

Musselshell County Montana

Community Health Services Development
Community Health Needs Assessment Report

Survey conducted by
Roundup Memorial Healthcare
Roundup, Montana

In cooperation with
The Montana Office of Rural Health

May 2018



Office of Rural Health
Area Health
Education Center

Roundup Memorial Healthcare Community Health Needs Assessment

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**Community Survey & Focus Groups
Summary Report
June 2018**

I. Introduction

Roundup Memorial Healthcare is a 25-bed Critical Access Hospital (CAH) and rural health clinic based in Roundup, Montana. Roundup Memorial Healthcare serves Musselshell County of just over 1,800 square miles and provides medical services to the Musselshell County population of just over 4,582 people. Roundup Memorial Healthcare participated in the Community Health Services Development (CHSD) Project administrated by the Montana Office of Rural Health. Community involvement in steering committee meetings, focus groups and key informant interviews enhance community engagement in the assessment process.

In the winter of 2018, Roundup Memorial Healthcare’s service area was surveyed about its healthcare system. This report shows the results of the survey in both narrative and chart formats. A copy of the survey instrument is included at the end of this report (Appendix E). Readers are invited to familiarize themselves with the survey instrument and the subsequent findings. The narrative report touches on the highlights while the charts present data for virtually every question asked. Please note: we are able to compare some of the 2018 survey data with data from previous surveys conducted in 2014 and 2012. If any statistical significance exists, it will be reported. The significance level was set at 0.05.

II. Health Assessment Process

A Steering Committee was convened to assist Roundup Memorial Healthcare in conducting CHSD. A diverse group of community members representing various organizations and populations within the community (ex. public health, elderly, uninsured) came together in February 2018. For a list of all Steering Committee members and their affiliations, see Appendix A. The Steering Committee met twice during the CHSD process; first to discuss health concerns in the community and offer their perspective in designing the survey instrument and again to review results of the survey and focus groups and to assist in the prioritization of health needs to address.

III. Survey Methodology

Survey Instrument

In March 2018, postcards that included information to access a web-based survey portal were mailed out to the residents in Roundup Memorial Healthcare’s service area. Following the web-based mailing, a hard copy survey was sent to the same addresses (excluding those who had responded via web portal). The survey was based on a design that has been used extensively in the states of Washington, Wyoming, Alaska, Montana, and Idaho. The survey was designed to provide each facility with information from local residents regarding:

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

Sampling

Roundup Memorial Healthcare provided a list detailing the number of outpatient and inpatient admissions by zip code. Those zip codes with the greatest number of admissions were selected to be included in the survey. A random list of 1080 residents were then selected with the assistance of the MSU HELPS lab. Residence was stratified in the initial sample selection so that each area would be represented in proportion to the overall served population and the proportion of past admissions. (Note: although the survey samples were proportionately selected, actual surveys returned from each population area varied which may result in slightly less proportional results.)

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

Information Gaps

Data

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

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

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

Limitations in Survey Methodology

A common approach to survey research is the mailed survey. However, this approach is not without limitations. There is always the concern of non-response as it may affect the representativeness of the sample. Thus, a mixture of different data collection methodologies is recommended. Conducting community focus groups in addition to the random sample survey allows for a more robust sample and, ultimately, these efforts help to increase the community response rate. Partnering with local community organizations such as public health, community health centers, and senior centers, just to name a few, helps to reach segments of the population that might not otherwise respond to a survey.

Survey Implementation

In March 2018, a postcard including a link and access code to the community health services development web-based survey was mailed out to 1080 randomly selected residents in the hospital's service area. A second hard-copy survey was mailed to the same residents who had not completed the online survey with a cover letter from Roundup Memorial Healthcare with the Chief Executive Officer's signature on facility letterhead, and a postage paid reply envelope. A news release was sent to local newspaper as well as social media postings prior to the survey distribution announcing that Roundup Memorial Healthcare would be conducting a community health services survey throughout the region in cooperation with the Montana Office of Rural Health.

One hundred sixty-nine surveys were returned out of 1080. Of those 1080 surveys, 309 surveys were returned undeliverable for a 21.9% response rate. From this point on, the total number of surveys will be out of 771. Based upon the sample size, we can be 95% confident that the responses to the survey questions are representative of the service area population, plus or minus 7.53%.

IV. Survey Respondent Demographics

A total of 771 surveys were distributed amongst Roundup Memorial Healthcare's service area. One hundred sixty-nine were completed for a 21.9% response rate. The following tables indicate the demographic characteristics of the survey respondents. Information on location, gender, age, and employment is included. Percentages indicated on the tables and graphs are based upon the total number of responses for each individual question, as some respondents did not answer all questions.

Place of Residence (Question 31)

The returned surveys are skewed toward the Roundup population which is reasonable given that this is where most of the services are located. Six 2018 respondents chose not to answer this question.

		2012		2014		2018	
Area	Zip code	Count	Percent	Count	Percent	Count	Percent
Roundup	59072	121	81.8%	114	86.4%	146	90.1%
Winnett	59087	6	4.1%	3	2.3%	3	1.9%
Musselshell	59059	7	4.7%	3	2.3%	3	1.9%
Ryegate	59074	2	1.4%	1	0.8%	0	0.0%
Melstone	59054	5	3.4%	5	3.8%	5	3.1%
Lavina	59046	7	4.7%	5	3.8%	4	2.5%
Other		0	0.0%	1	0.8%	1	0.6%
TOTAL		148	100%	132	100%	162	100%

“Other” comments:

- 59102

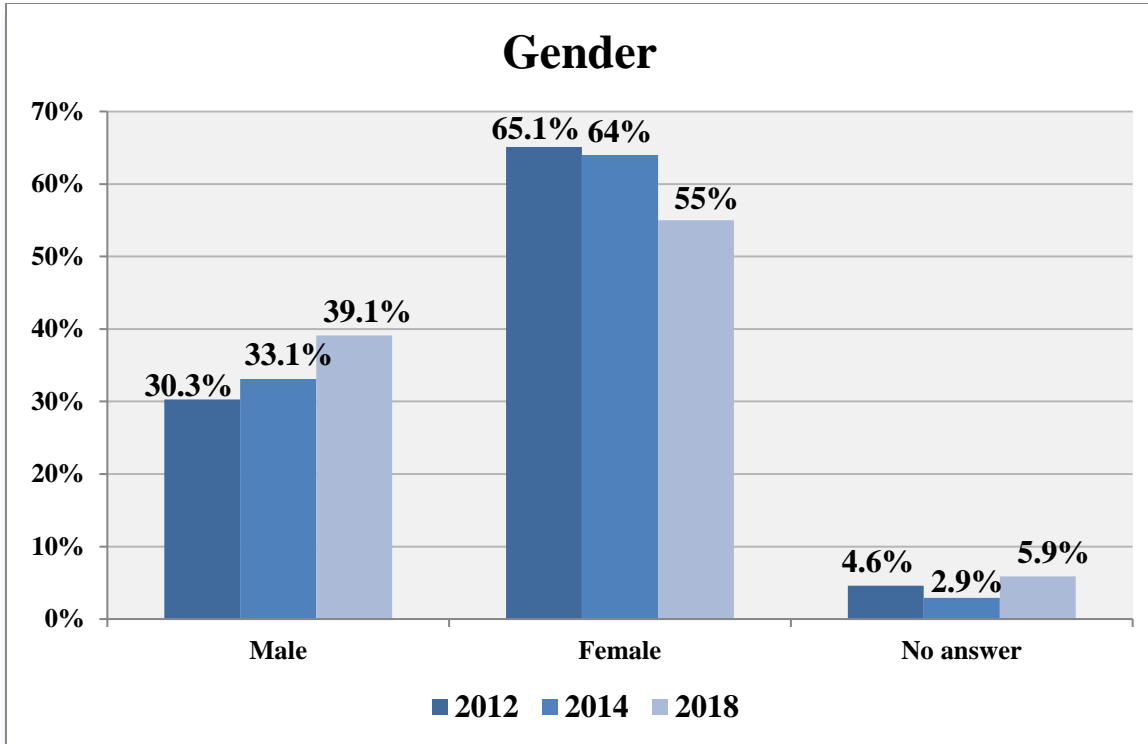
Gender (Question 32)

2018 N= 169

2014 N= 139

2012 N= 152

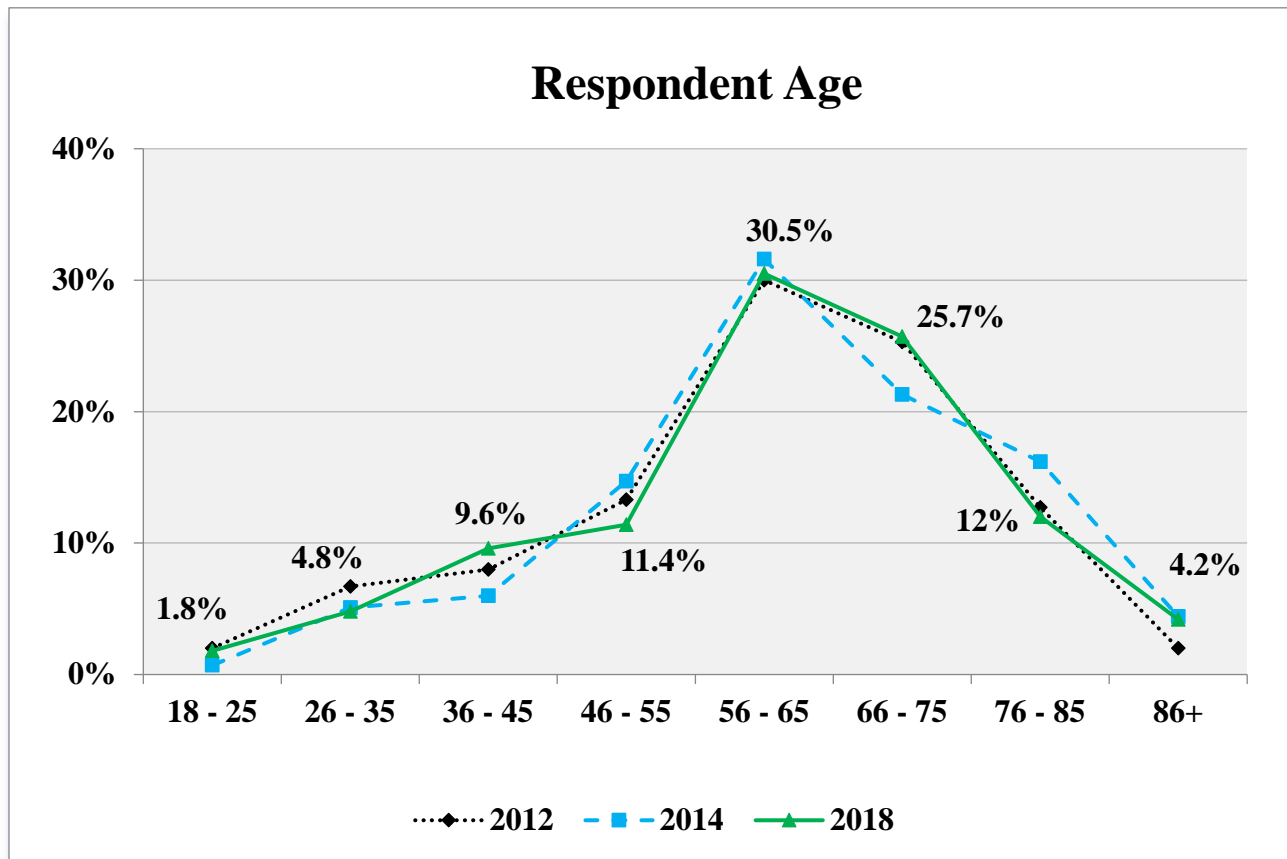
Of the 169 surveys returned, 55% (n=93) of survey respondents were female, 39.1% (n=66) were male, and 5.9% (n=10) chose not to answer this question. It is not unusual for survey respondents to be predominantly female, particularly when the survey is healthcare-oriented since women are frequently the healthcare decision makers for families.



Age of Respondents (Question 33)

2018 N=167
2014 N= 136
2012 N= 150

Thirty-one percent of respondents (n=51) were between the ages of 56-65. Twenty-six percent of respondents (n=43) were between the ages of 66-75 and 11.4% of respondents (n=19) were between the ages of 46-55. This statistic is comparable to other Critical Access Hospital demographics. The increasing percentage of aging residents in rural communities is a trend which is seen throughout Montana and will likely have a significant impact on the need for healthcare services during the next 10-20 years. However, it is important to note that the survey was targeted to adults and, therefore, no respondents are under age 18. Older residents are also more invested in healthcare decision making and are more likely to respond to healthcare surveys, as reflected by this graph.

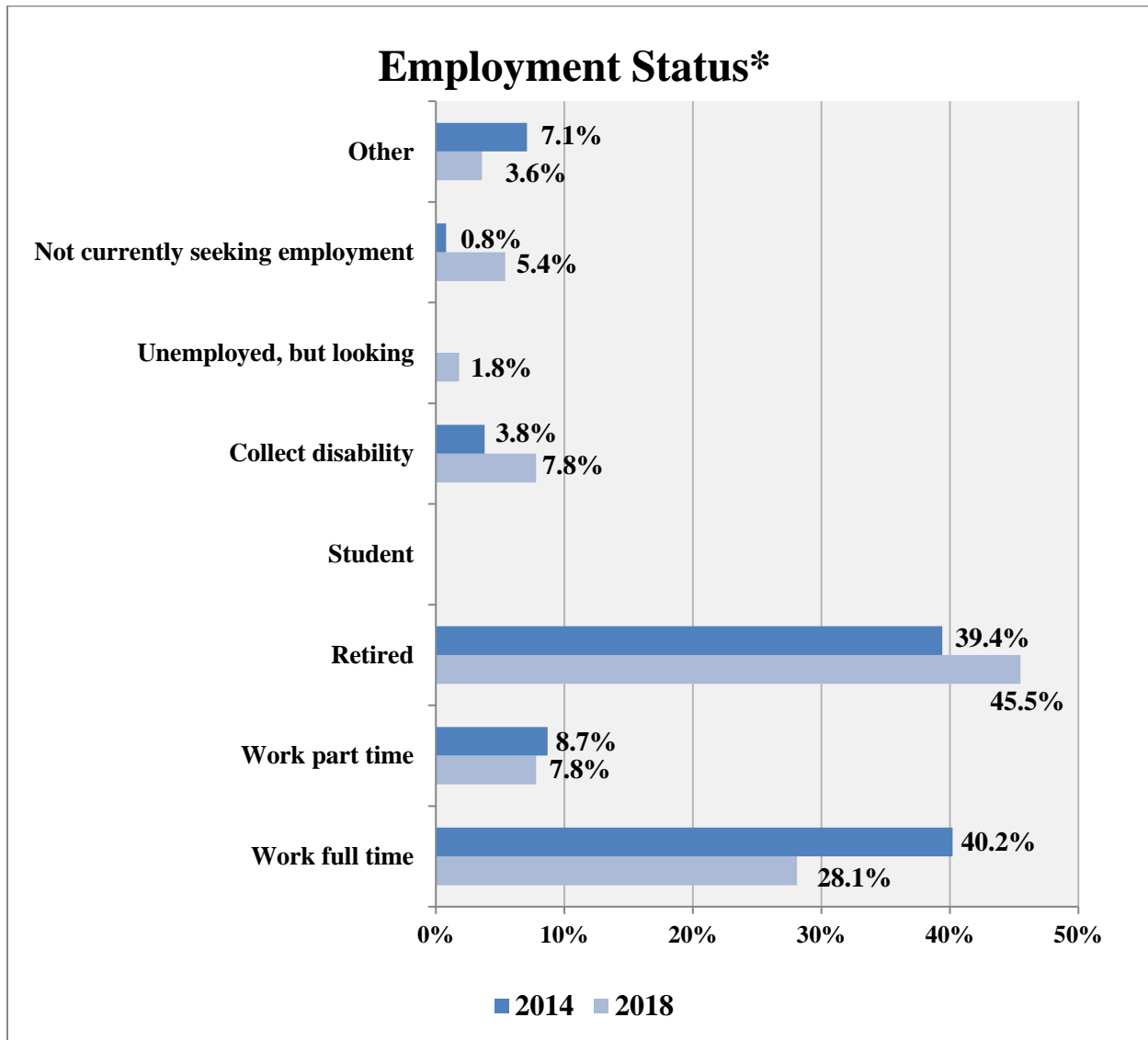


Employment Status (Question 34)

2018 N= 167

2014 N= 127

Respondents were asked to indicate their employment status. Forty-six percent (n=76) reported they are retired while 28.1% (n=47) work full time. Respondents could check all that apply so the percentages do not equal 100%.



*Significantly fewer 2018 respondents work fulltime.

“Other” Comments”

- Self-employed (2)
- Semi-retired. Work as much as I am physically able to
- Disabled vet
- Caretaker of parent

V. Survey Findings – Community Health

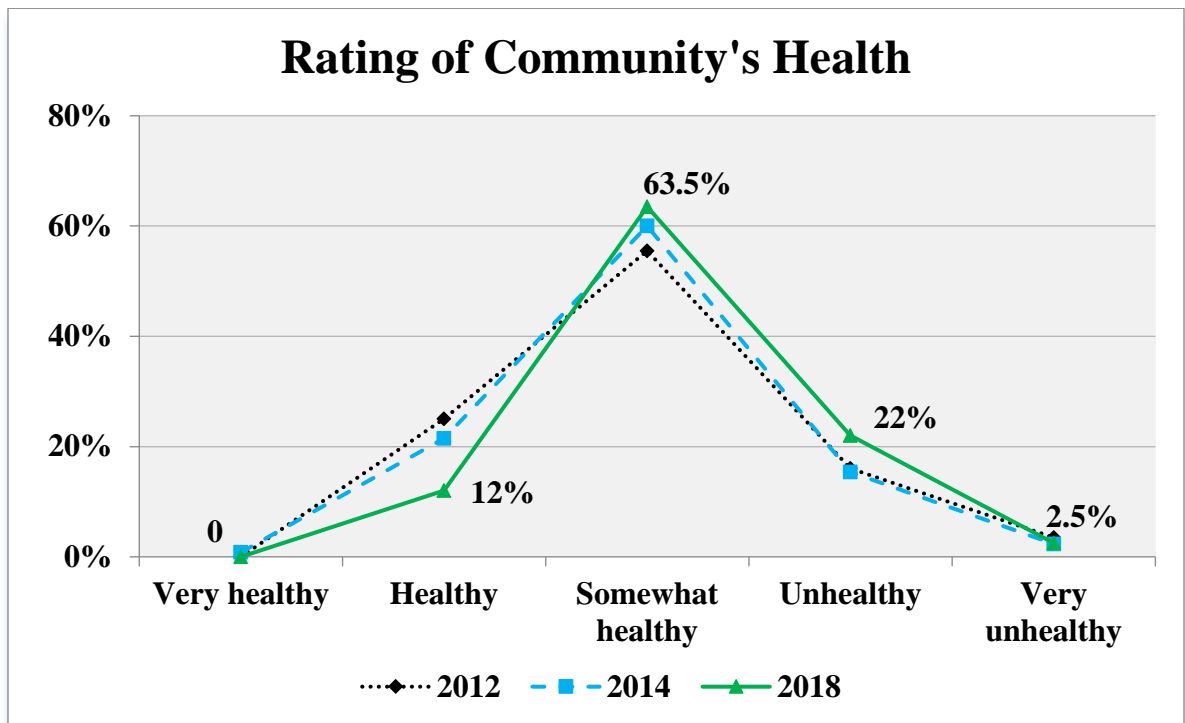
Impression of Community (Question 1)

2018 N= 159

2014 N= 130

2012 N= 144

Respondents were asked to indicate how they would rate the general health of their community. Sixty-four percent of respondents (n=101) rated their community as “Somewhat healthy.” Twenty-two percent of respondents (n=35) felt their community was “Unhealthy” and 12% (n=19) felt their community was “Healthy.”



Health Concerns for Community (Question 2)

2018 N= 169

2014 N= 139

2012 N= 152

Respondents were asked what they felt the three most serious health concerns were in their community. The top identified health concern was “Alcohol abuse/substance abuse” with 71% (n=120). “Overweight/obesity” was also a high priority at 34.9% (n=59) followed by “Cancer” at 24.9% (n=42). Respondents were asked to pick their top three serious health concerns, so percentages do not equal 100%.

Health Concern	2012		2014		2018	
	Count	Percent	Count	Percent	Count	Percent
Alcohol abuse/substance abuse	104	68.4%	94	67.6%	120	71.0%
Overweight/obesity	62	40.8%	47	33.8%	59	34.9%
Cancer ¹	57	37.5%	37	26.6%	42	24.9%
Tobacco use ²	28	18.4%	14	10.1%	38	22.5%
Lack of exercise	22	14.5%	18	12.9%	27	16.0%
Depression/anxiety	22	14.5%	15	10.8%	26	15.4%
COPD/Asthma/respiratory disorders	Not asked - 2012		Not asked - 2014		24	14.2%
High blood pressure	Not asked - 2012		Not asked - 2014		24	14.2%
Diabetes	29	19.1%	18	12.9%	23	13.6%
Mental health issues	25	16.4%	14	10.1%	23	13.6%
Heart disease ³	33	21.7%	23	16.5%	18	10.7%
Lack of access to healthcare	15	9.9%	18	12.9%	17	10.1%
Child abuse/neglect	13	8.6%	8	5.8%	14	8.3%
Lack of dental care	14	9.2%	7	5.0%	8	4.7%
Motor vehicle accidents	10	6.6%	11	7.9%	4	2.4%
Stroke	3	2.0%	1	0.7%	3	1.8%
Autoimmune disorders	Not asked - 2012		Not asked - 2014		3	1.8%
Domestic violence	7	4.6%	7	5.0%	2	1.2%
Work related accidents/injuries	4	2.6%	7	5.0%	2	1.2%
Recreation-related accidents/injuries	1	0.7%	3	2.2%	0	0.0%
Other	4	2.6%	6	4.3%	4	2.4%

¹Significantly fewer 2018 respondents selected cancer as a serious community health concern.

²Significantly more 2018 respondents selected tobacco use as a serious health concern than in 2014.

³Significantly fewer 2018 respondents selected heart disease as a serious health concern.

“Other” comments:

- There is nothing for the kids to do. They have to go to Billings to do anything fun.
- Narcotics
- Water quality
- Opioids

Components of a Healthy Community (Question 3)

2018 N= 169

2014 N= 139

2012 N= 152

Respondents were asked to identify the three most important things for a healthy community. Sixty-six percent of respondents (n=111) indicated that “Access to healthcare and other services” is important for a healthy community. “Good jobs and a healthy economy” was the second most indicated component at 42.6% (n=72) and third was “Water quality” at 34.9% (n=59). Respondents were asked to identify their top three choices thus the percentages do not add up to 100%.

Important Component	2012		2014		2018	
	Count	Percent	Count	Percent	Count	Percent
Access to healthcare and other services	94	61.8%	77	55.4%	111	65.7%
Good jobs and a healthy economy	83	54.6%	68	48.9%	72	42.6%
Water quality	Not asked – 2012		Not asked- 2014		59	34.9%
Healthy behaviors and lifestyles	52	34.2%	51	36.7%	47	27.8%
Strong family life	39	25.7%	44	31.7%	37	21.9%
Good schools	35	23.0%	35	25.2%	28	16.6%
Low crime/safe neighborhoods	25	16.4%	24	17.3%	28	16.6%
Religious or spiritual values	30	19.7%	24	17.3%	28	16.6%
Affordable housing	24	15.8%	16	11.5%	27	16.0%
Clean environment	29	19.1%	23	16.5%	20	11.8%
Community involvement	14	9.2%	15	10.8%	17	10.1%
Parks and recreation ¹	2	1.3%	14	10.1%	7	4.1%
Low death and disease rates	8	5.3%	3	2.2%	5	3.0%
Tolerance for diversity	8	5.3%	3	2.2%	4	2.4%
Low level of domestic violence	3	2.0%	5	3.6%	2	1.2%
Transportation	Not asked – 2012		Not asked-2014		2	1.2%
Arts and cultural events	4	2.6%	1	0.7%	1	0.6%
Other	3	2.0%	3	2.2%	4	2.4%

¹Parks and recreation was selected significantly less often by 2018 respondents when compared with 2014.

“Other” comments:

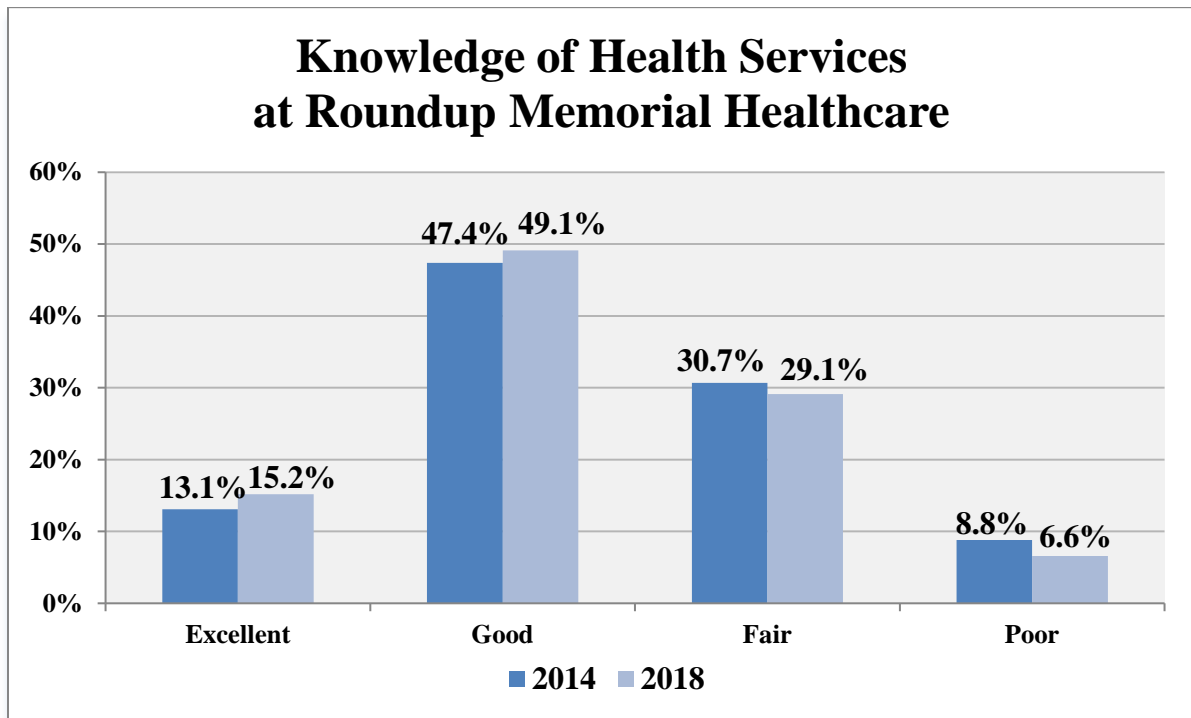
- If you put in something like a disc golf park, the kids would have something to do
- Access to mental health services
- Attention needed for family caregiver of elderly parents. I feel isolated and alone. Outside employment not an option
- Help others

Overall Awareness of Health Services (Question 4)

2018 N= 165

2014 N= 137

Respondents were asked to rate their knowledge of the health services available at Roundup Memorial Healthcare. Forty-nine percent (n=81) of respondents rated their knowledge of health services as “Good”, “Fair” was selected by 29.1% percent (n=48) and “Excellent” was selected by 15.2% (n=25) of respondents.



How Respondents Learn of Healthcare Services (Question 5)

2018 N= 169

2014 N= 139

The most frequently indicated method of learning about available services was “Word of mouth/reputation” at 65.7% (n=111). “Friends/family” was the second most frequent response at 64.5% (n=109) and the “Newspaper” was reported at 38.5% (n=65). Respondents could select more than one method, so percentages do not equal 100%.

Method	2014		2018	
	Count	Percent	Count	Percent
Word of mouth/reputation	90	64.7%	111	65.7%
Friends/family	86	61.9%	109	64.5%
Newspaper¹	37	26.6%	65	38.5%
Healthcare provider	45	32.4%	60	35.5%
Mailings/newsletter	12	8.6%	19	11.2%
Social media/Facebook	8	5.8%	16	9.5%
Radio	9	6.5%	14	8.3%
Presentations	3	2.2%	9	5.3%
Public health nurse ²	12	8.6%	5	3.0%
Website/internet	7	5.0%	5	3.0%
Other	13	9.4%	15	8.9%

¹Significantly more 2018 respondents learn about available healthcare services via the newspaper.

²Significantly fewer 2018 respondents learn about healthcare services from the public health nurse.

“Other” comments:

- Coworkers/internet
- Word of mouth
- Work (2)
- Roundup Clinic itself
- Prior personal experience on Assoc. Board
- By going there (2)
- We don't
- Observation
- My own use
- Needed to use ER (2)
- Experience

Cross Tabulation of Service Knowledge and Learning about Services

Analysis was done to assess respondents' knowledge of services available at Roundup Memorial Healthcare with how they learn about services available in their community. The chart below shows the results of the cross tabulation. How respondents learned of healthcare services was a multiple response item, thus totals do not add up to 100%.

KNOWLEDGE RATING OF ROUNDUP MEMORIAL HEALTHCARE SERVICES BY HOW RESPONDENTS LEARN ABOUT HEALTHCARE SERVICES

	Excellent	Good	Fair	Poor	Total
Word of mouth/reputation	14 (12.7%)	49 (44.5%)	38 (34.5%)	9 (8.2%)	110
Friends/family	16 (14.8%)	55 (50.9%)	33 (30.6%)	4 (3.7%)	108
Newspaper	10 (15.4%)	34 (52.3%)	20 (30.8%)	1 (1.5%)	65
Healthcare provider	17 (28.3%)	34 (56.7%)	9 (15%)		60
Mailings/newsletter	3 (15.8%)	12 (63.2%)	4 (21.1%)		19
Social media/Facebook	4 (25%)	6 (37.5%)	5 (31.3%)	1 (6.3%)	16
Radio		11 (78.6%)	2 (14.3%)	1 (7.1%)	14
Presentations	1 (11.1%)	5 (55.6%)	3 (33.3%)		9
Public health nurse	1 (20%)	2 (40%)	2 (40%)		5
Website/internet	1 (20%)	3 (60%)	1 (20%)		5
Other	3 (21.4%)	9 (64.3%)	2 (14.3%)		14

Other Community Health Resources Utilized (Question 6)

2018 N= 169

2014 N= 139

Respondents were asked which community health resources, other than the hospital or clinic, they had used in the last three years. “Pharmacy” was the most frequently utilized community health resource cited by respondents at 67.5% (n=114). “Dentist” was also a highly utilized resource at 42% (n=71) followed by “Chiropractor” at 29% (n=49). Respondents could select more than one resource, so percentages do not equal 100%.

Resource	2014		2018	
	Count	Percent	Count	Percent
Pharmacy	98	70.5%	114	67.5%
Dentist	51	36.7%	71	42.0%
Chiropractor	36	25.9%	49	29.0%
Area Agency on Aging	Not asked - 2014		47	27.8%
Optometrist	Not asked - 2014		43	25.4%
Senior center	16	11.5%	22	13.0%
VA	18	12.9%	16	9.5%
Public health	7	5.0%	11	6.5%
Mental health	4	2.9%	9	5.3%
Hospice	Not asked - 2014		4	2.4%
In home personal assistant	Not asked - 2014		3	1.8%
Other	13	9.4%	12	7.1%

“Other” comments:

- None (6)
- None. Travel to Billings
- Physical therapy
- Breast cancer mobile unit
- Health fair
- Indian Health Services
- Hospital and care center

Improvement for Community’s Access to Healthcare (Question 7)

2018 N= 169

2014 N= 139

Respondents were asked to indicate what they felt would improve their community’s access to healthcare. Fifty-six percent of respondents (n=95) reported that “More primary care providers (MD/DO)” would make the greatest improvement. Thirty-eight percent of respondents (n=64) indicated “Health costs financial assistance” would improve access and “Improved quality of care” was selected by 31.4% (n=53). Respondents could select more than one method, so percentages do not equal 100%.

Improvement	2014		2018	
	Count	Percent	Count	Percent
More primary care providers (MD/DO)	87	62.6%	95	56.2%
Health costs financial assistance	Not asked - 2014		64	37.9%
Improved quality of care	58	41.7%	53	31.4%
More specialists	36	25.9%	48	28.4%
More Nurse Practitioners/Physicians Assistants	38	27.3%	37	21.9%
Greater health education services	26	18.7%	34	20.1%
Outpatient services expanded hours	32	23.0%	34	20.1%
Transportation assistance	27	19.4%	25	14.8%
Telemedicine	10	7.2%	22	13.0%
Interpreter services-cultural sensitivity	Not asked - 2014		1	0.6%
Other	18	12.9%	15	8.9%

“Other” comments:

- Retaining good nurses
- In home risk assessment providers
- Staff professionalism and privacy
- More local mental health resources/providers (2)
- 1: Personal assistance for Seniors within Musselshell County but outside that 85-90-minute rule from Billings Hospitals. 2: Infusions for Chronic Diseases (Remicade for RA)
- Retain providers. People want to see the same person and build a relationship
- Improved quality of administration
- General practice doctors
- Not have to wait to get in
- Jobs
- More insurance providers
- Dialysis
- More information about what services are provided locally
- Better doctors

Interest in Educational Classes/Programs (Question 8)

2018 N= 169

2014 N= 139

Respondents were asked if they would be interested in any educational classes/programs if offered locally. The most highly indicated class/program was “Fitness” at 38.5% (n=65). “Weight loss” was selected by 33.1% of respondents (n=56) and “Health and wellness” with 30.8% (n=52). Respondents could select more than one method, so percentages do not equal 100%.

Educational Class/Program	2014		2018	
	Count	Percent	Count	Percent
Fitness¹	35	25.2%	65	38.5%
Weight loss	32	23.0%	56	33.1%
Health and wellness	33	23.7%	52	30.8%
Living will	22	15.8%	36	21.3%
Nutrition	17	12.2%	33	19.5%
Women's health	20	14.4%	33	19.5%
First aid/CPR	33	23.7%	30	17.8%
Alzheimer's/Dementia	21	15.1%	27	16.0%
Diabetes	25	18.0%	24	14.2%
Men's health	14	10.1%	19	11.2%
Mental health	8	5.8%	19	11.2%
Heart disease	11	7.9%	16	9.5%
Cancer	15	10.8%	15	8.9%
Smoking cessation	9	6.5%	14	8.3%
Grief counseling	5	3.6%	9	5.3%
Support groups	10	7.2%	9	5.3%
Parenting	8	5.8%	8	4.7%
Alcohol/substance abuse	5	3.6%	4	2.4%
Prenatal	5	3.6%	4	2.4%
Other	6	4.3%	4	2.4%

¹Significantly more 2018 respondents are interested in classes regarding fitness.

“Other” comments:

- Community resources
- Holistic healing/alternative medicine (like acupuncture, colonic irrigation)
- ACE - case study Child Wise Institute - Helena
- None of the above

Utilization of Preventative Services (Question 9)

2018 N= 169

2014 N= 139

Respondents were asked if they had utilized any of the preventative services listed in the past year. “Routine health checkup” was selected by 51.5% of respondents (n=87). Forty-six percent of respondents (n=77) indicated they received a “Flu shot” and 45% of respondents (n=76) received a “Routine blood pressure check.” Respondents could check all that apply, thus the percentages do not equal 100%.

Service	2014		2018	
	Count	Percent	Count	Percent
Routine health checkup	80	57.6%	87	51.5%
Flu shot	71	51.1%	77	45.6%
Routine blood pressure check	75	54.0%	76	45.0%
Cholesterol check	50	36.0%	54	32.0%
Mammography ¹	43	30.9%	34	20.1%
Immunizations	Not asked - 2012		32	18.9%
None	14	10.1%	27	16.0%
Prostate (PSA)	23	16.5%	21	12.4%
Pap smear ²	33	23.7%	19	11.2%
Colonoscopy ³	26	18.7%	17	10.1%
Children’s checkup/Well Baby	10	7.2%	11	6.5%
Other	7	5.0%	8	4.7%

¹⁻³Significantly fewer 2018 respondents had received a mammography, pap smear or colonoscopy in the past year.

“Other” comments:

- Prescriptions
- None in Roundup
- Travel to Billings for all services
- Labs
- We go to St. Vincent’s in Billings
- Endo
- Shots and meds
- Pneumonia shot

Desired Local Healthcare Services (Question 10)

2018 N= 169

2014 N= 139

Respondents were asked to indicate which additional healthcare services would they utilize if available locally. Respondents indicated the most interest in having “Massage therapy” services at 32.5% of respondents (n=55) followed by a “Alternative medicine” at 27.8% (n=47), and “Dermatology” at 20.7% (n=35). Respondents were asked to select all that apply so percentages do not equal 100%.

Service	2014		2018	
	Count	Percent	Count	Percent
Massage therapy¹	25	18.0%	55	32.5%
Alternative medicine	40	28.8%	47	27.8%
Dermatology	25	18.0%	35	20.7%
Respiratory health	16	11.5%	20	11.8%
Colonoscopy	18	12.9%	18	10.7%
Home health	14	10.1%	17	10.1%
Mammography	20	14.4%	16	9.5%
Diabetic clinic	17	12.2%	15	8.9%
OB/GYN	11	7.9%	14	8.3%
Pediatrician	12	8.6%	13	7.7%
Endocrinologist (diabetes)	17	12.2%	12	7.1%
Psychiatry	12	8.6%	12	7.1%
Cancer care	8	5.8%	8	4.7%
Other	8	5.8%	6	3.6%

¹Significantly more 2018 respondents indicated an interest in having ‘massage therapy’ available locally.

“Other” comments:

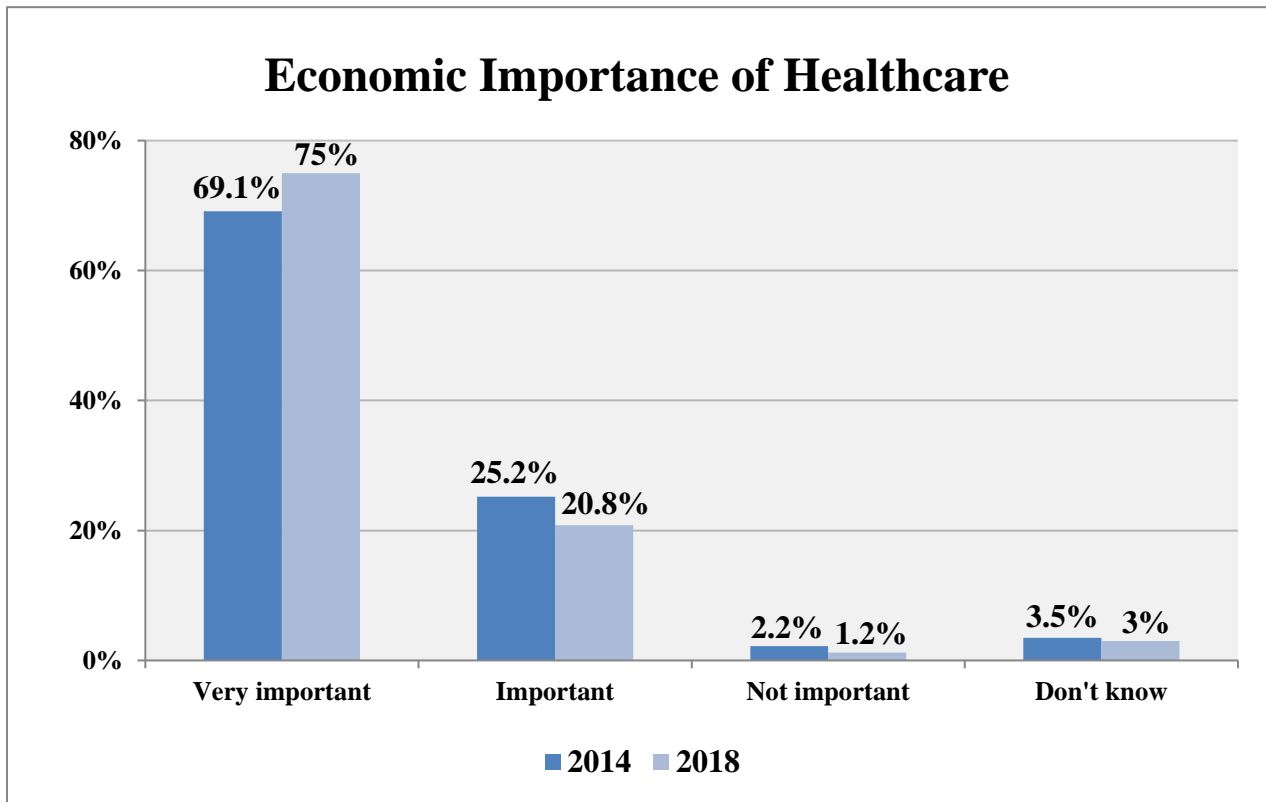
- Rheumatologist
- Infusion for chronic conditions
- Physical therapy
- VA
- Do not use local medical facility due to near death experience due to mis-diagnosis
- Pap smear

Economic Importance of Local Healthcare Providers and Services (Question 11)

2018 N= 168

2014 N= 139

The majority of respondents (75%, n=126) indicated that local healthcare providers and services (i.e. hospitals, clinics, nursing homes, assisted living, etc.) are “Very important” to the economic wellbeing of the area. Twenty-one percent of respondents (n=35) indicated they are “Important” and five respondents, or 3% indicated they “Don’t know”.



Survey Findings – Use of Healthcare Services

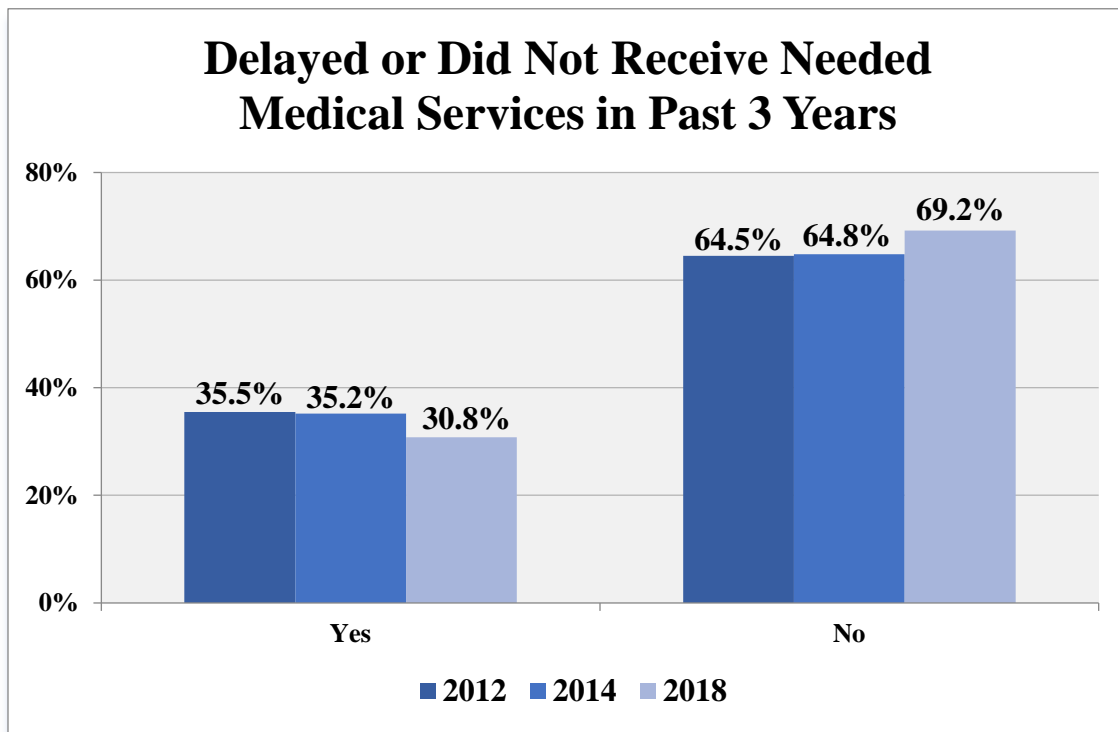
Needed/Delayed Hospital Care During the Past Three Years (Question 12)

2018 N= 169

2014 N= 125

2012 N= 141

Thirty-one percent of respondents (n=52) reported that they or a member of their household thought they needed healthcare services but did not get it or had to delay getting it. Sixty-nine percent of respondents (n=117) felt they were able to get the healthcare services they needed without delay.



Reasons for NOT Being Able to Receive Services or Delay in Receiving Healthcare Services (Question 13)

2018 N= 52

2014 N= 44

2012 N= 50

For those who indicated they were unable to receive or had to delay services (n=52), the reasons most cited were: “It costs too much” (34.6%, n=18), “Not treated with respect” (21.2%, n=11) and “Don’t like doctors/PAs” and “My insurance didn’t cover it” (19.2%, n=10 each). Respondents were asked to indicate their top three choices thus percentages do not total 100%.

Reason	2012		2014		2018	
	Count	Percent	Count	Percent	Count	Percent
It costs too much¹	29	58.0%	16	36.4%	18	34.6%
Not treated with respect	8	16.0%	10	22.7%	11	21.2%
Don't like doctors/PAs²	7	14.0%	19	43.2%	10	19.2%
My insurance didn't cover it	6	12.0%	7	15.9%	10	19.2%
Too long to wait for an appointment	13	26.0%	7	15.9%	8	15.4%
Could not get an appointment	4	8.0%	7	15.9%	7	13.5%
No insurance ³	21	42.0%	7	15.9%	7	13.5%
Office wasn't open when I could go	8	16.0%	4	9.1%	7	13.5%
Too nervous or afraid	4	8.0%	3	6.8%	5	9.6%
Transportation problem	3	6.0%	0	0.0%	4	7.7%
Unsure if services were available	6	12.0%	6	13.6%	3	5.8%
Could not get off work	3	6.0%	2	4.5%	2	3.8%
It was too far to go	2	4.0%	1	2.3%	2	3.8%
Didn't know where to go	1	2.0%	1	2.3%	1	1.9%
Had no one to care for the children	1	2.0%	0	0.0%	1	1.9%
Language barrier	0	0.0%	0	0.0%	0	0.0%
Other	12	24.0%	6	13.6%	10	19.2%

¹The percentage of respondents that selected 'It costs too much' has significantly decreased since 2012.

²Significantly fewer 2018 respondents delayed seeking health care because they 'Don't like doctors/PAs'.

³The percentage of respondents that selected 'No insurance' has significantly decreased since 2012.

“Other” comments:

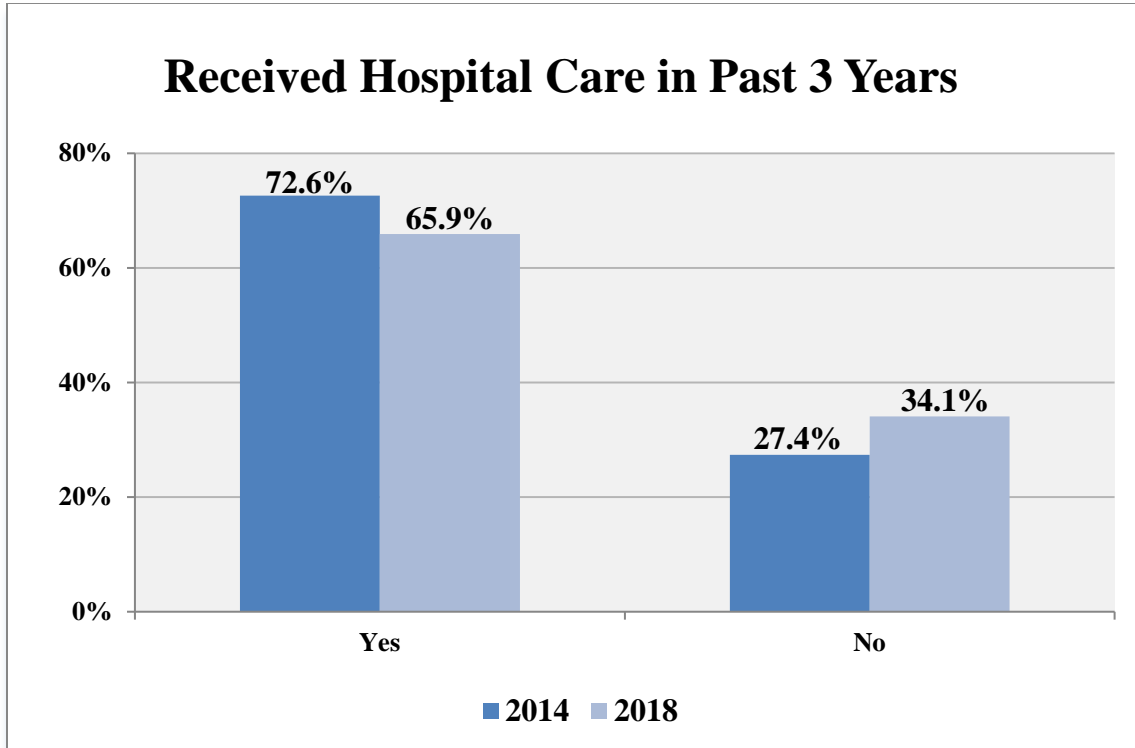
- Lack of concern regarding health questions on parents with issues, delayed quality care that resulted in transporting to Billings
- Better care in Billings, MT
- Information shared (2)
- Snowed in
- Misdiagnoses
- No time
- VA goofed up on my appointment

Hospital Care Received in the Past Three Years (Question 14)

2018 N= 167

2014 N= 135

Respondents were asked if they or someone in their household had received hospital care in the last three years. Hospitalization was quantified as hospitalized overnight, day surgery, obstetrical care, rehabilitation, radiology, or emergency care. Sixty-six percent of respondents (n=110) reported that they or a member of their family had received hospital care during the previous three years and 34.1% (n=57) had not received hospital services.



Hospital Used Most in the Past Three Years (Question 15)

2018 N= 110

2014 N= 88

Of the 110 respondents who indicated receiving hospital care in the previous three years, 44.5% (n=49) reported receiving care in Billings at Billings Clinic. Twenty-nine percent of respondents (n=32) went to Roundup Memorial Healthcare and 22.7% of respondents (n=25) utilized services in Billings from St. Vincent's.

Hospital	2014		2018	
	Count	Percent	Count	Percent
Billings (Billings Clinic)	46	52.3%	49	44.5%
Roundup Memorial Healthcare	25	28.4%	32	29.1%
Billings (St. Vincent's)	16	18.2%	25	22.7%
Harlowton	0	0.0%	0	0.0%
Lewistown	0	0.0%	0	0.0%
Other	1	1.1%	4	3.6%
TOTAL	88	100%	110	100%

“Other” comments:

- VA
- Surgery Center – Billings
- Not in MT
- Indian Health Services

Reasons for Selecting the Hospital Used (Question 16)

2018 N= 110

2014 N= 98

Of the 110 respondents who had a personal or family experience at a hospital within the past three years, the primary reason given for selecting the facility used most often was “Doctor/provider preference” at 57.6% (n=57). “Prior experience with hospital” was selected by 49.5% (n=49) and 38.4% (n=38) selected “Closest to home.” Note that respondents were asked to select the top three answers which influenced their choices; therefore, the percentages do not equal 100%.

Reason	2011		2014		2018	
	Count	Percent	Count	Percent	Count	Percent
Doctor/provider preference	Not asked - 2011		43	46.7%	57	57.6%
Prior experience with hospital	82	50.9%	48	52.2%	49	49.5%
Closest to home	74	46.0%	40	43.5%	38	38.4%
Referred by physician ¹	79	49.1%	24	26.1%	32	32.3%
Hospital’s reputation for quality	51	31.7%	25	27.2%	31	31.3%
Emergency, no choice	45	28.0%	29	31.5%	18	18.2%
Closest to work	10	6.2%	4	4.3%	5	5.1%
Recommended by family or friends	16	9.9%	5	5.4%	4	4.0%
VA/Military requirement	2	1.2%	5	5.4%	3	3.0%
Cost of care	9	5.6%	6	6.5%	2	2.0%
Required by insurance plan ²	14	8.7%	3	3.3%	2	2.0%
Other	16	9.9%	4	4.3%	6	6.1%

¹⁻²Significantly fewer 2014 and 2018 respondents selected 'referred by physician' and 'required by insurance plan.'

“Other” comments:

- Specialties not offered locally
- Didn't know where else to go. New to area
- Better overall care. I knew medical information would not be shared in community
- Children work there
- Indian Health Services

Cross Tabulation of Hospital and Residence

Analysis was done to examine where respondents utilized hospital services the most in the past three years with where they live by zip code. The chart below shows the results of the cross tabulation. Resident's zip code (place of residence) is across the top and hospital location is along the side. Winnett and Ryegate zip codes were removed from the table due to non-response.

LOCATION OF MOST OFTEN UTILIZED HOSPITAL BY RESIDENCE

	Roundup 59072	Musselshell 59059	Melstone 59054	Lavina 59046	Other	Total
Billings (Billings Clinic)	42 (43.8%)	1 (50%)	2 (40%)	1 (33.3%)	1 (100%)	47 (43.9%)
Roundup Memorial Healthcare	28 (29.2%)		3 (60%)	1 (33.3%)		32 (29.9%)
Billings (St. Vincent's)	22 (22.9%)	1 (50%)		1 (33.3%)		24 (22.4%)
Other	4 (4.2%)					4 (3.7%)
Harlowton						0
Lewistown						0
Total	96	2	5	3	1	107 (100%)

Cross Tabulation of Hospital and Reason Selected

Analysis was done to assess respondents' most utilized hospital with why they selected that hospital. The chart below shows the results of the cross tabulation. Reason hospital was selected was a multiple response item, thus totals do not add up to 100%. Hospital location is across the top of the table and reason for selection is along the side.

LOCATION OF MOST UTILIZED HOSPITAL BY REASONS HOSPITAL SELECTED

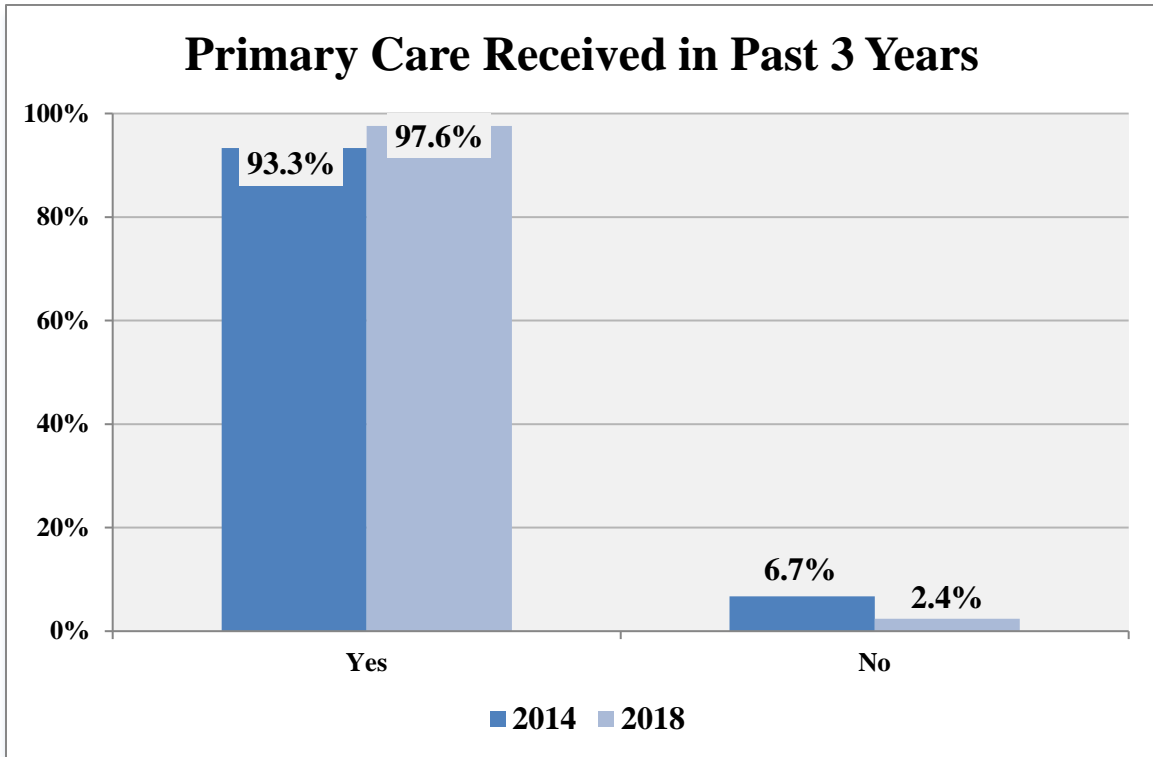
	Roundup Memorial Healthcare	Billings (Billings Clinic)	Billings (St. Vincent's)	Harlowton	Lewistown	Other	Total
Prior experience with hospital	14 (23.7%)	28 (47.5%)	17 (28.8%)				59
Hospital's reputation for quality	10 (18.2%)	31 (56.4%)	13 (23.6%)			1 (1.8%)	55
Referred by physician	5 (12.5%)	20 (50%)	14 (35%)			1 (2.5%)	40
Closest to home	25 (80.6%)	3 (9.7%)	2 (6.5%)			1 (3.2%)	31
Emergency, no choice	16 (55.2%)	7 (24.1%)	5 (17.2%)			1 (3.4%)	29
Required by insurance plan		8 (66.7%)	4 (33.3%)				12
Recommended by family or friends		6 (54.5%)	4 (36.4%)			1 (9.1%)	11
VA/Military requirement	3 (33.3%)	3 (33.3%)	2 (22.2%)			1 (11.1%)	9
Cost of care	1 (25%)	2 (50%)	1 (25%)				4
Closest to work	3 (100%)						3
Marketing/advertising							0
Other		3 (50%)	2 (33.3%)			1 (16.7%)	6

Primary Care Received in the Past Three Years (Question 17)

2018 N= 169

2014 N= 135

Ninety-eight percent of respondents (n=165) indicated they or someone in their household had been seen by a primary care provider (such as a family physician, physician assistant, or nurse practitioner) for healthcare services in the past three years. Four respondents (2.4%) indicated they or someone in their household had not.



Location of Primary Care Provider (Question 18)

2018 N= 164

2014 N= 102

Of the 165 respondents who indicated receiving primary care services in the previous three years, 36% (n=59) reported receiving care at Roundup Memorial Healthcare. Thirty percent of respondents (n=49) went to Billings Clinic and 17.1% of respondents (n=28) utilized primary care services in Billings at St. Vincent's. One of the 165 respondents who reported they had utilized primary care services in the past three years did not indicate where they received those services.

Clinic	2014		2018	
	Count	Percent	Count	Percent
Roundup Memorial Healthcare	35	31.8%	59	36.0%
Billings Clinic	38	34.5%	49	29.9%
Billings St. Vincent's	15	13.6%	28	17.1%
Billings (other) ¹	5	4.5%	18	11.0%
VA	6	5.5%	8	4.9%
Harlowton	0	0.0%	0	0.0%
Lewistown	2	1.8%	0	0.0%
Other	1	0.9%	2	1.2%

¹Significantly more 2018 respondents reported seeking primary care services at a 'Billings (other)' clinic.

"Other" comments:

- Care here
- Indian Health Services

Reasons for Selection of Primary Care Provider (Question 19)

2018 N= 165

2014 N= 126

Those respondents who indicated they or someone in their household had been seen by a primary care provider within the past three years were asked to indicate why they chose that primary care provider. “Prior experience with clinic” was the most frequently selected reason at 46.1% (n=76) followed by “Clinic’s reputation for quality” at 38.2% (n=63) and “Closest to home” at 29.1% (n=48). Respondents were asked to check all that apply so the percentages do not equal 100%.

Reason	2014		2018	
	Count	Percent	Count	Percent
Prior experience with clinic	59	46.8%	76	46.1%
Clinic’s reputation for quality	41	32.5%	63	38.2%
Closest to home	39	31.0%	48	29.1%
Appointment availability	23	18.3%	39	23.6%
Referred by physician or other provider ¹	17	13.5%	38	23.0%
Recommended by family or friends	31	24.6%	34	20.6%
Required by insurance plan	7	5.6%	18	10.9%
VA/Military requirement	10	7.9%	11	6.7%
Length of waiting room time	8	6.3%	10	6.1%
Cost of care	3	2.4%	5	3.0%
Indian Health Services	0	0.0%	1	0.6%
Other	14	11.1%	11	6.7%

¹2018 respondents were significantly more likely to select a clinic based on a referral by physician or other provider.

“Other” comments:

- Because I like the PA
- In insurance network, but specific dr. not required
- I trust her with my health care
- Specialist, OB/GYN
- Prior care
- Cardiologist specialist @ Billing Clinic not available @ Roundup Clinic
- No male care provider in Roundup
- Roundup does not have a rheumatologist
- Gone to her for a long time
- Kid's primary doctor

Cross Tabulation of Primary Care and Residence

Analysis was done to examine where respondents went most often for primary care with where they live by zip code. The chart below shows the results of the cross tabulation. Clinic location are along the side and respondent's zip codes are across the top. Ryegate zip code was removed from the table due to non-response.

LOCATION OF PRIMARY CARE PROVIDER MOST UTILIZED BY RESIDENCE

	Roundup 59072	Winnett 59087	Musselshell 59059	Melstone 59054	Lavina 59046	Other	Total
Roundup Memorial Healthcare	51 (35.9%)		2 (66.7%)	3 (60%)	1 (25%)		57 (36.1%)
Billings Clinic	41 (28.9%)	1 (33.3%)	1 (33.3%)	2 (40%)	1 (25%)	1 (100%)	47 (29.7%)
Billings St. Vincent's	24 (16.9%)	2 (66.7%)			1 (25%)		27 (17.1%)
Billings (other)	17 (12%)				1 (25%)		18 (11.4%)
VA	7 (4.9%)						7 (4.4%)
Harlowton							0
Lewistown							0
Other	2 (1.4%)						2 (1.3%)
Total	142	3	3	5	4	1	158 (100%)

Cross Tabulation of Clinic and Reason Selected

Analysis was done to examine where respondents went most often for primary care services with why they selected that clinic/provider. The chart below shows the results of the cross tabulation. Reason clinic/provider was selected was a multiple response item, thus totals do not add up to 100%. Lewistown and Harlowton were removed from the table due to non-selection.

LOCATION OF PRIMARY CARE PROVIDER BY REASONS CLINIC SELECTED

	Roundup Memorial Healthcare	Billings Clinic	Billings St. Vincent's	Billings (other)	VA	Other	Total
Clinic's reputation for quality	13 (20.6%)	24 (38.1%)	16 (25.4%)	10 (15.9%)			63
Closest to home	43 (89.6%)	2 (4.2%)	3 (6.3%)				48
Prior experience with clinic	29 (38.2%)	29 (38.2%)	9 (11.8%)	7 (7.9%)	2 (2.6%)	1 (1.3%)	46
Appointment availability	22 (56.4%)	7 (17.9%)	2 (5.1%)	6 (15.4%)	1 (2.6%)	1 (2.6%)	39
Referred by physician or other provider	2 (5.3%)	18 (47.4%)	11 (28.9%)	6 (15.8%)	1 (2.6%)		38
Recommended by family or friends	4 (11.8%)	13 (38.2%)	11 (32.4%)	6 (17.6%)			34
Required by insurance plan	5 (27.8%)	9 (50%)	3 (16.7%)	1 (5.6%)			18
VA/Military requirement		2 (18.2%)	1 (9.1%)	2 (18.2%)	6 (54.5%)		11
Length of waiting room time	3 (30%)	2 (20%)	1 (10%)	2 (20%)	1 (10%)	1 (10%)	10
Cost of care	2 (40%)				2 (40%)	1 (20%)	5
Indian Health Services						1 (100%)	1
Other	2 (18.2%)	5 (45.5%)	4 (36.4%)				11

Use of Healthcare Specialists during the Past Three Years (Question 20)

2018 N= 169

2014 N= 125

Eighty-five percent of the respondents (n=143) indicated they or a household member had seen a healthcare specialist during the past three years and 15.4% (n=26) indicated they had not.



Type of Healthcare Specialist Seen (Question 21)

2018 N= 143

2014 N= 104

The respondents (n=143) saw a wide array of healthcare specialists in the past three years. The most frequently indicated specialist was a “Dentist” at 49.7% of respondents (n=71) having utilized their services. “Cardiologist” was the second most utilized specialist at 30.8% (n=44) and “Dermatologist” was third at 30.1% (n=43). Respondents were asked to choose all that apply so percentages do not equal 100%.

Health Care Specialist	2014		2018	
	Count	Percent	Count	Percent
Dentist	47	45.2%	71	49.7%
Cardiologist	30	28.8%	44	30.8%
Dermatologist	27	26.0%	43	30.1%
Chiropractor	24	23.1%	38	26.6%
Orthopedic surgeon	25	24.0%	33	23.1%
Internal medicine	Not asked - 2014		30	21.0%
Physical therapist	19	18.3%	29	20.3%
Radiologist	22	21.2%	28	19.6%
OB/GYN	14	13.5%	25	17.5%
Ophthalmologist ¹	32	30.8%	25	17.5%
Gastroenterologist	18	17.3%	22	15.4%
General surgeon	12	11.5%	22	15.4%
ENT (ear/nose/throat)	14	13.5%	21	14.7%
Urologist	18	17.3%	20	14.0%
Neurologist	13	12.5%	19	13.3%
Pulmonologist	12	11.5%	18	12.6%
Mental health counselor	5	4.8%	16	11.2%
Podiatrist	11	10.6%	16	11.2%
Endocrinologist	7	6.7%	13	9.1%
Allergist	8	7.7%	10	7.0%
Psychiatrist (M.D.)	4	3.8%	10	7.0%
Rheumatologist	2	1.9%	10	7.0%
Audiologist	Not asked - 2014		10	7.0%
Oncologist	11	10.6%	8	5.6%
Dietician	1	1.0%	7	4.9%
Occupational therapist	4	3.8%	7	4.9%
Pediatrician ²	10	9.6%	5	3.5%
Psychologist	5	4.8%	5	3.5%

<i>Question 22 continued next page...</i>				
Neurosurgeon	8	7.7%	4	2.8%
Geriatrician	2	1.9%	2	1.4%
Social worker	4	3.8%	1	0.7%
Speech therapist	1	1.0%	1	0.7%
Substance abuse counselor	0	0%	0	0.0%
Other	6	5.8%	6	4.2%

¹⁻² 2018 respondents were significantly less likely to have been to an ophthalmologist or a pediatrician.

“Other” comments:

- Acupuncturist
- Plastic surgeon
- Concussion
- Spine and brain
- Diabetes educator
- Eye Dr.

Location of Healthcare Specialist (Question 22)

2018 N= 143

2014 N= 104

Of the 143 respondents who indicated they saw a healthcare specialist in the past three years, 58.7% (n=113) saw one at Billings Clinic. St. Vincent's specialty services were utilized by 30.1% of respondents (n=43) and "Billings (other)" was selected by 30.1% (n=43). Respondents could select more than one location; therefore, percentages do not equal 100%.

Location	2014		2018	
	Count	Percent	Count	Percent
Billings Clinic	72	69.2%	84	58.7%
St. Vincent's	33	31.7%	43	30.1%
Billings (other)¹	18	17.3%	43	30.1%
Roundup Memorial Healthcare Clinic	14	13.5%	30	21.0%
VA	8	7.7%	13	9.1%
Lewistown	0	0%	1	0.7%
Harlowton	1	1.0%	0	0.0%
Other	14	13.5%	10	7.0%

¹Significantly more 2018 respondents selected "Billings (other)".

"Other" comments:

- Roundup (2)
- Roundup dentist
- Frontier Cancer Center
- Bull Mountain Chiropractic
- Outside of MT (2)

Overall Quality of Care at Roundup Memorial Healthcare (Question 23)

Respondents were asked to rate a variety of aspects of the overall care provided at Roundup Memorial Healthcare using the scale of 4=Excellent, 3=Good, 2=Fair, 1=Poor, and Don't Know. The sums of the average scores were then calculated with Ambulance services and Mobile mammography both receiving the top average scores of 3.6 out of 4.0. The total average score was 3.2, indicating the overall services of the hospital to be "Excellent" to "Good."

2018*	Excellent (4)	Good (3)	Fair (2)	Poor (1)	Don't Know	Haven't used	No answer	N	Avg
Ambulance services	43	20	5	0	7	87	7	169	3.6
Mobile mammography	19	6	1	1	14	115	13	169	3.6
Laboratory	58	39	8	0	7	50	7	169	3.5
Physical therapy	33	15	4	2	11	92	12	169	3.5
Chronic conditions management	9	4	3	0	19	120	14	169	3.4
Radiology (x-ray/ultrasound)	30	31	5	2	7	82	12	169	3.3
Rehabilitation (skilled/swing bed)	7	7	2	0	15	124	14	169	3.3
CT scan	13	13	6	0	15	111	11	169	3.2
Emergency room	42	38	14	5	6	56	8	169	3.2
Podiatrist- visiting specialist	5	10	2	0	14	122	16	169	3.2
Clinical services	33	40	22	3	7	56	8	169	3.1
Visiting nurse	5	5	4	0	17	124	14	169	3.1
Hospital care (in-patient)	16	14	12	2	10	104	11	169	3.0
Diabetes education program	3	4	2	2	17	127	14	169	2.7
IV infusion services	6	2	8	2	13	124	14	169	2.7
Extended Care Unit (nursing home)	7	5	5	5	11	124	12	169	2.6
Audiologist	1	2	5	0	18	130	13	169	2.5
TOTAL	312	229	109	24					3.2

*Significantly more 2018 respondents rated Laboratory and Physical Therapy services as Excellent.

Continued on next page...

2014	Excellent (4)	Good (3)	Fair (2)	Poor (1)	Don't know	Haven't used	No Answer	N	Avg
Ambulance services	45	18	3	1	8	44	20	139	3.6
Laboratory	32	33	9	1	12	26	26	139	3.3
Radiology (x-ray/ultrasound)	20	30	5	3	10	47	24	139	3.2
CT Scan	10	14	2	2	17	69	25	139	3.1
Emergency room	30	33	8	8	10	33	17	139	3.1
Clinical services	22	40	19	8	7	23	20	139	2.9
Hospital care (in-patient)	9	17	7	4	13	67	22	139	2.8
Physical therapy	5	16	6	5	13	69	25	139	2.7
Rehabilitation (swing bed)	4	3	2	3	18	81	28	139	2.7
Orthopedic surgeon – visiting specialist	4	4	1	4	20	81	25	139	2.6
Extended Care Unit (nursing home)	3	7	6	4	16	77	26	139	2.5
Podiatrist – visiting specialist	2	4	2	3	18	83	27	139	2.5
Visiting nurse or community health worker	5	1	1	5	19	81	27	139	2.5
Audiologist	2	3	2	4	22	80	26	139	2.3
Diabetes education program	1	3	3	2	21	79	30	139	2.3
TOTAL	194	226	76	57					3.0

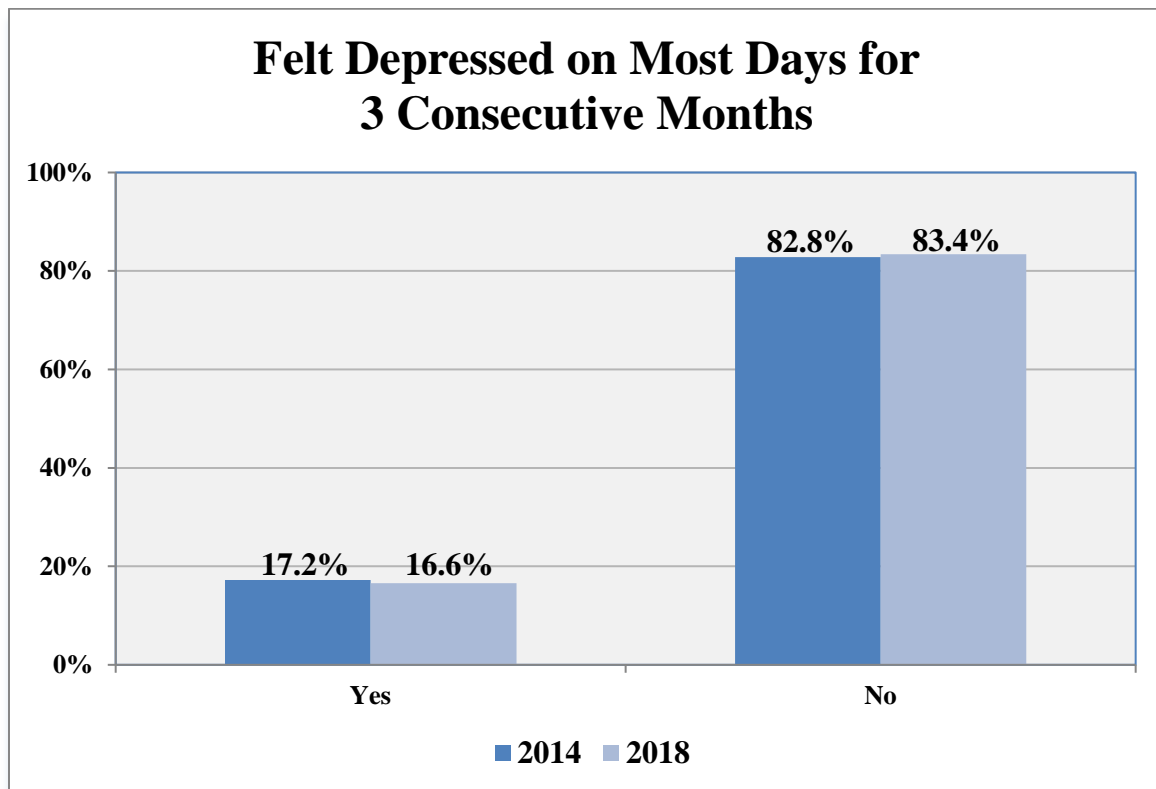
Survey Findings – Personal Health

Prevalence of Depression (Question 24)

2018 N= 163

2014 N= 134

Respondents were asked to indicate if there were periods of at least three consecutive months in the past three years where they felt depressed on most days, although they may have felt okay sometimes. Seventeen percent of respondents (n=27) indicated they had experienced periods of depression and 83.4% of respondents (n=136) indicated they had not.

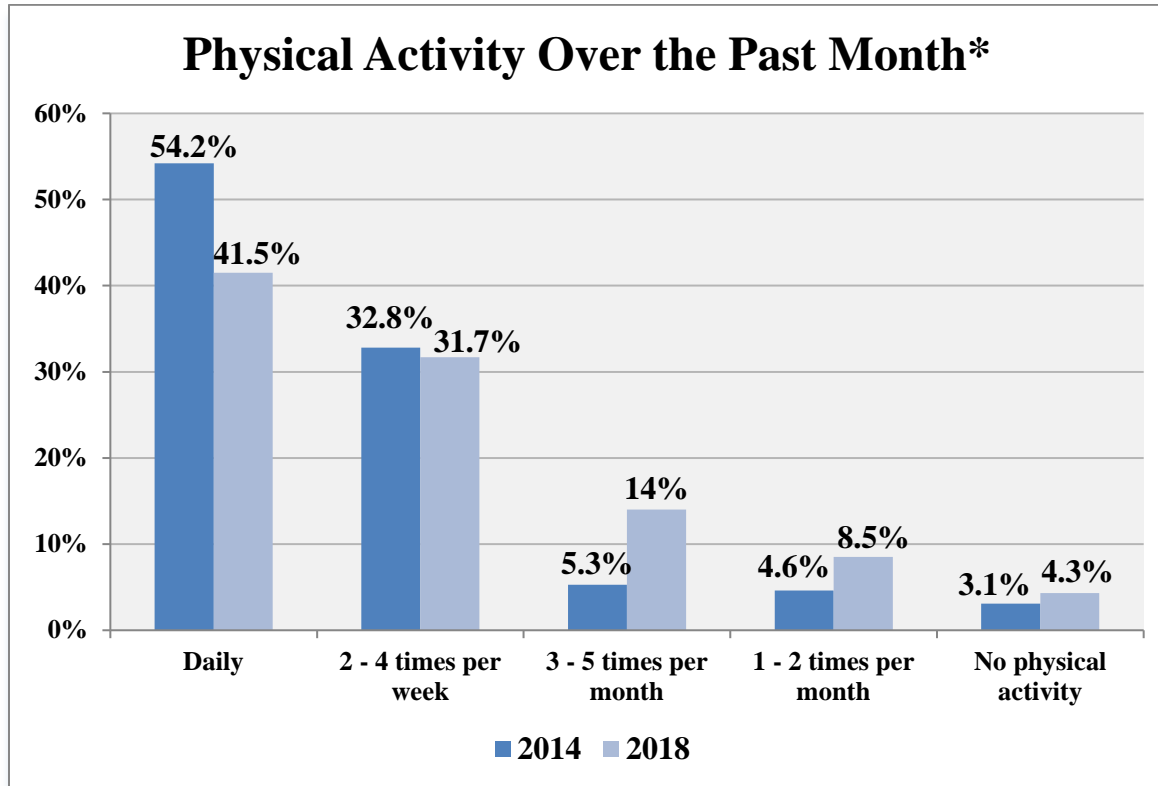


Physical Activity (Question 25)

2018 N= 164

2014 N= 131

Respondents were asked to indicate how frequently they had physical activity for at least twenty minutes over the past month. Forty-two percent of respondents (n=68) indicated they had physical activity of at least twenty minutes “Daily” and 31.7% (n=52) indicated they had physical activity “2-4 times per week.” Four percent of respondents (n=7) indicated they had “No physical activity.”



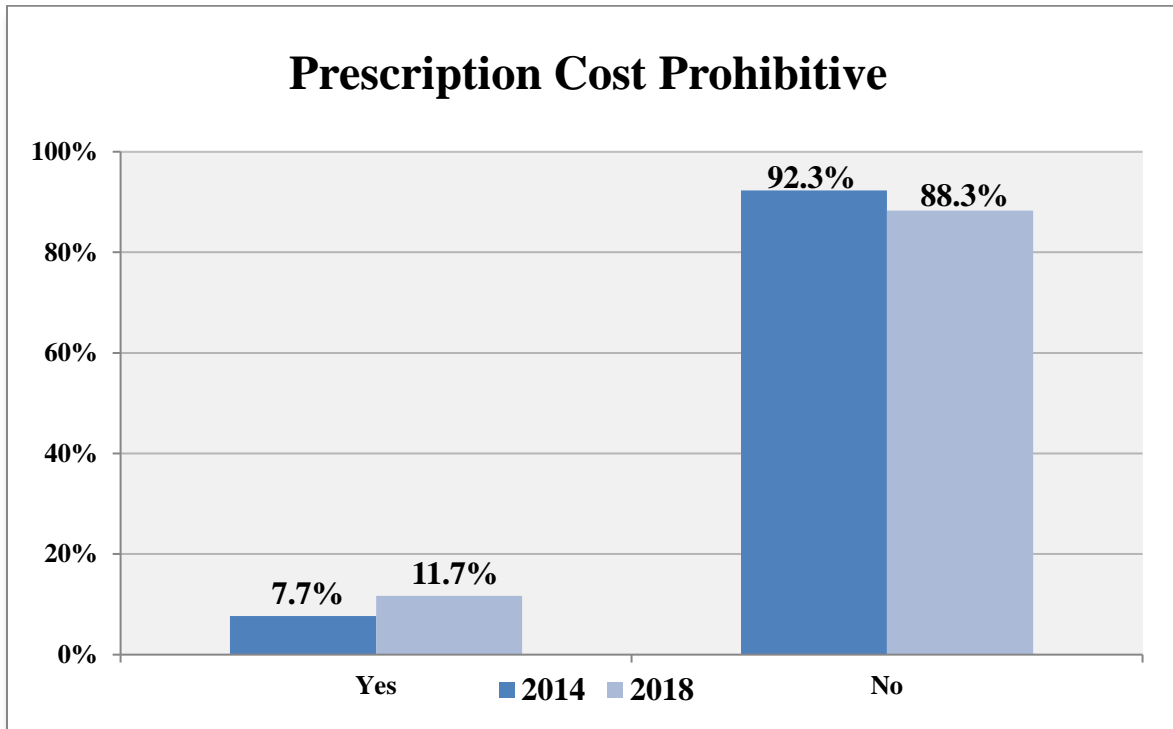
*Significantly fewer 2018 respondents reported exercising daily and more reported exercising 3-5 times per month.

Cost and Prescription Medications (Question 26)

2018 N= 163

2014 N= 130

Respondents were asked to indicate if, during the last year, medication costs had prohibited them from getting a prescription or taking their medication regularly. Twelve percent of respondents (n=19) indicated that, in the last year, cost had prohibited them from getting a prescription or taking their medication regularly. Eighty-eight percent of respondents (n=144) indicated that cost had not been prohibitive.



Survey Findings – Health Insurance

Medical Insurance (Question 27)

2018 N= 162

2014 N= 112

Respondents were asked to indicate what type of medical insurance covers the majority of their medical expenses. Thirty-five percent (n=56) indicated they have “Medicare” coverage. Twenty-six percent (n=42) indicated they have “Employer sponsored” and “Private insurance/private plan” was reported by 9.9% of respondents (n=16).

Insurance Type	2014		2018	
	Count	Percent	Count	Percent
Medicare	34	30.4%	56	34.6%
Employer sponsored	36	32.1%	42	25.9%
Private insurance/private plan	11	9.8%	16	9.9%
VA/Military	7	6.3%	10	6.2%
Medicaid	3	2.7%	9	5.6%
None/pay out of pocket	11	9.8%	8	4.9%
Health Insurance Marketplace	3	2.7%	7	4.3%
Healthy MT Kids	3	2.7%	6	3.7%
Health Savings Account	1	0.9%	3	1.9%
State/Other	1	0.9%	2	1.2%
Indian Health	0	0.0%	1	0.6%
Agricultural Corp. paid	0	0.0%	0	0.0%
Other	2	1.8%	2	1.2%
TOTAL	112	100%	162	100%

“Other” comments:

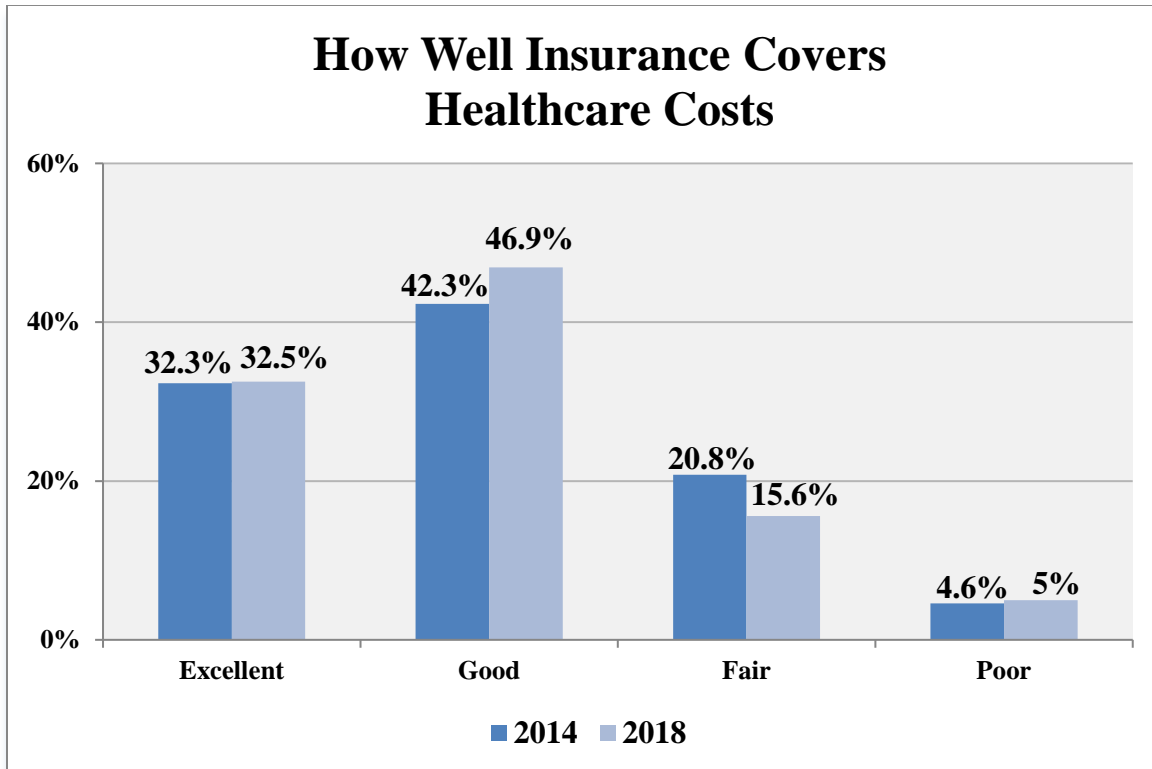
- Blue Cross-Blue Shield
- HUMANA

Insurance and Healthcare Costs (Question 28)

2018 N= 160

2014 N= 130

Respondents were asked to indicate how well they felt their health insurance covers their healthcare costs. Forty-seven percent of respondents (n=75) indicated they felt their insurance covers a “Good” amount of their healthcare costs. Thirty-three percent of respondents (n=52) indicated they felt their insurance is “Excellent” and 15.6% of respondents (n=25) indicated they felt their insurance was “Fair.”



Barriers to Having Medical Insurance (Question 29)

2018 N= 8

2014 N= 11

Those respondents who indicated they did not have medical insurance were asked to indicate why they did not. “Cannot afford to pay for medical insurance” was the top response with 75% (n=6). Respondents could select all that apply.

Reason	2014		2018	
	Count	Percent	Count	Percent
Cannot afford to pay for medical insurance	6	54.5%	6	75.0%
Employer does not offer insurance	3	27.3%	2	25.0%
Choose not to have medical insurance	4	36.4%	0	0.0%
Other	0	0%	1	12.5%

“Other” comments:

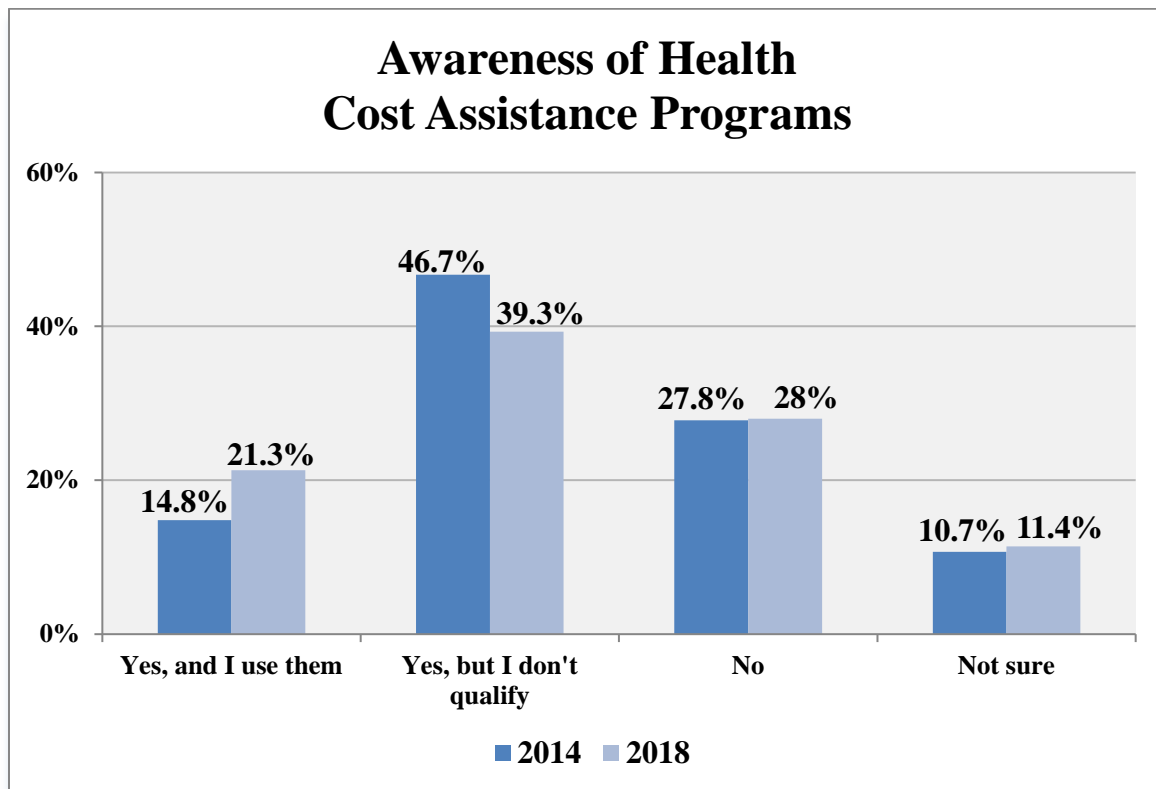
- Employer cost high

Awareness of Health Payment Programs (Question 30)

2018 N= 150

2014 N= 122

Respondents were asked to indicate their awareness of programs that help people pay for healthcare bills. Thirty-nine percent of respondents (n=59) indicated they were aware of these types of programs but did not qualify to utilize them. Twenty-eight percent (n=42) indicated that they were not aware of these programs and 21.3% of respondents (n=32) indicated they are aware of the programs and utilize them.



VI. Focus Group and Key Informant Interview Methodology

One focus group and five key informant interviews were conducted in April of 2018. Participants were identified as people living in Roundup Memorial Healthcare's service area.

Twenty-two people participated in the focus group interview and five participated in the key informant interviews. The focus group was designed to represent various consumer groups of healthcare including senior citizens and local community members. The focus group was held at the Roundup Senior Center. The meeting lasted up to 90 minutes in length. The key informant interviews lasted approximately 15 minutes in length and had similar but fewer questions than the focus group. Both focus group and key informant interviews questions can be found in Appendix H. The questions and discussions were led by Amy Royer with the Montana Office of Rural Health.

VII. Focus Group and Key Informant Interview Summary

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

Improve health of the community:

- More access to preventative health services
- More outreach about wellness and living a healthy lifestyle
- Improved access to healthy food options
- Improved drinking water quality
- Better flood control

Most important local healthcare issues:

- Alcohol and substance abuse
- High poverty rates and transient population
- Illness related to unhealthy lifestyle – obesity, diabetes, heart disease, and stroke
- Mental health issues

Opinion of hospital services:

- Participants were very satisfied with the staff and providers at RMH. They indicated that in the past, turnover of providers was a problem but that the situation has greatly improved.

Reasons for using local providers:

- Participants indicated that they feel the local providers do a great job and they like to stay local to support the hospital.
- Convenience

Opinion of local services:

- Participants felt that the senior center did a remarkable job in the community.
- Participants spoke of the lack of public health services in the community because the local health department is located in Lewistown
- Ambulance services were thought to be top notch
- Some participants indicated that they use the local pharmacy, while others travel elsewhere because they felt the prices were too high locally.

Reasons to leave the community for healthcare:

- Specialty services
- VA Services
- Grocery shopping/errands in Billings

Needed healthcare services in the community:

- Weight loss/healthy lifestyle programs in the community.
- More mental health programs and improved access to them.
- Assistance programs to help people pay for medical and dental services
- Another M.D. or D.O.
- More visiting specialist

VIII. Summary

One hundred sixty-nine surveys were completed in Roundup Memorial Healthcare's service area for a 21.9% response rate. Of the 169 returned, 55% of the respondents were female, 56.2% were between the ages of 56 and 76 years, and 45.5% reported being retired.

Respondents rated the overall quality of care at the hospital as excellent to good, scoring 3.2 out of 4.0.

Over half of the respondents (63.5%) feel the Roundup area is a "somewhat healthy" place to live. Respondents indicated their top three health concerns were: alcohol abuse/substance abuse (71%), overweight/obesity (34.9%), and cancer (24.9%), with significantly fewer 2018 respondents selecting cancer as a serious community health concern. Significantly more respondents identified tobacco use and heart disease to be a concern.

When respondents were asked which health related educational programs or classes they would be most interested in, the top choices were: Fitness (38.5%), weight loss (33.1%) and health and wellness (30.8%).

Overall, the respondents within Roundup Memorial Healthcare's service area are seeking hospital care at a rate that is typically seen in rural areas. The majority of participants appeared to have very favorable opinions of the services with most praising the care received. Participants were appreciative of the care available while identifying additional services or needs.

In summary, respondents report support for local healthcare and many prefer to seek care locally whenever possible for convenience and out of trust for local providers.

IX. Prioritization of Health Needs, Available Resources, and Implementation Planning Process

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

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

- Access to healthcare services
- Awareness of services
- Health and wellness

Roundup Memorial Healthcare will determine which needs or opportunities could be addressed considering RMH's parameters of resources and limitations. The committee will prioritize the needs/opportunities using the additional parameters of the organizational vision, mission, and/or values, as well as existing and potential community partners.

The participants will create goals to achieve through strategies and activities, as well as the general approach to meeting the stated goal (i.e. staff member responsibilities, timeline, potential community partners, anticipated impact(s), and performance/evaluation measures). This plan will be documented and posted along with the CHSD assessment report.

Resources

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

- 3RNet
- Al-Anon
- Alcoholics Anonymous
- Bountiful Baskets
- Centers for Medicaid and Medicare Services (CMS)
- Montana Department of Health and Human Services (MT DPHHS)
- Area II Agency on Aging
- Senior Center
- County Public Health
- County Sheriff's Department
- Montana Office of Rural Health and Area Health Education Center
- County Extension- Montana State University
- Performance Improvement Network (PIN)
- Mountain-Pacific Quality Health
- Veteran's Affairs
- HRDC
- Food bank
- WIC
- Roundup Mental Health Center
- St. Vincent's Mobile mammography
- Visiting specialists
- General conditions management
- Diabetes support group
- lifestyle balance group
- Chiropractor (Bull Mountain Chiropractic- Dr. Brian Bushman)
- Dentist (Elite Dental Center- Mark Rosebush, DDS)
- Optometrist (Roundup Vision Clinic- Kevin Biegel, OD)
- Fitness Center (A Healthy Life)
- Saves INC. (To help victims of domestic violence and sexual assault)
- Golden thimble (Provides clothing to community members in need)
- Narcotics Anonymous
- Smoking cessation through CMHD

X. Evaluation of Activity Impacts from Previous CHNA

Roundup Memorial Healthcare provided the Montana Office of Rural Health with an update on their Implementation Plan activities from their previous CHNA process. The RMH Board of Directors approved its previous implementation plan on June 25, 2015. The plan prioritized the following health issues:

- Improve access to healthcare services in the Roundup Memorial Healthcare service area.
- Continue to improve the quality of care provided at Roundup Memorial Healthcare.
- Increase awareness of services available at Roundup Memorial Healthcare.

Improve access to healthcare services in the Roundup Memorial Healthcare service area

- Recruited and hired one additional D.O.
- Employed strategies to maintain current primary care staff
- Improved provider satisfaction by streamlining the medication refill process
- Continued to offer continuing education opportunities for providers
- Explored the addition of visiting specialist: added a podiatrist, audiologist, pain management, and diabetes support group
- Expanded telemedicine capabilities. Now available throughout the entire facility
- Sought out grant funding to acquire e-Emergency
- Promoted monthly mammography service
- Used telemedicine to provide mental health services

Continue to improve the quality of care provided at Roundup Memorial Healthcare

- Optimized the use of Cerner EHR
- Provided additional training for RMH staff on the use of the Cerner EHR
- Attested to Meaningful Use
- Promoted the use of Cerner Patient Portal
- Explored Patient-Centered Medical Home as practice model
- Worked with Billings Clinic and St. Vincent Healthcare to develop a plan to achieve interoperability
- Improved chronic illness care

Increase awareness of services available at Roundup Memorial Healthcare

- Redesigned the RMH website
- Placed monthly articles in local newspapers
- Continued participation in radio show
- Explored additional forms of outreach to schools in RMH service area (sports physicals, etc.)
- Scheduled more open-house activities to familiarize the community with hospital and clinic services

Appendix A – Steering Committee Members

Steering Committee – Name and Organization Affiliation

1. Brad Howell- CEO, Roundup Memorial Healthcare (RMH)
2. Rachel Sisco- Executive Assistant/Public Relations and Marketing Lead, RMH
3. Kenny Davis- Roundup Herald
4. Sue Woods- Public Health Director, Central Montana Health District
5. Natalie Schaff- BPA & Teacher, Roundup High School
6. Todd Wood- Director, Area II Agency on Aging
7. Valeri Russell- Physician Assistant, RMH
8. Faith Hope Horpestad- Diabetes Educator, RMH
9. Cindy McCaffree- Secretary, Roundup Mental Health Center

Appendix B – Public Health and Populations Consultation

Public Health and Populations Consultation Worksheet

1. Public Health

- a. Sue Woods- Public Health Director, Central Montana Health District
Brad Howell- CEO, Roundup Memorial Healthcare
Valeri Russell- Physician Assistant, Roundup Memorial Healthcare
Cindy McCaffree- Roundup Mental Health Center

b. Date of Consultation

First Steering Committee Meeting: 02/20/2018
Key Informant Interview: 04/04/2018

- c. Type of Consultation (Interview, Steering Committee, Focus Group, etc.)
Steering Committee, and key informant interviews

d. Input and Recommendations from Consultation

- Immunization rates for the county are lower than the state average.
- The county has higher reported rates of no leisure time for physical activity.
- It seems like we see a lot of auto immune disease in this area.
- Respiratory illnesses and high blood pressure are really common as well.
- Mental health and chemical dependency. It's still such a stigma and it is still such a big issue.

2. Populations Consultation (a leader or representative of populations such as medically underserved, low-income, minority and/or populations with chronic disease)

Population: Low-Income, Underinsured

- a. Sue Woods- Public Health Director, Central Montana Health District
Brad Howell- CEO, Roundup Memorial Healthcare
Todd Wood- Director, Area II Agency on Aging
Faith Horpestad- Diabetes Self-Management Education and Support Quality Care Coordinator, Roundup Memorial Healthcare

b. Date of Consultation

First Steering Committee Meeting: 02/20/2018
Key Informant Interview: 04/04/2018

- c. Type of Consultation (Interview, Steering Committee, Focus Group, etc.)
Steering Committee

d. Input and Recommendations from Consultation

- The lower socio-economic status of our county really effects the ability to access healthcare services.
- Yes, I expect that a lot of people may select financial assistance (on the survey) as a way to improve access to healthcare.

- Poverty, health literacy and transportation are all issues.
- If they are on the ACA/state health plan they don't qualify for any of the medical or pharmaceutical coupons. A large portion of our population is under insured, so we offer a lot of financial assistance at the hospital. For rural facilities it is really difficult to offer these services.

Population: Seniors

a. Todd Wood- Director, Area II Agency on Aging

b. Date of Consultation

First Steering Committee Meeting: 02/20/2018

c. Type of Consultation (Interview, Steering Committee, Focus Group, etc.)

Steering Committee

d. Input and Recommendations from Consultation

- Transportation is an issue for seniors.
- There are several in home personal assistance programs.

Population: Youth

a. Chad Sealey- Superintendent of Roundup Public Schools

b. Date of Consultation

Key Informant Interview: 04/04/2018

c. Type of Consultation (Interview, Steering Committee, Focus Group, etc.)

Interview

d. Input and Recommendations from Consultation

- Continued outreach from not only the school but also the hospital, foundation, and the Central Montana Health District is needed to promote healthy lifestyles. Anything we can do to educate families on healthy behaviors, foods and lifestyles.
- We certainly see more students with higher needs in the past few years based on drug and alcohol use by their parents. Many times, they move back into the community from somewhere else.

Appendix C – Secondary Data

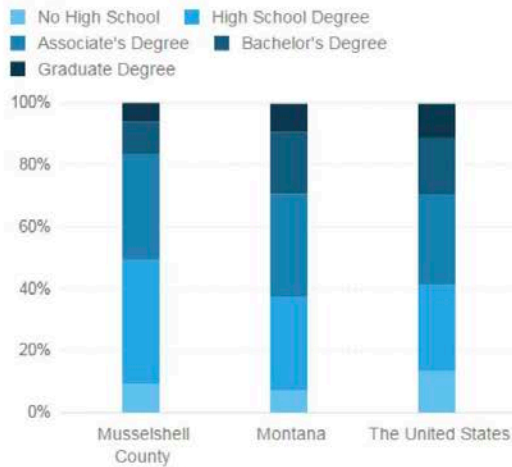
Musselshell County-CMHD
 Secondary Data Analysis
 April 24, 2018



Demographic Measure (%)		CMHD ³			Montana ²			Nation ^{1,2}					
Population- County ²		4,582			1,032,949			321,418,820					
Population Density		1.8			6.8			Not relevant					
Age-County ²		<5	18-64	65+	<5	18-64	65+	<5	18-64	65+			
		5.0%	57.1%	22.5%	6%	54.9%	17.2%	6.2%	56%	14.9%			
Gender-County ²		Male		Female		Male		Female		Male		Female	
		50.0%		50.0%		50.3%		49.7%		49.2%		50.8%	
Race/Ethnic Distribution	White	96.2%			89.2%			77.1%					
	American Indian or Alaska Native	1.3%			6.6%			1.2%					
	Other †	2.6%			5.1%			36.7%					

¹County Health Ranking, Robert Wood Johnson Foundation (2012) †Black, Asian/Pacific Islanders, Hispanic & Non-Hispanic Ancestry
²US Census Bureau (2015) ³County Health Profiles, DPPHS (2015)

Highest Degree Attained



Musselshell County

No High School	9.06%
High School Degree	40.15%
Associate's Degree	34.02%
Bachelor's Degree	10.67%
Graduate Degree	6.47%

Montana

No High School	7.56%
High School Degree	29.80%
Associate's Degree	33.57%
Bachelor's Degree	19.85%
Graduate Degree	9.22%

The United States

No High School	13.67%
High School Degree	27.95%
Associate's Degree	29.09%
Bachelor's Degree	18.27%
Graduate Degree	11.01%

⁴National Center for Education Statistics



Musselshell County-CMHD

Secondary Data Analysis

April 24, 2018

Socioeconomic Measures (%)	County ^{1,2}	Montana ^{1,2,5}	Nation ^{2,5,6,7,8}
Median Income	\$39,517	\$46,766	\$53,482
Unemployment Rate	4.2%	4.1%	4.9%
Persons Below Poverty Level	17.7%	14.6%	13.5%
Uninsured Adults (Age <65)	20%	17%	13.3%
Uninsured Children (Age <18)	N/A	11.0%	5.5%
Children in Poverty	28%	19%	21%

¹County Health Ranking, Robert Wood Johnson Foundation (2017) ⁶Center for Disease Control and Prevention (CDC), Health Insurance (2014)

²US Census Bureau (2015)

⁷Bureau of Labor Statistics (August 2016)

⁵Montana Dept of Labor and Industry, Research & Analysis Bureau (August 2015) ⁸National Center for Children in Poverty

Maternal Child Health ³	CMHD	Montana
<i>Births</i> <i>Between 2011-2013</i>	604	35,881
<i>Born less than 37 weeks</i>	9.1%	9.1%
<i>Teen Birth Rate (females age 15-19)-County</i> <i>Per 1,000 years 2009-2013</i>	N/A	32.0
<i>Smoking during pregnancy</i>	16.8%	16.3%
<i>Receiving WIC</i>	30.3%	34.6%
<i>Children (2-5 years of age) overweight or obese</i>	25.7%	27.9%

³County Health Profiles, DPPHS (2015)

Behavioral Health	County ^{1,3}	Montana ^{1,3,9}
<i>Childhood Immunization Up-To-Date (UTD) %</i> <i>Coverage *- CMHD</i>	53.6%	65.6%
<i>Tobacco Use</i>	18%	19%
<i>Alcohol Use</i> <i>(binge + heavy drinking)</i>	19%	22%
<i>Obesity</i>	28%	25%
<i>Poor Mental Health Days (Past 30 days)</i>	3.5	3.6
<i>No Leisure time for physical activity</i>	29%	20%

¹County Health Ranking, Robert Wood Johnson Foundation (2017)

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

³County Health Profiles, DPPHS (2015)

⁹Center for Disease Control and Prevention (CDC), National Vital Statistics (2014)

Communicable Diseases (per 100,000 people) ⁹	CMHD	Montana
<i>Chlamydia</i>	133.9	366.24
<i>Hepatitis C</i>	84.6	122.95
<i>Pertussis</i>	38.5	44.60

⁹County Health Profiles, DPPHS (2015)

Musselshell County-CMHD
 Secondary Data Analysis
 April 24, 2018

<i>Chronic Disease Inpatient Admissions³</i>	CMHD	Montana
<i>Chronic Obstructive Pulmonary Disease (COPD) Per 100,000 population</i>	664.2	716.8
<i>Diabetes Per 100,000 population</i>	781.0	822.5
<i>Cardiovascular Disease Per 100,000 population</i>	751.5	746.7

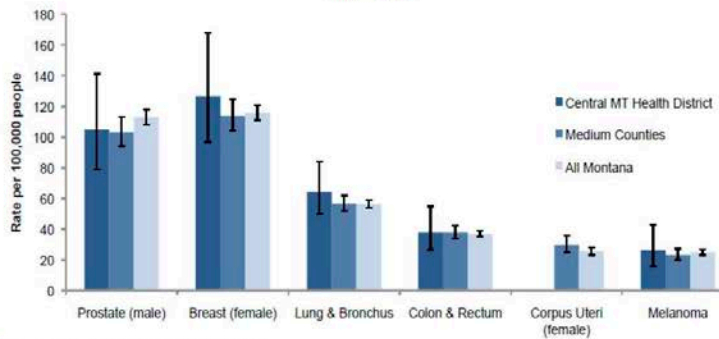
³ County Health Profiles, DPPHS (2015)

Cancer Prevalence	CMHD ³	Montana ³	Nation ¹⁰
All Sites Cancer	440.2	439.8	448.7

³ County Health Profiles, DPPHS (2015)

¹⁰ Center for Disease Control and Prevention (CDC) (2014)

Age-Adjusted Cancer Incidence Rate by Cancer Site, Montana, 2011-2013



³ County Health Profiles, DPPHS (2015)

Mortality ^{9,11}	Montana	Nation
<i>Suicide Rate per 100,000 population</i>	23.8	12.9
<i>Unintentional Injury Death Rate per 100,000 population</i>	56.8	41.3
<i>Pneumonia/Influenza Mortality per 100,000 population</i>	13.7	15.1
<i>Diabetes Mellitus² per 100,000 population</i>	24.4	23.9
<i>Leading Causes of Death</i>	1. Heart Disease 2. Cancer 3. CLRD*	1. Heart Disease 2. Cancer 3. CLRD*

⁹ Center for Disease Control and Prevention (CDC), National Vital Statistics (2014)

¹¹ Kaiser State Health Facts, National Diabetes Death Rate (2014)

*Chronic Lower Respiratory Disease

Appendix D – Survey Cover Letter & Web Postcard



Roundup Memorial Healthcare

March 23rd, 2018

Dear [LASTNAME] household:

**Participate in our Community Health Needs Assessment survey for a chance to
WIN a \$50 gas card!**

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

*Your name has been randomly selected as a resident who lives in the Roundup Memorial Healthcare service area. The survey covers topics such as: use of health care services, awareness of services, community health, health insurance and demographics. We know your time is valuable so we have made an effort to keep the survey to about 15 minutes. **Participating in this survey is completely voluntary and your identity and answers will remain confidential.** Please note that we cannot guarantee confidentiality for any information you choose to share with others in your community.*

You are probably aware of many challenges rural citizens face related to health care, such as access to services and affordability. However, by completing the enclosed survey, you can help guide Roundup Memorial Healthcare in developing comprehensive and affordable health care services to our area residents.

- 1. Due date to complete survey: April 13th**
- 2. Complete the enclosed survey and return it in the envelope provided - no stamp needed. OR visit helpslab.montana.edu to complete the survey online. Access code: [CODED].**
- 3. The winning number will be posted the week of April 16th**

The winning number for the \$50 gas card will be announced in the Roundup Record Tribune and Winnett Times and the Roundup Herald as well as on the Roundup Memorial Healthcare website and Facebook page the week of April 16th. Roundup Memorial Healthcare is offering you this chance to win this prize as a thank you for completing the survey.

All survey responses will go to the HELPS Lab at Montana State University in Bozeman, Montana, the organization that is assisting MORH with this project. If you have any questions about the survey, please call Natalie Claiborne at 406-994-6001. We believe, with your help, we can continue to improve health care services in our region.

Thank you for your assistance. We appreciate your time.

Sincerely,

Bradley Howell, CEO

Hospital + 1202 Third Street West + PO Box 40 + Roundup, MT 59072 + 406-323-2301 + Fax 406-323-3681

Dear [LASTNAME] household,

Roundup Memorial Healthcare is partnering with the Montana Office of Rural Health (MORH) to assess the health needs of our community. We need information from a wide range of people to assist in planning our programs, services, and facilities. You have been randomly selected to participate. This opportunity is limited to one adult in your household. The average time to complete the survey is about 10-15 minutes. Your help is critical in determining health priorities and future needs. Participation in this survey is completely voluntary, and your confidential responses will not be tied to you as an individual.

You will automatically be entered into a raffle for a \$50 gas card upon submitting the survey. You can access the survey at helpslab.montana.edu, the main page of the HELPS Lab at MSU. Click on "Current Surveys" and then choose the rural health survey for our community. Your individualized access code is [ACCESS CODE]. Feel free to call the Montana Office of Rural Health at (406) 994-6001 if you have any difficulty or have any questions.

Thank you for your assistance. We appreciate your time.

- Bradley Howell, CEO

Roundup Memorial Healthcare



Appendix E – Survey Instrument

Community Health Services Development Survey Roundup, Montana [CODED]



INSTRUCTIONS: Please complete the survey by marking the appropriate boxes and then return it in the enclosed postage-paid envelope. If you need assistance filling out this survey, please contact the Montana Office of Rural Health at 406-994-6001. Participation is voluntary. You can choose not to answer any question and can stop at any time.

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

- Very healthy Healthy Somewhat healthy Unhealthy Very unhealthy

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

- | | | |
|--|---|--|
| <input type="checkbox"/> Alcohol abuse/substance abuse | <input type="checkbox"/> Domestic violence | <input type="checkbox"/> Overweight/obesity |
| <input type="checkbox"/> Autoimmune disorders | <input type="checkbox"/> Heart disease | <input type="checkbox"/> Stroke |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Recreation-related accidents/injuries |
| <input type="checkbox"/> Child abuse/neglect | <input type="checkbox"/> Lack of access to healthcare | <input type="checkbox"/> Tobacco use |
| <input type="checkbox"/> COPD/Asthma/
respiratory disorders | <input type="checkbox"/> Lack of dental care | <input type="checkbox"/> Work related accidents/injuries |
| <input type="checkbox"/> Depression/anxiety | <input type="checkbox"/> Lack of exercise | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Mental health issues | |
| | <input type="checkbox"/> Motor vehicle accidents | |

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

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

4. How do you rate your knowledge of the health services that are available at Roundup Memorial Healthcare?

- Excellent Good Fair Poor

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

- | | | |
|--|--|---|
| <input type="checkbox"/> Friends/family | <input type="checkbox"/> Presentations | <input type="checkbox"/> Word of mouth/reputation |
| <input type="checkbox"/> Healthcare provider | <input type="checkbox"/> Public health nurse | <input type="checkbox"/> Website/internet |
| <input type="checkbox"/> Mailings/newsletter | <input type="checkbox"/> Radio | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Social media/Facebook | |

Turn to BACK of page to continue

1

6. Which community health resources, other than the hospital or clinic, have you used in the last three years? (Select ALL that apply)
- | | | |
|---|---|--|
| <input type="checkbox"/> Area Agency on Aging | <input type="checkbox"/> In home personal assistant | <input type="checkbox"/> Public health |
| <input type="checkbox"/> Chiropractor | <input type="checkbox"/> Mental health | <input type="checkbox"/> Senior center |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Optometrist | <input type="checkbox"/> Veterans Affairs (VA) |
| <input type="checkbox"/> Hospice | <input type="checkbox"/> Pharmacy | <input type="checkbox"/> Other: _____ |
7. In your opinion, what would improve our community's access to healthcare? (Select ALL that apply)
- | | |
|--|---|
| <input type="checkbox"/> Health costs financial assistance | <input type="checkbox"/> More specialists |
| <input type="checkbox"/> Greater health education services | <input type="checkbox"/> Outpatient services expanded hours |
| <input type="checkbox"/> Improved quality of care | <input type="checkbox"/> Telemedicine |
| <input type="checkbox"/> Interpreter services-cultural sensitivity | <input type="checkbox"/> Transportation assistance |
| <input type="checkbox"/> More primary care providers (MD/DO) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> More Nurse Practitioners/Physician Assistants | |
8. If any of the following classes/programs were made available to the community, which would you be most interested in attending? (Select ALL that apply)
- | | | |
|---|--|--|
| <input type="checkbox"/> Alcohol/substance abuse | <input type="checkbox"/> Health and wellness | <input type="checkbox"/> Prenatal |
| <input type="checkbox"/> Alzheimer's/Dementia | <input type="checkbox"/> Heart disease | <input type="checkbox"/> Smoking cessation |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Living will | <input type="checkbox"/> Support groups |
| <input type="checkbox"/> Diabetes/diabetes prevention | <input type="checkbox"/> Men's health | <input type="checkbox"/> Weight loss |
| <input type="checkbox"/> First aid/CPR | <input type="checkbox"/> Mental health | <input type="checkbox"/> Women's health |
| <input type="checkbox"/> Fitness | <input type="checkbox"/> Nutrition | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Grief counseling | <input type="checkbox"/> Parenting | |
9. Which of the following preventative services have you used in the past year? (Select ALL that apply)
- | | | |
|---|---|---|
| <input type="checkbox"/> Children's checkup/Well baby | <input type="checkbox"/> Immunizations | <input type="checkbox"/> Routine blood pressure check |
| <input type="checkbox"/> Cholesterol check | <input type="checkbox"/> Mammography | <input type="checkbox"/> Routine health checkup |
| <input type="checkbox"/> Colonoscopy | <input type="checkbox"/> Pap smear | <input type="checkbox"/> None |
| <input type="checkbox"/> Flu shot | <input type="checkbox"/> Prostate (PSA) | <input type="checkbox"/> Other: _____ |
10. What additional healthcare services would you use if available locally? (Select ALL that apply)
- | | | |
|---|---|---|
| <input type="checkbox"/> Alternative Medicine | <input type="checkbox"/> Endocrinologist (diabetes) | <input type="checkbox"/> Pediatrician |
| <input type="checkbox"/> Cancer care | <input type="checkbox"/> Home health | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Colonoscopy | <input type="checkbox"/> Mammography | <input type="checkbox"/> Respiratory health |
| <input type="checkbox"/> Diabetic clinic | <input type="checkbox"/> Massage therapy | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Dermatology | <input type="checkbox"/> OB/GYN | |
11. How important are local healthcare providers and services (i.e.: hospitals, clinics, nursing homes, assisted living, etc.) to the economic well-being of the area?
- Very important Important Not important Don't know
12. In the past three years, was there a time when you or a member of your household thought you needed healthcare services but did NOT get or delayed getting medical services?
- Yes No (If no, skip to question 14)

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

- | | | |
|--|---|--|
| <input type="checkbox"/> Could not get an appointment | <input type="checkbox"/> It was too far to go | <input type="checkbox"/> Too long to wait for an appointment |
| <input type="checkbox"/> Could not get off work | <input type="checkbox"/> Language barrier | <input type="checkbox"/> Too nervous or afraid |
| <input type="checkbox"/> Didn't know where to go | <input type="checkbox"/> My insurance didn't cover it | <input type="checkbox"/> Transportation problem |
| <input type="checkbox"/> Don't like doctors/PAs | <input type="checkbox"/> No insurance | <input type="checkbox"/> Unsure if services were available |
| <input type="checkbox"/> Had no one to care for the children | <input type="checkbox"/> Not treated with respect | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> It costs too much | <input type="checkbox"/> Office wasn't open when I could go | |

14. In the past three years, has anyone in your household received care in a hospital (e.g., hospitalized overnight, day surgery, obstetrical care, rehabilitation, radiology or emergency care)?

- Yes No (If no, skip to question 17)

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

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Roundup Memorial Healthcare | <input type="checkbox"/> Billings (St. Vincent's) | <input type="checkbox"/> Lewistown |
| <input type="checkbox"/> Harlowton | <input type="checkbox"/> Billings (Billings Clinic) | <input type="checkbox"/> Other: _____ |

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

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

17. In the past three years, have you or a household member seen a primary healthcare provider, such as a family physician, physician assistant or nurse practitioner for healthcare services?

- Yes No (If no, skip to question 20)

18. Where was that primary healthcare provider that you used most frequently located? (Select ONLY 1)

- | | | |
|--|---|--|
| <input type="checkbox"/> Roundup Memorial Healthcare | <input type="checkbox"/> Billings (other) | <input type="checkbox"/> Veterans Affairs (VA) |
| <input type="checkbox"/> Billings Clinic | <input type="checkbox"/> Harlowtown | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Billings St. Vincent's | <input type="checkbox"/> Lewistown | |

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

- | | |
|--|--|
| <input type="checkbox"/> Appointment availability | <input type="checkbox"/> Prior experience with clinic |
| <input type="checkbox"/> Clinic's reputation for quality | <input type="checkbox"/> Recommended by family or friends |
| <input type="checkbox"/> Closest to home | <input type="checkbox"/> Referred by physician or other provider |
| <input type="checkbox"/> Cost of care | <input type="checkbox"/> Required by insurance plan |
| <input type="checkbox"/> Indian Health Services | <input type="checkbox"/> VA/Military requirement |
| <input type="checkbox"/> Length of waiting room time | <input type="checkbox"/> Other: _____ |

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

- Yes No (If no, skip to question 23)

Turn to BACK of page to continue

3

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

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

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

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Roundup Memorial Healthcare | <input type="checkbox"/> Billings (other) | <input type="checkbox"/> VA |
| <input type="checkbox"/> Billings Clinic | <input type="checkbox"/> Lewistown | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> St. Vincent's | <input type="checkbox"/> Harlowtown | |

23. The following services are available at Roundup Memorial Healthcare. Please rate the overall quality for each service by circling your answer. (Please circle N/A if you have not used the service)

	Excellent	Good	Fair	Poor	Haven't used	Don't Know
Ambulance services	4	3	2	1	N/A	DK
Audiologist	4	3	2	1	N/A	DK
Chronic conditions management	4	3	2	1	N/A	DK
Clinical services	4	3	2	1	N/A	DK
CT Scan	4	3	2	1	N/A	DK
Diabetes education program	4	3	2	1	N/A	DK
Emergency room	4	3	2	1	N/A	DK
Extended Care Unit (nursing home)	4	3	2	1	N/A	DK
Hospital care (in-patient)	4	3	2	1	N/A	DK
IV infusion services	4	3	2	1	N/A	DK
Laboratory	4	3	2	1	N/A	DK
Mobile mammography	4	3	2	1	N/A	DK
Physical therapy	4	3	2	1	N/A	DK
Podiatrist – visiting specialist	4	3	2	1	N/A	DK
Radiology (x-ray/ultrasound)	4	3	2	1	N/A	DK
Rehabilitation (skilled/swing bed)	4	3	2	1	N/A	DK
Visiting nurse	4	3	2	1	N/A	DK

24. In the past three years, have there been periods of at least three consecutive months where you felt depressed on most days?
 Yes No
25. Over the past month, how often have you had physical activity for at least 20 minutes?
 Daily
 2-4 times per week
 3-5 times per month
 1-2 times per month
 No physical activity
26. Has cost prohibited you from getting a prescription or taking your medication regularly?
 Yes No
27. What type of medical insurance covers the majority of your household's medical expenses? (Select ONLY 1)
 Agricultural Corp. paid Indian Health VA/military
 Employer sponsored Medicaid None/pay out of pocket
 Health Insurance Marketplace Medicare Other: _____
 Health Savings Account Private insurance/private plan
 Healthy MT Kids State plan
28. How well do you feel your health insurance covers your healthcare costs?
 Excellent Good Fair Poor
29. If you do NOT have medical insurance, why? (Select ALL that apply)
 Can't afford to pay for medical insurance Choose not to have medical insurance
 Employer does not offer insurance Other: _____
30. Are you aware of programs that help people pay for healthcare expenses?
 Yes, and I use them Yes, but I do not qualify No Not sure

Demographics

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

31. Where do you currently live, by zip code?
 59072 Roundup 59054 Melstone
 59087 Winnett 59046 Lavina
 59059 Musselshell Other: _____
 59074 Ryegate
32. What is your gender?
 Male Female

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5

33. What age range represents you?

18-25

46-55

76-85

26-35

56-65

86+

36-45

66-75

34. What is your employment status?

Work full time

Student

Not currently seeking employment

Work part time

Collect disability

Other: _____

Retired

Unemployed, but looking

[CODED]

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

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

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

Appendix F – Responses to Other and Comments

2. In the following list, what do you think are the three most serious health concerns in our community?

- There is nothing for the kids to do. They have to go to Billings to do anything fun.
- Narcotics
- Water quality
- Opioids

3. Select the three items below that you believe are most important for a healthy community:

- If you put in something like a disc golf park, the kids would have something to do
- Access to mental health services
- Attention needed for family caregiver of elderly parents. I feel isolated and alone. Outside employment not an option
- Help others

5. How do you learn about the health services available in our community?

- Coworkers/internet
- Word of mouth
- Work (2)
- Roundup Clinic itself
- Prior personal experience on Assoc. Board
- By going there (2)
- We don't
- Observation
- My own use
- Needed to use ER (2)
- Experience

6. Which community health resources, other than the hospital or clinic, have you used in the last three years?

- None (6)
- None. Travel to Billings
- Physical therapy
- Breast cancer mobile unit
- Health fair
- Indian Health Services
- Hospital and care center

7. In your opinion, what would improve our community's access to healthcare?

- Retaining good nurses
- In home risk assessment providers
- Staff professionalism and privacy
- More local mental health resources/providers (2)
- 1: Personal assistance for Seniors within Musselshell County but outside that 85-90-minute rule from Billings Hospitals. 2: Infusions for Chronic Diseases (Remicade for RA)

- Retain providers. People want to see the same person and build a relationship
- Improved quality of administration
- General practice doctors
- Not have to wait to get in
- Jobs
- More insurance providers
- Dialysis
- More information about what services are provided locally
- Better doctors

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

- Community resources
- Holistic healing/alternative medicine (like acupuncture, colonic irrigation)
- ACE - case study Child Wise Institute - Helena
- None of the above

9. Which of the following preventative services have you used in the past year?

- Prescriptions
- None in Roundup
- Travel to Billings for all services
- Labs
- We go to St. Vincent's in Billings
- Endo
- Shots and meds
- Pneumonia shot

10. What additional healthcare services would you use if available locally?

- Rheumatologist
- Infusion for chronic conditions
- Physical therapy
- VA
- Do not use local medical facility due to near death experience due to mis-diagnosis
- Pap smear

13. If yes, what were the three most important reasons why you did not receive healthcare services?

- Lack of concern regarding health questions on parents with issues, delayed quality care that resulted in transporting to Billings
- Better care in Billings, MT
- Information shared (2)
- Snowed in
- Misdiagnoses
- No time
- VA goofed up on my appointment

15. If yes, which hospital did your household use the MOST for hospital care?
- VA
 - Surgery Center – Billings
 - Not in MT
 - Indian Health Services
16. Thinking about the hospital you were at most frequently, what were the three most important reasons for selecting that hospital?
- Specialties not offered locally
 - Didn't know where else to go. New to area
 - Better overall care. I knew medical information would not be shared in community
 - Children work there
 - Indian Health Services
18. Where was that primary healthcare provider located?
- Care here
 - Indian Health Services
19. Why did you select the primary care provider you are currently seeing?
- Because I like the PA
 - In insurance network, but specific dr. not required
 - I trust her with my health care
 - Specialist, OB/GYN
 - Prior care
 - Cardiologist specialist @ Billing Clinic not available @ Roundup Clinic
 - No male care provider in Roundup
 - Roundup does not have a rheumatologist
 - Gone to her for a long time
 - Kid's primary doctor
21. What type of healthcare specialist was seen?
- Acupuncturist
 - Plastic surgeon
 - Concussion
 - Spine and brain
 - Diabetes educator
 - Eye Dr.
22. Where was the healthcare specialists seen?
- Roundup (2)
 - Roundup dentist
 - Frontier Cancer Center
 - Bull Mountain Chiropractic
 - Outside of MT (2)

27. What type of medical insurance covers the majority of your household's medical expenses?

- Blue Cross-Blue Shield
- HUMANA

29. If you do NOT have medical insurance, why?

- Employer cost high

31. Where do you currently live by zip code?

- 59102

34. What is your employment status?

- Self-employed (2)
- Semi-retired. Work as much as I am physically able to
- Disabled vet
- Caretaker of parent

Appendix G –Focus Group and Key Informant Interview Questions

Focus Groups

1. What would make this community a healthier place to live?
2. What do you think are the most important local healthcare issues? (Probe question: What do you think are the biggest issues facing local healthcare services?)
3. We are now going to ask you for your views about the hospital. What do you think of the hospital in terms of:
 - Quality of care
 - Number of services
 - Hospital staff (style of care, competence)
 - Hospital board and leadership (good leaders, trustworthy)
 - Business office
 - Condition of facility and equipment
 - Financial health of the hospital
 - Cost
 - Office/clinic staff
 - Availability
4. Are any of the local providers your personal provider or personal provider to your family members? Why?
5. What do you think about these local services:
 - Emergency Room
 - Ambulance service
 - Healthcare services for Senior Citizens
 - Public/County Health Department
 - Healthcare services for low-income individuals/families
 - Nursing Home/Assisted Living Facility
 - Pharmacy
6. Why might people leave the community for healthcare?
7. What other healthcare services are needed in the community?

Key Informant Interview

1. What would make your community a healthier place to live?
2. What do you think are the most important local healthcare issues?
3. What other healthcare services are needed in the community?

Appendix H – Focus Group and Key Informant Interview Notes

Focus Group

Monday, April 2, 2018 – 12:00 pm-1:00 pm – Roundup Senior Center – Roundup, MT

22 participants (12 male, 10 female)

1. What would make this community a healthier place to live?
 - Better water, there is too much salt in the water especially for someone who has diet restrictions.
 - The water is rust color too.
 - Better flood control. We have a serious problem with flooding here.

2. What do you think are the most important local healthcare issues?
 - Illnesses associated with an older population.
 - Tax burden from the new school.
 - Drug use.
 - We don't have a lot of moisture so a lot of respiratory issues. A lot of asthma.
 - Road safety.

3. What do you think of the hospital in terms of:
 - Quality of Care
 - Awesome.
 - It's wonderful, no complaints.
 - We're glad it's there.
 - They're doing more with the VA now so that's good.
 - Couple times I wasn't happy about something, but I complained, and they fixed it.

Number of Services

- It's gotten a lot better.
- They got Faith there and she works with diabetics and she does a lot of services.
- They're doing great.
- PT is getting better. We just need more equipment.

Hospital Staff

- PA's are really good but we're losing one. Shell be back once a week.
- I'm very satisfied. I wouldn't do major things there. I only use them for minor things.
- They did great with my dad. They aren't afraid to refer either.

Hospital Board and Leadership

- I don't know them at all.
- Agreed, I think I only know one person on the board.

Business Office

- They're very helpful.
- They send bills through Great Falls
- Mine was messed up and she (the billing office) straightened it out.
- The lady I talked to fixed mine too. I was impressed.

Condition of Facility and Equipment

- They have hospital beds in the nursing home, so they can bring them right to the hospital.
- They need more new beds and they don't have any new things.
- The facility is actually really good.
- It's really clean.

Financial Health of the Hospital

- I don't know.
- They're doing fine for where they've been.
- They're affiliated with Billings Clinic
- We need cohesiveness between medical records between here and Billings Clinic.

Cost

- It's all expensive but it's expensive everywhere.

Office/Clinic Staff

- *Not asked.*

Availability

- They make you come 30 minutes early and that's not possible for working people.
- They will cancel your appointment if you don't get there 30 minutes early.
- Why can't they ask people to arrive only 10 minutes early?

4. Are any of the local providers your personal provider or personal provider to your family members? Why?

- Yes, It's easier.
- I think they do a good job.
- Convience and to support the hospital.

5. What do you think about these local services:

Emergency Room

- *Not asked.*

Ambulance Service

- They're good
- No complaints. They come when you need them.

Healthcare Services for Senior Citizens

- Good.
- Adequate.
- They do a remarkable job at the senior center.

Public/County Health Department

- We don't have one. They closed it.
- Closest one is in Billings or Lewistown.

Healthcare Services for Low-Income Individuals/Families

- People have to go to Billings or Lewistown for WIC or other low-income services.
- Or people have to access low-income services on the internet but now there are no open computers because the library is closed except certain days.

Nursing Home/Assisted Living Facility

- *Not asked.*

Pharmacy

- Shopko
- A lot of people travel to Billings for medications because they don't like the local pharmacy.
- They are too expensive.
- Convenient but they have messed up my medicines.

6. Why might people leave the community for healthcare?

- Specialists.
- Cost.
- VA services.
- Services not provided here.
- A lot of people go to billings because of grocery shopping.

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

- Expanded mental health services
- They have the foot doctor and hearing aid doctor once a month, but it would nice to have a dermatologist or something. I wish they could get some of the common specialists so come by once or twice a month.
- An infusion center would be nice.
- We did get a brand-new CT scanner.
- I don't know what they can do for the cancer care. If they can do chemo or not.

Key Informant Interview #1

April 4, 2018- Faith Horpestad, Diabetes Self-Management Education and Support Quality Care Coordinator–Via phone interview

1. What would make your community a healthier place to live?
 - There are some barriers. Transportation is an issue for access to healthcare.
 - Health literacy is an issue and there is a high poverty rate here.
 - In working with the diabetic community it's difficult to teach about medication when they can't afford them.

2. What do you think are the most important local healthcare issues?
 - Again, poverty, health literacy and transportation are all issues.
 - If they are on the ACA/state health plan they don't qualify for any of the medical or pharmaceutical coupons. A large portion of our population is under insured, so we offer a lot of financial assistance at the hospital. For rural facilities it is really difficult to offer these services.
 - We have fairly high diabetes rates.
 - Also, high rates of heart disease and blood pressure. All goes hand in hand with the diabetes.

3. What other healthcare services are needed in the community?
 - Long term we need to keep diabetes education going or expand it.
 - It would be nice to have a Lifestyle Balance program for the public (those that don't have diabetes). A lot of people are at risk for pre-diabetes. Programs that help people eat better and stay more active.
 - We need some weight loss/healthy lifestyle programs in the community.
 - More mental health programs and improved access to them.
 - Medicare put in a behavioral health grant, but you need a social worker or psychiatrist and we don't have either of those. It's difficult to find people who are trained in mental health to practice in rural Montana.

Key Informant Interview #2

April 4, 2018- Chad Sealey, Superintendent of Roundup Public Schools–Via phone interview

1. What would make your community a healthier place to live?
 - Continued outreach from not only to school but also the hospital, foundation, and the Central Montana Health District promoting healthy lifestyles. Anything we can do to educate families on healthy behaviors, foods and lifestyles.

2. What do you think are the most important local healthcare issues?
 - Un-healthy lifestyles lead to a lot of health issues in the community.
 - We actually have a lot of people that move in and out of the community. Some of it is tied to poverty level.
 - There is a drug component as well.
 - We certainly see more students with higher needs in the past few years based on drug and alcohol use by their parents. Many times, they move back into the community from somewhere else.
 - A lot of people move here to live with their parents or grandparents.
 - There is certainly an economic component, but I think the community is thriving more than it was five years ago.

3. What other healthcare services are needed in the community?
 - At this point the hospital has done a really good job at hiring and maintaining quality providers. This is the most important component for maintaining a healthy community because the doctors can form a relationship with the local clientele. It's crucial because if people don't have a relationship with their provider then they won't use the services here. We need to keep maintaining our local services.

Key Informant Interview #3

April 4, 2018- Cindy McCaffree, Roundup Mental Health Center –Via phone interview

1. What would make your community a healthier place to live?
 - More local availability of health foods and having more access to healthcare. Many clients don't have health insurance and they really can't afford to go to the doctor or pay for healthy foods.

2. What do you think are the most important local healthcare issues?
 - Mental health and chemical dependency.
 - Its still such a stigma and it is still such a big issue.
 - Along with this, people have drug issues, they both kind of go together but mental health is really the big issue I see.
 - It is across all demographics, children and adults alike. It often starts with kids and it snowballs into issue when they are teens and adults. All income levels suffer from mental health issues.
 - There are also a lot of anger management issues as well.

3. What other healthcare services are needed in the community?
 - We provide the mental health and chemical addiction services, there could be more at the hospital. But there are really good at tele-med and referring people to the Billings office.
 - We help a lot of people to fill out insurance forms, but we struggle getting the word out about the services we have. There is still so much of a stigma that people are reluctant to seek health. Need more communication and awareness to break that stigma.
 - It's sad to see that so many people need help, but they don't know where to turn to get it. We need to make people aware that this is a disease and it doesn't make you different than anyone else.

Key Informant Interview #4

April 4, 2018- Anonymous –Via phone interview

1. What would make your community a healthier place to live?
 - Education and outreach about healthy lifestyle. It seems there is a lot of ambivalence about change. It seems people don't care to change.
 - An improved culture of health in the community would help.
2. What do you think are the most important local healthcare issues?
 - The ability to pay for healthcare. We see a lot of people who can't afford to pay.
 - A lot of people have dental issues. We see a lot of people with infections caused from their teeth.
 - Obesity and all of its co-morbidities. The obesity rates are terrible.
3. What other healthcare services are needed in the community?
 - We need more MDs or DOs. Many people don't want to see a mid-level, so they will leave to community for healthcare services.
 - Perhaps more programs to help people pay for dental. Now that Medicaid no longer pays for dental they have lost a lot of patients.
 - More senior living options. Some people are having to move out of the community, so they can live in senior communities or assisted living.

Key Informant Interview #5

April 4, 2018 - Anonymous –Via phone interview

1. What would make your community a healthier place to live?
 - I would like to see the development of more wellness infrastructure. Like walking trails and more wellness programs. Wellness needs to be the focus for a lot of programs.
 - Preventative health services would cover obesity cardiac illnesses, stroke, smoking.

2. What do you think are the most important local healthcare issues?
 - Obesity and cardiac health.
 - There is an awful lot of STD/STI and Hep C cases in the county. These can be indicators of risky behavior. Risk prevention would be a good area to focus.

3. What other healthcare services are needed in the community?
 - The ability to walk-in somewhere and just receive services. Having something available in the evenings so that people don't have to go to the emergency room. Increased access to urgent services.
 - More preventative healthcare services.

