Horn Hospital Association efforts influencing social determinants of health **Activities:**

- Explore opportunities to assist in advocacy and education with the City/County in addressing housing needs in Big Horn County (City/County Planning Board, Hardin Revitalization Group)
- Expand BHHA services related to dietary and nutrition outreach/education
- Develop a diabetic outpatient education program
- Partner with the City, Big Horn County Extension Agent, and Big Horn County Public Health to asses current local health and physical activity activities/opportunities and create a community calendar to highlight opportunities
 - o Develop outreach and marketing plan for community calendar
- Partner with local schools to sponsor annual walking/steps challenge
- Host/sponsor breast cancer, diabetes and Alzheimer's walk/5k run events that promote health, wellness and prevention
- Partner with Big Horn County Public Health to host a Family Fun Day that provides health promotion, education and resources to area families and community members
- Explore expanding caregiver support and education regarding Alzheimer's and dementia care
- Continue to support/supplement senior transportation services one day a week to and from appointments

Implementation Plan Grid

Goal 1: Improve access to healthcare services in Big Horn County.

Strategy 1.1: Enhance primary care service availability in Big Horn County

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Explore feasibility of enhancing primary care services in Big Horn County (walk-in clinic, expanded hours, etc.)	BHHA Executive Management	June 2021	BHHA Executive Management		Resource limitations Financial limitations
Convene community primary care provider partners to create education and outreach on appropriate utilization of healthcare services and capability of healthcare provider team (where to go/when/for what)	BHHA Executive Management	Feb. 2022	CEO	Big Horn Valley Health Center (BHVHC), SCL Health Clinic	Resource limitations Scheduling conflicts
Enhance BHHA healthcare workforce training (CNA courses, CPR/First Aid, ACLS, Stop the Bleed, etc.) opportunities for community partners and stakeholders	BHHA Department Manager	April 2022	CEO	MH Stakeholders, EMS, BHVHC, Schools	Resource limitations Financial limitations

Needs Being Addressed by this Strategy:

- 1. 27.5% of survey respondents rated the health of the community as "Unhealthy" or "Very unhealthy."
- 2. Survey respondents indicated the top three components of a healthy community are "Good jobs and a healthy economy", Healthy behaviors and lifestyles" and "Access to health care and other services."
- 3. Survey respondents indicated they top ways to improve the community's access to healthcare are "More primary care providers" (significantly higher of a priority over the last three assessments), "Availability of walk-in clinic/longer hours" and "Availability of visiting specialist."
- 4. 39.8% of survey respondents delayed or did not receive needed healthcare services within the last three years. Top two reasons for delay/not receiving care were "Could not get an appointment" (significantly higher of a priority over the last three assessments) and "Too long to wait for an appointment."
- 5. Focus group participants indicated a large concern regarding availability/access to primary healthcare services.

Anticipated Impact(s) of these Activities:

- Increase access to primary care services
- **Build community capacity**
- Strengthen community partnerships
- Service, policy, and resources development

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

- Outcome of meeting with community primary care providers
- Number and type of educational/marketing materials related to accessing primary care
- Number of workforce training opportunities provided/sponsored
- Number of workforce training participants

Measure of Success: The 2022 CHNA survey will show an increase in survey respondent access to primary care services. Additionally, Big Horn County will maintain community education programs, increase hours of access to healthcare and offer different community options for hours of access.

Goal 2: Enhance access to and knowledge of behavioral health services in Big Horn County.

Strategy 2.1: Expand awareness and availability of behavioral health resources in Big Horn County

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Convene community mental/behavioral/ substance abuse partners to assess current community services and create a resource for community and area stakeholders	BHHA Outreach Director	May 2022	CEO	BHVC, Alta Care Inc.	Resource limitations Scheduling conflicts
Explore feasibility of offering behavioral health services at BHHA via telemedicine	Local Advisory Council	June 2022	CEO	внус	Resource limitations
Continue to promote, provide, and explore opportunities to expand education for local youth related to substance use prevention, suicide prevention, and promoting healthy metal health practices (Senior night, Mental Health 1st Aid, "YAM" Youth Awareness of Mental Health, etc.)	Local Advisory Council	June 2022	BHHA Outreach Director	Local Advisory Council, BHVHC	Resource limitations Financial limitations
Continue to host and chair Mental Health Local Advisory Council	BHHA Outreach Director	June 2022	CEO	Mental Health Local Advisory Council	Resource limitations Scheduling conflicts

Needs Being Addressed by this Strategy:

- 1. 27.5% of survey respondents rated the health of the community as "Unhealthy" or "Very unhealthy."
- 2. Survey respondents indicated the top three components of a healthy community are "Good jobs and a healthy economy", Healthy behaviors and lifestyles" and "Access to health care and other services."
- 6. Top three identified health concerns for the community were "Alcohol/substance abuse", "Diabetes", and "Overweight/obesity."
- 7. 12.9% of survey respondents reported experiencing periods of depression of at least three consecutive months in the past three years.
- 8. Focus group participants indicated a need for additional mental health services available locally.
- 9. 34.2% of survey respondents reported having "Fair" or "Poor" knowledge of available services at Big Horn Hospital Association.

Anticipated Impact(s) of these Activities:

Increase access to mental health services

- Decrease societal stigma associated with mental illness and substance use disorders
- Strengthen community partnerships
- **Build community capacity**
- Service, policy, and resources development
- Increased community knowledge of resources

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

- Public Health Mortality data i.e. (FICMR) Teen adolescent suicide rates.
- Number of educational opportunities offered
- Number of MHLAC meetings
- Track development and dissemination of resource document

Measure of Success: Big Horn will see an increase in community stakeholder involvement in BH efforts.

Goal 2: Enhance access to and knowledge of behavioral health services in Big Horn County.

Strategy 2.2: Strengthen substance use disorder programs and services in Big Horn County

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Explore opportunities to encourage safe medication and need exchange/disposal programs in Big Horn County	BHVHC	May 2022	BHHA Outreach Director	Local pharmacy, BHVHC	Resource limitations
Continue to participate in the Rural Health Opioid Prevention (RHOP) consortium to enhance opioid prevention and training in Big Horn County	внна	June 2022	CEO	RHOP Consortium	Resource limitations

Needs Being Addressed by this Strategy:

- 1. 27.5% of survey respondents rated the health of the community as "Unhealthy" or "Very unhealthy."
- 2. Survey respondents indicated the top three components of a healthy community are "Good jobs and a healthy economy", Healthy behaviors and lifestyles" and "Access to health care and other services."
- 6. Top three identified health concerns for the community were "Alcohol/substance abuse", "Diabetes", and "Overweight/obesity."
- 8. Focus group participants indicated a need for additional mental health services available locally.
- 10. Focus group participants indicated that alcohol and drug abuse are major concerns within the community.

Anticipated Impact(s) of these Activities:

- Decrease societal stigma associated with mental illness and substance use disorders
- Strengthen community partnerships
- Increase access to substance use disorder services and resources

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

- Number of new disposal containers (Sharps boxes)
- Number of educational/outreach opportunities offered

Measure of Success: Big Horn County will see an increase in community education and access to safe disposal containers.

Goal 3: Engage in efforts to address the social determinants of health in Big Horn County.

Strategy 3.1: Enhance Big Horn Hospital Association efforts influencing social determinants of health

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Explore opportunities to assist in advocacy and education with the City/County in addressing housing needs in Big Horn County (City/County Planning Board, Hardin Revitalization Group)	BHHA Outreach Director	April 2022	CEO	City of Hardin, Big Horn County, City/County Planning Board, Hardin Revitalization Group	Resource limitations Scheduling conflicts
Expand BHHA services related to dietary and nutrition outreach/education	Dietary Manager, RD	May 2021	CEO	Area Clinics	Financial limitations Workforce limitations
Develop a diabetic outpatient education program	Dietary Manager, RD	May 2021	CEO	Area Clinics	Financial limitations Workforce limitations
Partner with the City, Big Horn County Extension Agent, and Big Horn County Public Health to asses current local health and physical activity activities/opportunities and create a community calendar to highlight opportunities O Develop outreach and marketing plan for community calendar	BHHA Outreach Director	April 2022	CEO	City of Hardin, Big Horn County Extension, Big Horn County Public Health	Resource limitations Financial limitations Scheduling conflicts
Partner with local schools to sponsor annual walking/steps challenge	BHHA Outreach Director	May 2022	CEO	Local schools	Resource limitations Scheduling conflicts
Host/sponsor breast cancer, diabetes and Alzheimer's walk/5k run events that promote health, wellness and prevention	LTC Administrator	May 2022	CEO	Local Schools, Senior Center	Resource limitations Financial limitations

Partner with Big Horn County Public Health to host a Family Fun Day that provides health promotion, education and resources to area families and community members	BHHA Outreach Director	April 2021	CEO	Big Horn County Public Health	Resource limitations Scheduling conflicts
Explore expanding caregiver support and education regarding Alzheimer's and dementia care	LTC Administrator	Amy 2022	CEO	Senior Center, National Alzheimer's Association	Resource limitations
Continue to support/supplement senior transportation services – one day a week to and from appointments	LTC Administrator	April 2022	CEO	Senior Center, National Alzheimer's Association	Resource limitations Financial limitations

Needs Being Addressed by this Strategy:

- 1. 27.5% of survey respondents rated the health of the community as "Unhealthy" or "Very unhealthy."
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- 11. 57.9% of survey respondents indicated they feel the community does not have adequate and affording housing available.
- 12. Focus group participants reported a need for additional respite care and living units for seniors in the community.
- 13. 44.4% of survey respondents felt there was a need for a "Senior retirement housing/community" available locally.
- 14. 18.3% of survey respondents felt "Lack of affordable and safe housing" was a serious health concern.
- 15. Survey respondents reported most interest in educational classes and programs related to "Fitness", "Health and wellness", and "Weight loss."
- 16. 15.7% of survey respondents indicated they engage in physical activity of at least 20 minutes in the last month "1-2 times per month" or "No physical activity."
- 17. Focus group participants discussed a desire for more opportunities to be fit, programs that encourage physical activity, and health and wellness education
- 18. Focus group participants noted Alzheimer's and dementia care as well as services to assist the community to age in place would be beneficial to the area.

Anticipated Impact(s) of these Activities:

- Increased community knowledge of services and resources
- Increase access to healthcare services
- **Build community capacity**
- Strengthen community partnerships
- Service, policy, and resources development
- Improved health outcomes

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

- Number of community education events
- Number of attendees at local events
- Number of community stakeholder presentations
- Track development and dissemination of physical activity events resources

Measure of Success: BHHA will see an increase in community attendance at local sponsored events.

Needs Not Addressed and Justification

Identified health needs unable to address by BHHA	Rationale
46% of survey respondents reported a need for additional pharmacy services available locally.	 Not cost effective for BHHA to operate a stand-alone pharmacy and organizational philosophy to not compete with local business operations.
 43.2% of survey respondents indicated they did not know or were unsure of programs that help people pay for healthcare bills. 	 Healthcare navigator program for healthcare insurance was not funded for appropriate staff dedication to need. Information is given to patient population regarding discounts for payment in full at time of admission.
3. Big Horn County has higher rates of Chlamydia, Hep C, and Pertussis than the state of Montana.	 Informational pamphlets are given out to the public at PH dept. and PHN does cooperate with local school nurses for student education on STI's.
4. Big Horn County's Unintentional Death Rate (per 100,000 population) is 110.7 compared to 41.3 for Montana.	 Local FICMR team has offered preventative information to families/public identified as victims associated with unintentional death events.

Dissemination of Needs Assessment

Big Horn Hospital Association "BHHA" disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on their website (bighornhospital.org) as well as having copies available at the facility, Big Horn County Public Health, and the Big Horn County Senior Living 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 BHHA is utilizing their input. The Steering Committee, as well as the Board of Directors, will be encouraged to act as advocates in Big Horn County as the facility seeks to address the healthcare needs of their community.

Furthermore, the board members of BHHA will be directed to the hospital's website to view the complete assessment results and the implementation plan. BHHA board members approved and adopted the plan on October 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 Big Horn Hospital Association Community Benefit Strategic Plan can be submitted to:

Outreach/Foundation Director Big Horn Hospital Association 17 N. Miles Ave. Hardin, MT 59034

Contact BHHA's Outreach/Foundation Director Bill Hodges at (406) 665-2310 or bhodges@bighornhospital.org with any questions.

[Please remove the following statement and the disclaimer in the footer once the planning document is finalized] *Please note that you will need to include information specific to these requirements:

- You must post your community health needs assessment (CHNA) and your facility's implementation plan publicly both "conspicuously" on your website as well as have a hard copy available at your facility should someone request to view either/both documents.
 - o Your documents must remain on the web until two subsequent CHNA reports have been posted
 - o An individual must not be required to create an account or provide personally identifiable information to access the report
 - o A paper copy must be available for public inspection without charge
- Your facility's implementation plan must be approved, and the plan must document the date upon which the plan was approved/adopted