

Liberty County, Montana

Community Health Services Development Community Health Needs Assessment Report

Survey conducted by
Liberty Medical Center
Chester, Montana

In cooperation with
The Montana Office of Rural Health

June 2018



MONTANA
STATE UNIVERSITY

Office of Rural Health
Area Health
Education Center

**Liberty Medical Center
Community Health Needs Assessment**

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Community Survey & Focus Groups Summary Report June 2018

I. Introduction

Liberty Medical Center is a 25-bed Critical Access Hospital (CAH) and rural health clinic based in Chester, Montana. Liberty Medical Center serves Liberty County of just over 1,445 square miles and provides medical services to a service population of approximately 3,000 people. Liberty Medical Center 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 spring of 2018, Liberty Medical Center'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 2015 and 2011. 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 Liberty Medical Center 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 March 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 May 2018, postcards that included information to access a web-based survey portal were mailed out to the residents in Liberty Medical Center'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

Liberty Medical Center provided a list of outpatient and inpatient admissions. Those zip codes with the greatest number of admissions were selected to be included in the survey. A random list of 752 residents was 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.)

Four focus group 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 requires 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 May 2018, a postcard including a link and access code to the community health services development web-based survey was mailed out to 752 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 Liberty Medical Center 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 Liberty Medical Center would be conducting a community health services survey throughout the region in cooperation with the Montana Office of Rural Health.

Two-hundred twenty-six surveys were returned out of 752. Of those 752 surveys, 29 surveys were returned undeliverable for a 31% response rate. From this point on, the total number of surveys will be out of 723. 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 6.5%.

IV. Survey Respondent Demographics

A total of 723 surveys were distributed amongst Liberty Medical Center's service area. Two-hundred twenty-six were completed for a 31% 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 30)

2018 N= 219

2015 N= 243

2011 N= 300

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

		2011		2015		2018	
Area	Zip code	Count	Percent	Count	Percent	Count	Percent
Chester	59522	180	60.0%	154	63.4%	155	70.8%
Rudyard	59540	41	13.7%	28	11.5%	20	9.1%
Joplin	59531	36	12.0%	31	12.8%	19	8.7%
Inverness	59530	13	4.3%	9	3.7%	11	5.0%
Gildford	59525	6	2.0%	5	2.1%	3	1.4%
Hingham	59528	11	3.7%	9	3.7%	3	1.4%
Lothair	59461	2	0.7%	2	0.8%	1	0.5%
Kremlin	59532	3	1.0%	Not asked – 2015		6	2.7%
Galata	59444	5	1.7%	1	0.4%	0	0.0%
Whitlash	59545	Not asked - 2011		2	0.8%	0	0.0%
Other		3	1.0%	2	0.8%	1	0.5%
TOTAL		300	100%	243	100%	219	100%

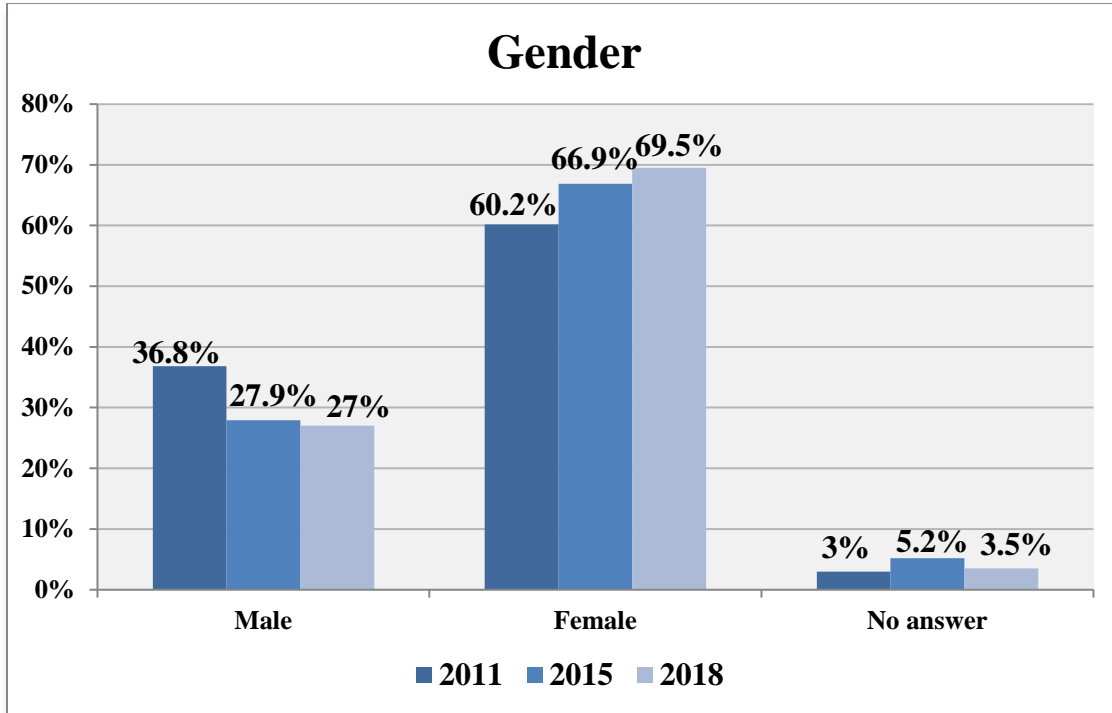
Gender (Question 31)

2018 N= 226

2015 N= 251

2011 N= 304

Of the 226 surveys returned, 69.5% (n=157) of survey respondents were female, 27% (n=61) were male, and 3.5% (n=8) 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.



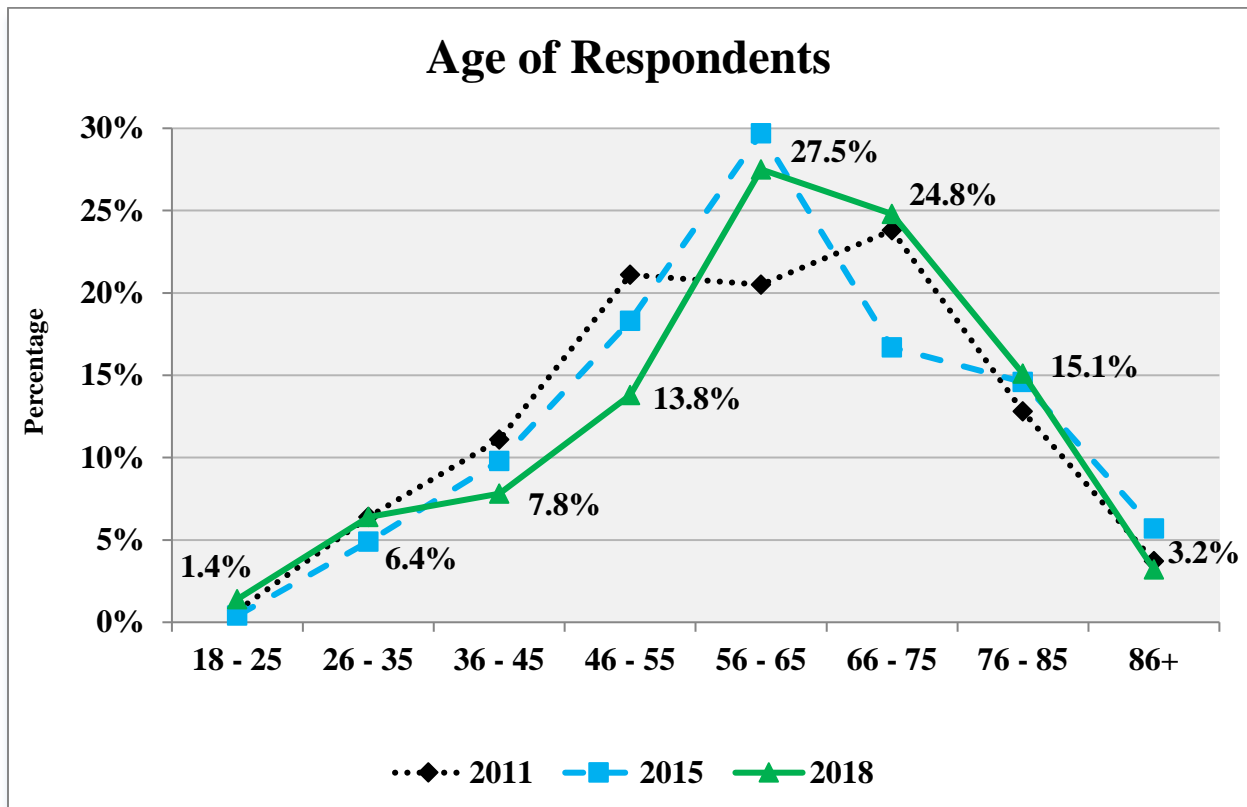
Age of Respondents (Question 32)

2018 N= 218

2015 N= 246

2011 N= 298

Twenty-eight percent of respondents (n=60) were between the ages of 56-65. Twenty-five percent of respondents (n=54) were between the ages of 66-75 and 15.1% of respondents (n=33) were between the ages of 76-85. 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.



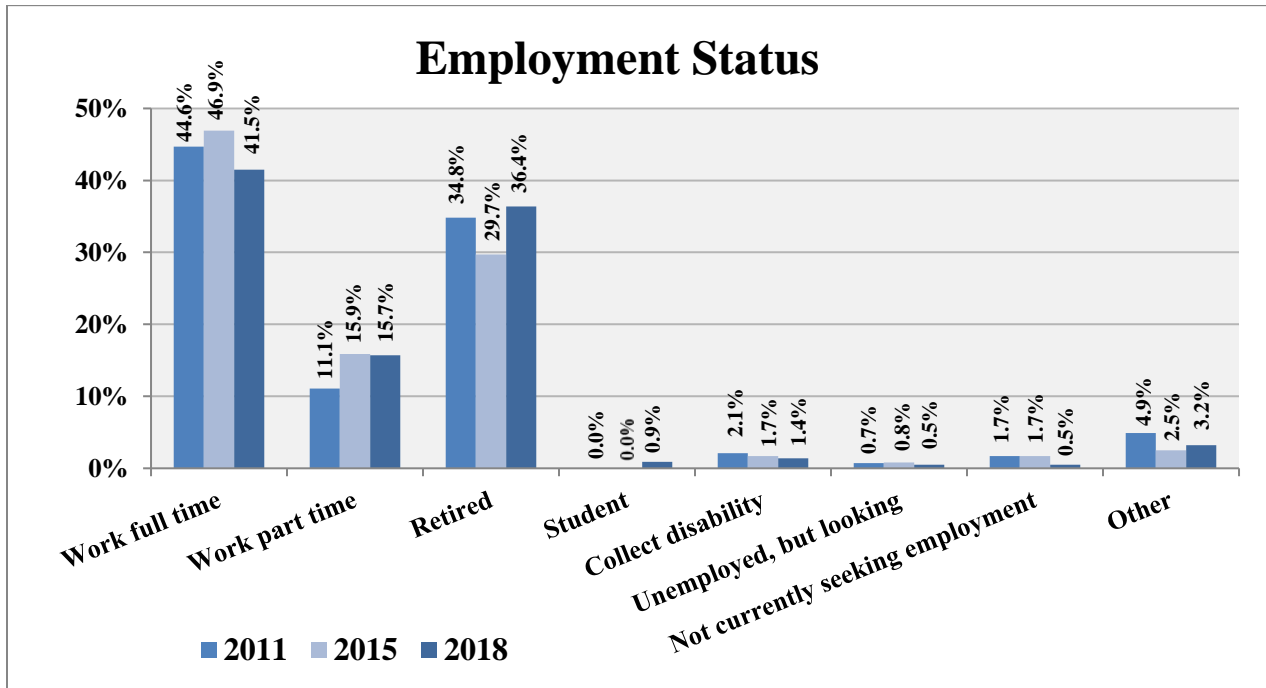
Employment Status (Question 33)

2018 N= 217

2015 N= 239

2011 N= 287

Respondents were asked to indicate their employment status. Forty-two percent (n=90) reported they work full time, while 36.4% (n=79) are retired. Respondents could check all that apply so the percentages do not equal 100%.



“Other” comments:

- Self-employed (5)
- Homemaker (2)

V. Survey Findings – Community Health

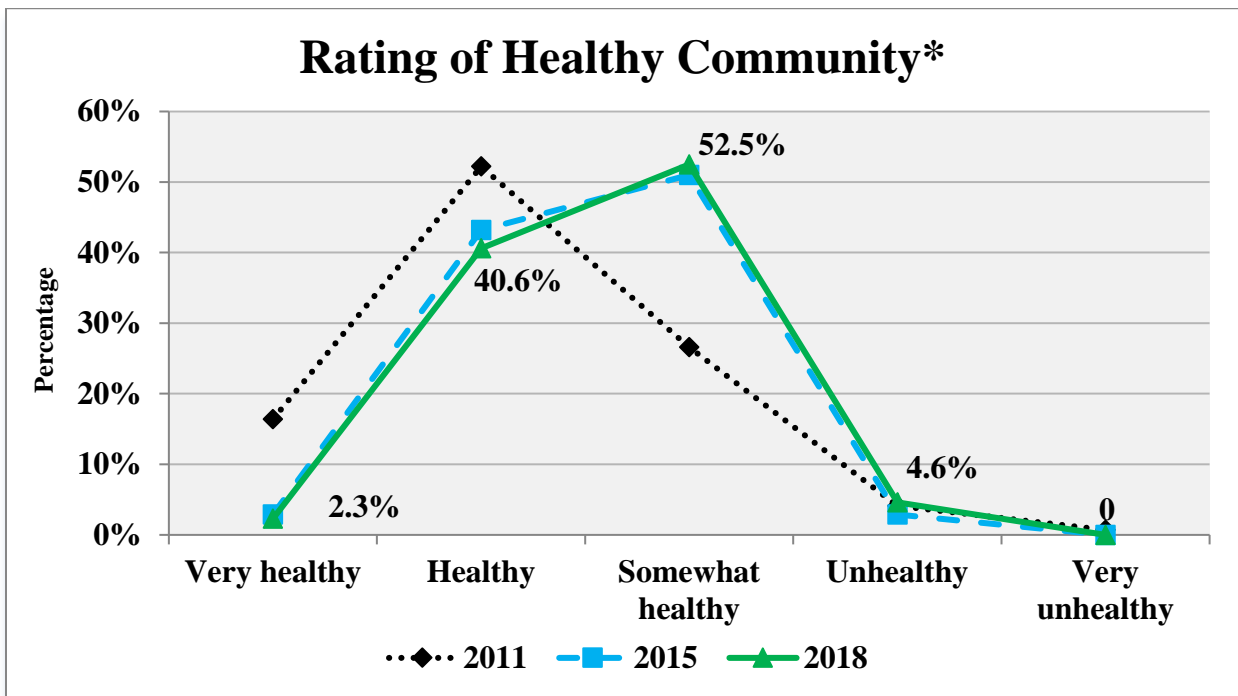
Impression of Community (Question 1)

2018 N= 217

2015 N= 241

2011 N= 293

Respondents were asked to indicate how they would rate the general health of their community. Fifty-three percent of respondents (n=114) rated their community as “Somewhat healthy.” Forty-one percent of respondents (n=88) felt their community was “Healthy” and 4.6% (n=10) felt their community was “Unhealthy.”



*Significantly fewer 2015 and 2018 respondents felt the community was 'Very healthy'

*Significantly more 2015 and 2018 respondents felt the community was 'Somewhat healthy'

Health Concerns for Community (Question 2)

2018 N= 226

2015 N= 251

2011 N= 304

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 48.6% (n=110). “Cancer” was also a high priority at 46.9% (n=106) followed by “Overweight/obesity” at 34.1% (n=77). Respondents were asked to pick their top three serious health concerns, so percentages do not equal 100%.

Health Concern	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Alcohol abuse/substance abuse	136	44.7%	107	42.6%	110	48.7%
Cancer ¹	169	55.6%	169	67.3%	106	46.9%
Overweight/obesity	87	28.6%	70	27.9%	77	34.1%
Heart disease	89	29.3%	85	33.9%	57	25.2%
Depression/anxiety ²	Not asked – 2011		39	15.5%	52	23.0%
Diabetes	81	26.6%	46	18.3%	49	21.7%
Lack of exercise	62	20.4%	36	14.3%	31	13.7%
Mental health issues ³	16	5.3%	19	7.6%	29	12.8%
Tobacco use ⁴	33	10.9%	20	8.0%	25	11.1%
Lack of access to healthcare ⁵	15	4.9%	6	2.4%	18	8.0%
Teen drug use ⁶	41	13.5%	37	14.7%	15	6.6%
Underage alcohol use ⁷	63	20.7%	33	13.2%	11	4.9%
Work related accidents/injuries	25	8.2%	11	4.4%	10	4.4%
Lack of access to healthy food	Not asked - 2011		Not asked - 2015		10	4.4%
Stroke	26	8.6%	13	5.2%	9	4.0%
Child abuse/neglect	11	3.6%	4	1.6%	7	3.1%
Opioid addiction	Not asked - 2011		Not asked - 2015		7	3.1%
Domestic violence	6	2.0%	1	0.4%	4	1.8%
Motor vehicle accidents	10	3.3%	5	2.0%	4	1.8%
Recreation-related accidents/injuries ⁸	18	5.9%	2	0.8%	4	1.8%
Suicide	Not asked - 2011		Not asked - 2015		3	1.3%
Other	9	3.0%	9	3.6%	7	3.1%

^{1&6} Significantly fewer 2018 respondents selected ‘Cancer’, and ‘Teen drug use’ as a top health concern.

^{2,3&5} Significantly more 2018 respondents selected ‘Depression/Anxiety’, ‘Mental health issues’ and ‘Lack of access to healthcare’ as top health concern.

⁴ ‘Tobacco use’ is significantly more of a health concern in 2018 than in the previous assessment.

⁷ ‘Underage alcohol use’ as a top health concern has been significantly declining since 2011.

⁸ Significantly fewer 2018 and 2015 respondents selected ‘Recreation-related accidents/injuries’ as a top health concern.

“Other” comments:

- These choices should be grouped. Alcohol, drugs, tobacco, cancer and others are concerns
- Unhealthy lifestyle
- Aging process
- Not watching children or letting them stay home too young
- Overall drug abuse, all ages
- Public opinions negative - self serving
- Apathy

Components of a Healthy Community (Question 3)

2018 N= 226

2015 N= 251

2011 N= 304

Respondents were asked to identify the three most important things for a healthy community.

Seventy-four percent of respondents (n=167) 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 38.1% (n=86) and third was “Strong family life” at 34.5% (n=78).

Respondents were asked to identify their top three choices; thus, the percentages do not add up to 100%.

Important Component	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Access to healthcare and other services	196	64.5%	173	68.9%	167	73.9%
Good jobs and a healthy economy	103	33.9%	86	34.3%	86	38.1%
Strong family life	97	31.9%	101	40.2%	78	34.5%
Healthy behaviors and lifestyles	88	28.9%	87	34.7%	74	32.7%
Good schools ¹	117	38.5%	76	30.3%	66	29.2%
Religious or spiritual values	88	28.9%	85	33.9%	58	25.7%
Low crime/safe neighborhoods ²	67	22.0%	23	9.2%	32	14.2%
Community involvement	34	11.2%	36	14.3%	23	10.2%
Affordable housing	33	10.9%	21	8.4%	21	9.3%
Clean environment ³	41	13.5%	15	6.0%	15	6.6%
Teen recreational activities	20	6.6%	7	2.8%	11	4.9%
Tolerance for diversity	17	5.6%	9	3.6%	11	4.9%
Parks and recreation	8	2.6%	5	2.0%	6	2.7%
Arts and cultural events	8	2.6%	2	0.8%	5	2.2%
Low death and disease rates	8	2.6%	8	3.2%	4	1.8%
Low level of domestic violence	8	2.6%	4	1.6%	4	1.8%
Other	3	1.0%	3	1.2%	1	0.4%

¹⁻³Significantly fewer 2018 and 2015 respondents selected ‘Clean environment’, ‘Low crime/safe neighborhoods’ and ‘Good schools’ as important components to a health community.

“Other” comments:

- So many choices could be grouped. I don't like leaving out other choices that I feel are extremely important.

How Respondents Learn of Healthcare Services (Question 4)

2018 N= 226

2015 N= 251

2011 N= 304

The most frequently indicated method of learning about available services was “Word of mouth/reputation” at 68.1% (n=154). “Clinic/hospital staff” was the second most frequent response at 65.5% (n=148) followed by “Friends/family” at 57.1% (n=129). Respondents could select more than one method, so percentages do not equal 100%.

Method	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Word of mouth/reputation¹	217	71.4%	152	60.6%	154	68.1%
Clinic/hospital staff	178	58.6%	167	66.5%	148	65.5%
Friends/family	Not asked – 2011		149	59.4%	129	57.1%
Healthcare provider	Not asked – 2011		121	48.2%	115	50.9%
Newspaper	115	37.8%	76	30.3%	87	38.5%
Social media/Facebook ²	Not asked – 2011		19	7.6%	72	31.9%
Mailings/newsletter	Not asked – 2011		Not asked – 2015		52	23.0%
Public health nurse	Not asked – 2011		Not asked – 2015		36	15.9%
Website/internet ³	9	3.0%	12	4.8%	21	9.3%
Radio ⁴	7	2.3%	11	4.4%	15	6.6%
Presentations	11	3.6%	7	2.8%	7	3.1%
Other	20	6.6%	6	2.4%	8	3.5%

¹Significantly more 2018 respondents learned of healthcare services via ‘Word of mouth/reputation’, compared to 2015 respondents.

²⁻³Significantly more 2018 respondents learn about healthcare serves via ‘Social media/Facebook’ and ‘Website/internet.’

⁴Respondents learning of healthcare services via the ‘Radio’ has been significantly growing since to 2011.

“Other” comments:

- None
- Poster around town
- Health fairs
- I live here (3)
- You @ Liberty Rudyard EMT ER SAVED MY LIFE

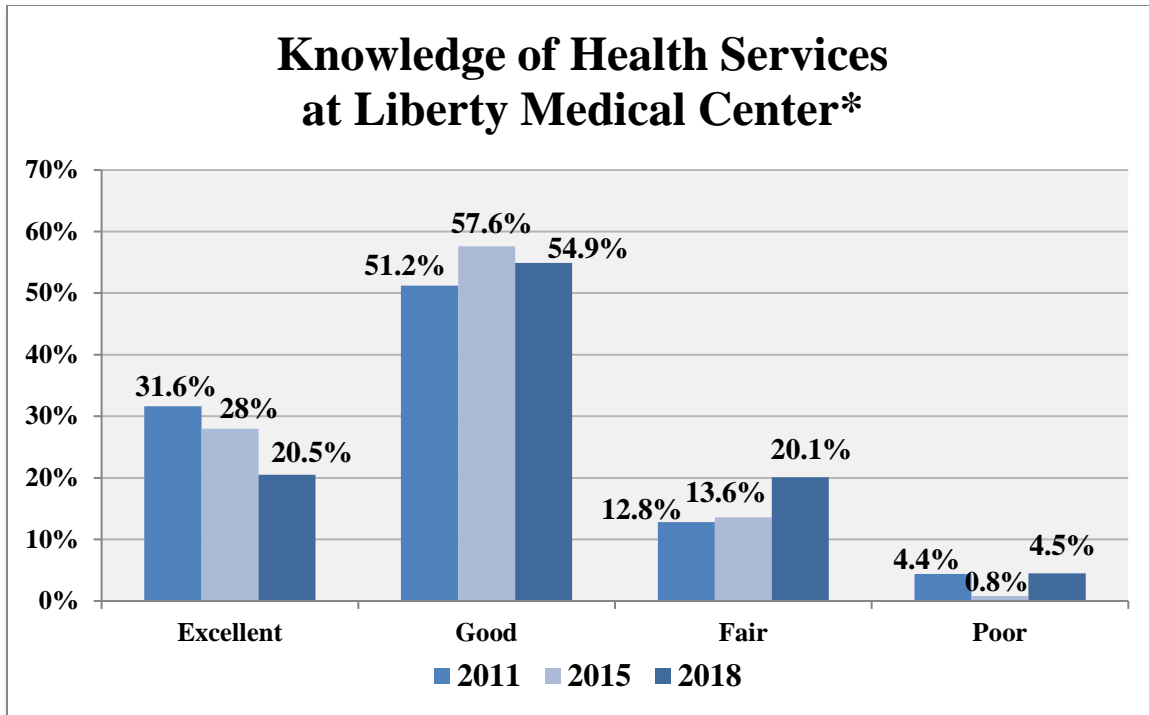
Overall Awareness of Health Services (Question 5)

2018 N= 224

2015 N= 250

2011 N= 297

Respondents were asked to rate their knowledge of the health services available at Liberty Medical Center. Fifty-five percent (n=123) of respondents rated their knowledge of health services as “Good”, “Excellent” was selected by 20.5% percent (n=46), and “fair” was selected by 20.1% (n=45) of respondents. Two respondents chose not to answer this question.



*Overall rating of knowledge about services available at LMC has decreased significantly since 2011.

Cross Tabulation of Service Knowledge and Learning about Services

Analysis was done to assess respondents' knowledge of services available at Liberty Medical Center 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 LIBERTY MEDICAL CENTER SERVICES BY HOW RESPONDENTS LEARN ABOUT HEALTHCARE SERVICES

	Excellent	Good	Fair	Poor	Total
Word of mouth/reputation	33 (21.4%)	81 (52.6%)	34 (22.1%)	6 (3.9%)	154
Clinic/hospital staff	35 (23.6%)	93 (62.8%)	16 (10.8%)	4 (2.7%)	148
Friends/family	31 (24%)	71 (55%)	22 (17.1%)	5 (3.9%)	129
Healthcare provider	32 (28.1%)	69 (60.5%)	11 (9.6%)	2 (1.8%)	114
Newspaper	19 (22.1%)	46 (53.5%)	19 (22.1%)	2 (2.3%)	86
Social media (Facebook, etc.)	19 (26.4%)	35 (48.6%)	17 (23.6%)	1 (1.4%)	72
Mailings/newsletter	14 (26.9%)	28 (53.8%)	10 (19.2%)	0 (0%)	52
Public health nurse	7 (20%)	27 (77.1%)	1 (2.9%)	0 (0%)	35
Website/internet	5 (23.8%)	14 (66.7%)	2 (9.5%)	0 (0%)	21
Radio	5 (33.3%)	7 (46.7%)	2 (13.3%)	1 (6.7%)	15
Presentations	0 (0%)	4 (57.1%)	1 (14.3%)	2 (28.6%)	7
Other	2 (25%)	2 (25%)	3 (37.5%)	1 (12.5%)	8

Other Community Health Resources Utilized (Question 6)

2018 N= 226

2015 N= 251

2011 N= 304

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 82.3% (n=186). “Dentist” was also a highly utilized resource at 54.4% (n=123) followed by “Public health” at 33.6% (n=76). Respondents could select more than one resource, so percentages do not equal 100%.

Resource	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Pharmacy	250	82.2%	211	84.1%	186	82.3%
Dentist	161	53.0%	139	55.4%	123	54.4%
Public health¹	58	19.1%	74	29.5%	76	33.6%
Senior center ²	69	22.7%	92	36.7%	75	33.2%
Specialty clinic services	Not asked – 2011		Not asked – 2015		51	22.6%
Fitness center	56	18.4%	49	19.5%	50	22.1%
Message therapy	51	16.8%	50	19.9%	35	15.5%
Chiropractor	Not asked – 2011		Not asked – 2015		39	17.3%
Ambulance	Not asked – 2011		Not asked – 2015		32	14.2%
Liberty County Transit	27	8.9%	30	12.0%	30	13.3%
Mental health	10	3.3%	6	2.4%	12	5.3%
Tobacco prevention program	11	3.6%	2	2.8%	6	2.7%
Other	4	1.3%	7	2.8%	10	4.4%

^{1&2}Public health and senior center utilization has been increasing significantly since 2011.

“Other” comments:

- None (4)
- Specialized surgery
- PT [Physical Therapy]
- School gym
- Optometrist
- Visitor
- ER

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

2018 N= 226

2015 N= 251

2011 N= 304

Respondents were asked to indicate what they felt would improve their community's access to healthcare. Forty-one percent of respondents (n=92) reported that "Home health" would make the greatest improvement. Forty percent of respondents (n=91) indicated "More primary care providers" would improve access and "Additional specialists" was selected by 35% (n=79). Respondents could select more than one method, so percentages do not equal 100%.

Improvement	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Home health ¹	72	23.7%	102	40.6%	92	40.7%
More primary care providers ²	69	22.7%	77	30.7%	91	40.3%
Additional specialists ³	93	30.6%	52	20.7%	79	35.0%
Greater health education services ⁴	40	13.2%	49	19.5%	46	20.4%
Improved quality of care ⁵	31	10.2%	34	13.5%	41	18.1%
Insurance navigator	Not asked - 2011		30	12.0%	39	17.3%
Clinic/lab expanded hours ⁶	31	10.2%	58	23.1%	29	12.8%
Telemedicine ⁷	9	3.0%	19	7.6%	27	11.9%
Transportation assistance ⁸	0	0%	15	6.0%	15	6.6%
Cultural sensitivity	4	1.3%	6	2.4%	10	4.4%
Other ⁹	18	5.9%	18	7.2%	33	14.6%

^{1,4,7&8} 'Home health', 'Greater health education services', 'telemedicine' and 'transportation assistance' as ways to improve the community's access to healthcare has been significantly increasing since 2011.

^{2,3,5&9} Significantly more 2018 respondents selected 'More primary care providers', 'additional specialists', 'Improved quality of care' and 'Other' reasons not listed as ways to improve the community's access to healthcare.

⁶Selection of 'Clinic/lab expanded hours' significantly decreased since the last assessment.

"Other" comments

- Increased staffing on weekends, evenings, nights
- Help with billing; discount for cash payment in-full
- Recruit a doctor (3)
- We need a doctor for our system
- Real doctors instead of PA's (4)
- MD availability (6)
- Full time MD + Optometrist
- Long-term providers
- Consistency of care and follow through
- Discount for those that pay on time
- Hospice
- More nurses
- Primary care providers are extremely important but all the providers in the world are wasted if the patient can't access them in a timely, necessary way.
- Resident eye doctor
- Naturopathic doctor (3)
- Expanded acceptance of other health insurances
- Confidentiality
- It would be nice to offer blood work once a year but not necessarily one's birthday month
- Medicaid help
- VA coverage

Interest in Educational Classes/Programs (Question 8)

2018 N= 226

Respondents were asked if they would be interested in any educational classes/programs if offered locally. The most highly indicated class/program was “Women’s health” at 38.5% (n=87). “Weight loss” was selected by 33.2% of respondents (n=75) and “Fitness” with 32.3% (n=73). Respondents could select more than one method, so percentages do not equal 100%.

Educational Class/Program	2018	
	Count	Percent
Women's health	87	38.5%
Weight loss	75	33.2%
Fitness	73	32.3%
Nutrition	69	30.5%
Living will	56	24.8%
Mental health	35	15.5%
Men's health	32	14.2%
Grief counseling	21	9.3%
Parenting	14	6.2%
Support groups	13	5.8%
Alcohol/substance abuse	9	4.0%
Prenatal	5	2.2%
Smoking cessation	4	1.8%
Other	11	4.9%

“Other” comments:

- Basic first aid
- None (4)
- Other than emergency room, to be seen by providers as needed without advanced appointments. Problems arise that are not really emergency that need to be addressed in a timely manner.
- None, I’m 87
- End of life hospice (2)
- Childhood obesity
- VA groups

Utilization of Preventative Services (Question 9)

2018 N= 226

2015 N= 251

Respondents were asked if they had utilized any of the preventative services listed in the past year. “Flu shot” was selected by 57.1% of respondents (n=129). Fifty-five percent of respondents (n=124) indicated they received “Routine blood work/birthday lab” and 47.3% of respondents (n=107) received a “Cholesterol check.” Respondents could check all that apply, thus the percentages do not equal 100%.

Service	2015		2018	
	Count	Percent	Count	Percent
Flu shot	154	61.4%	129	57.1%
Routine blood work/birthday lab¹	178	70.9%	124	54.9%
Cholesterol check	119	47.4%	107	47.3%
Routine blood pressure check ²	138	55.0%	91	40.3%
Routine health checkup ³	131	52.2%	86	38.1%
Mammography	108	43.0%	81	35.8%
Dexa scan	Not asked – 2015		36	15.9%
Medicare wellness	Not asked – 2015		30	13.3%
Pap smear ⁴	56	22.3%	29	12.8%
Prostate (PSA)	40	15.9%	25	11.1%
Colonoscopy	30	12.0%	22	9.7%
None	23	9.2%	20	8.8%
Children’s checkup/Well Baby	17	6.8%	17	7.5%
Other	3	1.2%	9	4.0%

¹⁻⁴Significantly fewer 2018 respondents selected ‘Routine blood work/birthday lab’, ‘Routine blood pressure check’, ‘Routine health checkup’ and ‘Pap smear’ as preventative services they have utilize in the past year.

Desired Local Healthcare Services (Question 10)

2018 N= 226

2015 N= 251

2011 N= 304

Respondents were asked to indicate which additional healthcare services would they utilize if available locally. Respondents indicated the most interest in having “Optometry” services at 48.7% of respondents (n=110) followed by a “Dermatology” at 28.3% (n=64), and “ENT (ear/nose/throat)” at 26.5% (n=60). Respondents were asked to select all that apply so percentages do not equal 100%.

Service	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Optometry	Not asked – 2011		Not asked – 2015		110	48.7%
Dermatology	71	23.4%	55	21.9%	64	28.3%
ENT (ear/nose/throat)	Not asked – 2011		Not asked – 2015		60	26.5%
Foot care clinic	75	24.7%	41	16.3%	49	21.7%
Naturopath	Not asked – 2011		Not asked – 2015		37	16.4%
Allergist	Not asked – 2011		43	17.1%	36	15.9%
MRI ¹	71	23.4%	33	13.1%	34	15.0%
Acupuncture	61	20.1%	45	17.9%	30	13.3%
OB/GYN	Not asked – 2011		28	11.2%	23	10.2%
Rheumatology	Not asked – 2011		Not asked – 2015		23	10.2%
Podiatrist	Not asked – 2011		21	8.4%	20	8.8%
Home health ²	44	14.5%	23	9.2%	19	8.4%
VA access	Not asked – 2011		Not asked – 2015		18	8.0%
Cancer care	35	11.5%	19	7.6%	17	7.5%
Endocrinologist ³	Not asked – 2011		7	2.8%	17	7.5%
Urology	Not asked – 2011		Not asked – 2015		17	7.5%
Psychiatry	17	5.6%	10	4.0%	15	6.6%
Telemedicine	Not asked – 2011		Not asked – 2015		8	3.5%
Community health worker	Not asked – 2011		11	4.4%	7	3.1%
Other	7	2.3%	6	2.4%	10	4.4%

¹⁻²Significantly fewer 2018 and 2015 respondents indicated they desired ‘MRI’ or ‘Home health’ or ‘MRI’ services if available locally.

³Significantly more 2018 respondents indicated that would use an ‘Endocrinologist’ if available locally.

“Other” comments:

- None (4)
- Heart and lungs
- Massage therapy, insurance paid
- Radiologist
- Optometrist
- Dental
- Periodontist

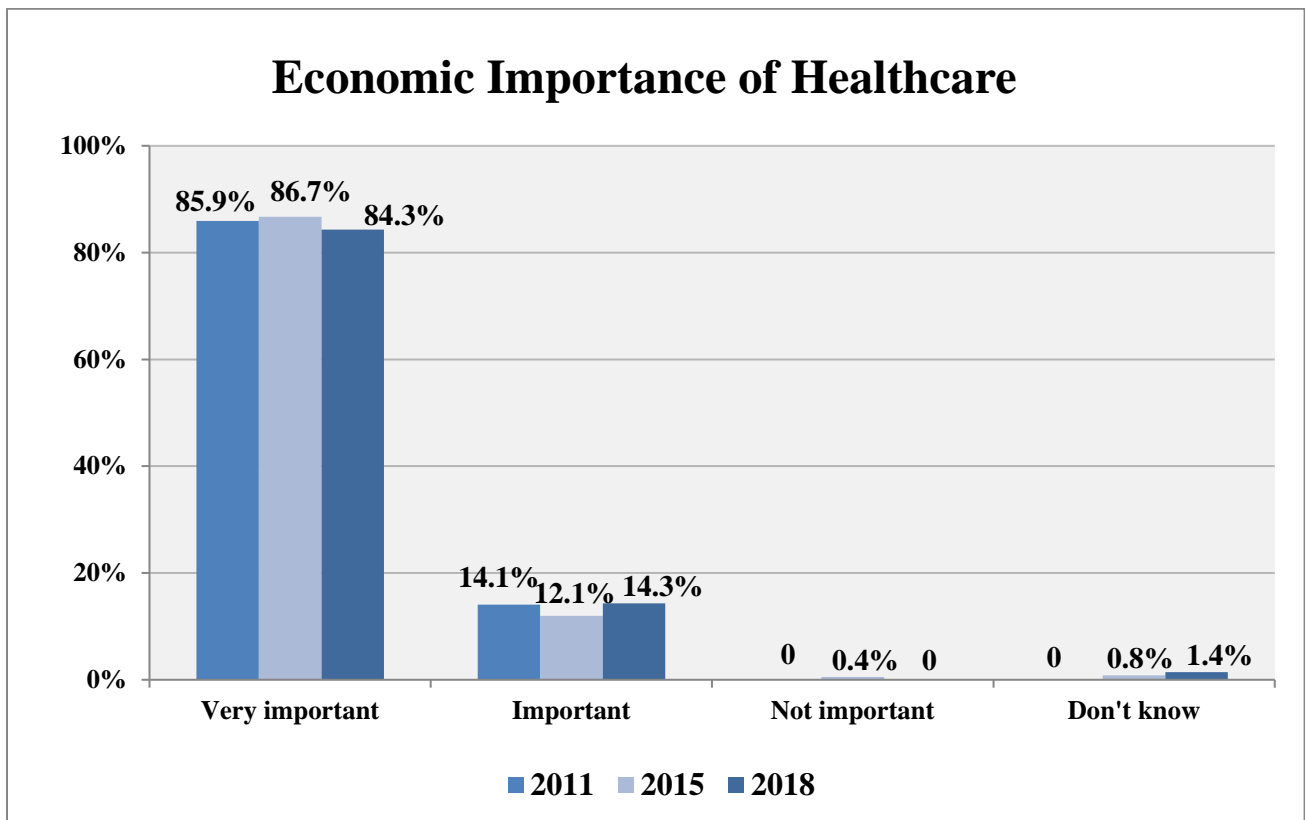
Economic Importance of Local Healthcare Providers and Services (Question 11)

2018 N= 223

2015 N= 249

2011 N= 298

The majority of respondents (84.3%, n=188) 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. Fourteen percent of respondents (n=32) indicated they are “Important” and three respondents, or 1.4% indicated they “Don’t know”. Three respondents chose not to answer this question.



Survey Findings – Use of Healthcare Services

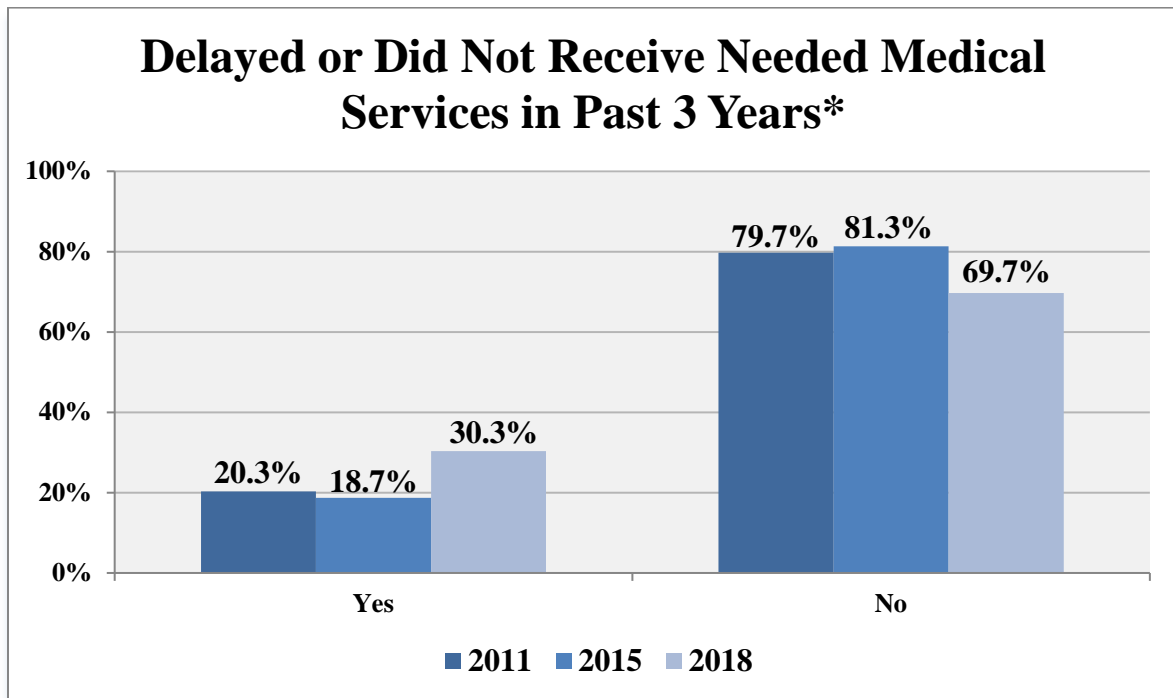
Needed/Delayed Hospital Care During the Past Three Years (Question 12)

2018 N= 211

2015 N= 235

2011 N= 291

Thirty percent of respondents (n=64) 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. Seventy percent of respondents (n=147) felt they were able to get the healthcare services they needed without delay. Fifteen respondents chose not to answer this question.



*Significantly more 2018 respondents indicated that they did not receive or delayed getting needed medical services than previous assessments.

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

2018 N= 64

2015 N= 44

2011 N= 59

For those who indicated they were unable to receive or had to delay services (n=64), the reasons most cited were: “Could not get an appointment” (26.6%, n=17) and “It costs too much” (25%, n=16) and “Don't like doctors” and “Too long to wait for an appointment” (21.9%, n=14 each). Respondents were asked to indicate their top three choices; thus, percentages do not total 100%.

Reason	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Could not get an appointment	8	13.6%	11	25.0%	17	26.6%
It costs too much¹	30	50.8%	12	27.3%	16	25.0%
Don't like doctors	14	23.7%	8	18.2%	14	21.9%
Too long to wait for an appointment	13	22.0%	11	25.0%	14	21.9%
My insurance didn't cover it	14	23.7%	11	25.0%	11	17.2%
Could not get off work	4	6.8%	6	13.6%	9	14.1%
Office wasn't open when I could go	13	22.0%	11	25.0%	8	12.5%
No insurance ²	12	20.3%	2	4.5%	7	10.9%
Unsure if services were available	5	8.5%	3	6.8%	7	10.9%
Not treated with respect	8	13.6%	6	13.6%	5	7.8%
It was too far to go	1	1.7%	2	4.5%	4	6.3%
Didn't know where to go	1	1.7%	3	6.8%	3	4.7%
Had no one to care for the children	0	0%	2	4.5%	3	4.7%
Too nervous or afraid	3	5.1%	2	4.5%	2	3.1%
Transportation problem	2	3.4%	0	0%	2	3.1%
Language barrier	0	0%	0	0%	0	0%
Other	10	16.9%	4	9.1%	13	20.3%

¹'It costs too much' as a barrier to receiving care has significantly decreased since 2011.

²'No insurance' as a barrier to receiving care as significantly fluctuated over the last three assessments.

“Other” comments:

- Real doctors
- Procrastination on my part
- Never meet insurance deductible!
- I was seen in the emergency room on a Sunday and referred to a primary care provider on Monday and was told by the staff I would have to wait until the following Monday for an appointment. No matter what my problem, the staff member didn't care. My point here is, no medical provider is not any better than those that coordinate services. Some conditions just can't wait!
- Did not get a call back for a colonoscopy
- My personal info being leaked to others not entitled to that info; has happened before
- Privacy in small town
- Thought it would go away on its own and it did
- Bad doctors
- Had to get allergy shots twice/wk. Protocol took too long a time to receive shot
- Not available
- No pediatricians to deal with post NICU baby

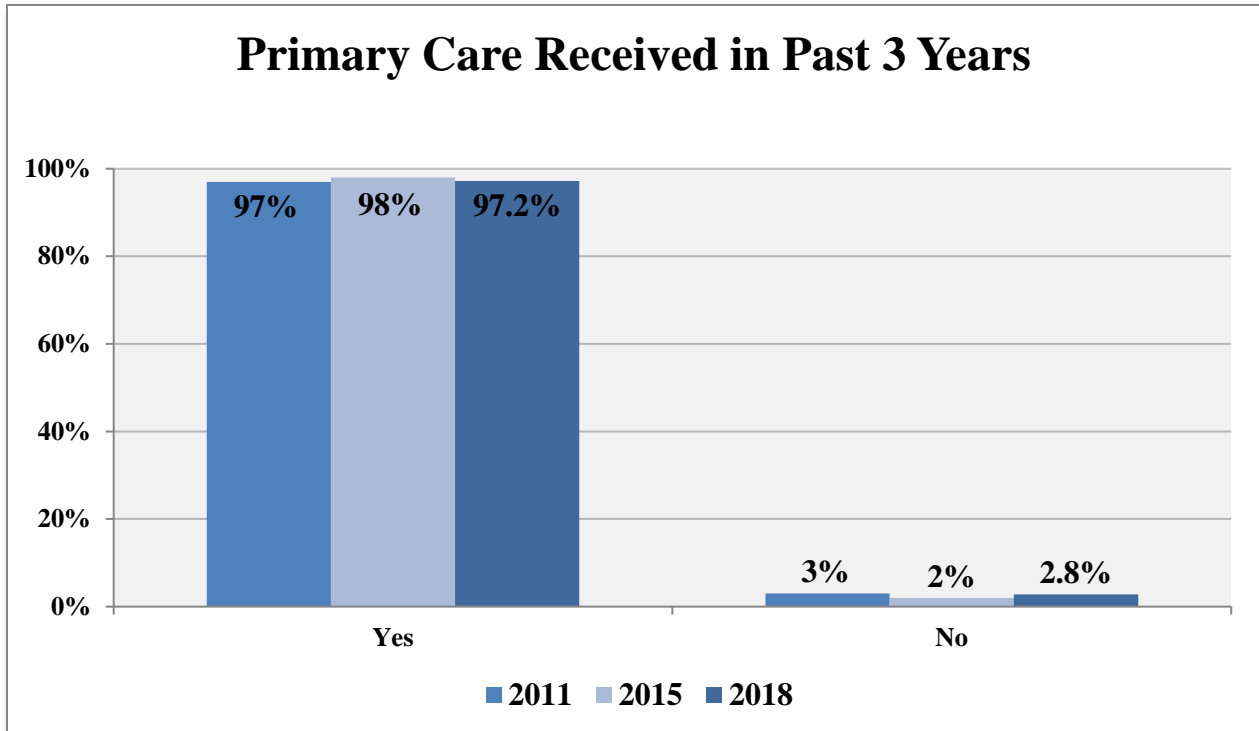
Primary Care Received in the Past Three Years (Question 14)

2018 N= 218

2015 N= 249

2011 N= 300

Ninety-seven percent of respondents (n=212) 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. Six respondents (2.8%) indicated they or someone in their household had not. Eight respondents chose not to respond to this question.



Location of Primary Care Provider (Question 15)

2018 N= 211

2015 N= 226

2011 N= 288

Of the 212 respondents who indicated receiving primary care services in the previous three years, 59.7% (n=126) reported receiving care in Chester. Nineteen percent of respondents (n=40) went to Great Falls Clinic and 7.6% of respondents (n=16) utilized primary care services at Benefis. One of the 212 respondents who reported they had utilized primary care services in the past three years did not indicate where they received those services.

Clinic	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Chester¹	235	81.6%	171	75.7%	126	59.7%
Great Falls Clinic	Not asked - 2011		Not asked - 2015		40	19.0%
Benefis	Not asked - 2011		Not asked - 2015		16	7.6%
Havre	23	8.0%	17	7.5%	14	6.6%
Kalispell	Not asked - 2011		2	0.9%	3	1.4%
Shelby	13	4.5%	7	3.1%	2	0.9%
Helena	Not asked - 2011		1	0.4%	2	0.9%
VA clinic	5	1.7%	0	0%	2	0.9%
Missoula	Not asked - 2011		2	0.9%	0	0%
Billings	1	0.3%	1	0.4%	0	0%
Great Falls	10	3.5%	22	9.7%	Not asked - 2018	
Other	1	0.3%	3	1.3%	6	2.8%
TOTAL	288	100%	226	100%	211	100%

¹Significantly fewer 2018 and 2015 respondents selected 'Chester' as the location for their primary healthcare provider.

“Other” comments:

- Great Falls OB/GYN
- Northwest Physicians, Gt. Falls
- Family Practice, Great Falls (2)
- Military clinic
- Great Falls

Reasons for Selection of Primary Care Provider (Question 16)

2018 N= 212

2015 N= 244

2011 N= 291

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. “Closest to home” was the most frequently selected reason at 49.5% (n=105) followed by “Prior experience with clinic” at 43.4% (n=92) and “Appointment availability” at 37.3% (n=79). Respondents were asked to check all that apply so the percentages do not equal 100%.

Reason	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Closest to home¹	218	74.9%	139	57.0%	105	49.5%
Prior experience with clinic²	167	57.4%	115	47.1%	92	43.4%
Appointment availability	114	39.2%	87	35.7%	79	37.3%
Local provider reputation	Not asked – 2011		97	38.6%	74	32.7%
Personal relationship with provider	67	23.0%	72	29.5%	68	32.1%
Clinic’s reputation for quality	87	29.9%	68	27.9%	47	22.2%
Recommended by family or friends	45	15.5%	36	14.8%	44	20.8%
Referred by physician or other provider	17	5.8%	25	10.2%	22	10.4%
Length of waiting room time ³	45	15.5%	33	13.5%	17	8.0%
Cost of care	33	11.3%	20	8.2%	13	6.1%
Required by insurance plan	6	2.1%	3	1.2%	4	1.9%
VA/Military requirement	7	2.4%	4	1.6%	3	1.4%
Indian Health Services	Not asked – 2011		Not asked – 2015		0	0.0%
Other ⁴	17	5.8%	7	2.9%	19	9.0%

¹⁻³Selection of ‘Closest to home’, ‘Prior experience with clinic’ and ‘Length of waiting room time’ as reasons for selecting a primary healthcare provider have been declining significantly since 2011.

⁴Significantly more 2018 respondents indicated an ‘Other’ reasons not listed for primary care provider selection when compared to 2015.

“Other” comments:

- She had been my Dr in the past
- Some people who work in Liberty County Healthcare Services talk too much. In a small town, that is unacceptable.
- Where we live in the winter and Great Falls, because that is where the doctor went from here
- Has all the resources needed
- Several years as her patient
- A woman MD
- Pregnancy
- Female
- OB-GYN not in Chester long enough to develop relationship
- Was my physician in Chester previously
- Dr. moved, I followed
- Work at Havre Hospital
- At LMC because it's close. Benefis because they provide special care not offered in Chester
- I believe in supporting local services (2)
- My son's Medicaid won't let me take them to their pediatrician
- Convenience
- Just clicked with him and he was very thorough
- Personal preference

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 locations are listed along the side and respondent's zip codes are across the top. The communities of Whitlash, Ledger, and Galata were omitted from the table due to non-response.

LOCATION OF PRIMARY CARE PROVIDER MOST UTILIZED BY RESIDENCE

	Chester 59522	Rudyard 59540	Joplin 59531	Inverness 59530	Gildford 59525	Hingham 59528	Kremlin 59532	Lothair 59461	Other	Total
Chester	87 (72.5%)	10 (8.3%)	11 (9.2%)	9 (7.5%)		1 (0.8%)	2 (1.7%)			120
Great Falls Clinic	32 (80%)	4 (10%)	1 (2.5%)	1 (2.5%)	1 (2.5%)		1 (2.5%)			40
Benefis	11 (68.8%)	2 (12.5%)	1 (6.3%)			1 (6.3%)			1 (6.3%)	16
Havre	6 (42.9%)	2 (14.3%)	1 (7.1%)	1 (7.1%)	2 (14.3%)		2 (14.2%)			14
Kalispell	2 (66.7%)	1 (33.3%)								3
Helena			1 (50%)			1 (50%)				2
Shelby	1 (50.0%)		1 (50%)							2
VA clinic	2 (100%)									2
Other	4 (66.7%)						1 (16.7%)	1 (16.7%)		6
Total	145	19	16	11	3	3	6	1	1	205

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%. Billings, Conrad, Cut Bank, Fort Benton and Missoula clinic locations were removed from the chart due to non-selection.

LOCATION OF PRIMARY CARE PROVIDER BY REASONS CLINIC SELECTED

	Chester	Kalispell	Benefis	Great Falls Clinic	Havre	VA Clinic	Shelby	Helena	Other	Total
Closest to home	98 (93.3%)	1 (1%)		3 (2.9%)	3 (2.9%)					105
Prior experience with clinic	64 (69.6%)	1 (1.1%)	3 (3.3%)	13 (14.1%)	6 (6.5%)	1 (1.1%)	1 (1.1%)		3 (3.3%)	92
Appointment availability	56 (70.9%)	2 (2.5%)	4 (5.1%)	8 (10.1%)	5 (6.3%)		1 (1.3%)		3 (3.8%)	79
Local provider reputation	60 (84.5%)		1 (1.4%)	5 (7%)	3 (4.2%)			1 (1.4%)	1 (1.4%)	71
Personal relationship with provider	46 (67.6%)		1 (1.5%)	18 (26.5%)					1 (1.5%)	68
Clinic's reputation for quality	33 (70.2%)	1 (2.1%)	2 (4.3%)	7 (14.9%)	3 (6.4%)				1 (2.1%)	47
Recommended by family or friends	32 (72.7%)		4 (9.1%)	4 (9.1%)	2 (4.5%)			2 (4.5%)		44
Referred by physician or other provider	5 (22.7%)		4 (18.2%)	9 (40.9%)	2 (9.1%)			1 (4.5%)	1 (4.5%)	22
Length of waiting room time	11 (64.7%)		1 (5.9%)	2 (11.8%)					3 (17.6%)	17
Cost of care	9 (69.2%)	1 (7.7%)	1 (7.7%)		1 (7.7%)				1 (7.7%)	13
Required by insurance plan	1 (25%)		1 (25%)		2 (50%)					4
VA/Military requirement	1 (33.3%)					2 (66.7%)				3
Indian Health Services	1 (100%)									1
Other	6 (31.6%)		6 (31.6%)	5 (26.3%)	1 (5.3%)				1 (5.3%)	19

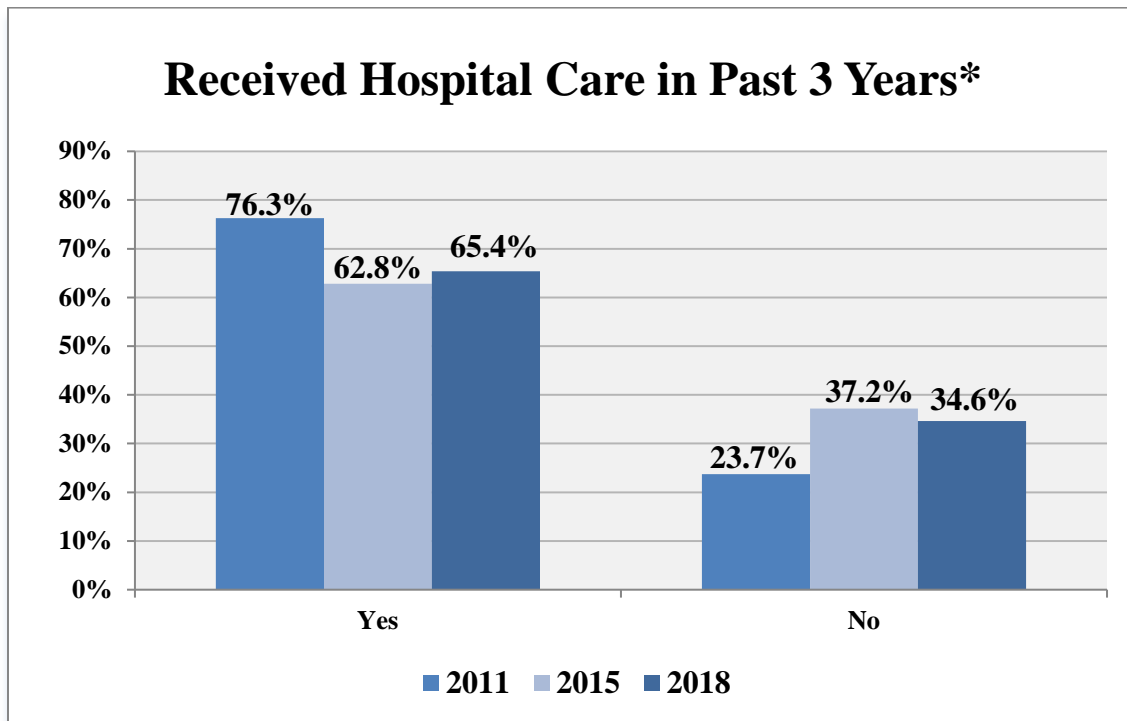
Hospital Care Received in the Past Three Years (Question 17)

2018 N= 217

2015 N= 242

2011 N= 295

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-five percent of respondents (n=142) reported that they or a member of their family had received hospital care during the previous three years and 34.6% (n=75) had not received hospital services. Nine respondents chose not to answer this question.



*Significantly fewer 2018 and 2015 respondents did not receive hospital care in the last three years.

Hospital Used Most in the Past Three Years (Question 18)

2018 N= 142

2015 N= 133

2011 N= 211

Of the 142 respondents who indicated receiving hospital care in the previous three years, 36.6% (n=52) reported receiving care in Chester. Thirty-six percent of respondents (n=51) went to Benefis and 16.2% of respondents (n=23) utilized services from Great Falls Clinic.

Hospital	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Chester¹	128	60.7%	50	37.6%	52	36.6%
Benefis	Not asked - 2011		Not asked - 2015		51	35.9%
Great Falls Clinic	Not asked - 2011		Not asked - 2015		23	16.2%
Havre	14	6.6%	8	6.0%	5	3.5%
Billings	5	2.4%	2	1.5%	5	3.5%
VA hospital	1	0.5%	0	0%	3	2.1%
Fort Benton	Not asked - 2011		Not asked - 2015		2	1.4%
Missoula	2	0.9%	2	1.5%	1	0.7%
Helena	Not asked - 2011		1	0.8%	0	0%
Shelby	7	3.3%	1	0.8%	0	0%
Kalispell	3	1.4%	7	5.3%	0	0%
Great Falls	51	24.2%	60	45.1%	Not asked - 2018	
Conrad	Not asked - 2011		Not asked - 2015		0	0%
Cut Bank	Not asked - 2011		Not asked - 2015		0	0%
Other	0	0%	2	1.5%	0	0%
TOTAL	211	100%	133	100%	142	100%

¹Significantly fewer 2018 and 2015 respondents selected 'Chester' as the hospital most utilized.

“Other” comments:

- Out of state

Reasons for Selecting the Hospital Used (Question 19)

2018 N= 142

2015 N= 152

2011 N= 225

Of the 142 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 “Closest to home” at 45.1% (n=64). “Referred by physician” was selected by 38% (n=54) and 35.2% (n=50) selected “Emergency, no choice.” Note that respondents were asked to select the top three answers which influenced their choices; therefore, the percentages do not equal 100%.

Reason	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Closest to home¹	157	69.8%	71	46.7%	64	45.1%
Referred by physician²	70	31.1%	66	43.4%	54	38.0%
Emergency, no choice	58	25.8%	50	32.9%	50	35.2%
Medical staff	Not asked – 2011		Not asked - 2015		43	30.3%
Prior experience with hospital ³	122	54.2%	63	41.4%	40	28.2%
Hospital’s reputation for quality	78	34.7%	47	30.9%	36	25.4%
Prefer to see M.D.	Not asked – 2011		Not asked - 2015		15	10.6%
Closest to work ⁴	28	12.4%	7	4.6%	10	7.0%
Recommended by family or friends	16	7.1%	16	10.5%	8	5.6%
Cost of care ⁵	24	10.7%	7	4.6%	6	4.2%
Required by insurance plan	9	4.0%	6	3.9%	3	2.1%
VA/Military requirement	3	1.3%	2	1.3%	3	2.1%
Other	28	12.4%	13	8.6%	1	0.7%

^{1,3&5}‘Closest to home’, ‘Prior experience with hospital’ and ‘Cost of care’ as reasons for hospital selection has been significantly decreasing since 2011.

²Significantly fewer 2018 respondents selected ‘Referred by physician’ as a top reason for selecting a hospital than 2015.

⁴Selection of ‘Closest to work’ has decreased significantly since 2011.

“Other” comments:

- Less gravel road

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. The Hingham, Galata, Ledger and Whitlash communities were removed from the table due to non-response.

LOCATION OF MOST OFTEN UTILIZED HOSPITAL BY RESIDENCE

	Chester 59522	Rudyard 59540	Joplin 59531	Inverness 59530	Hingham 59528	Gildford 59525	Kremlin 59532	Other	Total
Chester	36 (72%)	6 (12%)	5 (10%)	3 (6%)					50
Benefis	31 (62%)	6 (12%)	4 (8%)	2 (4%)	2 (4%)	1 (2%)	3 (6%)	1 (2%)	50
Great Falls Clinic	17 (81%)	1 (64.8%)	1 (4.8%)	1 (4.8%)			1 (4.8%)		21
Billings	5 (100%)								5
Havre	1 (20%)	2 (40%)		1 (20%)		1 (20%)			5
VA Hospital	2 (66.7%)	1 (33.3%)							3
Fort Benton	2 (100%)								2
Missoula	1 (100%)								1
Total	95	16	10	7	2	2	4	1	137

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. Conrad, Cut Bank, Helena, Kalispell, Shelby and Other hospital locations were removed from the chart due to non-selection.

LOCATION OF MOST UTILIZED HOSPITAL BY REASONS HOSPITAL SELECTED

	Chester	Benefis	Great Falls Clinic	Havre	Billings	Fort Benton	Missoula	VA hospital	Total
Closest to home	42 (65.6%)	10 (15.6%)	7 (10.9%)	4 (6.3%)	1 (1.6%)				64
Referred by physician	10 (18.5%)	26 (48.1%)	13 (24.1%)	2 (3.7%)	2 (3.7%)	1 (1.9%)			54
Emergency, no choice	26 (52%)	18 (36%)	5 (10%)			1 (2%)			50
Medical staff	22 (51.2%)	11 (25.6%)	4 (9.3%)	1 (2.3%)	3 (7%)		1 (2.3%)	1 (2.3%)	43
Prior experience with hospital	13 (32.5%)	14 (35%)	6 (15%)	4 (10%)	3 (7.5%)				40
Hospital's reputation for quality	11 (30.6%)	11 (30.6%)	8 (22.2%)		3 (8.3%)	2 (5.6%)	1 (2.8%)		36
Prefer to see M.D.	1 (6.7%)	7 (46.7%)	4 (26.7%)	1 (6.7%)	1 (6.7%)		1 (6.7%)		15
Closest to work	6 (60%)	1 (10%)	2 (20%)	1 (10%)					10
Recommended by family/friends	2 (25%)	3 (37.5%)	2 (25%)		1 (12.5%)				8
Cost of care	3 (50%)	2 (33.3%)						1 (16.7%)	6
Required by insurance plan	1 (33.3%)				1 (33.3%)			1 (33.3%)	3
VA/Military requirement								3 (100%)	3
Other		1 (100%)							1

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

2018 N= 218

2015 N= 238

2011 N= 283

Seventy-eight percent of the respondents (n=171) indicated they or a household member had seen a healthcare specialist during the past three years and 21.6% (n=47) indicated they had not. Eight respondents chose not to answer this question.



Location of Healthcare Specialist (Question 21)

2018 N= 171

2015 N= 195

2011 N= 241

Of the 171 respondents who indicated they saw a healthcare specialist in the past three years, 52% (n=89) saw one at Great Falls Clinic. Benefis specialty services were utilized by 29.8% of respondents (n=51) and Chester was reported by 27.5% (n=47). Respondents could select more than one location; therefore, percentages do not equal 100%.

Location	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Great Falls Clinic¹	188	78.0%	146	74.9%	89	52.0%
Benefis	Not asked – 2011		Not asked – 2015		51	29.8%
Chester²	121	50.2%	87	44.6%	47	27.5%
Kalispell ³	19	7.9%	12	6.2%	30	17.5%
Havre	47	19.5%	36	18.5%	24	14.0%
Billings	21	8.7%	14	7.2%	15	8.8%
Missoula	11	4.6%	10	5.1%	10	5.8%
Shelby	20	8.3%	12	6.2%	6	3.5%
Helena	Not asked – 2011		15	7.7%	8	4.7%
VA Hospital	Not asked – 2011		Not asked – 2015		4	2.3%
Conrad	Not asked – 2011		Not asked – 2015		2	1.2%
Cut Bank	Not asked – 2011		Not asked – 2015		0	0%
Fort Benton	Not asked – 2011		Not asked – 2015		0	0%
Other	27	11.2%	15	7.7%	15	8.8%

¹Significantly fewer 2018 respondents selected ‘Great Falls Clinic’ as the location where they received specialty services.

²Selection of ‘Chester’ as the location where respondents received specialty services has declined significantly since 2011.

³Significantly more 2018 respondents selected ‘Kalispell’ as the location where they received specialty services.

“Other” comments:

- Bozeman (2)
- Lewistown, MT
- Dr. Santine
- Out of state (2)
- Great Falls (6)
- Sletten Cancer Center
- Tucson
- Las Vegas

Type of Healthcare Specialist Seen (Question 22)

2018 N= 171

2015 N= 195

2011 N= 241

The respondents (n=171) saw a wide array of healthcare specialists in the past three years. The most frequently indicated specialist was a “Orthopedic surgeon” with 26.9% of respondents (n=46) having utilized their services. “Cardiologist” and “Dermatologist” were the next most utilized specialists with 24% (n=41 each). Respondents were asked to choose all that apply so percentages do not equal 100%.

Health Care Specialist	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Orthopedic surgeon	53	22.0%	54	27.7%	46	26.9%
Cardiologist	47	19.5%	50	25.6%	41	24.0%
Dermatologist¹	23	9.5%	39	20.0%	41	24.0%
Dentist ²	139	57.7%	104	53.3%	39	22.8%
Ophthalmologist	Not asked - 2011		35	17.9%	31	18.1%
ENT (ear/nose/throat)	49	20.3%	27	13.8%	27	15.8%
OB/GYN	30	12.4%	25	12.8%	24	14.0%
Chiropractor	28	11.6%	27	13.8%	21	12.3%
Urologist	46	19.1%	30	15.4%	21	12.3%
Physical therapist ³	60	24.9%	49	25.1%	17	9.9%
Neurologist	25	10.4%	22	11.3%	16	9.4%
Podiatrist	9	3.7%	15	7.7%	16	9.4%
Radiologist ⁴	39	16.2%	32	16.4%	14	8.2%
Oncologist	21	8.7%	18	9.2%	13	7.6%
Gastroenterologist	27	11.2%	15	7.7%	12	7.0%
Allergist	15	6.2%	20	10.3%	11	6.4%
General surgeon ⁵	41	17.0%	26	13.3%	11	6.4%
Endocrinologist	9	3.7%	9	4.6%	10	5.8%
Rheumatologist	16	6.6%	11	5.6%	9	5.3%
Neurosurgeon	13	5.4%	6	3.1%	8	4.7%
Pediatrician	9	3.7%	7	3.6%	6	3.5%
Dietician	5	2.1%	5	2.6%	4	2.3%
Mental health counselor	11	4.6%	6	3.1%	4	2.3%
Occupational therapist	13	5.4%	8	4.1%	4	2.3%
Psychologist	6	2.5%	3	1.5%	3	1.8%
Oral surgeon ⁶	22	9.1%	10	5.1%	2	1.2%
Psychiatrist (M.D.)	9	3.7%	3	1.5%	2	1.2%
Social worker ⁷	26	10.8%	1	0.5%	2	1.2%
Speech therapist	4	1.7%	2	1.0%	2	1.2%
Periodontist	3	1.2%	4	2.1%	1	0.6%
Substance abuse counselor	1	0.4%	0	0%	1	0.6%
Pulmonologist	Not asked – 2011		11	5.6%	9	5.3%

Geriatrician	0	0%	1	0.5%	0	0%
Other	19	7.9%	9	4.6%	19	11.1%

¹Significantly more 2018 and 215 respondents indicated they had seen a ‘Dermatologist’ in the past three years.

²⁻⁶Significantly fewer 2018 respondents indicated they had seen a ‘Dentist’, ‘Physical therapist’, ‘Radiologist’, ‘General surgeon’ or an ‘Oral surgeon’ in the past three years.

⁷Significantly fewer 2018 and 2015 respondents indicated they had seen a ‘Social worker’ in the past three years.

“Other” comments:

- Infection disease specialist (2)
- Nephrologist
- Surgeon
- Kidney specialist
- Audiology, optometry
- One who works on hands and wrists exclusively as well as a back surgeon
- Optometrist (3)
- Hematology
- Naturopath
- Knee replacement MD
- Several VA groups
- Diabetic
- Audiologist (2)
- Plastic surgeon

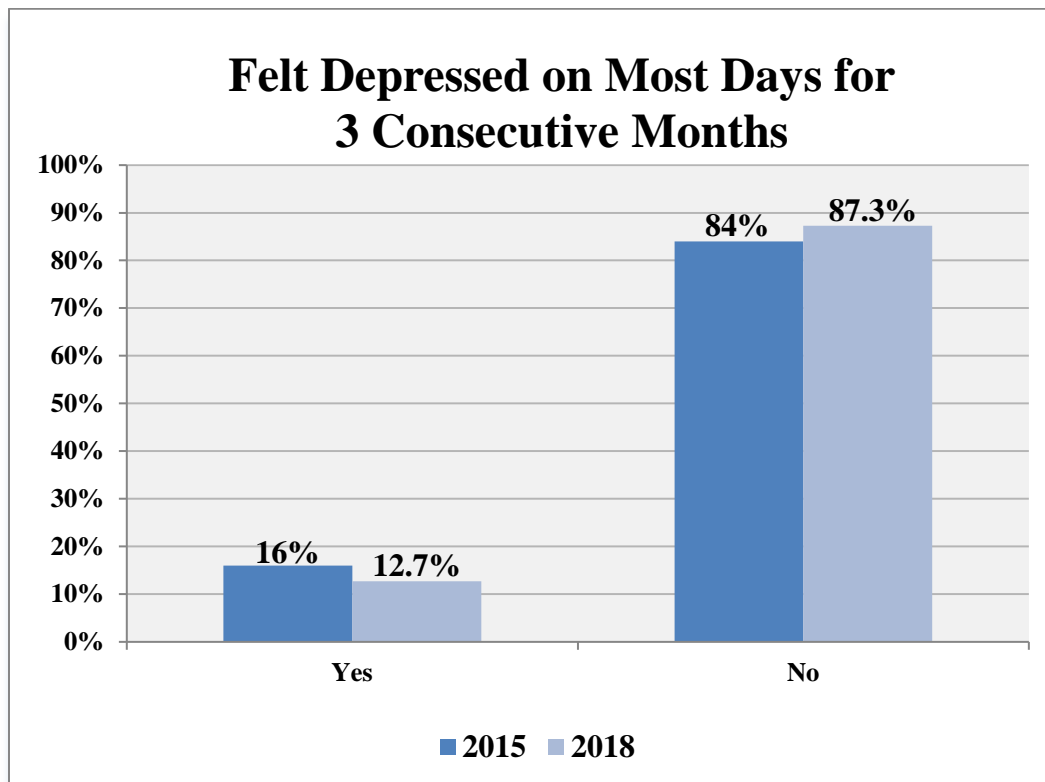
Survey Findings – Personal Health

Prevalence of Depression (Question 23)

2018 N= 221

2015 N= 243

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. Thirteen percent of respondents (n=28) indicated they had experienced periods of depression and 87.3% of respondents (n=193) indicated they had not. Five respondents chose not to answer this question.

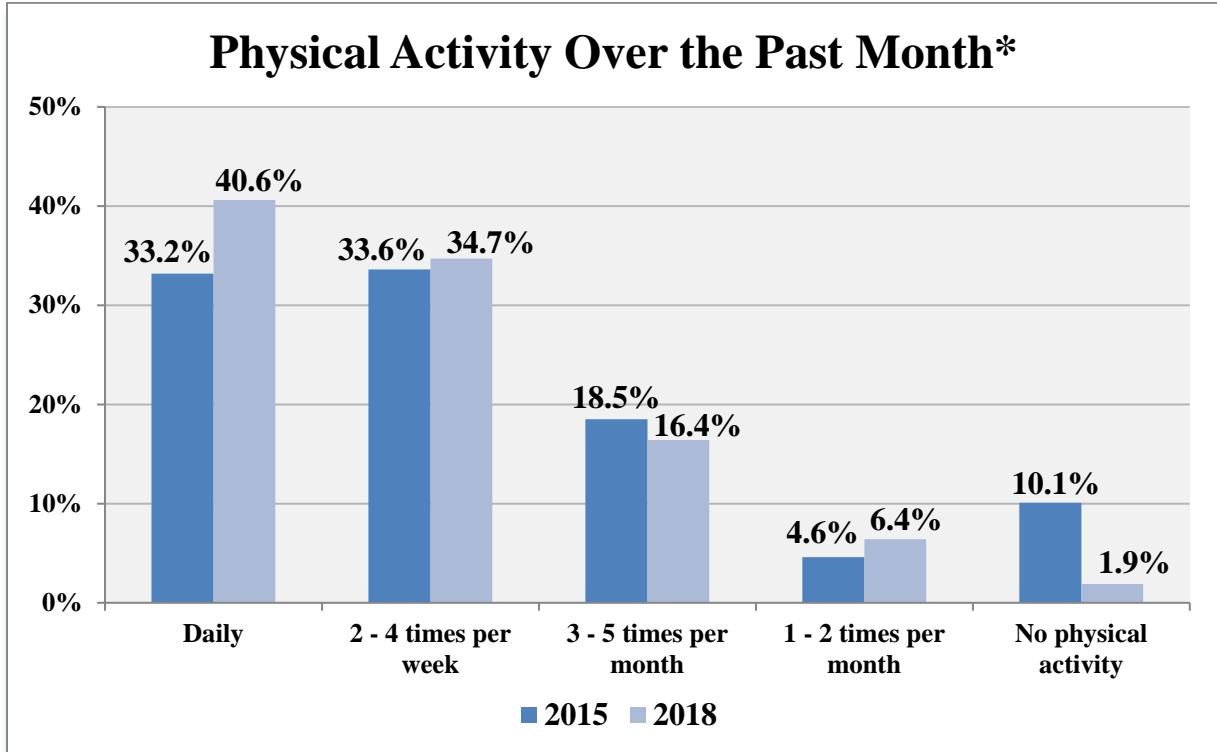


Physical Activity (Question 24)

2018 N= 219

2015 N= 238

Respondents were asked to indicate how frequently they had physical activity for at least twenty minutes over the past month. Forty-one percent of respondents (n=89) indicated they had “Daily” physical activity and 34.7% (n=76) indicated they had physical activity of at least twenty minutes “2-4 times per week”. Two percent of respondents (n=4) indicated they had “No physical activity” and five respondents chose not to answer this question.



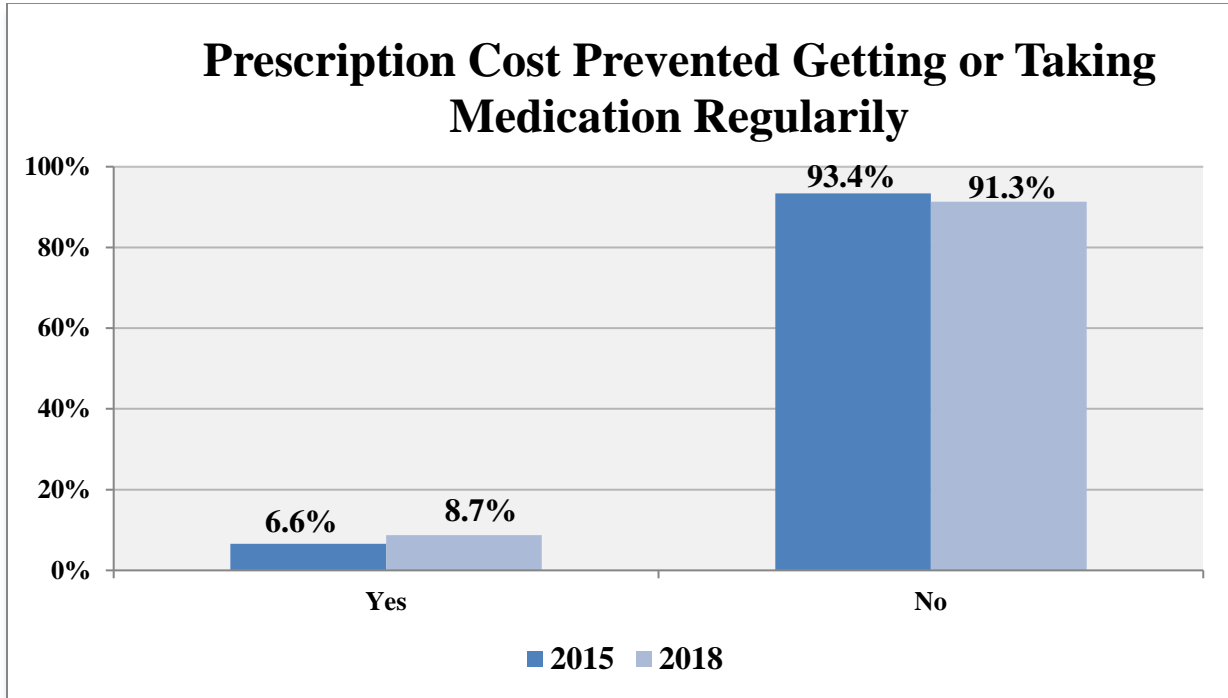
*Significantly fewer 2018 respondents indicated they had ‘no physical activity’ in the past month and significantly more had physical activity ‘daily’.

Cost and Prescription Medications (Question 25)

2018 N= 219

2015 N= 243

Respondents were asked to indicate if, during the last year, medication costs had prohibited them from getting a prescription or taking their medication regularly. Nine percent of respondents (n=19) indicated that, in the last year, cost had prohibited them from getting a prescription or taking their medication regularly. Ninety-one percent of respondents (n=200) indicated that cost had not prohibited them, and seven respondents chose not to answer this question.



Survey Findings – Health Insurance

Medical Insurance (Question 26)

2018 N= 218

2015 N= 213

2011 N= 287

Respondents were asked to indicate what type of medical insurance covers the majority of their medical expenses. Thirty-six percent (n=78) indicated they have “Medicare” coverage. Thirty-one percent (n=68) indicated they have “Employer sponsored,” and “Health Insurance Marketplace” was reported by 10.1% of respondents (n=22). Eight respondents chose not to answer this question.

Insurance Type	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Medicare	108	37.6%	66	31.0%	78	35.8%
Employer sponsored	95	33.1%	68	31.9%	68	31.2%
Health Insurance Marketplace	Not asked - 2011		12	5.6%	22	10.1%
Private insurance/private plan ¹	Not asked - 2011		35	16.4%	18	8.3%
None/pay out of pocket	14	4.9%	6	2.8%	10	4.6%
VA/Military	2	0.7%	2	0.9%	9	4.1%
Healthy MT Kids	7	2.4%	1	0.5%	6	2.8%
Medicaid	3	1.0%	4	1.9%	5	2.3%
State/other	3	1.0%	3	1.4%	2	0.9%
Agricultural Corp. paid	11	3.8%	10	4.7%	0	0%
Health Savings Account	0	0%	2	0.9%	0	0%
Indian Health	Not asked – 2011		0	0%	0	0%
Self-paid	40	13.9%	Not asked - 2015		Not asked - 2018	
Other	4	1.4%	4	1.9%	0	0%
TOTAL	287	100%	213	100%	218	100%

¹Significantly fewer 2018 respondents indicated they have ‘Private insurance/private plan’.

“Other” comments:

- Part B insurance
- Medicare/Tri-care
- Medicare supplement
- Signa
- Medicare D

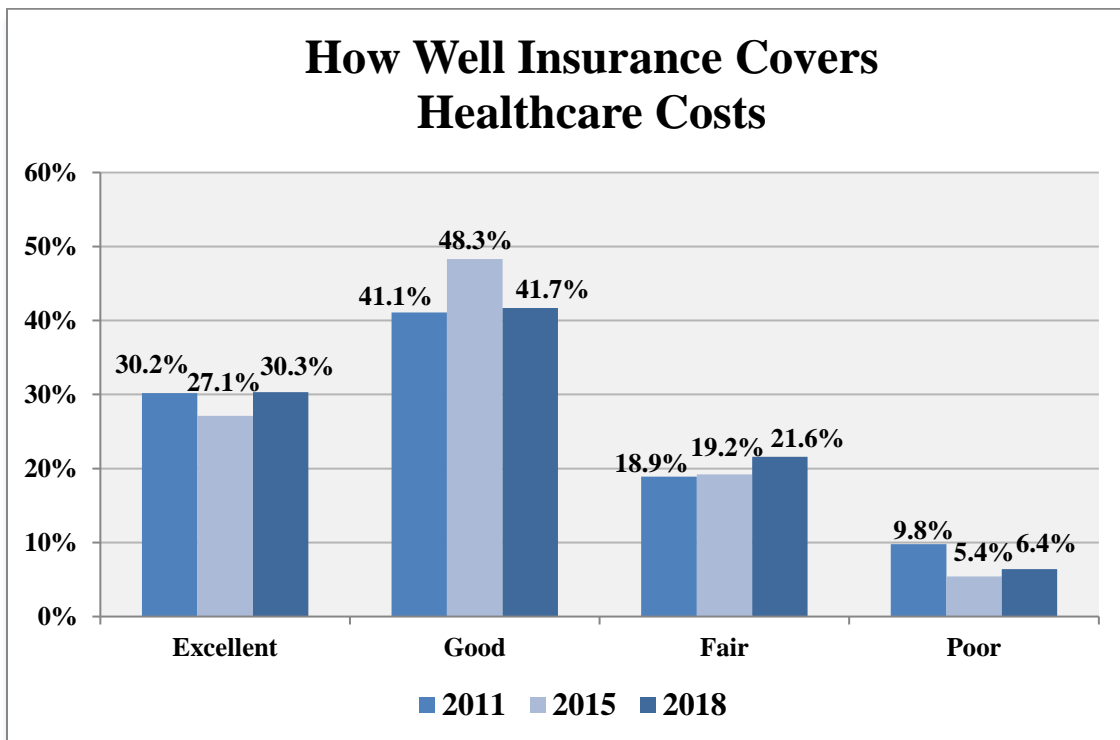
Insurance and Healthcare Costs (Question 27)

2018 N= 218

2015 N= 240

2011 N= 285

Respondents were asked to indicate how well they felt their health insurance covers their healthcare costs. Forty-two percent of respondents (n=91) indicated they felt their insurance covers a “Good” amount of their healthcare costs. Thirty percent of respondents (n=66) indicated they felt their insurance was “Excellent” and 21.6% of respondents (n=47) indicated they felt their insurance was “Fair.”



Barriers to Having Medical Insurance (Question 28)

2018 N= 10

2015 N= 6

2011 N= 14

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”, “Choose not to have medical insurance”, and “Employer does not offer insurance” were the top responses with 30% (n=3). each. Respondents could select all that apply.

Reason	2011		2015		2018	
	Count	Percent	Count	Percent	Count	Percent
Cannot afford to pay for medical insurance ¹	13	92.9%	2	33.3%	3	30.0%
Choose not to have medical insurance	2	14.3%	2	33.3%	3	30.0%
Employer does not offer insurance	0	0%	1	16.7%	3	30.0%
Other	1	7.1%	1	16.7%	2	20.0%

¹‘Cannot afford to pay for medical insurance’ has been significantly decreasing since 2011.

“Other” comments:

- Belong to co-op; Samaritan Ministries
- Have Samaritan Health Care Plan

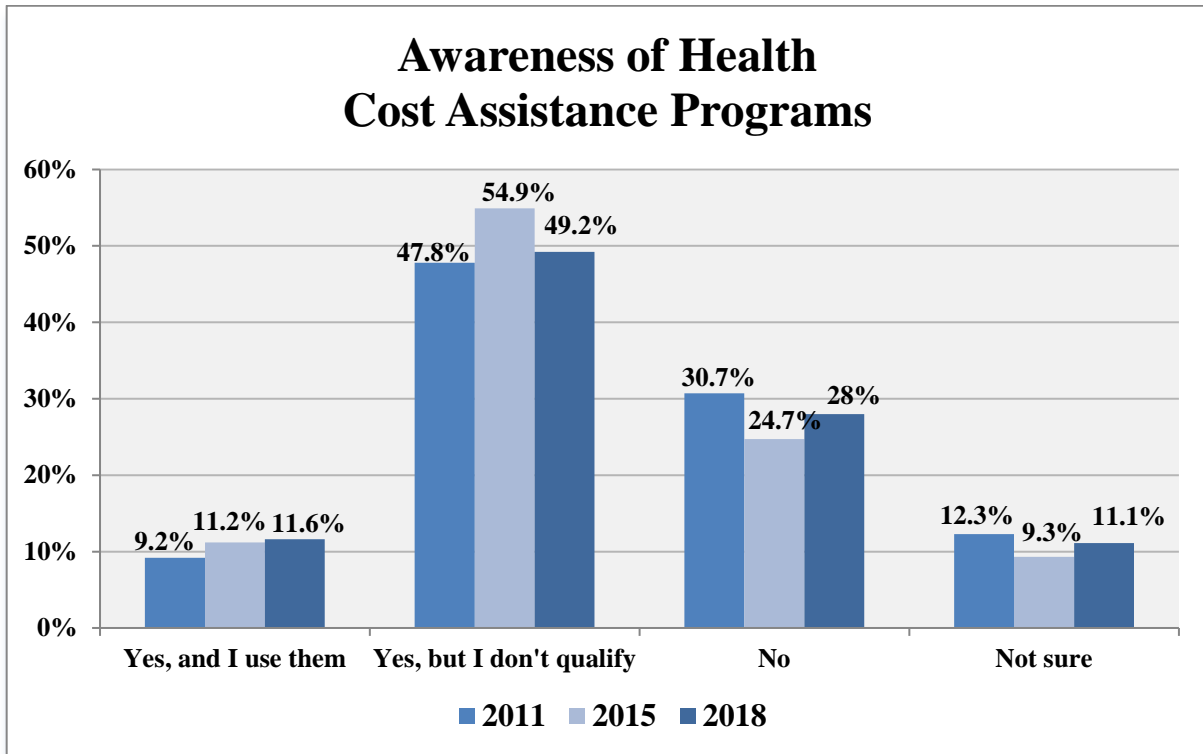
Awareness of Health Payment Programs (Question 29)

2018 N= 189

2015 N= 215

2011 N= 251

Respondents were asked to indicate their awareness of programs that help people pay for healthcare bills. Forty-nine percent of respondents (n=93) indicated they were aware of these types of programs but did not qualify to utilize them. Twenty-eight percent (n=53) indicated that they were not aware of these programs and 11.6% of respondents (n=22) indicated they are aware of the programs and utilize them.



VI. Focus Group Interview Methodology

Four focus group interviews were conducted in late April and early May of 2018. Participants were identified as people living in Liberty Medical Center's service area.

Forty-one people participated in the focus group interviews. The focus groups were designed to represent various consumer groups of healthcare including senior citizens, local community members, and community leaders. The focus groups were held at Liberty Medical Center, the Chester Firehall, and the Chester Senior Center. The meetings lasted up to 60 minutes in length and followed the same line of questioning. Focus group interview questions can be found in Appendix H. The questions and discussions were led by Natalie Claiborne with the Montana Office of Rural Health.

VII. Focus Group 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:

- Stable primary care workforce
- More mental health services
- Daycare services
- Access to outdoor recreational activities (sidewalks, safe places to walk)
- Senior services such as home health or personal care attendants

Most important local healthcare issues:

- Mental health
- Healthcare workforce
- Specialty services
- Affordability and availability of senior living options

Opinion of hospital services:

- Participants were very satisfied with the staff and providers at LMC. They indicated that turnover of providers (MD) is a concern, but are grateful for the services and care they receive

Reasons for using local providers:

- Participants indicated many changed locations for primary care when the local provider moved
- Some participants indicated they left for either women's or birthing services
- Participants who utilized local providers do so because of their relationship and the quality of care received

Opinion of local services:

- Participants praised the care received in the Emergency Room/Department and felt the care was better than in other ERs
- Participants said of the ambulance services: "Good equipment, good people, good response."
- Participants indicated there are a variety of senior services but there is an aging population and demand on services
- Public health is viewed as providing a valued service with a great location. Believe more people could utilize their services

Reasons to leave the community for healthcare:

- Specialty services
- Women's and birthing services
- Following their established provider when they moved

Needed healthcare services in the community:

- An MD
- Additional childcare services
- More mental health programs and improved access to them
- Eye doctor
- Home health, hospice

VIII. Summary

Two hundred twenty-six surveys were completed in Liberty Medical Center's service area for a 31% response rate. Of the 226 returned, 69.5% of the respondents were female, 52.3% were between the ages of 56 and 75 years, and 41.5% reported working full time.

Over half of the respondents (52.5%) feel the Chester area is a "somewhat healthy" place to live. Respondents indicated their top three health concerns were: alcohol abuse/substance abuse (48.7%), cancer (46.9%), and overweight/obesity (34.1%), with significantly more respondents identifying depression/anxiety, mental health issues, and lack of access to healthcare as concerns.

When respondents were asked which health related educational programs or classes they would be most interested in, the top choices were: Women's health (38.5%), Weight loss (33.2%) and Fitness (32.3%).

Overall, the respondents within Liberty Medical Center'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 Liberty Medical Center (LMC) and community members from Liberty 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
- Outreach and education
- Behavioral health

Liberty Medical Center will determine which needs or opportunities could be addressed considering LMC'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.

- Local schools
- MSU Extension – Liberty County
- Liberty County Chamber of Commerce
- Liberty County Community and Senior Center
- Liberty County Times
- Patient Assistance Prescription Program
- Liberty County Library
- Liberty County Council on Aging
- Liberty County Healthy Coalition
- Hi-Line Health Foundation
- National Health Services Corps (due to Medically Underserved Area)
- 340B Prescription Drug Program
- Local churches
- Guild
- Liberty County Public Health
- Local pharmacies
- Local EMTs (Emergency Medical Technicians)
- Fitness Xpress
- Shelby radio stations
- Havre radio stations

X. Evaluation of Activity Impacts from Previous CHNA

Liberty Medical Center provided the Montana Office of Rural Health with an update on their Implementation Plan activities from their previous CHNA process. The LMC Board of Directors approved its previous implementation plan on June 17, 2015. The plan prioritized the following health issues:

- Increasing awareness of new and existing services
- Increasing community education and outreach surrounding health and wellness, Alzheimer's disease/dementia, alcohol/substance abuse and cancer education
- Improving access to healthcare services

Increasing awareness of new and existing services

- Began publishing articles in the local newspaper about new and existing services offered
- Increased social media presence with Facebook and website

Increasing community education and outreach surrounding health and wellness, Alzheimer's disease/dementia, alcohol/substance abuse and cancer education

- Hosted community wide Alzheimer's education class
- Hosted handwashing classes at the local schools
- Hosted healthy eating classes at the local schools
- Developed a packet to give to caregivers of Alzheimer's and dementia patients
- Hosted educational speech at local high school about alcohol/substance abuse issues

Improving access to healthcare services

- Opened specialty clinic with visiting providers
- Brought a chiropractor in to the specialty clinic two days a week

Appendix A – Steering Committee Members

Steering Committee – Name and Organization Affiliation

1. Matt Waller – CEO, Liberty Medical Center (LMC)
2. Julie Erickson – Quality Improvement Specialist, LMC
3. Larry Hendrickson - LMC Board Chairman and County Commissioner
4. Morb Wicks - LMC Board Member and County Commissioner
5. Joette Woods - County Commissioner
6. Rita Chvilicek - CJI School Principal
7. Tara Hendrickson - EMT Director
8. Melissa Kantorowicz - Public Health Nurse

Appendix B – Public Health and Populations Consultation

Public Health and Populations Consultation Worksheet

1. Public Health

- a. Melissa Kantorowicz – Sweet Grass County Public Health Nurse
Maureen Wicks- Liberty County Commissioner, LMC Board Member
Larry Henderson- Liberty County Commissioner, LMC Board Chair
Julie Erickson- PR Director, LMC

- b. Date of Consultation
First Steering Committee Meeting: 03/29/2018

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

- d. Input and Recommendations from Consultation
 - 20% of Liberty County are Hutterite and this affects our county statistics. Especially in educational attainment and socioeconomic measures.
 - Mental health is a large concern in our area.
 - I think on the survey we should say Clinic and Lab instead of outpatient services to ensure people understand what we are talking about.
 - I think we should include Kremlin and Ledger in the survey distribution.

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. Maureen Wicks- Liberty County Commissioner, LMC Board member

- b. Date of Consultation
First Steering Committee Meeting: 03/29/2019

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

- d. Input and Recommendations from Consultation
 - Large Hutterite community in our area.
 - Opioids- abusing prescription medications and prescription sharing

Population: Seniors

- a. Joette Woods- LC Commissioner
Julie Erickson- PR Director, LMC

- b. Date of Consultation
First Steering Committee Meeting: 03/29/2018
- c. Type of Consultation (Interview, Steering Committee, Focus Group, etc.)
Steering Committee
- d. Input and Recommendations from Consultation
 - Cancer rates seem off. Cancer is one of the top mortality causes in Liberty County.
 - I think rates from having an older population as well as lifestyles.
 - I think we should switch the order of the questions on the survey to have primary care use first then hospitalization to avoid confusion.

Population: Youth

- a. Rita Chuilicek- Chester Principal
- b. Date of Consultation
First Steering Committee Meeting: 03/29/2018
- c. Type of Consultation (Interview, Steering Committee, Focus Group, etc.)
Steering Committee
- d. Input and Recommendations from Consultation
 - Schools have been very proactive around suicides.
 - There are some drug use/abuse concerns

Appendix C – Secondary Data

Liberty County
 Secondary Data Analysis
 May 7, 2018

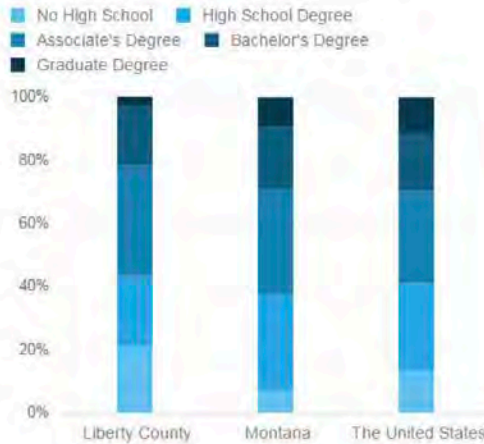


Office of Rural Health
 Area Health
 Education Center

Demographic Measure (%)		County ³			Montana ²			Nation ^{1,2}		
Population		2,359			1,032,949			321,418,820		
Population Density		1.6			6.8			Not relevant		
Age		<5	18-64	65+	<5	18-64	65+	<5	18-64	65+
		5.9%	58.7%	19.9%	6%	54.9%	17.2%	6.2%	56%	14.9%
Gender		Male		Female	Male		Female	Male		Female
		48%		52.0%	50.3%		49.7%	49.2%		50.8%
Race/Ethnic Distribution	White	98.3%			89.2%			77.1%		
	American Indian or Alaska Native	0.3%			6.6%			1.2%		
	Other †	0.7%			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



Liberty County

No High School	21.04%
High School Degree	22.12%
Associate's Degree	35.21%
Bachelor's Degree	18.71%
Graduate Degree	3.54%

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



Office of Rural Health
 Area Health
 Education Center

Liberty County
 Secondary Data Analysis
 May 7, 2018

Socioeconomic Measures (%)	County ^{1,2}	Montana ^{1,2,5}	Nation ^{2,5,6,7,8}
Median Income	\$47,768	\$46,766	\$53,482
Unemployment Rate	2.6%	4.1%	4.9%
Persons Below Poverty Level	17.0%	14.6%	13.5%
Uninsured Adults (Age <65)	19%	17%	13.3%
Uninsured Children (Age <18)	N/A	11.0%	5.5%
Children in Poverty	21%	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	County	Montana
<i>Births</i> <i>Between 2011-2013</i>	70	35,881
<i>Born less than 37 weeks</i>	N/A	9.1%
<i>Teen Birth Rate (females age 15-19)</i> <i>Per 1,000 years 2009-2013</i>	N/A	32.0
<i>Smoking during pregnancy</i>	N/A	16.3%
<i>Receiving WIC</i>	N/A	34.6%
<i>Children (2-5 years of age) overweight or obese</i>	N/A	27.9%

³County Health Profiles, DPPHS (2015)

Behavioral Health	County ^{1,3}	Montana ^{1,3,9}
<i>Childhood Immunization Up-To-Date (UTD) % Coverage*</i>	89.3%	65.6%
<i>Tobacco Use</i>	17%	19%
<i>Alcohol Use (binge + heavy drinking)</i>	21%	22%
<i>Obesity</i>	27%	25%
<i>Poor Mental Health Days (Past 30 days)</i>	3.4	3.6
<i>No Leisure time for physical activity</i>	23%	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) ³	County	Montana
<i>Chlamydia</i>	195.8	366.24
<i>Hepatitis C</i>	0	122.95
<i>Pertussis</i>	56.0	44.60

³County Health Profiles, DPPHS (2015)

Liberty County
 Secondary Data Analysis
 May 7, 2018

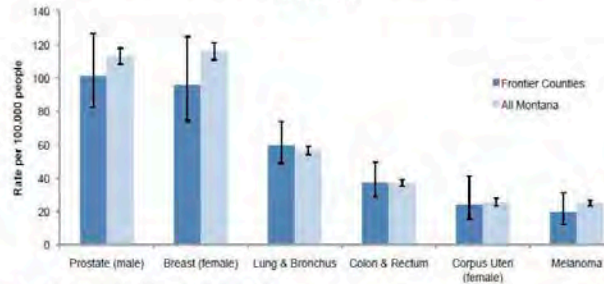
<i>Chronic Disease Inpatient Admissions²</i>	County	Montana
<i>Chronic Obstructive Pulmonary Disease (COPD) Per 100,000 population</i>	656.0	716.8
<i>Diabetes Per 100,000 population</i>	577.0	822.5
<i>Cardiovascular Disease Per 100,000 population</i>	572.3	746.7

² County Health Profiles, DPPHS (2015)

Cancer Prevalence	County ³	Montana ³	Nation ¹⁰
All Sites Cancer	284.4	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



² 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



May 4th, 2018

Dear [LASTNAME] household:

**Participate in our Community Health Needs Assessment survey for a chance to
WIN a \$50 Chamber Gift Certificate!**

Liberty Medical Center 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 Liberty Medical Center 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 of the 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 Liberty Medical Center in developing comprehensive and affordable health care services to our area residents.

1. **Due date to complete survey: May 18th**
2. **Complete your survey and return it in the envelope provided - no stamp needed**
3. **The winning number will be posted the week of May 21st**

The winning number for the \$50 Chamber Gift Certificate will be announced in the Liberty County Times as well as on the Liberty Medical Center Facebook page (<https://www.facebook.com/lchnh/>) the week of May 21st. Liberty Medical Center 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,

Matthew Waller, CEO

Dear [LASTNAME] household,

Liberty Medical Center 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 Chamber Gift Certificate upon submitting the survey. You can access the survey at helpslab.montana.edu, the main page of the HELPS Lab at MSU. Click [Current Surveys](#) and then select "Liberty Medical Center Survey." Your individualized access code is [CODED]. If you do not have access to a computer, a hard copy of the survey will be mailed to you in approximately 2 weeks. 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.

- Matthew Waller, CEO
Liberty Medical Center



Appendix E – Survey Instrument



Community Health Services Development Survey Chester, Montana

INSTRUCTIONS: Please complete this survey by marking the appropriate boxes and then return it in the enclosed postage-paid envelope. If you need assistance, 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"/> Lack of access to healthy food	<input type="checkbox"/> Recreation-related accidents/injuries
<input type="checkbox"/> Cancer	<input type="checkbox"/> Lack of exercise	<input type="checkbox"/> Teen drug use
<input type="checkbox"/> Child abuse/neglect	<input type="checkbox"/> Mental health issues	<input type="checkbox"/> Tobacco use
<input type="checkbox"/> Depression/anxiety	<input type="checkbox"/> Motor vehicle accidents	(vaping, e-cigarettes, smokeless)
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Opioid addiction	<input type="checkbox"/> Underage alcohol abuse
<input type="checkbox"/> Domestic violence	<input type="checkbox"/> Overweight/obesity	<input type="checkbox"/> Work related accidents/injuries
<input type="checkbox"/> Heart disease	<input type="checkbox"/> Stroke	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Lack of access to healthcare	<input type="checkbox"/> Suicide	

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"/> Teen recreational activities
<input type="checkbox"/> Good schools	<input type="checkbox"/> Tolerance for diversity
<input type="checkbox"/> Healthy behaviors and lifestyles	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Low crime/safe neighborhoods	

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

<input type="checkbox"/> Clinic/hospital staff	<input type="checkbox"/> Presentations	<input type="checkbox"/> Website/internet
<input type="checkbox"/> Friends/family	<input type="checkbox"/> Public health nurse	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Healthcare provider	<input type="checkbox"/> Radio	
<input type="checkbox"/> Mailings/newsletter	<input type="checkbox"/> Social media (Facebook, etc.)	
<input type="checkbox"/> Newspaper	<input type="checkbox"/> Word of mouth/reputation	

5. How do you rate your knowledge of the health services that are available at Liberty Medical Center?
 - Excellent Good Fair Poor

Turn to BACK of page to continue

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"/> Ambulance | <input type="checkbox"/> Massage therapy | <input type="checkbox"/> Specialty clinic services |
| <input type="checkbox"/> Chiropractor | <input type="checkbox"/> Mental health | <input type="checkbox"/> Tobacco prevention program |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Pharmacy | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Liberty County Transit | <input type="checkbox"/> Public health | |
| <input type="checkbox"/> Fitness center | <input type="checkbox"/> Senior center | |
7. In your opinion, what would improve our community's access to healthcare? (Select ALL that apply)
- | | |
|------------------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Cultural sensitivity | <input type="checkbox"/> Additional specialists |
| <input type="checkbox"/> Greater health education services | <input type="checkbox"/> Clinic/lab expanded hours |
| <input type="checkbox"/> Home health | <input type="checkbox"/> Telemedicine |
| <input type="checkbox"/> Improved quality of care | <input type="checkbox"/> Transportation assistance |
| <input type="checkbox"/> Insurance navigator | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> More primary care providers | |
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"/> Mental health | <input type="checkbox"/> Support groups |
| <input type="checkbox"/> Fitness | <input type="checkbox"/> Nutrition | <input type="checkbox"/> Weight loss |
| <input type="checkbox"/> Grief counseling | <input type="checkbox"/> Parenting | <input type="checkbox"/> Women's health |
| <input type="checkbox"/> Living will | <input type="checkbox"/> Prenatal | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Men's health | <input type="checkbox"/> Smoking/tobacco cessation | |
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"/> Mammography | <input type="checkbox"/> Routine blood work/birthday lab |
| <input type="checkbox"/> Cholesterol check | <input type="checkbox"/> Medicare wellness | <input type="checkbox"/> Routine health checkup |
| <input type="checkbox"/> Colonoscopy | <input type="checkbox"/> Pap smear | <input type="checkbox"/> None |
| <input type="checkbox"/> DEXA scan | <input type="checkbox"/> Prostate (PSA) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Flu shot | <input type="checkbox"/> Routine blood pressure check | |
10. What additional healthcare services would you use if available locally? (Select ALL that apply)
- | | | |
|--------------------------------------------------|-------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Acupuncture | <input type="checkbox"/> Foot care clinic | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Allergist | <input type="checkbox"/> Home health | <input type="checkbox"/> Rheumatology |
| <input type="checkbox"/> Cancer care | <input type="checkbox"/> MRI | <input type="checkbox"/> Telemedicine |
| <input type="checkbox"/> Community health worker | <input type="checkbox"/> Naturopath | <input type="checkbox"/> Urology |
| <input type="checkbox"/> Dermatology | <input type="checkbox"/> OB/GYN | <input type="checkbox"/> VA access |
| <input type="checkbox"/> ENT (ear/nose/throat) | <input type="checkbox"/> Optometry | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Endocrinologist | <input type="checkbox"/> Podiatrist | |
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?
- | | | | |
|-----------------------------------------|------------------------------------|----------------------------------------|-------------------------------------|
| <input type="checkbox"/> Very important | <input type="checkbox"/> Important | <input type="checkbox"/> Not important | <input type="checkbox"/> 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 | <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, 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 17)

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

- | | | |
|-----------------------------------|---------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Chester | <input type="checkbox"/> Fort Benton | <input type="checkbox"/> Missoula |
| <input type="checkbox"/> Billings | <input type="checkbox"/> Great Falls Clinic | <input type="checkbox"/> Shelby |
| <input type="checkbox"/> Benefis | <input type="checkbox"/> Havre | <input type="checkbox"/> VA clinic |
| <input type="checkbox"/> Conrad | <input type="checkbox"/> Helena | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Cut Bank | <input type="checkbox"/> Kalispell | |

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

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

17. 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 20)

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

- | | | |
|-----------------------------------|---------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Chester | <input type="checkbox"/> Fort Benton | <input type="checkbox"/> Missoula |
| <input type="checkbox"/> Billings | <input type="checkbox"/> Great Falls Clinic | <input type="checkbox"/> Shelby |
| <input type="checkbox"/> Benefis | <input type="checkbox"/> Havre | <input type="checkbox"/> VA hospital |
| <input type="checkbox"/> Conrad | <input type="checkbox"/> Helena | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Cut Bank | <input type="checkbox"/> Kalispell | |

Turn to BACK of page to continue

19. 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"/> Medical staff | <input type="checkbox"/> Required by insurance plan |
| <input type="checkbox"/> Closest to work | <input type="checkbox"/> Prefer to see M.D. | <input type="checkbox"/> VA/Military requirement |
| <input type="checkbox"/> Cost of care | <input type="checkbox"/> Prior experience with hospital | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Emergency, no choice | <input type="checkbox"/> Recommended by family or friends | |
| <input type="checkbox"/> Hospital's reputation for quality | <input type="checkbox"/> Referred by physician | |

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)

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

- | | | |
|-----------------------------------|---------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Chester | <input type="checkbox"/> Fort Benton | <input type="checkbox"/> Missoula |
| <input type="checkbox"/> Billings | <input type="checkbox"/> Great Falls Clinic | <input type="checkbox"/> Shelby |
| <input type="checkbox"/> Benefis | <input type="checkbox"/> Havre | <input type="checkbox"/> VA hospital |
| <input type="checkbox"/> Conrad | <input type="checkbox"/> Helena | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Cut Bank | <input type="checkbox"/> Kalispell | |

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

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

23. In the past three years, have there been periods of at least three consecutive months where you felt depressed on most days?

- Yes No

24. 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

25. Has cost prohibited you from getting a prescription or taking your medication regularly?
 Yes No

26. What type of medical insurance covers the majority of your household's medical expenses? (Select ONLY 1)

- | | | |
|-------------------------------------------------------|---------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Employer sponsored | <input type="checkbox"/> Indian Health | <input type="checkbox"/> State plan |
| <input type="checkbox"/> Health Insurance Marketplace | <input type="checkbox"/> Medicaid | <input type="checkbox"/> VA/military |
| <input type="checkbox"/> Health Savings Account | <input type="checkbox"/> Medicare | <input type="checkbox"/> None/pay out of pocket |
| <input type="checkbox"/> Healthy MT Kids | <input type="checkbox"/> Private insurance/private plan | <input type="checkbox"/> Other: _____ |

27. How well do you feel your health insurance covers your healthcare costs?

- Excellent Good Fair Poor

28. If you do NOT have medical insurance, why? (Select ALL that apply)

- | | |
|--------------------------------------------------------------------|---------------------------------------------------------------|
| <input type="checkbox"/> Can't afford to pay for medical insurance | <input type="checkbox"/> Choose not to have medical insurance |
| <input type="checkbox"/> Employer does not offer insurance | <input type="checkbox"/> Other: _____ |

29. 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.

30. Where do you currently live, by zip code?

- | | |
|------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> 59522 Chester | <input type="checkbox"/> 59532 Kremlin |
| <input type="checkbox"/> 59540 Rudyard | <input type="checkbox"/> 59444 Galata |
| <input type="checkbox"/> 59531 Joplin | <input type="checkbox"/> 59456 Ledger |
| <input type="checkbox"/> 59530 Inverness | <input type="checkbox"/> 59461 Lothair |
| <input type="checkbox"/> 59525 Gildford | <input type="checkbox"/> 59545 Whitlash |
| <input type="checkbox"/> 59528 Hingham | <input type="checkbox"/> Other: _____ |

31. What is your gender?

- Male Female

32. What age range represents you?

- | | | |
|--------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> 18-25 | <input type="checkbox"/> 46-55 | <input type="checkbox"/> 76-85 |
| <input type="checkbox"/> 26-35 | <input type="checkbox"/> 56-65 | <input type="checkbox"/> 86+ |
| <input type="checkbox"/> 36-45 | <input type="checkbox"/> 66-75 | |

33. What is your employment status?

- | | | |
|-----------------------------------------|--------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Work full time | <input type="checkbox"/> Student | <input type="checkbox"/> Not currently seeking employment |
| <input type="checkbox"/> Work part time | <input type="checkbox"/> Collect disability | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Retired | <input type="checkbox"/> Unemployed, but looking | |

Turn to BACK of page to continue

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?

- These choices should be grouped. Alcohol, drugs, tobacco, cancer and others are concerns
- Unhealthy lifestyle
- Aging process
- Not watching children or letting them stay home too young
- Overall drug abuse, all ages
- Public opinions negative - self serving
- Apathy

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

- So many choices could be grouped. I don't like leaving out other choices that I feel are extremely important.

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

- None
- Poster around town
- Health fairs
- I live here (3)
- You @ Liberty Rudyard EMT ER SAVED MY LIFE

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

- None (4)
- Specialized surgery
- PT [Physical Therapy]
- School gym
- Optometrist
- Visitor
- ER

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

- Increased staffing on weekends, evenings, nights
- Help with billing; discount for cash payment in-full
- Recruit a doctor (3)
- We need a doctor for our system
- Real doctors instead of PA's (4)
- MD availability (6)
- Full time MD + Optometrist
- Long-term providers
- Consistency of care and follow through
- Discount for those that pay on time
- Primary care providers are extremely important but all the providers in the world are wasted if the patient can't access them in a timely, necessary way.

- More nurses
- Resident eye doctor
- Naturopathic doctor (3)
- Hospice
- Expanded acceptance of other health insurances
- Confidentiality
- It would be nice to offer blood work once a year but not necessarily one's birthday month
- Medicaid help
- VA coverage

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

- Basic first aid
- None (4)
- other than emergency room, to be seen by providers as needed without advanced appointments. Problems arise that are not really emergency that need to be addressed in a timely manner.
- None, I'm 87
- End of life hospice (2)
- Childhood obesity
- VA groups

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

- None (4)
- Heart and lungs
- Massage therapy, insurance paid
- Radiologist
- Optometrist
- Dental
- Periodontist

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

- Real doctors
- Procrastination on my part
- Never meet insurance deductible!
- I was seen in the emergency room on a Sunday and referred to a primary care provider on Monday and was told by the staff I would have to wait until the following Monday for an appointment. No matter what my problem, the staff member didn't care. My point here is, no medical provider is not any better than those that coordinate services. Some conditions just can't wait!
- Did not get a call back for a colonoscopy
- My personal info being leaked to others not entitled to that info; has happened before
- Privacy in small town
- Thought it would go away on its own and it did
- Bad doctors
- Had to get allergy shots twice/wk. Protocol took too long a time to receive shot

- Not available
- No pediatricians to deal with post NICU baby

15. Where was that primary healthcare provider located?

- Great Falls OB/GYN
- Northwest Physicians, Gt. Falls
- Family Practice, Great Falls (2)
- Military clinic
- Great Falls

16. Why did you select the primary care provider you are currently seeing?

- She had been my Dr in the past
- Some people who work in Liberty County Healthcare Services talk too much. In a small town, that is unacceptable.
- Where we live in the winter and Great Falls, because that is where the doctor went from here
- Has all the resources needed
- Several years as her patient
- A woman MD
- Pregnancy
- Female
- OB-GYN not in Chester long enough to develop relationship
- Was my physician in Chester previously
- Dr. moved, I followed
- Work at Havre Hospital
- At LMC because it's close. Benefis because they provide special care not offered in Chester
- I believe in supporting local services (2)
- My son's Medicaid won't let me take them to their pediatrician
- Convenience
- Just clicked with him and he was very thorough
- Personal preference

18. If yes, which hospital did your household use the MOST for hospital care?

- Out of state

19. Thinking about the hospital you were at most frequently, what were the three most important reasons for selecting that hospital?

- Less gravel road

21. Where was the healthcare specialists seen?

- Bozeman (2)
- Lewistown, MT
- Dr. Santine
- Out of state (2)
- Great Falls (6)

- Sletten Cancer Center
- Tucson
- Las Vegas

22. What type of healthcare specialist was seen?

- Infection disease specialist (2)
- Nephrologist
- Surgeon
- Kidney specialist
- Audiology, optometry
- One who works on hands and wrists exclusively as well as a back surgeon
- Optometrist (3)
- Hematology
- Naturopath
- Knee replacement MD
- Several VA groups
- Diabetic
- Audiologist (2)
- Plastic surgeon

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

- Part B insurance
- Medicare/Tri-care
- Medicare supplement
- Signa
- Medicare D

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

- Belong to co-op; Samaritan Ministries
- Have Samaritan Health Care Plan

33. What is your employment status?

- Self-employed (5)
- Homemaker (2)

Appendix G –Focus Group Interview Questions

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?

Appendix H – Focus Group Interview Notes

Focus Group #1

Thursday, April 26, 2018 – 10:30am– 11:00am, Liberty Medical Center (Hi-Line Health Foundation)– Chester, MT

12 participants (2 male, 10 female)

1. What would make this community a healthier place to live?
 - Mental health services. We are doing better, and a mental health specialist comes in once a month, but she is really busy. We could use another one.
 - Not having a main doctor is obviously an issue. We just haven't made that match yet. We need to have a main doctor to cover all the PA.
 - LMC is doing dietary classes, but I think more people need to know about nutrition and healthy portion sizes.
 - The healthy cooking class was really well received
 - Lack of daycare services is a huge issue. They are only two certified day cares in town and they are absolutely full.

2. What do you think are the most important local healthcare issues?
 - Again, attracting a provider that will stay in the community.
 - Availability of specialists. There are a lot of healthcare services people need to leave the area for.
 - Mental Health.
 - A rheumatologist is not available, and we have a big aging population.
 - It seems like a lot of people have allergies too. A visiting allergist would be good.
 - Workforce, starting with EMTs and making sure we have CNAs. It's a big county. Retention is always an issue.
 - Trying to get people excited about working out and being active is difficult. LMC employees were offered reduced rates at the gym but not that many people took part in it.

3. What do you think of the hospital in terms of:
 - Quality of Care
 - We might not have a doc, but I am sure happy for the care that we have.
 - The care here is superior and has been for years.

 - Number of Services
 - *Not asked*

 - Hospital Staff
 - *Not asked*

 - Hospital Board and Leadership
 - *Not asked*

Business Office

- *Not asked*

Condition of Facility and Equipment

- *Not asked*

Financial Health of the Hospital

- *Not asked*

Cost

- *Not asked*

Office/Clinic Staff

- *Not asked*

Availability

- *Not asked*

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

- I travel from out of the county to Chester.
- I go out of town because there aren't a lot of women's services here.
 - Me too, I leave for women's services.
- Seems like it takes a long time for providers to get credentialed. It takes about 6 months to fully credential someone.

5. What do you think about these local services:

Emergency Room

- We have a great facility.
- They come in at any time and provide services.
- You are treated better here than other emergency rooms and if needed you get referred to really good providers.

Ambulance Service

- Much better than it used to be. In the past it took two years to get a bill.
- We all like the new director.
- The volunteers are excited and happy to be here. There is not a lot of turnover of EMTs in the county.
- Good equipment, good people and good response.

Healthcare Services for Senior Citizens

- There is no home health, which is really hard for people. There are folks who could still stay at home and just need a little help.
- Angel Care out of Havre is doing a lot of work on the Hi-Line now. They will come as far as Rudyard. Some of them are CNAs, some are Nurses, and some are household helpers.

Public/County Health Department

- People don't know that they can go there for their shots. They are helpful and easy but people don't know they are there.

Healthcare Services for Low-Income Individuals/Families

- *Not asked*

Nursing Home/Assisted Living Facility

- There is a waiting list so there is demand.
- There are 40 people on the list for the nursing home right now.
- A lot of people can't afford Wheat County Estates, so they have to get on the list.
- There is also a list for the retirement community as well.

Pharmacy

- They are very good.

6. Why might people leave the community for healthcare?

- Specialty services not available.
- Women's services.

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

- It would be really nice to have an eye doctor in town.
- Not having prenatal care here is really difficult for young families.
- A walking trail would be really nice.
- More childcare services.

Focus Group #2

Thursday, April 26, 2018 – 1:00pm – 2:00pm, Liberty Medical Center (Chamber Committee) – Chester, MT

6 participants (1 male, 5 female)

1. What would make this community a healthier place to live?

- I walk a lot and one thing I have noticed it that sidewalks are a scarcity. If we want people to be outside and active, then you have to give people places where they are comfortable walking around.
- We need to give people the ability to be safe when they are walking.
- A family in town invited the community to participate in Blue Bird Walks on their property. It would be really cool to reinvigorate something like that in the community. A community walking group.
- I am not much of a gardener, but a community garden would be nice. A lot of groups in town have talked about it. Where would it go?
 - Need to have access to water and it is difficult to find someone to maintain it.
 - It would take volunteers and we know how that goes. They get burnt out quickly.

2. What do you think are the most important local healthcare issues?
- Getting people to stay. With healthcare professionals, it's hard to get people to stay and raise their families. We don't see the longevity (with providers) like we used to.
 - It's rare to find people that want to come to a small town and stay.

3. What do you think of the hospital in terms of:

Quality of Care

- For a small town we are very lucky to have the facility that we have. A lot of people might not had made it if they weren't able to get stabilized here.

Number of Services

- *Not asked.*

Hospital Staff

- *Not asked.*

Hospital Board and Leadership

- *Not asked.*

Business Office

- *Not asked.*

Condition of Facility and Equipment

- *Not asked.*

Financial Health of the Hospital

- *Not asked.*

Cost

- *Not asked.*

Office/Clinic Staff

- *Not asked.*

Availability

- *Not asked.*

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

- I choose to stay here.
- I had a really bad experience here. A nurse was not professional.
 - All it takes is one bad experience
- The PA saved my dad's life but unfortunately, he's not here anymore.
- When I was having kids, I chose to go to Conrad because of the turnover in Chester. However, we go here now that I am not having kids anymore.
- A lot of people leave to community for women's services.

- But they really do save lives here.
- I think having the specialist that come in really help, especially for those who can't drive.
- I wish they could get more variety of specialists.

5. What do you think about these local services:

Emergency Room

- *Not asked.*

Ambulance Service

- The volunteers here are absolutely fabulous. They will drop everything to go on a run. They have saved a lot of lives. We are so lucky to have them here.

Healthcare Services for Senior Citizens

- We have a pretty good senior program here. The bus is great and takes them to Great Falls.
- The new senior center is fantastic. We have an aging community.
- I would not want to be anywhere else as an aging female alone than in Chester. I would feel completely comfortable and confident in the nursing home here. In my future I wouldn't mind being here as an aging senior.

Public/County Health Department

- *Not asked.*

Healthcare Services for Low-Income Individuals/Families

- *Not asked.*

Nursing Home/Assisted Living Facility

- *Not asked.*

Pharmacy

- *Not asked.*

6. Why might people leave the community for healthcare?

- *Not asked.*

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

- A podiatrist used to come here and doesn't anymore.
- We used to have an optometrist too.
- A lot of people go to Great Falls to see Dr. Earl.

Focus Group #3

Tuesday, May 1, 2018 – 8:30am – 9:00am, Liberty Medical Center (Local Emergency Planning Committee)– Chester, MT

15 participants (5 male, 10 female)

1. What would make this community a healthier place to live?
 - Less flooding.
 - Lack of mental health. The number one thing is lack of mental health resources in the state let alone Chester.
 - Vaping and e-cigarettes. New policies have been created, but it's a growing concern.
 - It's hard to do things outside and stay active in the winter. There are the diabetes classes and healthy cooking classes, those are great. So maybe some more opportunities to be fit.
 - Cost of healthy food is expensive. It's hard to find unprocessed foods.
 - The drug problem is still pretty significant here. We see Marijuana and meth.
 - More outreach to the Hutterite colonies would be good. We see the flu, ER visits, major depression etc. in this population. We have three colonies. They are about 20% of the total population here.

 2. What do you think are the most important local healthcare issues?
 - I am not too sure about the support groups in our community. Not sure how active AA and others are in the community right now.
 - The recruitment of qualified professionals is tough. All the way from EMS, to nurses and doctors.
 - It takes forever to get referred into a specialist.

 3. What do you think of the hospital in terms of:
 - Quality of Care
 - I think its excellent.
 - I hear a lot more complaints out of Benefis in Great Falls than I do in Chester.

 - Number of Services
 - For the size of our community, the hospital does an excellent job.
 - They are getting an MRI and are always looking into expanding services.
 - They are trying to get an eye doctor and there is even a specialty clinic with a chiropractor. Many specialists come in.

 - Hospital Staff
 - You get a lot more personalized care here.
 - One challenge for our staff is continuing education. They have to go to Great Falls. It would be nice if there was come here who was certified in PALS. It would be nice if there was a rural coalition to address this and all rural facilities in the area could team up on this.

 - Hospital Board and Leadership
 - Our CEO and board are very supportive of the staff.
-

Business Office

- *Not asked.*

Condition of Facility and Equipment

- *Not asked.*

Financial Health of the Hospital

- *Not asked.*

Cost

- *Not asked.*

Office/Clinic Staff

- *Not asked.*

Availability

- There is a delay and there is no follow up with it either [specialty consults]. So, you make an appointment a month out and there is no reminder call.
- They offer same day appointments [in the clinic] now, but it depends who is on that day.

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

- If your primary care moves to Great Falls a lot of people will follow. I think a lot of people followed Dr. Earl to Great Falls.
- It is really helpful to be able to get your blood work here.

5. What do you think about these local services:

Emergency Room

- They are excellent. The care my family member received was exceptional.
- I was really impressed with the ingenuity they have. They know what they are doing.

Ambulance Service

- Excellent.

Healthcare Services for Senior Citizens

- Pretty good.
- With the nursing home, assisted living, The Lodge and the senior center we do have a lot here.
- The center does meals and transportation.
- We lack hospice and home health care.

Public/County Health Department

- I think it's really good.
- I have never heard anything bad.
- I think it is well used.
- They do great outreach.
- They get out in the community. They go over to the senior center and take blood pressures. The seniors really enjoy it.

Healthcare Services for Low-Income Individuals/Families

- They are well utilized.

Nursing Home/Assisted Living Facility

- *Not asked.*

Pharmacy

- *Not asked.*

6. Why might people leave the community for healthcare?
 - Some people like to go out of town because everyone here is your neighbor. Privacy is limited in a small town.
 - I think a lot of young people go to Havre to the clinic there. A lot of young females will leave for women's services.
 - Another big one is pregnancy. There are no services here, so they leave to have their babies and then they continue to utilize services in Great Falls.
7. What other healthcare services are needed in the community?
 - Urology
 - Mental health, we have a fantastic counselor here, but they are always overbooked.
 - Home health.
 - Eye doctor.
 - Child care.
 - A shelter or safe house for abused spouses.

Focus Group #4

Thursday, May 1, 2018 – 9:45am – 10:30am, Liberty County Senior Center (Council on Aging)–
Chester, MT

8 participants (2 male, 6 female)

1. What would make this community a healthier place to live?
 - Home health. So many could stay home and there are quite a few people who are home bound who could have someone check on them. A lot of people go to the nursing home before they need to be there.
 - Agreed
 - And hospice.

2. What do you think are the most important local healthcare issues?
- We need a fulltime M.D. Just to help us know that our hospital is going to stay open.
 - The affordability of assisted living is an issue. None of it covered by Medicaid.
 - So many need it but they can't afford it, and there is always a list mile long to get in.
 - We don't deliver babies here anymore. Everyone gets shipped out.

3. What do you think of the hospital in terms of:

Quality of Care

- Excellent.
- It's very good and so clean. We are so fortunate!
- My mother got very good care there.

Number of Services

- We are so lucky to have what we do for the size of the town.
- I think we have 13 visiting specialists.
- We do miss our eye doctor though.
- We don't have to go out of town for a lot of services.
- Urology would be nice to have here. A lot of people travel.
- There is no dialysis and a lot of people must travel. Any infusion services people have to travel for.
- However, a lot of seniors can access these services because we have such a great transportation bus.

Hospital Staff

- They are wonderful.
- They treat their patients well.
- They don't get paid enough for what they put up with.

Hospital Board and Leadership

- I think they are trustworthy. I work with the board a lot and they are very corporative.
- I don't know the administrator.
- The board has good representation from around the county.

Business Office

- Haven't had any issues.
- People complain that things aren't covered enough. The billing office will always work with insurance to help you and make sure everything is coded right.

Condition of Facility and Equipment

- For a small community I think it is outstanding.
- They are great with keeping everything updated.
- The foundation even funds scholarships for students.
- The U-shop has been a great resource for fundraising.

Financial Health of the Hospital

- I imagine they are struggling since the cost for equipment is so expensive. With all the changes in reimbursement, it has been worrisome.
- They levy will be on the ballot in November. Hopefully that will help stabilize the facility. Fortunately, the facility is really backed by the community.

Cost

- I have heard people complain that it is really high, but it has to be because the volume is so low.
- I don't know if they are comparable to Great Falls but I would imagine so.
- I know it was cheaper for me to get a hotel room in Great Falls and get all my labs there than it was to get the labs in town.
- Some nursing homes are cheaper but they really aren't comparable to the facility here.
- At one point our nursing home was the cheapest.

Office/Clinic Staff

- *Not asked.*

Availability

- They are booked up but you usually don't have to wait too long. If you are really sick they will get you in.
- They return your calls and a lot of the providers will follow up to see how you are doing.
- They know when a farmer calls he must be really sick, so they get you in immediately.

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

- Ours is here, the only time we leave is for specialty care.
- We have had such good PAs here. The MDs are really just for administrative things and they only come once a month.
- For a small town we are really lucky with our providers.
- We have a physical therapist here and they work with the fitness center in town. It just works out so well.

5. What do you think about these local services:

Emergency Room

- Great!
- They only thing we don't like is the entrance. It's in a really bad place. Our buses have trouble backing in.
- People who live here don't even know where it is.

Ambulance Service

- Excellent.
- They are great!

Healthcare Services for Senior Citizens

- Dialysis would be great for seniors.

Public/County Health Department

- She does blood pressures.
- It is really nice having them located at the senior center.
- People know who she is.
- It's great because it isn't like a hospital setting.

Healthcare Services for Low-Income Individuals/Families

- For our size town I think we have good services. The food bank is well used.
- There is an issue with the dentist not accepting Medicaid.

Nursing Home/Assisted Living Facility

- A bit of a waitlist.
- Hard to get space for people with Medicaid.
- Glenda helps people fill out forms and acts as a patient navigator of sorts for the seniors.

Pharmacy

- We have two and they are great.

6. Why might people leave the community for healthcare?

- A lot were leaving for women's health.
- A lot of people left to follow their provider.

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

- Dialysis.
- Eye doctor.
- Infusion services.
- Hospice. Although the PAs really took up the slack with hospice here. We have been so lucky with our providers here.
- Home health. And some homemaker services, like cooking and cleaning.
- This is a great place to live as a senior.
- There really isn't daycare here. It makes it hard for young families to move here.