



# 2022

## COMMUNITY HEALTH NEEDS ASSESSMENT

**Conrad**, Montana

*Assessment conducted by **Logan Health Conrad** in  
cooperation with the Montana Office of Rural Health*

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# INTRODUCTION

# Introduction

Logan Health Conrad (LHC) is a 20-bed nonprofit Critical Access Hospital (CAH), rural health clinic, and extended care facility based in Conrad, Montana. Logan Health Conrad serves Pondera County of just over 1,600 square miles and provides medical services to a service population of approximately 6,150 people. Logan Health Conrad is the only hospital in Pondera County and houses both clinic and hospital services in the same facility. In addition to clinic services, LHC offers visiting outreach physicians who specialize in cardiology, orthopedics, and oncology. Logan Health Conrad’s primary service area includes the communities of Conrad, Brady, Valier, Dupuyer, and Heart Butte; with most of the County’s populated communities located along I-15 or US 89.



Pondera County is designated by the US Department of Health and Human Services (HHS) as a health professional shortage area due to its geographic population and is considered a frontier county. For further demographic, socioeconomic, and other related county and state data, please see Appendix C to review the Secondary Data Analysis.



Conrad

- **Mission:** Exceed the Healthcare Expectations of those we Serve Through All of Life’s Stages.
- **Vision:** Logan Health Conrad, in partnership with the community we serve, will strive to promote wellness and accessible, quality, personalized healthcare.
- **Values:** Logan Health Conrad “CARES”: **C**ommitment **A**ccountability **R**espect **E**xcellence **S**ervice

Logan Health Conrad participated in the Community Health Services Development (CHSD) Project administrated by the Montana Office of Rural Health (MORH) and funded in part through the Montana Health Research and Education Foundation (MHREF) Flex Grant. Community involvement in steering committee meetings and key informant interviews enhance community engagement in the assessment process.

In January 2022, LHC’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 2022 survey data with data from previous surveys conducted in partnership with the Montana Office of Rural Health in 2014 and 2019. If any statistical significance exists, it will be reported. The significance level was set at 0.05.

## Health Assessment Process

A steering committee was convened to assist Logan Health Conrad 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 December 2021. 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 CHNA and to assist in the prioritization of health needs.

## Survey

## Methodology

### Survey Instrument

In January 2022, surveys were mailed out to the residents in Pondera County, Montana. Survey respondents had the ability to complete the survey mailed to them, or via an online survey hosted at Montana State University's HELPS Lab 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

Logan Health Conrad provided a list of aggregated 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 800 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.).

Zip Code	Population <sup>1</sup>	Community Name	Total Distribution	# Male	# Female
59425	2633	Conrad	636	318	318
59486	551	Valier	33	16	16
59416	149	Brady	44	22	22
59456	425	Ledger	22	11	11
59432	118	Dupuyer	11	5	5
59448	600	Heart Butte	33	16	16
59467	127	Pendroy	22	11	11
<b>Total</b>	<b>4603</b>		<b>800</b>	<b>400</b>	<b>400</b>

<sup>1</sup> US Census Bureau - American Community Survey (2019)

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

## Information Gaps- Data

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

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

The low population density of rural and frontier communities often 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 and Prevention (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 & Key Informant 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 key informant interviews 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, assists in reaching segments of the population that might not otherwise respond to a survey.

While key informant interview data can offer invaluable insight into the perception of a community or group of individuals, qualitative data can be difficult to analyze. For this reason, interview data are grouped into common themes based on our interpretation of the transcript. To better understand these themes, please review the full transcript in Appendix I. MORH staff facilitated key informant interviews for LHC to ensure impartiality. However, given the small size of the community, key informant interview participants may still be hesitant to express their opinions freely. Personal identifiers are not included in the transcripts.

## Survey Implementation

In January 2022, a survey, cover letter on Logan Health Conrad's letterhead with the Chief Executive Officer's signature, and a postage paid envelope were mailed to 800 randomly selected residents in the hospital's service area. A news release was sent to the local newspaper as well as social media postings prior to the survey distribution announcing that Logan Health Conrad would be conducting a community health services survey throughout the region in cooperation with the Montana Office of Rural Health.

One hundred sixty surveys were returned out of 800. Of those 800 surveys, 88 surveys were returned undeliverable for a 22.5% response rate. From this point on, the total number of surveys will be out of 712. Based upon the sample size, we can be 95% confident that the responses to the survey questions are representative of the service area population, plus or minus 7.6%.

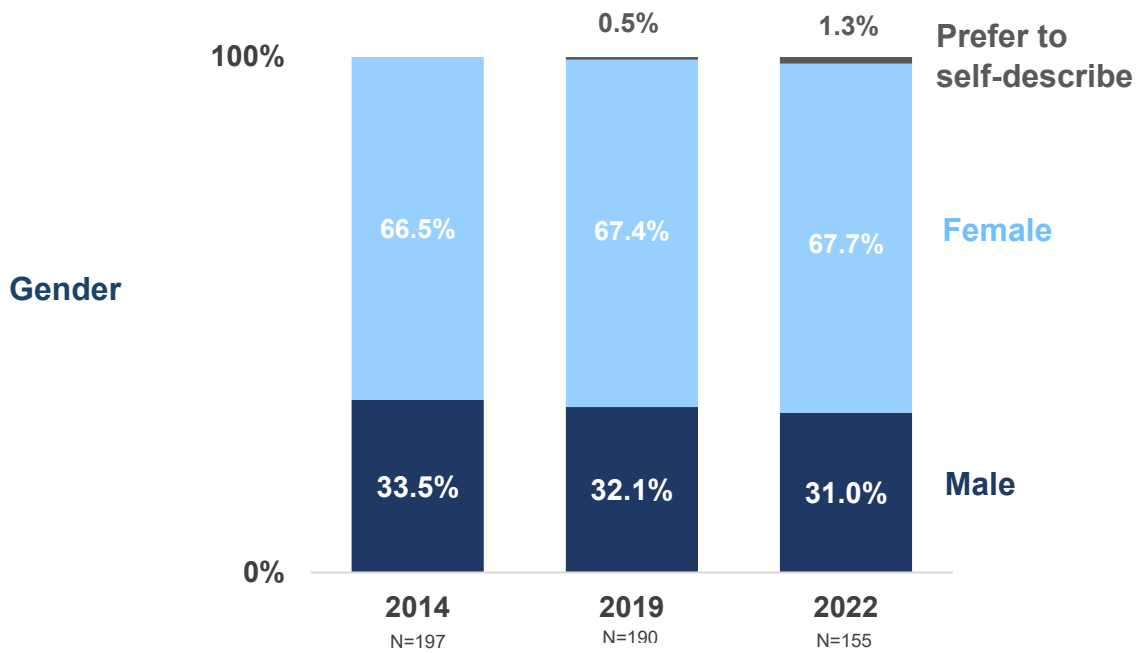
## Survey Respondent Demographics

A total of 712 surveys were distributed amongst Logan Health Conrad's service area. One hundred sixty were completed for a 22.5% 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.

<b>Place of Residence</b>	<b>2014 % (n)</b>	<b>2019 % (n)</b>	<b>2022 % (n)</b>
<b>Number of respondents</b>	202	194	159
59425 Conrad	79.7% (161)	77.3% (150)	82.4% (131)
59416 Brady	4.0% (8)	4.1% (8)	5.7% (9)
59467 Pendroy		1.0% (2)	3.8% (6)
59486 Valier	14.9% (30)	8.8% (17)	3.8% (6)
59432 Dupuyer		3.1% (6)	1.9% (3)
59456 Ledger	0.0% (0)	3.1% (6)	1.3% (2)
59448 Heart Butte	1.0% (2)	0.5% (1)	0.6% (1)
59422 Choteau		1.5% (3)	0.0% (0)
59041 Joliet	0.5% (1)		0.0% (0)
Other*		0.5% (1)	0.6% (1)
<b>TOTAL</b>	<b>100.0% (202)</b>	<b>100.0% (194)</b>	<b>100.0% (159)</b>

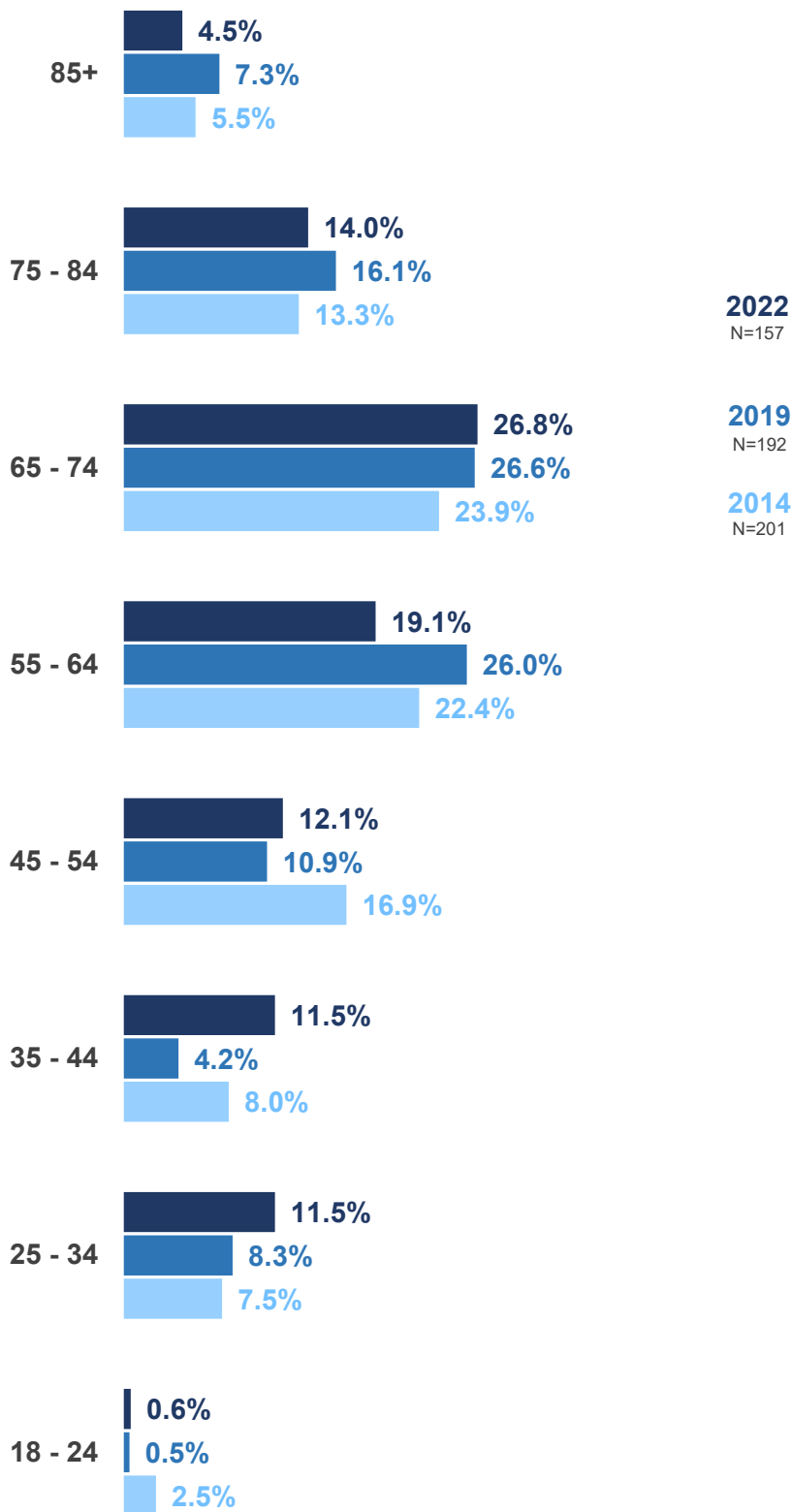
Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. \*Respondents (N=1) who selected over the allotted amount were moved to “Other.”





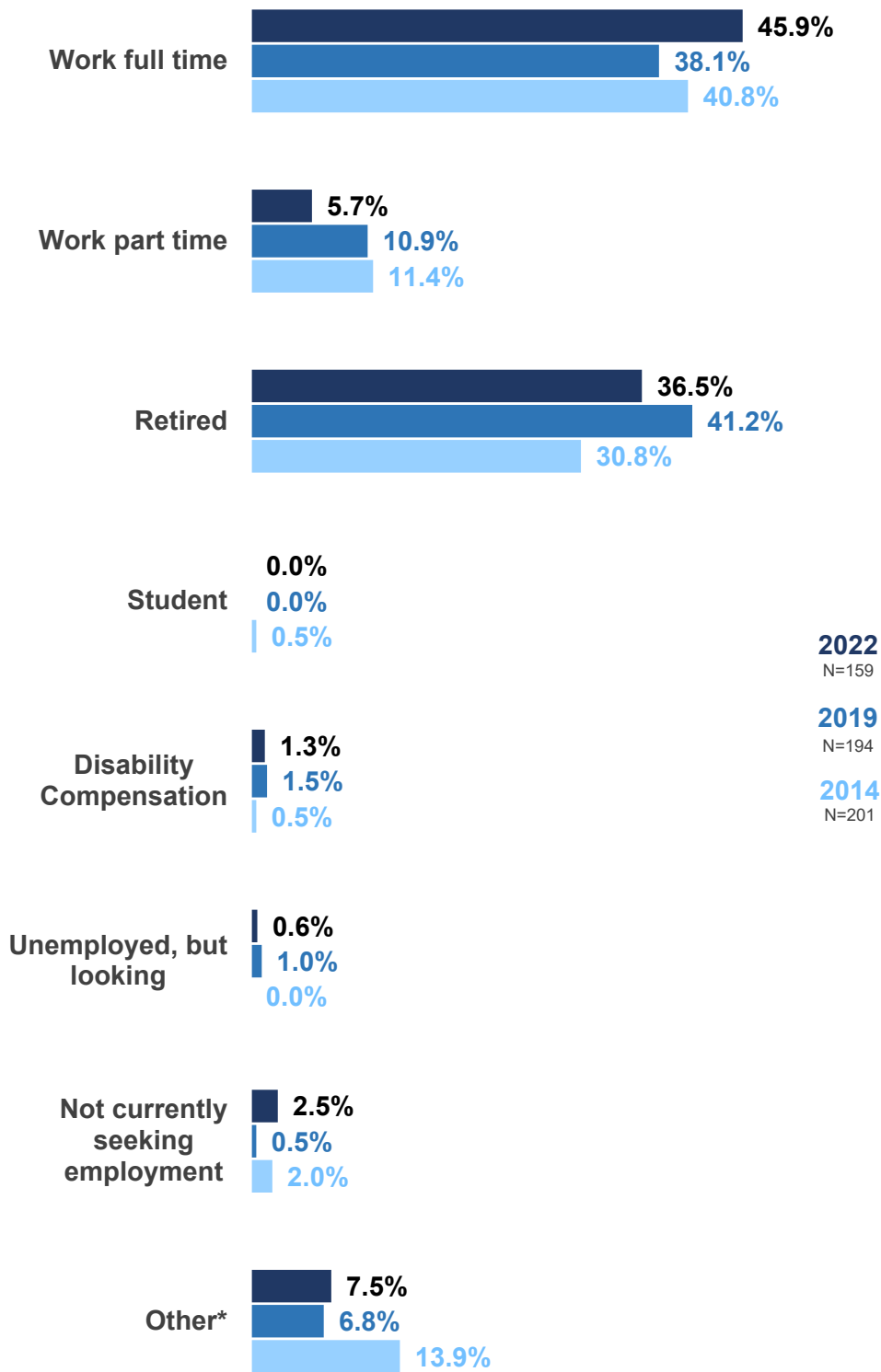
**Women are frequently the healthcare decision makers for their families and more likely to respond to a health-related survey.**

### Age of respondents for all years of the survey



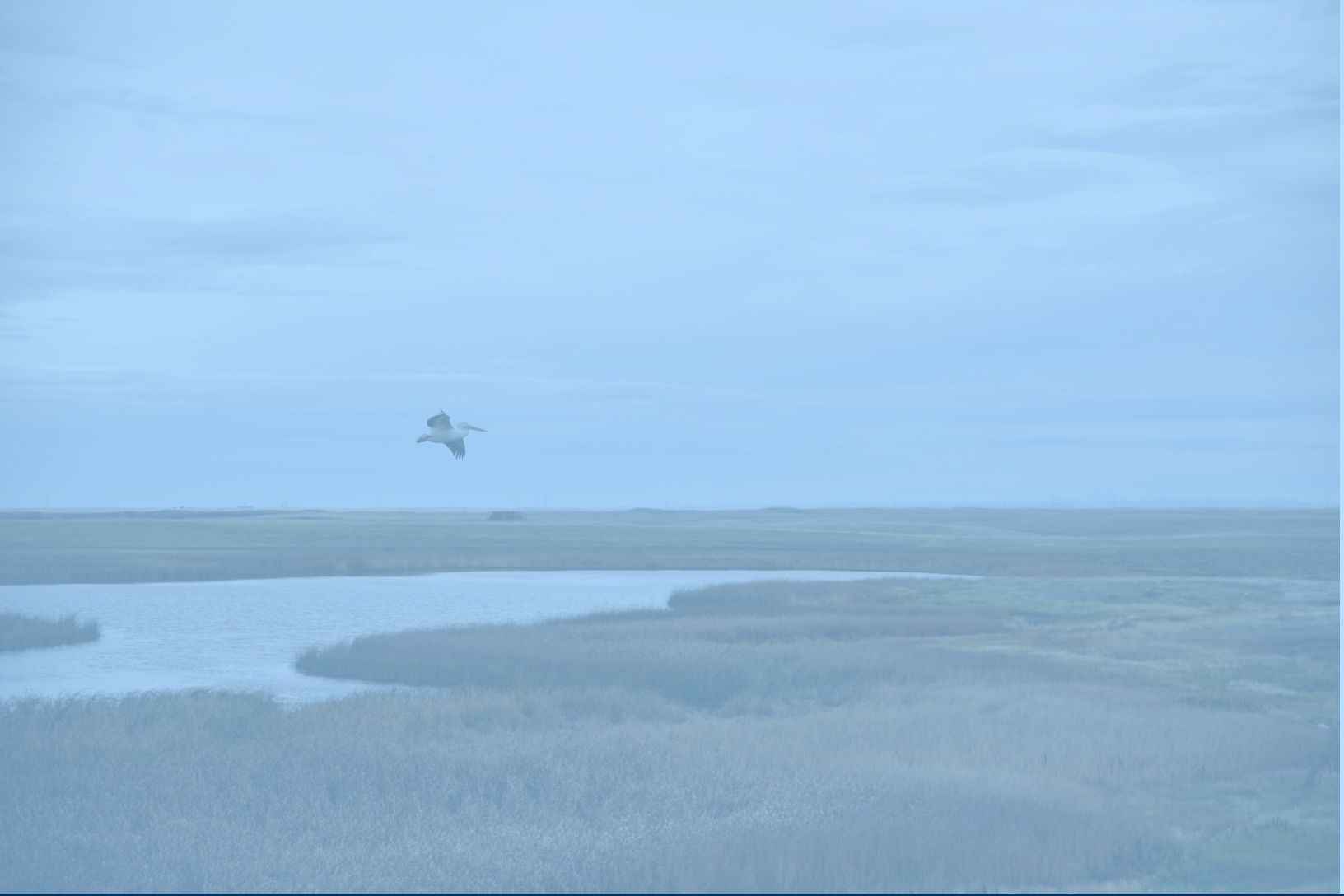
The increasing percentage of aging rural residents is a statewide trend and will likely have a significant impact on demand for future healthcare services.

### The majority of 2022 respondents are retired or work full time.



\*Respondents (N=5) who selected over the allotted amount were moved to "Other."

"Other" comments included: Self-employed (2), stay at home mom (SAHM), and "Self-employed farming."



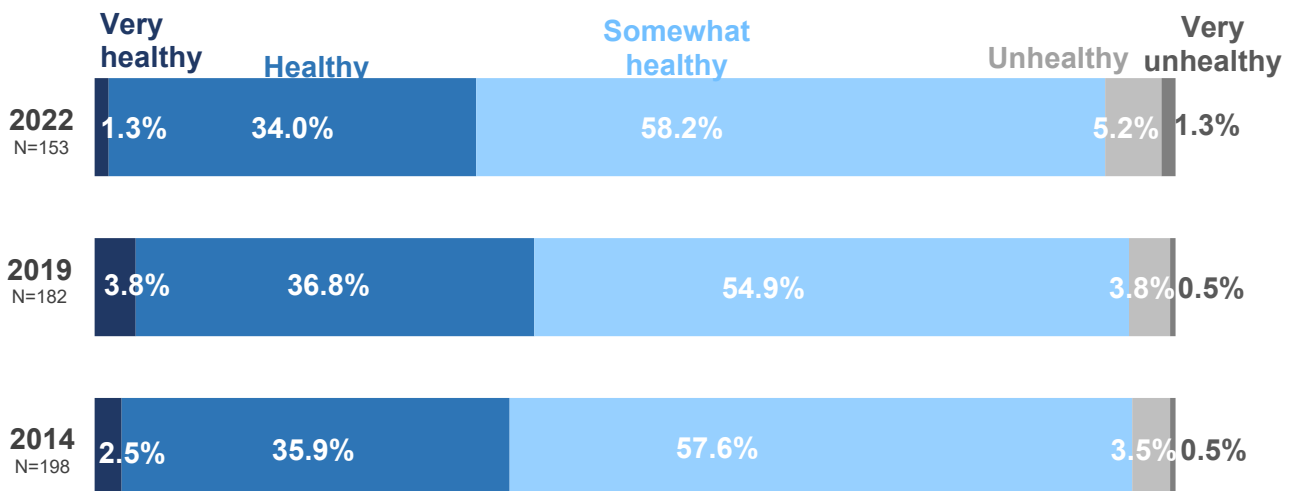
# **SURVEY RESULTS**

# Survey Results

## Rating of Healthy Community (Question 1)

Respondents were asked to indicate how they would rate the general health of their community. Fifty-eight point two percent of respondents (n=89) rated their community as “Somewhat healthy,” and 34.0% of respondents (n=52) felt their community was “Healthy.” Five point two percent (n=8) of respondents indicated they felt their community was “Unhealthy” and 1.3% (n=2, each) rated their community as “Very healthy” and “Very unhealthy.”

Over half of 2022 respondents rate their community as **somewhat healthy**



**Over half of survey respondents feel their community is somewhat healthy.**



## Health Concerns for Community (Question 2)

Respondents were asked what they felt the three most serious health concerns were in their community. The top identified health concern was “Cancer” at 49.0% (n=77). “Alcohol/substance abuse” was also a high priority at 39.5% (n=62), followed by “Overweight/obesity” at 21.0% (n=33).

“Other” comments included: COVID (5) and “Lack of alternative, holistic, integrated, and naturopathic healthcare options.”

*(View all comments in Appendix G)*

Health Concern	2014 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	206	195	157	
Cancer	57.8% (119)	51.8% (101)	49.0% (77)	<input type="checkbox"/>
Alcohol/substance abuse	34.5% (71)	46.7% (91)	39.5% (62)	<input checked="" type="checkbox"/>
Overweight/obesity	31.6% (65)	21.0% (41)	21.0% (33)	<input checked="" type="checkbox"/>
Prescription/illegal drug use	12.6% (26)	24.1% (47)	17.8% (28)	<input checked="" type="checkbox"/>
Depression/anxiety	7.8% (16)	9.2% (18)	12.1% (19)	<input type="checkbox"/>
Lack of exercise		5.6% (11)	11.5% (18)	<input checked="" type="checkbox"/>
Work/economic stress	11.2% (23)	9.7% (19)	11.5% (18)	<input type="checkbox"/>
Diabetes	18.9% (39)	9.7% (19)	10.8% (17)	<input checked="" type="checkbox"/>
Emerging infectious diseases			9.6% (15)	<input type="checkbox"/>
Heart disease	19.9% (41)	11.8% (23)	9.6% (15)	<input checked="" type="checkbox"/>
Lack of access to mental health		10.8% (21)	9.6% (15)	<input type="checkbox"/>
Child abuse/neglect	9.2% (19)	10.3% (20)	8.9% (14)	<input type="checkbox"/>
Tobacco use (cigarettes/cigars, vaping, smokeless)	14.1% (29)	15.4% (30)	8.9% (14)	<input type="checkbox"/>
Lack of access to affordable medications		11.3% (22)	7.0% (11)	<input type="checkbox"/>
Lack of access to healthcare	14.6% (30)	2.1% (4)	7.0% (11)	<input checked="" type="checkbox"/>
Poor nutrition	5.8% (12)	4.1% (8)	7.0% (11)	<input type="checkbox"/>
Respiratory issues/illness	6.8% (14)	4.1% (8)	5.7% (9)	<input type="checkbox"/>
Alzheimer’s/dementia		14.4% (28)	5.1% (8)	<input checked="" type="checkbox"/>
Lack of dental care	1.5% (3)	1.0% (2)	4.5% (7)	<input type="checkbox"/>
Lack of healthcare education	1.9% (4)	2.6% (5)	3.2% (5)	<input type="checkbox"/>
Social isolation/loneliness		4.6% (9)	3.2% (5)	<input type="checkbox"/>

*Table continued on next page.*

Trauma/Adverse Childhood Experiences (ACES)			3.2% (5)	<input type="checkbox"/>
Stroke	1.9% (4)	1.5% (3)	2.5% (4)	<input type="checkbox"/>
Work related accidents/injuries	3.9% (8)	0.5% (1)	2.5% (4)	<input type="checkbox"/>
Domestic violence	5.3% (11)	2.1% (4)	1.9% (3)	<input type="checkbox"/>
Hunger		0.0% (0)	1.3% (2)	<input type="checkbox"/>
Motor vehicle accidents	2.9% (6)	1.5% (3)	1.3% (2)	<input type="checkbox"/>
MLS/ALS/Parkinson's	2.4% (5)	1.0% (2)	0.6% (1)	<input type="checkbox"/>
Suicide	0.0% (0)	1.5% (3)	0.6% (1)	<input type="checkbox"/>
Post-traumatic stress disorder (PTSD)			0.0% (0)	<input type="checkbox"/>
Recreation related accidents/injuries	0.5% (1)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other*	3.9% (8)	6.7% (13)	7.6% (12)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to pick their top three serious health concerns, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. \*Respondents (N=2) who selected over the allotted amount were moved to "Other."

## Components of a Healthy Community (Question 3)

Respondents were asked to identify the three most important things for a healthy community. Forty-three percent of respondents (n=68) indicated that “Access to healthcare services” is important for a healthy community, followed by “Good jobs and a healthy economy” at 37.3% (n=59), and “Healthy behaviors and lifestyles” at 27.8% (n=44).

Components of a Healthy Community	2014 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	206	195	158	
Access to healthcare services	54.9% (113)	41.0% (80)	43.0% (68)	■
Good jobs and a healthy economy	38.8% (80)	41.0% (80)	37.3% (59)	□
Healthy behaviors and lifestyles	28.2% (58)	29.2% (57)	27.8% (44)	□
Low crime/safe neighborhoods	12.1% (25)	18.5% (36)	25.9% (41)	■
Strong family life	27.2% (56)	35.4% (69)	25.3% (40)	□
Good schools	27.2% (56)	37.4% (73)	23.4% (37)	■
Access to mental health services			17.7% (28)	□
Religious or spiritual values	27.7% (57)	19.0% (37)	14.6% (23)	■
Access to childcare/after school programs		8.7% (17)	12.7% (20)	□
Affordable housing	9.7% (20)	9.7% (19)	12.7% (20)	□
Community involvement/volunteerism	10.2% (21)	6.2% (12)	11.4% (18)	□
Access to healthy foods		10.8% (21)	10.8% (17)	□
Clean environment	12.1% (25)	8.7% (17)	7.0% (11)	□
Immunized children	6.3% (13)	5.1% (10)	4.4% (7)	□
Improved hospital & patient communication	9.2% (19)	5.6% (11)	4.4% (7)	□
Tolerance for diversity	1.9% (4)	2.6% (5)	4.4% (7)	□
Low death and disease rates	2.9% (6)	2.6% (5)	1.9% (3)	□
Low level of domestic violence	3.9% (8)	2.1% (4)	1.9% (3)	□
Transportation services		3.6% (7)	1.9% (3)	□
Parks and recreation	1.9% (4)	0.5% (1)	1.3% (2)	□

Table continued on next page.

Arts and cultural events	2.9% (6)	2.6% (5)	0.6% (1)	<input type="checkbox"/>
Other*	2.9% (6)	2.6% (5)	3.2% (5)	<input type="checkbox"/>

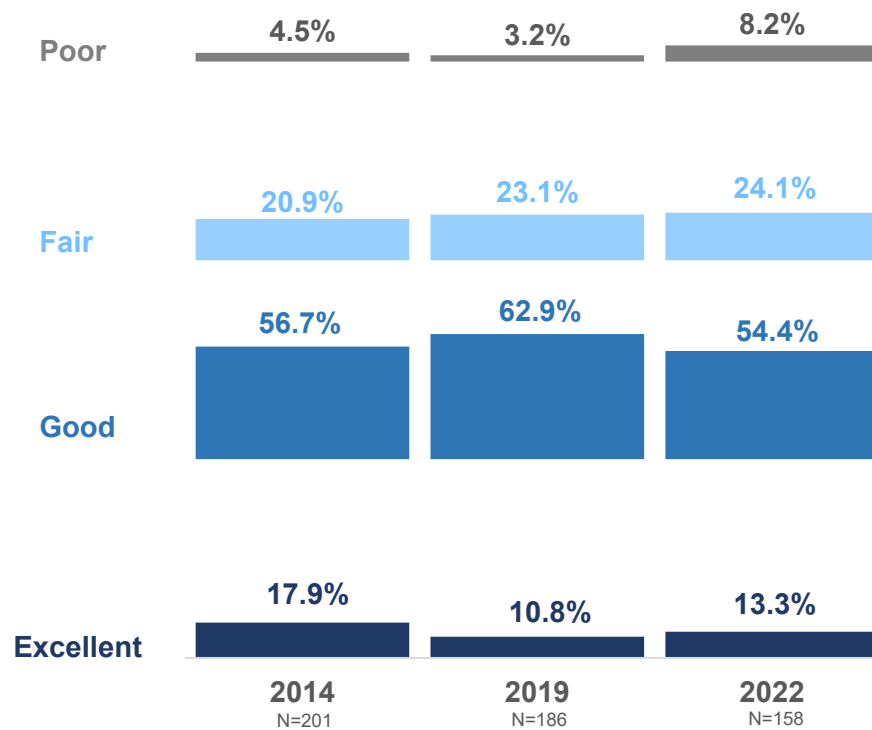
A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to pick their top three components of a healthy community, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. \*Respondents (N=3) who selected over the allotted amount were moved to “Other.”

“Other” comments included: “No racism,” and “Control of illegal drugs.”

## Knowledge of Health Services (Question 4)

Respondents were asked to rate their knowledge of the health services available through Logan Health Conrad. Fifty-four point four percent (n=86) of respondents rated their knowledge of health services as “Good.” “Fair” was selected by 24.1% (n=38), “Excellent” was chosen by 13.3% (n=21), and “Poor” selected by 8.2% of respondents (n=13).

**Over half of 2022 respondents rated their knowledge of services as good**



## How Respondents Learn of Health Services (Question 5)

The most frequently indicated method of learning about available services was “Word of mouth/reputation” at 66.5% (n=105). “Friends/family” was also frequently used to learn about health services at 64.6% (n=102), followed by “Healthcare provider” at 57.0% (n=90) which experienced a significant change since the last assessment.

How Respondents Learn about Community Health Services	2014 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	206	195	158	
Word of mouth/reputation	61.7% (127)	62.1% (121)	66.5% (105)	<input type="checkbox"/>
Friends/family	68.9% (142)	66.2% (129)	64.6% (102)	<input type="checkbox"/>
Healthcare provider	42.2% (87)	46.7% (91)	57.0% (90)	<input checked="" type="checkbox"/>
Newspaper	42.2% (87)	56.4% (110)	35.4% (56)	<input checked="" type="checkbox"/>
Radio	26.7% (55)	25.6% (50)	28.5% (45)	<input type="checkbox"/>
Social media		22.1% (43)	25.3% (40)	<input type="checkbox"/>
Website/internet	4.9% (10)	9.7% (19)	19.6% (31)	<input checked="" type="checkbox"/>
Billboards/posters		6.7% (13)	14.6% (23)	<input checked="" type="checkbox"/>
Senior center	4.4% (9)	7.7% (15)	12.7% (20)	<input checked="" type="checkbox"/>
Mailings/newsletter	17.0% (35)	16.9% (33)	12.0% (19)	<input type="checkbox"/>
Public Health	8.3% (17)	8.7% (17)	11.4% (18)	<input type="checkbox"/>
Presentations	2.9% (6)	2.6% (5)	1.9% (3)	<input type="checkbox"/>
Other	6.8% (14)	3.6% (7)	3.2% (5)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to indicate all methods of receiving information, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Call to ask if they have services.”

**View a cross tabulation of how respondents learn with how they rate their knowledge on p. 79**



## Utilized Community Health Resources (Question 6)

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 78.8% (n=123) which was a significant change since the last assessment. The “Dentist” was utilized by 60.3% (n=94) of respondents, followed by “Eye doctor” at 48.7% (n=76).

Use of Community Health Resources	2014 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	206	195	156	
Pharmacy	83.0% (171)	68.2% (133)	78.8% (123)	■
Dentist	48.5% (100)	51.8% (101)	60.3% (94)	□
Eye doctor	58.7% (121)	49.2% (96)	48.7% (76)	□
Chiropractor	33.0% (68)	36.9% (72)	39.1% (61)	□
Public Health	21.8% (45)	11.8% (23)	26.3% (41)	■
Senior Center	17.0% (35)	12.8% (25)	13.5% (21)	□
Cancer screening programs	11.7% (24)	12.8% (25)	11.5% (18)	□
Alternative medicine	8.7% (18)	10.8% (21)	6.4% (10)	□
Health club	12.6% (26)	11.3% (22)	6.4% (10)	□
Meals on Wheels		4.1% (8)	6.4% (10)	□
Mental Health	3.4% (7)	4.6% (9)	5.1% (8)	□
Home health	5.3% (11)	2.6% (5)	4.5% (7)	□
Food stamps/WIC	7.3% (15)	4.6% (9)	3.2% (5)	□
Long-term care/nursing home	4.9% (10)	3.1% (6)	3.2% (5)	□
Assisted living	4.4% (9)	1.5% (3)	2.6% (4)	□
Community transportation		3.6% (7)	1.3% (2)	□
Other	4.4% (9)	3.6% (7)	0.6% (1)	□

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to select all other community health resources used, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Pool/Parks.”

## Improve Community’s Access to Healthcare (Question 7)

Respondents were asked to indicate what they felt would improve their community’s access to healthcare. The majority of respondents (41.3%, n=59) reported that “More primary care providers” would make the greatest improvement. Thirty-eight point five percent of respondents (n=55) indicated “More specialists,” followed closely by “More information about available services” at 37.1% (n=53) would improve access.

**“More primary care providers” would make the greatest improvement**

What Would Improve the Community’s Access to Healthcare	2014 % (n)	2019 % (n)	2022 % (n)
Number of respondents	206	195	143
More primary care providers	67.0% (138)	43.1% (84)	41.3% (59)
More specialists	26.7% (55)	27.2% (53)	38.5% (55)
More information about available services		32.3% (63)	37.1% (53)
Payment assistance programs (healthcare expenses)		26.2% (51)	27.3% (39)
Home visit options		18.5% (36)	25.9% (37)
Outpatient services expanded hours	29.6% (61)	21.0% (41)	24.5% (35)
Greater health education services	24.8% (51)	13.3% (26)	21.7% (31)
Improved quality of care	30.6% (63)	20.0% (39)	19.6% (28)
School-based health center			18.9% (27)
Transportation assistance (to/from appointments)	9.7% (20)	14.9% (29)	15.4% (22)
Telemedicine	4.4% (9)	5.1% (10)	14.7% (21)
Cultural sensitivity	4.9% (10)	3.6% (7)	4.9% (7)
Interpreter services	1.5% (3)	0.5% (1)	0.0% (0)
Other	8.7% (18)	5.6% (11)	8.4% (12)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents were asked to select any items that would improve community access to healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Community education & community wellness facilities such as indoor pool & a space for classes;” Women’s health, and Counseling.

## Interest in Educational Classes/Programs (Question 8)

Respondents were asked if they would be interested in any educational classes/programs made available to the community. The most frequently selected class/program was “Health and wellness” at 51.8% (n=72). Interest in “Fitness” followed with 41.0% (n=57), while 36.7% of respondents (n=51) were interested in “Weight loss.”

Interest in Classes or Programs	2014 % (n)	2019 % (n)	2022 % (n)
Number of respondents	206	195	139
Health and wellness	27.7% (57)	28.7% (56)	51.8% (72)
Fitness	33.0% (68)	25.1% (49)	41.0% (57)
Weight loss	27.7% (57)	20.5% (40)	36.7% (51)
Women’s health	22.8% (47)	24.6% (48)	36.0% (50)
First aid/CPR	19.4% (40)	19.0% (37)	30.9% (43)
Nutrition	21.4% (44)	17.4% (34)	30.2% (42)
Living will	19.4% (40)	25.1% (49)	21.6% (30)
Mental health	8.3% (17)	11.3% (22)	19.4% (27)
Men’s health	9.7% (20)	10.8% (21)	17.3% (24)
Diabetes	16.0% (33)	14.4% (28)	16.5% (23)
Grief counseling	7.8% (16)	9.7% (19)	15.8% (22)
Cancer	18.4% (38)	14.9% (29)	14.4% (20)
Support groups	9.7% (20)	6.2% (12)	12.9% (18)
Caregiver support			11.5% (16)
Parenting	6.3% (13)	6.2% (12)	10.8% (15)
Heart disease	8.7% (18)	11.3% (22)	9.4% (13)
Alcohol/substance abuse		6.2% (12)	8.6% (12)
Early childhood care and development			8.6% (12)
Veteran support		9.2% (18)	7.9% (11)
Lactation/breastfeeding support		1.0% (2)	5.8% (8)
Prenatal	1.0% (2)	1.5% (3)	5.8% (8)
Respite care			5.8% (8)

Table continued on next page.

Smoking/tobacco cessation	4.4% (9)	3.1% (6)	5.8% (8)
Other	3.4% (7)	3.6% (7)	2.9% (4)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents were asked to pick all classes or programs that are of interest, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“**Other**” comments included: “Alzheimer's Support” and “Family planning.”

## Desired Local Health Services (Question 9)

Respondents were asked to indicate which additional services they would utilize if available locally. Respondents indicated the most interest in “Dermatology” at 58.7% (n=71). Thirty-two point two percent (n=39) respondents were interested in “Gynecology/Obstetrics,” while 23.1% (n=28) desire a “Pain management program” locally.

Desired Local Health Services	2014 % (n)	2019 % (n)	2022 % (n)
Number of respondents	206	195	121
Dermatology	20.4% (42)	37.9% (74)	58.7% (71)
Gynecology/Obstetrics	12.6% (26)	13.3% (26)	32.2% (39)
Pain management program	16.0% (33)	26.7% (52)	23.1% (28)
Urology	7.3% (15)	17.4% (34)	21.5% (26)
Pediatrics	7.8% (16)	8.7% (17)	15.7% (19)
Psychiatry	4.9% (10)	7.2% (14)	13.2% (16)
Adult day care	2.9% (6)	6.2% (12)	5.0% (6)
Other	2.9% (6)	11.8% (23)	14.0% (17)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents were asked to pick all desired local healthcare services that are of interest, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“**Other**” comments included: Arthritis (2), None (2), Alternative medicine, ear/nose/throat (ENT), Wellness Center, Endocrinology, Expanded lab services, Rheumatology, Orthopedic, Cardiac, and Eye doctor.

## Utilization of Preventive Services (Question 10)

Respondents were asked if they had utilized any of the preventive services listed in the past year. “Flu shot/immunizations” was selected by 72.8% of respondents (n=115), followed by “Blood pressure check” and “Dental check” at 58.2% (n=92, each). Survey respondents could select all services that applied.

Use of Preventive Services	2014 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	206	0	158	
Flu shot/immunizations			72.8% (115)	<input type="checkbox"/>
Blood pressure check			58.2% (92)	<input type="checkbox"/>
Dental check			58.2% (92)	<input type="checkbox"/>
Vision check	51.5% (106)		55.7% (88)	<input type="checkbox"/>
Health checkup	40.8% (84)		51.3% (81)	<input checked="" type="checkbox"/>
Cholesterol check	39.3% (81)		45.6% (72)	<input type="checkbox"/>
Mammography	28.6% (59)		31.0% (49)	<input type="checkbox"/>
Pap test	22.8% (47)		24.1% (38)	<input type="checkbox"/>
Prostate (PSA)	18.0% (37)		19.0% (30)	<input type="checkbox"/>
Colonoscopy	11.7% (24)		15.8% (25)	<input type="checkbox"/>
Hearing check			15.2% (24)	<input type="checkbox"/>
Children’s checkup/Well baby	7.3% (15)		11.4% (18)	<input type="checkbox"/>
Health fair	19.9% (41)		10.1% (16)	<input checked="" type="checkbox"/>
Nutrition support			1.9% (3)	<input type="checkbox"/>
None	12.1% (25)		1.3% (2)	<input checked="" type="checkbox"/>
Other	3.4% (7)		3.2% (5)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents could select any of the preventative services listed, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

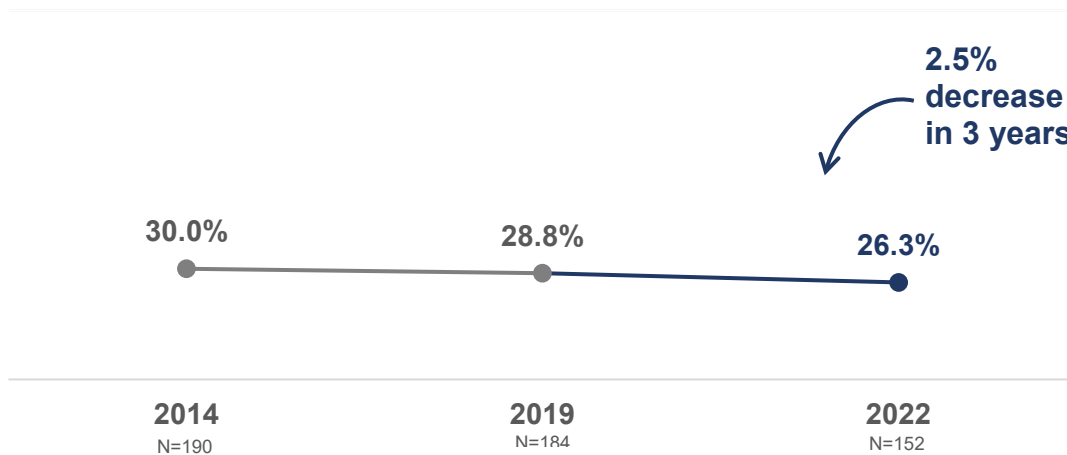
“Other” comments included: Bone density, Labs, “Upper Gastrointestinal (UGI), endoscopy, ultrasound,” COVID Vaccination, and “Sport Physical.”



## Delay of Services (Question 11)

Twenty-six point three percent of respondents (n=40) reported that they or a member of their household thought they needed healthcare services but did not get them or had to delay getting them. Seventy-three point seven percent of respondents (n=112) felt they were able to get the healthcare services they needed without delay.

**Just over a quarter of respondents delayed or did not receive needed services**



**View a cross tabulation of where respondents live and 'delay of healthcare services' on p. 80**

## Reason for Not Receiving/Delaying Needed Services (Question 12)

For those who indicated they were unable to receive or had to delay services (n=40), the reason most cited was that “It cost too much” (27.5%, n=11). “COVID-19 concerns/barriers” and “Don’t like providers” were selected by 22.5% (n=9, each).

Reasons for Delay in Receiving Needed Healthcare	2014 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	57	53	40	
It cost too much	38.6% (22)	47.2% (25)	27.5% (11)	<input type="checkbox"/>
COVID-19 barriers/concerns			22.5% (9)	<input type="checkbox"/>
Don’t like providers	10.5% (6)	11.3% (6)	22.5% (9)	<input type="checkbox"/>
Too long to wait for an appointment	45.6% (26)	18.9% (10)	20.0% (8)	<input checked="" type="checkbox"/>
Qualified provider not available		20.8% (11)	20.0% (8)	<input type="checkbox"/>
Could not get an appointment	35.1% (20)	18.9% (10)	17.5% (7)	<input type="checkbox"/>
My insurance didn’t cover it	15.8% (9)	15.1% (8)	17.5% (7)	<input type="checkbox"/>
No insurance	21.1% (12)	13.2% (7)	10.0% (4)	<input type="checkbox"/>
Office wasn’t open when I could go	21.1% (12)	5.7% (3)	10.0% (4)	<input checked="" type="checkbox"/>
Privacy/confidentiality			10.0% (4)	<input type="checkbox"/>
It was too far to go	7.0% (4)	3.8% (2)	7.5% (3)	<input type="checkbox"/>
Not treated with respect	7.0% (4)	13.2% (7)	7.5% (3)	<input type="checkbox"/>
Could not get off work	12.3% (7)	11.3% (6)	5.0% (2)	<input type="checkbox"/>
Didn’t know where to go	3.5% (2)	7.5% (4)	5.0% (2)	<input type="checkbox"/>
Transportation	7.0% (4)	5.7% (3)	5.0% (2)	<input type="checkbox"/>
Had no childcare	1.8% (1)	1.9% (1)	2.5% (1)	<input type="checkbox"/>
Too nervous or afraid	3.5% (2)	5.7% (3)	2.5% (1)	<input type="checkbox"/>
Unsure if services were available	8.8% (5)	5.7% (3)	2.5% (1)	<input type="checkbox"/>
Don’t understand healthcare system		1.9% (1)	0.0% (0)	<input type="checkbox"/>
Language barrier	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other*	14.0% (8)	15.1% (8)	12.5% (5)	<input type="checkbox"/>

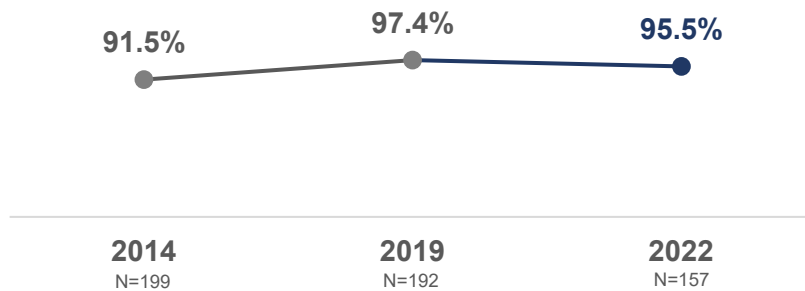
A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to indicate the top three reasons for a delay in seeking healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. \*Respondents (N=2) who selected over the allotted amount were moved to “Other.”

“Other” comments included: “Privacy” and “Procrastination.”

## Primary Care Services (Question 13)

Ninety-five point five percent of respondents (n=150) indicated they or someone in their household had been seen by a primary care provider (such as a family physician, physician assistant, or nurse practitioner) for healthcare services in the past three years. Four point five percent of respondents (n=7) indicated they had not received primary care.

**Primary care utilization has increased since the 2014 assessment**



## Location of Primary Care Services (Question 14)

One hundred forty-four of the 150 respondents who indicated receiving primary care services in the previous three years, shared where they sought services. The majority (61.1%, n=88) reported receiving care in Conrad. Twenty-two respondents were moved to “other” due to selecting more than one primary care provider location.

Location of Primary Care Provider	2014 % (n)	2019 % (n)	2022 % (n)
Number of respondents	170	187	144
Conrad	75.3% (128)	61.0% (114)	61.1% (88)
Great Falls	16.5% (28)	15.5% (29)	16.0% (23)
Shelby	4.7% (8)	3.7% (7)	2.8% (4)
Choteau	0.0% (0)	1.6% (3)	2.1% (3)
Indian Health Services		0.5% (1)	0.0% (0)
Kalispell	0.0% (0)	0.0% (0)	0.0% (0)
VA Clinic		1.6% (3)	0.0% (0)
Other	3.5% (6)	16.0% (30)	18.1% (26)
<b>TOTAL</b>	<b>100.0% (170)</b>	<b>100.0% (187)</b>	<b>100.0% (144)</b>

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. \*Respondents (N=22) who selected over the allotted amount were moved to “Other.”

“Other” comments included: Whitefish, Valier, Online, Boise, Havre, and Cut Bank.

**View a cross tabulation of where respondents live with where they utilize primary care services on p. 81**

## Reasons for Primary Care Provider Selection (Question 15)

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 54.1% (n=80), followed by “Prior experience with clinic” at 35.8% (n=53), and “Clinic/provider’s reputation for quality” at 34.5% (n=51).

Reasons for Selecting Primary Care Provider	2014 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	182	187	148	
Closest to home	59.3% (108)	51.3% (96)	54.1% (80)	<input type="checkbox"/>
Prior experience with clinic	50.5% (92)	42.8% (80)	35.8% (53)	<input checked="" type="checkbox"/>
Clinic/provider’s reputation for quality	18.7% (34)	38.0% (71)	34.5% (51)	<input checked="" type="checkbox"/>
Appointment availability	38.5% (70)	36.4% (68)	31.1% (46)	<input type="checkbox"/>
Recommended by family or friends	18.1% (33)	15.0% (28)	16.2% (24)	<input type="checkbox"/>
Referred by physician or other provider	12.1% (22)	8.6% (16)	8.1% (12)	<input type="checkbox"/>
Length of waiting room time	8.8% (16)	6.4% (12)	6.1% (9)	<input type="checkbox"/>
Required by insurance plan	4.4% (8)	3.2% (6)	2.0% (3)	<input type="checkbox"/>
VA/Military requirement	4.9% (9)	3.2% (6)	2.0% (3)	<input type="checkbox"/>
Cost of care	2.2% (4)	3.7% (7)	1.4% (2)	<input type="checkbox"/>
Indian Health Services	1.1% (2)	1.6% (3)	0.7% (1)	<input type="checkbox"/>
Other	12.6% (23)	10.7% (20)	10.1% (15)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to pick the reasons for selection of their primary care provider, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: Female, Confidentiality, “Using my obstetrician (OB) as a primary care provider,” “Specialty/pediatric,” and “Needed specialists i.e.: cardio, oncologist, ortho surgeon, pulmonology.”

**View a cross tabulation of where respondents utilize primary care services with their reasons for selecting their provider on p. 82**

## Pharmacy Services (Question 16)

Ninety-five percent of respondents (n=151) indicated they or someone in their household had utilized pharmacy services in the past year. Five percent of respondents (n=8) indicated they had not.

**Pharmacy utilization has remained consistent since the 2019 assessment**



**2019**  
N=201

**2022**  
N=186

## Location of Pharmacy Services (Question 17)

One hundred fifty of the 151 respondents who indicated utilizing pharmacy services in the previous year shared where they sought services. The majority (76.0%, n=114) reported utilizing pharmacy services in Conrad. Seven respondents were moved to “other” due to selecting more than one pharmacy location.

Location of Pharmacy Services	2014 % (n)	2019 % (n)	2022 % (n)
Number of respondents	0	178	150
Conrad	0.0% (0)	76.4% (136)	76.0% (114)
Great Falls	0.0% (0)	6.7% (12)	9.3% (14)
Mail Order/Online Pharmacy	0.0% (0)	2.8% (5)	5.3% (8)
Shelby	0.0% (0)	0.6% (1)	2.7% (4)
Choteau	0.0% (0)	1.7% (3)	0.7% (1)
Kalispell	0.0% (0)	0.0% (0)	0.7% (1)
Other*	0.0% (0)	11.8% (21)	5.3% (8)
<b>TOTAL</b>	<b>0.0% (0)</b>	<b>100.0% (178)</b>	<b>100.0% (150)</b>

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. \*Respondents (N=7) who selected over the allotted amount were moved to “Other.”

“Other” comments included: VA, “Express scrips,” and Indian Health Services.

**View a cross tabulation of where respondents live with where they utilize pharmacy services on p. 83**

## Reasons for Pharmacy Selection (Question 18)

Those respondents who indicated they or someone in their household had utilized pharmacy services in the last year were asked to indicate why they chose that pharmacy. “Closest to home” was the most frequently selected reason at 61.3% (n=92), followed by “Prior experience with pharmacy” at 39.3% (n=59) which experienced a significant change since the 2019 assessment, and “Pharmacy’s reputation for quality” at 24.7% (n=37).

Reasons for Pharmacy Selection	2014 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	0	180	150	
Closest to home		68.3% (123)	61.3% (92)	<input type="checkbox"/>
Prior experience with pharmacy		50.6% (91)	39.3% (59)	<input checked="" type="checkbox"/>
Pharmacy’s reputation for quality		25.6% (46)	24.7% (37)	<input type="checkbox"/>
Cost of prescriptions/medications		12.2% (22)	14.7% (22)	<input type="checkbox"/>
Length of wait time		7.2% (13)	8.7% (13)	<input type="checkbox"/>
Required by insurance plan		3.9% (7)	8.7% (13)	<input type="checkbox"/>
Recommended by family or friends		3.9% (7)	4.0% (6)	<input type="checkbox"/>
Cost assistance programs		1.7% (3)	0.7% (1)	<input type="checkbox"/>
Other		10.6% (19)	6.0% (9)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to pick the reasons for selection of their primary care provider, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

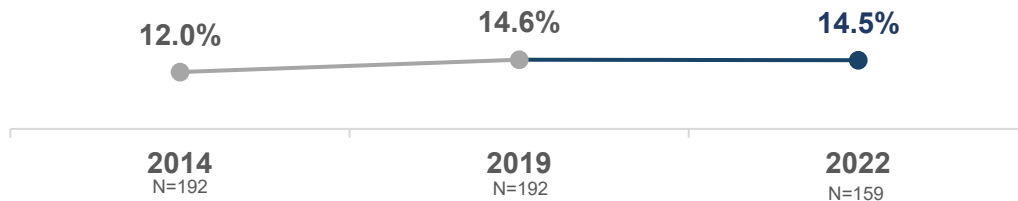
“Other” comments included: “Convenience. Mail for free;” “Personal care from independent pharmacy;” “VA;” and “Closest to work.”

**View a cross tabulation of where respondents utilize pharmacy services with their reasons for their pharmacy selection on p. 84**

## Difficulty Getting Prescriptions (Question 19)

Respondents were asked to indicate if, during the last year, costs had prohibited them from getting a prescription or taking their medication regularly. Fourteen point five percent of respondents (n=23) indicated that they had difficulty getting a prescription or taking their medication regularly in the last year. Seventy-six point seven percent of respondents (n=122) indicated that they did not have trouble getting or taking prescriptions, while 8.8% of respondents (n=14) stated it was not a pertinent question for them.

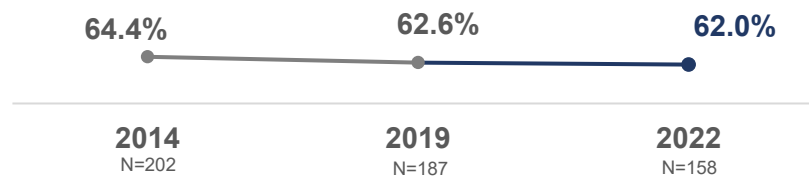
**Cost as a barrier to taking medications has remained consistent since the 2019 assessment**



## Hospital Care Services (Question 20)

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-two percent of respondents (n=98) reported that they or a member of their family had received hospital care during the previous three years, and 38.0% (n=60) had not received hospital services.

**Hospital utilization has decreased since the 2014 assessment**





## Location of Hospital Services (Question 21)

Ninety-three of the 98 respondents who indicated receiving hospital care in the last three years, shared the location of the hospital that their household used most often. The majority (40.9%, n=38) of respondents reported receiving care at “Benefis (Great Falls).” Twenty-three point seven percent of respondents (n=22) received services at “Logan Health Conrad,” and 17.2% of respondents (n=16) reported utilizing services at “Great Falls Clinic (Great Falls).”

Hospital Used Most Often	2014 % (n)	2019 % (n)	2022 % (n)
Number of respondents	113	117	93
Benefis (Great Falls)	38.9% (44)	31.6% (37)	40.9% (38)
Logan Health Conrad (Conrad)	46.0% (52)	33.3% (39)	23.7% (22)
Great Falls Clinic (Great Falls)		9.4% (11)	17.2% (16)
Logan Health (Kalispell)	5.3% (6)	3.4% (4)	5.4% (5)
Benefis Teton Medical Center (Choteau)	0.9% (1)	0.0% (0)	0.0% (0)
Indian Health Services		0.9% (1)	0.0% (0)
Logan Health Shelby (Shelby)	4.4% (5)	3.4% (4)	0.0% (0)
VA Hospital		0.9% (1)	0.0% (0)
Other*	4.4% (5)	17.1% (20)	12.9% (12)
<b>TOTAL</b>	<b>100.0% (113)</b>	<b>100.0% (117)</b>	<b>100.0% (93)</b>

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. \*Respondents (N=6) who selected over the allotted amount were moved to “Other.”

“Other” comments included: Billings Clinic, Bozeman, Butte, and “Depends on the circumstances - would prefer Conrad.”

**View a cross tabulation of where respondents live with where they utilize hospital services on p. 85**

## Reasons for Hospital Selection (Question 22)

Ninety-seven of the 98 respondents who had a personal or household experience at a hospital within the past three years, shared the reason for the selection. The primary reason given for selecting the facility used most often was “Referred by physician or other provider” at 46.4% (n=45). “Closest to home” was selected by 38.1% of the respondents (n=37), and 36.1% (n=35) indicated “Emergency, no choice.”

Reasons for Selecting Hospital	2014 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	130	117	97	
Referred by physician or other provider	38.5% (50)	41.0% (48)	46.4% (45)	<input type="checkbox"/>
Closest to home	56.2% (73)	44.4% (52)	38.1% (37)	<input checked="" type="checkbox"/>
Emergency, no choice	31.5% (41)	31.6% (37)	36.1% (35)	<input type="checkbox"/>
Prior experience with hospital	46.9% (61)	46.2% (54)	34.0% (33)	<input type="checkbox"/>
Hospital’s reputation for quality	24.6% (32)	34.2% (40)	25.8% (25)	<input type="checkbox"/>
Recommended by family or friends	7.7% (10)	8.5% (10)	9.3% (9)	<input type="checkbox"/>
Required by insurance plan	2.3% (3)	2.6% (3)	6.2% (6)	<input type="checkbox"/>
Closest to work	4.6% (6)	3.4% (4)	4.1% (4)	<input type="checkbox"/>
Cost of care	1.5% (2)	2.6% (3)	1.0% (1)	<input type="checkbox"/>
Financial assistance programs		2.6% (3)	1.0% (1)	<input type="checkbox"/>
Indian Health Services		0.9% (1)	1.0% (1)	<input type="checkbox"/>
VA/Military requirement	5.4% (7)	1.7% (2)	1.0% (1)	<input type="checkbox"/>
Other*	8.5% (11)	6.0% (7)	9.3% (9)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to pick their top three reasons for selecting a hospital, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. \*Respondents (N=1) who selected over the allotted amount were moved to “Other.”

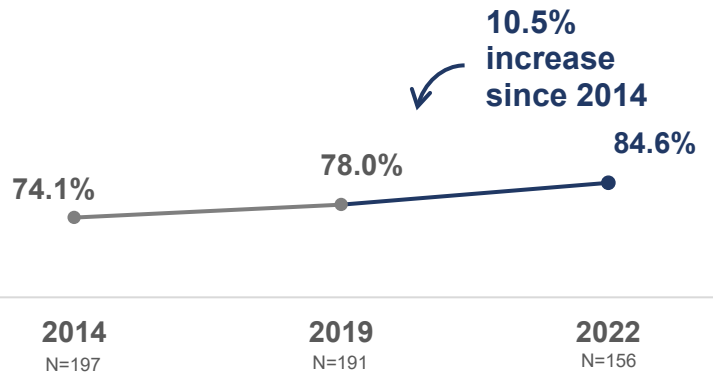
“Other” comments included: “Type of care not offered in Conrad;” “High risk care;” and “Planned procedures, our doctors are in Great Falls.”

**View a cross tabulation of where respondents utilize hospital services with their reasons for selecting that facility p. 86**

## Specialty Care Services (Question 23)

Respondents were asked if they or someone in their household had seen a healthcare specialist in the last three years. Specialty care was quantified as a health provider other than their primary care provider or family doctor. Eighty-four point six percent of the respondents (n=132) indicated they or a household member had seen a healthcare specialist during the past three years, while 15.4% (n=24) indicated they had not.

Specialty care utilization has consistently increased since the 2014 assessment



## Location of Healthcare Specialist(s) (Question 24)

One hundred thirty-one of the 132 respondents who indicated they saw a healthcare specialist in the past three years, shared where they saw that provider. The majority of respondents (93.9%, n=123) sought care in Great Falls which was a significant change since the last assessment. Seventeen point six percent of respondents (n=23) utilized specialty services in Conrad while 13.0% of respondents (n=17) received specialty care in Kalispell. Respondents could select more than one location, so percentages do not equal 100%.

Location of Specialist	2014 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	146	149	131	
Great Falls	78.8% (115)	78.5% (117)	93.9% (123)	■
Conrad	32.2% (47)	25.5% (38)	17.6% (23)	■
Kalispell	15.8% (23)	12.1% (18)	13.0% (17)	□
Shelby	10.3% (15)	6.0% (9)	5.3% (7)	□
VA Facility	Grayed out	2.7% (4)	5.3% (7)	□
Missoula	6.8% (10)	5.4% (8)	4.6% (6)	□
Indian Health Services	Grayed out	0.0% (0)	0.8% (1)	□
Other	11.6% (17)	12.8% (19)	8.4% (11)	□

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to indicate the location of any specialist seen in the past three years, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: Helena (3); Billings, MT (2); and Choteau (2).

## Type of Healthcare Specialist Seen (Question 25)

The respondents (n=132) saw a wide array of healthcare specialists in the past three years. The most frequently utilized specialist was the “Dentist” at 37.1% (n=49), followed by the “Optometrist” at 30.3% (n=40). The “Dermatologist” and “Orthopedic surgeon” were each seen by 22.7% of respondents (n=30). Respondents were asked to choose all that apply, so percentages do not equal 100%.

Type of Specialists Seen	2014 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	146	149	132	
Dentist	30.1% (44)	30.9% (46)	37.1% (49)	<input type="checkbox"/>
Optometrist		14.1% (21)	30.3% (40)	<input checked="" type="checkbox"/>
Dermatologist	14.4% (21)	26.2% (39)	22.7% (30)	<input checked="" type="checkbox"/>
Orthopedic surgeon	32.2% (47)	25.5% (38)	22.7% (30)	<input type="checkbox"/>
Cardiologist	24.0% (35)	24.8% (37)	21.2% (28)	<input type="checkbox"/>
OB/GYN	15.1% (22)	16.1% (24)	19.7% (26)	<input type="checkbox"/>
Chiropractor	17.1% (25)	12.8% (19)	16.7% (22)	<input type="checkbox"/>
Ophthalmologist	15.1% (22)	17.4% (26)	16.7% (22)	<input type="checkbox"/>
Oncologist	14.4% (21)	12.1% (18)	15.9% (21)	<input type="checkbox"/>
Physical therapist	15.8% (23)	18.8% (28)	15.9% (21)	<input type="checkbox"/>
Urologist	15.8% (23)	12.8% (19)	15.2% (20)	<input type="checkbox"/>
ENT (ear/nose/throat)	9.6% (14)	11.4% (17)	12.9% (17)	<input type="checkbox"/>
Radiologist	15.8% (23)	10.7% (16)	12.1% (16)	<input type="checkbox"/>
Audiologist		5.4% (8)	10.6% (14)	<input type="checkbox"/>
Gastroenterologist	7.5% (11)	10.1% (15)	9.8% (13)	<input type="checkbox"/>
Pulmonologist	6.2% (9)	6.0% (9)	8.3% (11)	<input type="checkbox"/>
General surgeon	13.7% (20)	8.1% (12)	7.6% (10)	<input type="checkbox"/>
Pain management		11.4% (17)	7.6% (10)	<input type="checkbox"/>
Endocrinologist	7.5% (11)	7.4% (11)	6.8% (9)	<input type="checkbox"/>
Neurologist	11.6% (17)	12.1% (18)	6.8% (9)	<input type="checkbox"/>
Allergist	4.1% (6)	1.3% (2)	6.1% (8)	<input type="checkbox"/>
Mental health counselor	3.4% (5)	4.7% (7)	6.1% (8)	<input type="checkbox"/>

Table continued on next page.

Neurosurgeon	2.1% (3)	4.0% (6)	6.1% (8)	<input type="checkbox"/>
Rheumatologist	4.8% (7)	6.0% (9)	5.3% (7)	<input type="checkbox"/>
Wound care		5.4% (8)	5.3% (7)	<input type="checkbox"/>
Pediatrician	4.8% (7)	2.0% (3)	4.5% (6)	<input type="checkbox"/>
Occupational therapist	4.8% (7)	4.7% (7)	3.8% (5)	<input type="checkbox"/>
Podiatrist	6.2% (9)	6.7% (10)	3.8% (5)	<input type="checkbox"/>
Speech therapist	0.7% (1)	2.7% (4)	3.8% (5)	<input type="checkbox"/>
Denturist		4.7% (7)	3.0% (4)	<input type="checkbox"/>
Dietician			3.0% (4)	<input type="checkbox"/>
Psychiatrist (M.D.)	1.4% (2)	2.0% (3)	1.5% (2)	<input type="checkbox"/>
Psychologist	2.7% (4)	2.0% (3)	0.8% (1)	<input type="checkbox"/>
Substance abuse counselor	0.7% (1)	0.0% (0)	0.8% (1)	<input type="checkbox"/>
Geriatrician	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Social worker	1.4% (2)	2.7% (4)	0.0% (0)	<input type="checkbox"/>
Other	7.5% (11)	7.4% (11)	6.8% (9)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to indicate each type of specialist seen, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: Nephrologist, Acupuncture, Naturopath, Internal medicine, “Back surgeon, shoulder surgeon,” Physical therapist, Oral Surgeon, and Fertility specialist

## Overall Quality of Care through Logan Health Conrad (Question 26)

Respondents were asked to rate various services available through Logan Health Conrad using the scale of 4= Excellent, 3= Good, 2= Fair, 1=Poor, and Haven't Used. The services that received the highest score was "Radiology" with a rating of 3.5 (n=80) out of 4.0. Overall, the average rating on quality and availability of the health services listed was 3.2 out of 4.0.

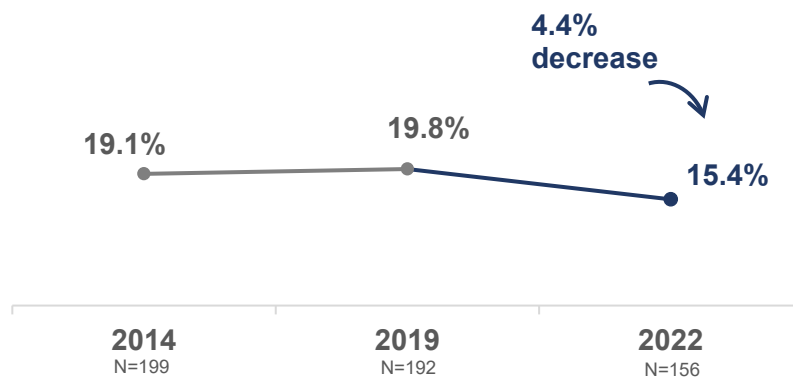
Quality of Care Rating at Logan Health - Conrad	2014 Average (n)	2019 Average (n)	2022 Average (n)	SIGNIFICANT CHANGE
4 Point Scale: Poor = 1, Fair = 2, Good = 3, Excellent = 4				
Total number of respondents	187	165	146	
Radiology	3.2 (104)	3.4 (98)	3.5 (80)	■
Rural Health Clinic services (Logan Health Conrad clinic)	3.2 (171)	3.3 (89)	3.3 (86)	□
Ambulance services	3.6 (104)	3.6 (75)	3.3 (54)	■
Inpatient services	3.4 (78)	3.2 (70)	3.3 (46)	□
Rehabilitation services	3.3 (63)	3.3 (58)	3.3 (45)	□
Home health	3.5 (47)	3.4 (27)	3.3 (21)	□
Nursing home/extended care	3.4 (63)	3.1 (37)	3.2 (31)	□
Laboratory	3.3 (154)	3.3 (132)	3.2 (117)	□
Emergency room	3.2 (143)	3.3 (117)	3.1 (93)	□
Oncology		3.2 (12)	3.1 (8)	□
Visiting specialists (oncology and orthopedist)		3.3 (51)	3.1 (21)	□
Telemedicine		2.8 (9)	3.0 (8)	□
Durable medical equipment (DME)		3.1 (64)	3.0 (34)	□
Respiratory services (ex. sleep studies)		3.1 (23)	3.0 (19)	□
Orthopedics		3.0 (11)	2.6 (11)	□
<b>Overall average</b>		<b>3.3 (187)</b>	<b>3.3 (165)</b>	<b>3.2 (146)</b>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Grayed out cells indicate the question was not asked that year.

## Prevalence of Depression (Question 27)

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. Fifteen point four percent of respondents (n=24) indicated they had experienced periods of depression, and 84.6% of respondents (n=132) indicated they had not.

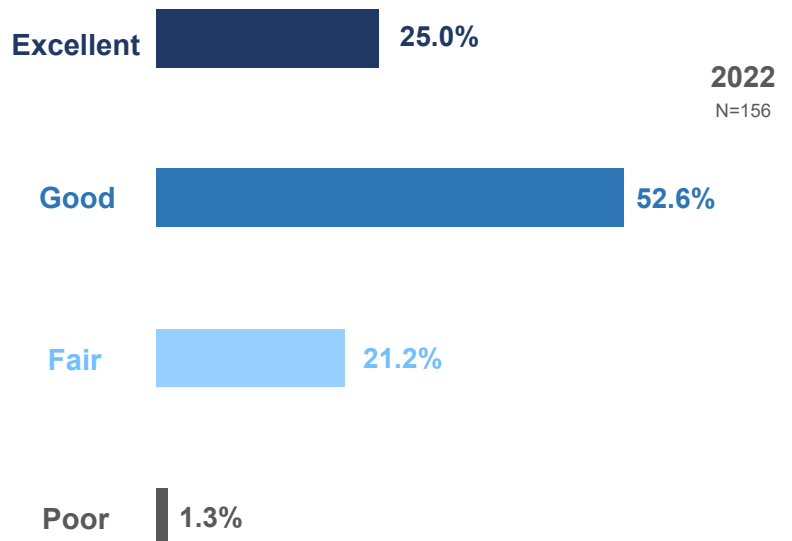
**Fewer respondents report experiencing periods of depression since the last assessment**



## Rating of Mental Health (Question 28)

Respondents were asked to indicate how they would describe their mental health in general when considering stress, anxiety, depression, and emotional problems. Fifty-two point six percent of respondents (n=82) felt their mental health was “Good,” 25.0% (n=39) rated their mental health as “Excellent,” 21.2% of respondents (n=33) felt their mental health was “Fair,” and 1.3% of respondents (n=2) rated their mental health as “Poor.”

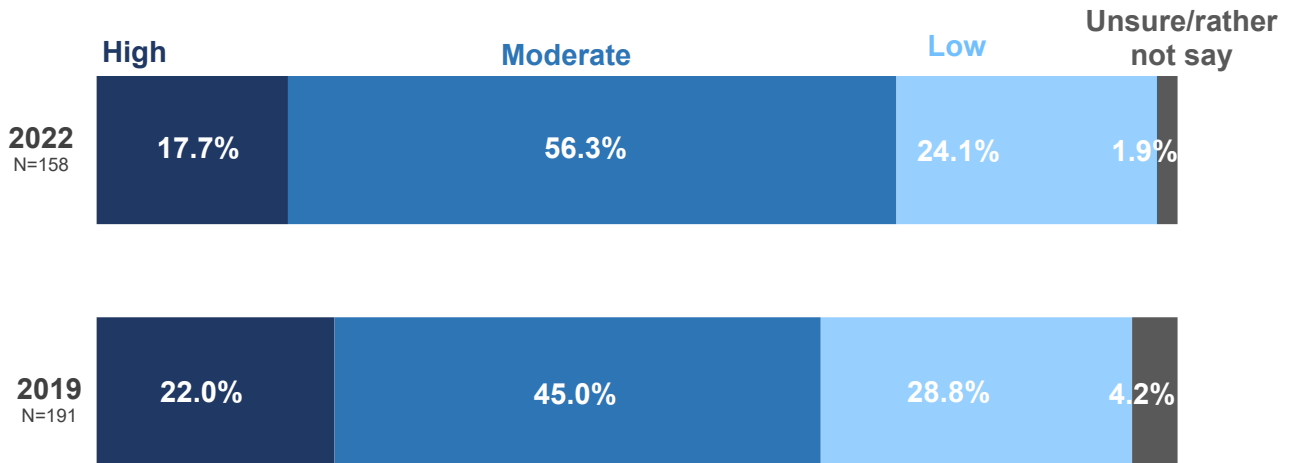
**Over half of respondents rated their mental health as good**



## Perception of Stress (Question 29)

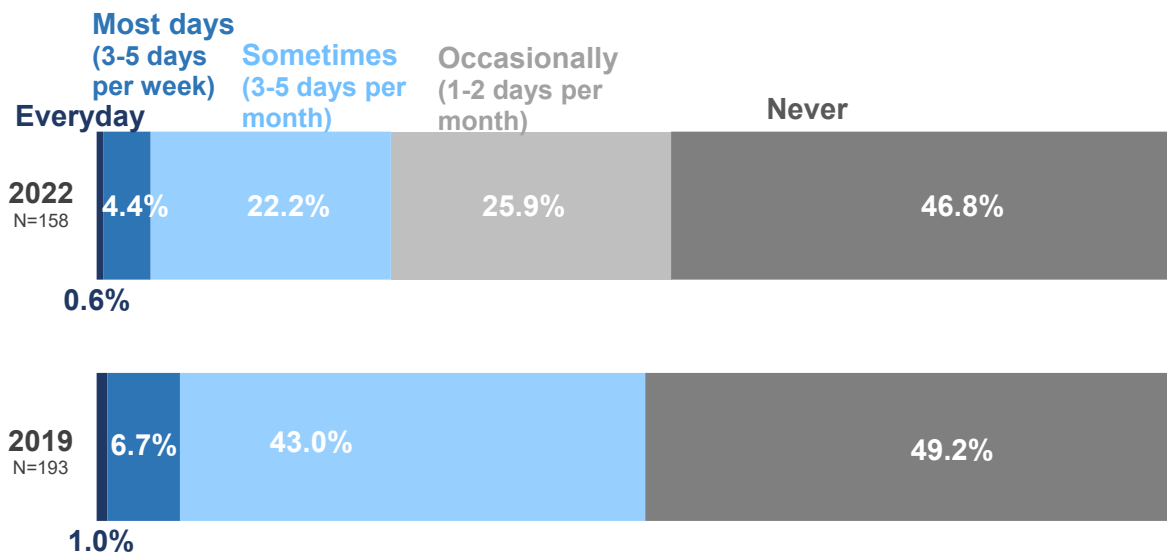
Respondents were asked to indicate how they would describe their stress level over the past year. Fifty-six point three percent of respondents (n=89) indicated they experienced a moderate level of stress, 24.1% (n=38) had a low level of stress, 17.7% of respondents (n=28) indicated they had experienced a high level of stress, and 1.9% (n=3) indicated they were “Unsure/rather not say.”

Over half of 2022 respondents rate their stress level as **moderate**



## Social Isolation (Question 30)

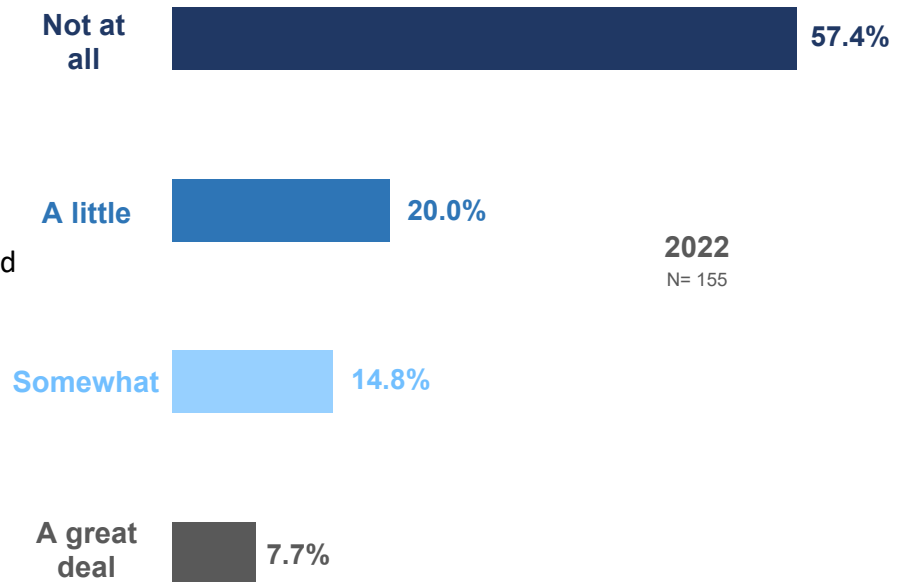
Respondents were asked to indicate how often they felt lonely or isolated in the past year. Forty-six point eight percent of respondents (n=74) indicated they never felt lonely or isolated, and 25.9% of respondents (n=41) indicated they “occasionally (1-2 days per month)” felt lonely or isolated. Twenty-two point two percent (n=35) reported they felt lonely or isolated “sometimes (3-5 days per month),” 4.4% (n=7) indicated they felt lonely or isolated on “Most days (3-5 days per week),” and 0.6% (n=1) reported they felt lonely or isolated “Everyday.”





## Impact of Substance Abuse (Question 31)

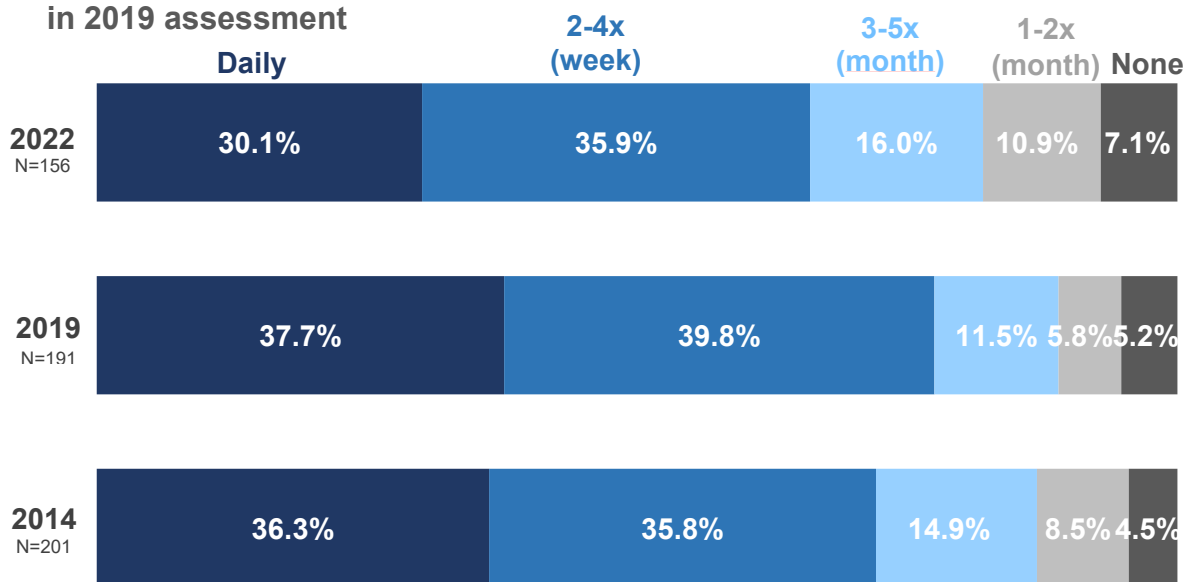
Respondents were asked to indicate to what degree their life has been negatively affected by their own or someone else’s substance abuse issues including alcohol, prescription, or other drugs. Fifty-seven point four percent of respondents (n=89) indicated their life was “Not at all” affected. Twenty percent (n=31) were “A little” affected, 14.8% (n=23) were “Somewhat” affected, and 7.7% (n=12) indicated they were “A great deal” negatively affected.



## Physical Activity (Question 32)

Respondents were asked to indicate how frequently they had physical activity for at least twenty minutes over the past month. Thirty-five point nine percent of respondents (n=56) indicated they had physical activity of at least twenty minutes “2-4 times per week,” and 30.1% (n=47) indicated they had physical activity “daily.” Seven point one percent of respondents (n=11) indicated they had “No physical activity.”

**2022 Survey respondents are less physically active than reported the in 2019 assessment**



## Food Insecurity (Question 33)

Respondents were asked to indicate if, during the last year, they had worried that they would not have enough food to eat. The majority, 94.9% (n=149), were not worried, but 5.1% (n=8) were concerned about not having enough to eat.

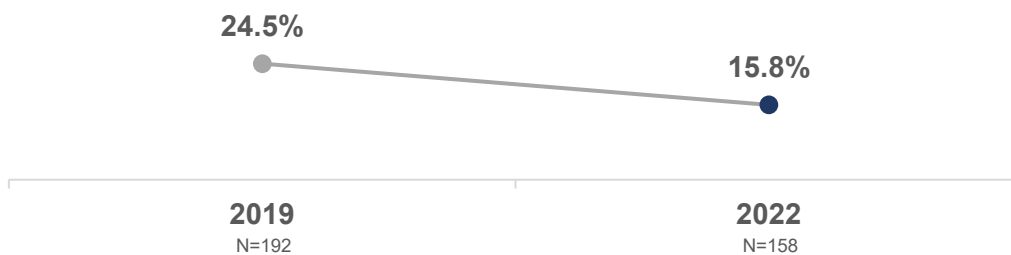
**The majority of respondents did not worry about having enough food**



## Housing (Question 34)

Respondents were asked to indicate if they felt the community has adequate and affordable housing options available. Fifty-four point four percent of respondents (n=86) indicated that they feel there are not adequate and affordable housing options available in the community, 15.8% (n=25) felt there are adequate and affordable options available, and 29.7% (n=47) didn't know.

**Fewer 2022 respondents feel the community has adequate and affordable housing options**



## Health Insurance Type (Question 35)

Respondents were asked to indicate what type of health insurance covers the majority of their medical expenses. Twenty-nine point two percent (n=45) indicated they have “Employer sponsored” coverage, followed closely by “Medicare” coverage at 28.6% (n=44).

Type of Health Insurance	2014 % (n)	2019 % (n)	2022 % (n)
Number of respondents	165	193	154
Employer sponsored	32.1% (53)	23.8% (46)	29.2% (45)
Medicare	34.5% (57)	35.2% (68)	28.6% (44)
Private insurance/private plan	12.7% (21)	5.2% (10)	5.2% (8)
Health Insurance Marketplace		8.8% (17)	4.5% (7)
Christian Health Ministries			3.2% (5)
Healthy MT Kids	1.8% (3)	2.1% (4)	3.2% (5)
Health Savings Account	3.6% (6)	1.0% (2)	1.9% (3)
Medicaid	4.2% (7)	7.3% (14)	1.9% (3)
VA/military	4.8% (8)	3.1% (6)	1.3% (2)
None/pay out of pocket	4.8% (8)	2.1% (4)	0.6% (1)
Indian Health	0.0% (0)	0.0% (0)	0.0% (0)
State/Other	0.6% (1)		
Other*	0.6% (1)	11.4% (22)	20.1% (31)
<b>TOTAL</b>	<b>100.0% (165)</b>	<b>100.0% (193)</b>	<b>100.0% (154)</b>

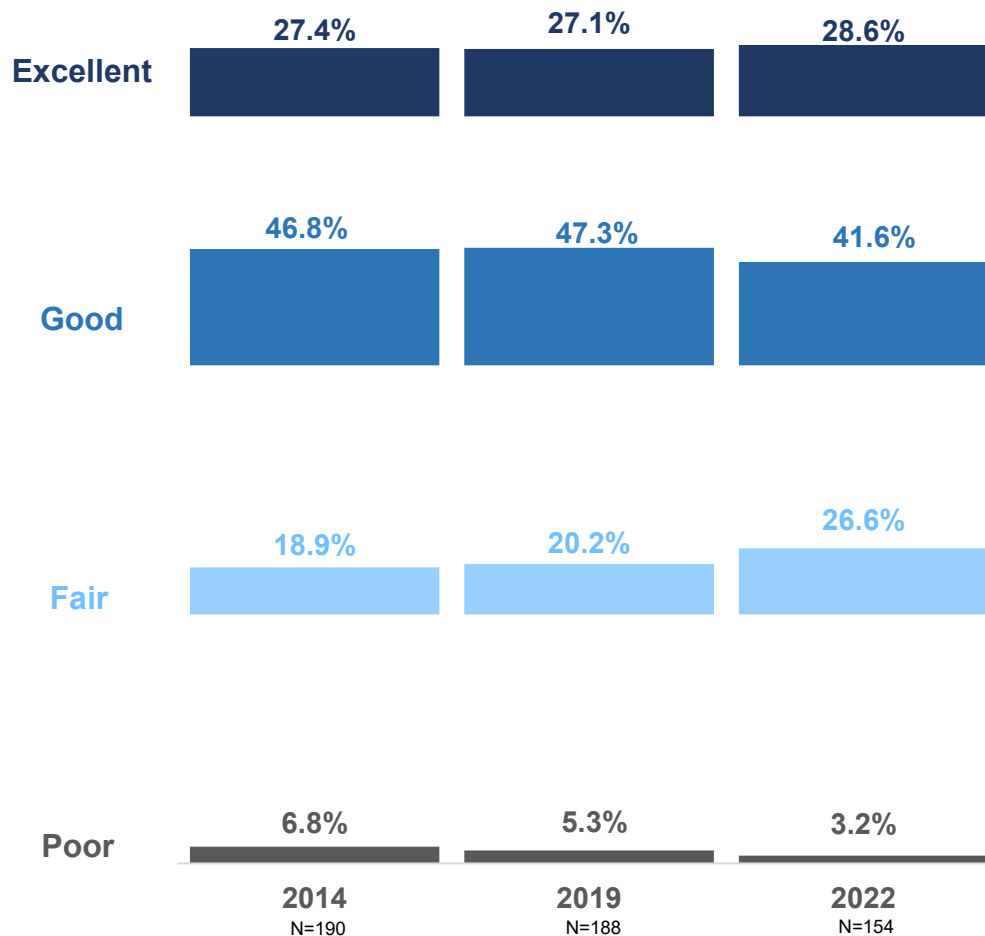
Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. \*Respondents (N=24) who selected over the allotted amount were moved to “Other.”

“Other” comments included: “3 people in house all have different insurances”

## Insurance and Healthcare Costs (Question 36)

Respondents were asked to indicate how well they felt their health insurance covers their healthcare costs. Forty-one point six percent of respondents (n=64) indicated they felt their insurance covers a “Good” amount of their healthcare costs. Twenty-eight point six percent of respondents (n=44) indicated they felt their insurance covered an “Excellent” amount, and 26.6% of respondents (n=41) indicated they felt their insurance covered a “Fair” amount of their health costs.

**Most people feel that their health insurance offers excellent or good coverage**



## Barriers to Having Insurance (Question 37)

For those who indicated they did not have insurance (n=1), the top reason selected for not having insurance was “Can’t afford to pay for medical insurance.” Respondents could select all that apply.

Reasons for No Health Insurance	2014 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	8	4	1	
Can’t afford to pay for health insurance	75.0% (6)	100.0% (4)	100.0% (1)	<input type="checkbox"/>
Choose not to have health insurance	12.5% (1)	0.0% (0)	100.0% (1)	<input checked="" type="checkbox"/>
Employer does not offer insurance	37.5% (3)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Too confusing/don’t know how to apply		0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>

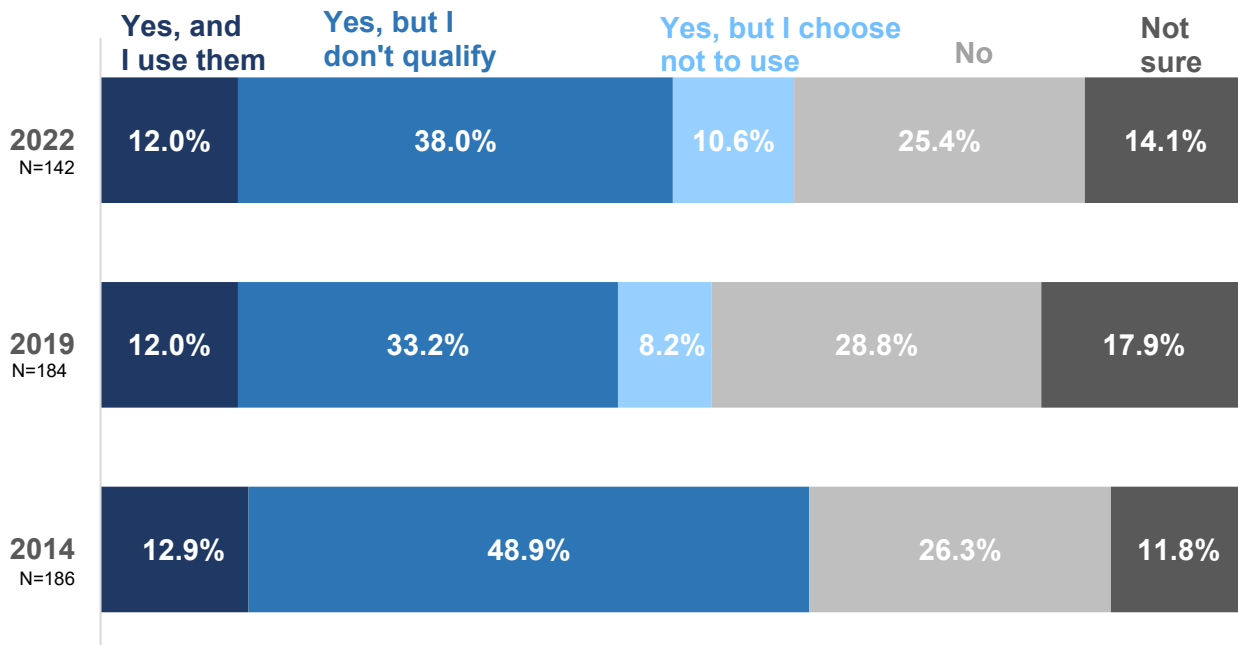
A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Not applicable (NA)” (2)

## Awareness of Health Cost Assistance Programs (Question 38)

Respondents were asked to indicate their awareness of programs that help people pay for healthcare bills. Thirty-eight percent of respondents (n=54) indicated they were aware of these programs but did not qualify to utilize them, and 25.4% (n=36) indicated that they were not aware of health cost assistance programs.

**Over a quarter of 2022 respondents are not aware of programs that help people pay for healthcare expenses**





# KEY INFORMANT RESULTS



## Key Informant Interview Methodology

Four key informant interviews were conducted in January and February 2022. Participants were identified as people living in Logan Health Conrad's service area.

The four interviews were conducted over the telephone. The meetings lasted up to 15 minutes in length and followed the same line of questioning. Interview transcripts can be found in Appendix I. Interviews were facilitated by Montana Office of Rural Health staff.



### Key Informant Interview Themes

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



#### MENTAL HEALTH

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The most common thread of the key informant interviews was a concern about local mental health resources and services available to those across the lifespan. Community members expressed concern that there's still stigma associated with accessing such services and resources. It was noted that there are some local services available, but community members spoke of challenges with getting an appointment due to the local demand.

Speaking specifically about children and adolescent's accessing mental health services, it was noted that "there are limited resources for teens and there really isn't a local mental health provider that serves children under 10 years of age." Another community member said "some parents may still have a hard time believing their teens may benefit from accessing these services."





## HEALTH EDUCATION & ACTIVE LIVING OPPORTUNITIES

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Health education and fitness opportunities were another common theme of these key informant interviews. In particular, opportunities to be active, increased community involvement and engagement, and health education opportunities were shared. One community member poignantly stated, “I would love to see a culture of abundance in health opportunities fostered in this area.” They continued, “A key determinant of health around here is isolation. If we can get people off their couches and moving, it does wonders for your mind and body.”

As Conrad experiences harsh Montana winters, one community member shared that they see a need for annual community activities hosted between October and March. Participants expressed gratitude for the local hiking path and pool. Although these fitness opportunities exist, many participants felt the community would benefit from better access to year-round facilities. Specifically, one community member stated, “An indoor pool in Conrad could solve so many problems across the lifespan – swimming is therapeutic, that instead of turning to something like opioids for pain, we could have a healthier option available.”

Finally, in regard to health education, a key informant interview participant shared that they frequently see “fliers for fall prevention classes, but that it would be nice to see a calendar that shows the full array of offerings.” Another participant suggested offering dietary workshops for the community.

## SERVICES NEEDED IN THE COMMUNITY

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- More mental health resources and providers
- Women’s health provider [i.e., Obstetrician/Gynecologist (OB/GYN)]
- More child specific care available locally (mental health and pediatrics)
- Urgent care (same day)
- Enhanced awareness of traveling specialty providers
- Increased health education outreach and fitness opportunities
- Community space for movement and health education across the lifespan (i.e. Indoor pool, classroom, etc.)



# EXECUTIVE SUMMARY

## Executive Summary

The table below shows a summary of results from the Logan Health Conrad's Community Health Needs Assessment. Areas of opportunity were determined after consideration of various criteria, including a comparison to data from local, state, and federal sources (Secondary data); survey results; those issues of greatest concern identified by the community stakeholders through key informant interviews; and the potential impact of a given issue.

Areas of Opportunity	Secondary Data	Survey	Interviews
<b>Access to Healthcare Services</b>			
<i>More primary care providers</i>	⊗	✓	☑
<i>Specialty services (i.e., urgent care, pediatrics, and women's health)</i>	⊗	✓	☑
<i>Awareness of available services (i.e., traveling specialists)</i>		✓	☑
<i>Affordability and insurance</i>	⊗	✓	☑
<b>Chronic Disease Prevention</b>			
<i>Cancer</i>	⊗	✓	☑
<i>Overweight/obesity/physical inactivity</i>		✓	☑
<i>Health education- weight loss, fitness, health &amp; wellness, nutrition</i>		✓	☑
<b>Mental and Behavioral Health</b>			
<i>More mental health services/resources</i>	⊗	✓	☑
<i>Alcohol/substance abuse</i>	⊗	✓	☑
<i>Stress management</i>		✓	
<b>Health Measures</b>			
<i>Vaccination [i.e., HPV up-to-date (UTD) and vaccine preventable diseases]</i>	⊗		



# **NEXT STEPS & RESOURCES**

## Prioritization of Health Needs

The community steering committee, comprised of staff leaders from Logan Health Conrad (LHC) and community members from Pondera 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:

- Mental and behavioral health
- Chronic disease management and prevention
- Access to healthcare services

Logan Health Conrad will determine which needs or opportunities could be addressed considering LHC'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.

## Available Community 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 were identified. As the steering committee continues to meet, more resources will continue to be identified, therefore, this list is not exhaustive.

- Conrad Area Chamber of Commerce
- Beehive Homes of Conrad
- Horizon Lodge Housing and Urban Development Division (HUD)
- Counseling Connections
- Options Counseling
- Sunrise Counseling
- Pioneer Counseling
- Center for Mental Health
- Pondera County Health Department
- Easter Seal Home Care Services
- Office of Public Assistance
- Alcoholics Anonymous
- Pondera Community Center
- Valier Senior Center
- Food Pantry
- Head Start
- Senior Surry – Conrad
- Northern Transit System/VA Visits
- Olson Drug
- Village Drug
- Pondera Funeral Home
- Conrad School District
- Benefis Health System
- Logan Health System
- Montana Hospital Association



# Evaluation of Previous CHNA & Implementation Plan

Logan Health Conrad provided the Montana Office of Rural Health with an update on their Implementation Plan activities from their previous CHNA process. The LHC Board of Directors approved its previous implementation plan in December 2019. The plan prioritized the following health issues:

- Access to healthcare services
- Chronic care management/prevention
- Mental and behavioral health

The following tables include completed activities, accomplishments and impacts/outcomes within the facility’s proposed goals. To view LHC’s full Implementation Plan visit:

[ponderamedical.org](http://ponderamedical.org).

## ***Goal 1: Enhance access to healthcare services in Pondera County.***

	<b>Activities</b>	<b>Accomplishments</b>	<b>Community Impact/Outcomes</b>
<b>Strategy 1.1:</b> Improve access to primary care services at LHC	Consider alternative staffing models to best meet community appointment needs	Conducted a survey among patients to assess their needs for appointment times. Based on the survey results, it was not found feasible to modify schedules at that time.	Logan Health Conrad may revisit in the future as the need arises.
	Include new questions regarding point of care needs as a part of patient satisfaction survey	The patient satisfaction survey was modified for point of care needs.	Recommendations from surveys implemented to improve patient experience.
	Consider expanding/adjusting primary care hours	Logan Health Conrad conducted a survey related to primary care office hours, although the results did not generate any requests for extended hours.	Logan Health Conrad may revisit in the future as the need arises.

	Create outreach materials to educate community on provider scope of practice	Outreach materials were created and the information was shared on the Logan Health Conrad website and social media platforms.	Increased community awareness of local providers.
	Create outreach opportunities to introduce LHC’s provider team to community (provider’s scope, interest, and patient testimonials, etc.)	Due to COVID-19 restrictions, in-person outreach with the community was placed on hold. Instead, Logan Health Conrad utilized social media platforms to share these messages.	Increased community awareness of local providers.
	Develop outreach materials to educate community on how to access the most appropriate level of care (Ed vs walk-in vs. clinic appointment)	Outreach materials were created to educate the community on Emergency Department vs. walk in and clinic services. The information was shared on the Logan Health Conrad website and social media platforms.	Expansion of walk-in visits have improved the community’s access to care.
<b>Strategy 1.2:</b> Improve access to specialty care services at LHC	Create outreach materials to educate community on specialty provider services, introduction to specialty providers and availability	There were changes in specialty providers and reduced availability due to the COVID-19 pandemic.	Although the COVID-19 pandemic impacted in-person specialty care visits locally, there was an increased use of telehealth visits.
	Explore enhancing specialty services at LHC onsite or via telehealth (cardiology, urology, dermatology)	Increased access to Integrated Behavioral Health and Pulmonology services.	Improved patient screening for behavioral health needs. Logan Health Conrad is in the process of implementing Telepsychiatry for ER.
<b>Strategy 1.3:</b> Explore new modalities to enhance LHC’s outreach and communication	Explore alternative methods to provide outreach (via short wave radio, social media (live), podcast, utilization of facility monitors, electronic billboard, etc.)	Logan Health Conrad has continued the use of social media platforms to provide outreach in the service area. Moreover, we obtained a vaccine hesitancy grant that supports outreach and education activities. Logan Health Conrad is in the process of working on billboard for an additional outreach opportunity.	Enhanced communication opportunities has increased the community knowledge of services available locally.



<p>Reach out to community partners to assess community resources and opportunities to disseminate/share services/information</p>	<p>LHC employs the local school nurse which has increased access of health services and education to youth and their families.</p> <p>Implemented Smiles Across MT to improve access to equitable oral hygiene health services among local children and adolescents.</p>	<p>Improved access to health education particularly among local children and adolescents.</p>
<p>Continue to refer patients to, and provide outreach to educate community on insurance navigation, cost assistance programs, etc.</p>	<p>Logan Health Conrad continues to assist patients with limited income with their Medicaid application.</p>	<p>Improved access to care by supporting patients.</p>
<p>Continue to foster youth engagement through various outreach programs by leveraging programs/events such as National Rural Health Day, REACH, CAN trainings, etc.</p>	<p>Due to restrictions associated with the COVID-19 pandemic, outreach programming was limited but Logan Health Conrad has provided limited community education opportunities such as CNA training, First Aid/CPR, education on shaken baby, and Stop the Bleed.</p>	<p>While the COVID-19 pandemic impacted this activity, Logan Health Conrad engaged area youth through opportunities such as CNA training, First Aid/CPR, education on shaken baby, and Stop the Bleed.</p>

**Goal 2: Enhance LHC’s chronic care management and prevention efforts to reduce chronic disease burden.**

	Activities	Accomplishments	Community Impact/Outcomes
<p><b>Strategy 2.1:</b> Host or sponsor community events that promote prevention and wellness</p>	<p>Continue to host annual health fair (providing reduced rate laboratory screenings, health education, services and resources)</p>	<p>COVID-19 restrictions limited the ability to host events such as the annual health fair. Instead, Logan Health Conrad offered laboratory specials similar to what is offered at the annual health fair. We leveraged social media channels to share health education.</p>	<p>Although the COVID-19 pandemic impacted the annual health fair, community members had access to Laboratory specials to stay current on routine lab work. Use of social media for health education.</p>
	<p>Host/sponsor community events (Community Fun Run, Golf Tournament, Ghost Out, Community Wellness Challenges, National Night Out, etc.)</p>	<p>COVID-19 restrictions limited the ability to host most events, but Logan Health Conrad had the opportunity to participate in the National Night Out and hosted a Fun Run in June 2021.</p>	<p>Although the COVID-19 pandemic impacted many in-person events, Logan Health Conrad was still able to participate in a couple events that enhanced their presence in the community.</p>

	Explore developing a youth/family wellness programs (New Year challenge, Steps challenge, Physical Therapy lectures, etc.)	COVID-19 restrictions limited the ability to host most events. The Wellness Center was closed to the community due to associated restrictions.	Despite restrictions associated with the COVID-19 pandemic, Logan Health Conrad participated in Walk with Ease program in collaboration with the local Health Department.
<b>Strategy 2.2:</b> Enhance chronic care management services and resources at LHC	Implement LHC chronic care management program	Logan Health Conrad has implemented a chronic care program.	Improved assessment of behavioral health needs and access to necessary services and resources.
	Develop internal protocols to determine eligible patient population	Logan Health Conrad is continuing to work on establishing protocols and eligible patient population.	This activity is still in progress, however it's intended that it will improve health outcomes and enhance access to chronic care management services and resources.
	Create outreach materials to invite potential participants	This activity has been delayed due to a focus on improvements to Integrated Behavioral Health screening protocol.	Although this activity has been delayed, it's intended that it will increase patient enrollment in the Chronic Disease Management program.
<b>Strategy 2.3:</b> Enhance health educational offerings available through LHC	Convene staff team to develop and spearhead health and wellness resources/opportunities/partners	Education was provided to the service area on walk-in appointment availability as well as a change in provider schedules to accommodate the walk-in services. Outreach was limited due to restrictions associated with the COVID-19 pandemic.	This activity is still in progress, however it's intended that it will improve the community's access to timely health and wellness resources.
	Explore development of health education series (Women's health, Fitness and nutrition, Prevention and screenings)	COVID-19 restrictions limited the ability to host in-person events.	Logan Health Conrad may revisit in the future as the need arises.
	Determine new modalities to engage and disseminate health and resource series (vides on website, Facebook, presentations, etc.)	Logan Health Conrad is working on website development with facility merger. We are conducting an ongoing assessment of community needs.	This activity is in progress; however it will enhance the community's awareness of health education resources.

**Goal 3: Enhance mental and behavioral health services in Pondera County.**

	<b>Activities</b>	<b>Accomplishments</b>	<b>Community Impact/Outcomes</b>
<p><b>Strategy 3.1:</b> Continue to promote and provide behavioral health resources in Pondera County</p>	<p>Continue to participate in various community programs that address mental health in Pondera County (Pondera County Mental Health Advisory Board, Mental Health Consortium, DUI Task Force)</p>	<p>Logan Health Conrad has maintained a strong presence and participation in Pondera County Mental Health board and DUI taskforce. The Mental Health Consortium ended due to COVID-19.</p>	<p>Increased access to mental health screening at clinic. Supported a mental health training at local schools with educators.</p>
	<p>Continue to participate in Integrated Behavioral Health and Opioid grant projects enhancing behavioral health services at LHC</p>	<p>Logan Health Conrad has maintained a strong participation with the Integrated Behavioral Health project.</p>	<p>This activity is in progress; however it will enhance the community’s access to local mental and behavioral health services.</p>
	<p>Continue to research/seek behavioral health services, resources, grants, staff and community partner skill development opportunities (MOAB, Mental Health First Aid, etc.)</p>	<p>Logan Health Conrad maintains an ongoing affiliation with Integrated Behavioral Health project.</p>	<p>Logan Health Conrad has implemented Telepsychiatry within the Emergency Room to improve the community’s access to mental health services locally.</p>
	<p>Create web-based calendar and information of available local and state mental health resources</p>	<p>Logan Health Conrad is currently in the process of developing a calendar to share available local and state mental health resources.</p>	<p>This activity is in progress; however it will enhance the community’s awareness of available mental health resources.</p>



# APPENDICES

# Appendix A- Steering Committee

<b>Steering Committee Member</b>	<b>Organization Affiliation</b>
<i>Laura Erickson</i>	VP – Logan Health Conrad (LHC)
<i>Casey Rasmussen</i>	Marketing Director – LHC
<i>Wendy Wedum</i>	Extension Agent – Montana State University (MSU) Extension Agency
<i>Becky Kujava</i>	Administrative Assistant – Montana State University (MSU) Extension Agency
<i>Carol Green</i>	Community organizer and volunteer
<i>Terry Syvertson</i>	Community member
<i>Melissa Willis</i>	Valier Area Development Corporation
<i>Pete McKeone</i>	Pondera Healthcare Foundation
<i>Joel Farkell</i>	Pondera County Fire Department
<i>Nicki Sullivan</i>	School Nurse – Conrad School District
<i>Shannon Elings</i>	Pondera County Health Department
<i>Cynthia Grubb</i>	Rural Health Clinic Manager



# Appendix B- Public Health & Populations Consultation

**Public Health & Populations Consultation** - a leader or representative of populations such as medically underserved, low-income, minority and/or populations with chronic disease.

## Name/Organization

Laura Erickson – Vice President, Logan Health Conrad  
Casey Rasmussen – Marketing Director, Logan Health Conrad  
Shannon Elings – Pondera County Health Department  
Wendy Wedum – Extension Agent, Montana State University (MSU) Extension Agency  
Becky Kujava – Administrative Assistant, MSU Extension Agency  
Carol Green – Community organizer and volunteer  
Terry Syvertson – Community member  
Melissa Willis – Valier Area Development Corporation  
Pete McKeone – Pondera Healthcare Foundation  
Joel Farkell – Pondera County Fire Department  
Nicki Sullivan – School Nurse, Conrad School District

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

First Steering Committee	December 16, 2021
Key informant interviews	January – February 2022
Second Steering Committee	March 8, 2022

## Public and Community Health

- I think some of the secondary data rates are surprisingly low, especially some of the mental health rates. It seems to be a bigger issue in our community than those rates are suggesting.
- It is always a little suspicious when one infectious disease is much higher in one county when compared to Montana overall. Could this disparity in numbers be due to a previous outbreak in Pondera County?
- Some people in this community don't have the ability to write, is there any type of assistance that is offered for those folks that may need help filling out their survey?
- As it relates to trauma we would like to add PTSD as a response option for Question 2 on the survey.
- Lack of exercise is good to keep but we'd also like to highlight the lack of access to exercise opportunities, especially during the winter months.

- COVID-19 should be included in some way for Question 2 on the survey, but we would like to make it more general as the community is definitely divided on the subject.
- We would like to add nutritional support as a preventive service response.
- I have talked to many people who have said they avoided certain things, including healthcare, due to COVID and the pandemic. This is really unfortunate.
- People may avoid seeking care because they are worried they will test positive for COVID and be told they have to quarantine/stay home.
- There is still a stigma around seeking mental health services, particularly in a small town like Conrad.
- It would be good to make the connection on the cover letter that Logan Health Conrad was formerly known as Pondera Medical Center (PMC). This could help alleviate some possible confusion about the facility.

### Population: Low-Income, Underinsured

- The response option of “collect disability” that was used on the previous survey comes off as insensitive, I think we should reword it to disability compensation or something similar.

### Population: Youth

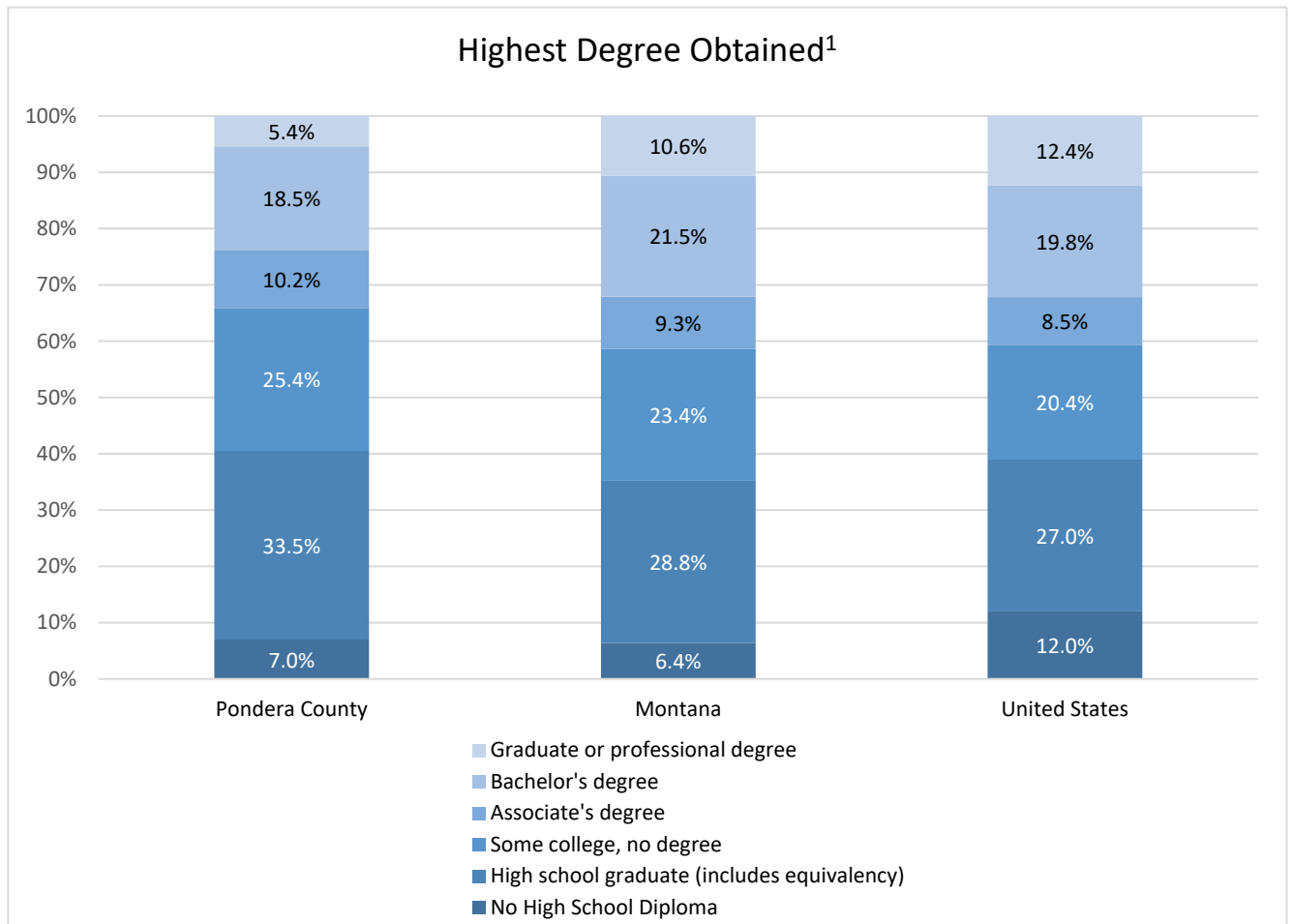
- I think that the children in poverty number is quite accurate, it is a high number. Several children in the community need additional support but are unable to get it because of limited resources.
- We have talked about trying to implement a school-based health clinic, gauging that as a response option for Question 7 would be beneficial.
- In addition to parenting, early childhood development should be a response option for Question 8. I have heard several people mention they would attend a program/class similar to that.

# Appendix C- Pondera Co. Secondary Data

Demographic Measure (%)		County			Montana			Nation		
Population <sup>1</sup>		5,994			1,050,649			324,697,795		
Population Density <sup>1</sup>		3.7			7.1			85.5		
Veteran Status <sup>1</sup>		11.9%			10.4%			7.3%		
Disability Status <sup>1</sup>		15.8%			13.6%			12.6%		
Age <sup>1</sup>		<5	18-64	65+	<5	18-64	65+	<5	18-64	65+
		7.2%	55.5%	20.0%	5.8%	60.1%	18.2%	6.1%	61.7%	15.6%
Gender <sup>1</sup>		Male		Female	Male		Female	Male		Female
		49.6%		50.4%	50.3%		49.7%	49.2%		50.8%
Race/Ethnic Distribution <sup>1</sup>		White			91.4%			75.3%		
		American Indian or Alaska Native			8.3%			1.7%		
		Other <sup>†</sup>			3.7%			26.5%		

<sup>1</sup> US Census Bureau - American Community Survey (2019)

<sup>†</sup> Black, Asian/Pacific Islanders, Hispanic & Non-Hispanic Ancestry



<sup>1</sup> US Census Bureau - American Community Survey (2019)



Socioeconomic Measures (%)	County	Montana	Nation
Median Income <sup>1</sup>	\$51,151	\$54,970	\$62,843
Unemployment Rate <sup>1</sup>	6.6%	4.0%	5.3%
Persons Below Poverty Level <sup>1</sup>	19.3%	13.1%	13.4%
Children in Poverty <sup>1</sup>	29.4%	15.8%	18.5%
Internet at Home <sup>2</sup>	74.8%	81.5%	-
Households with Population Age 65+ Living Alone <sup>2</sup>	354	52,166	-
Households Without a Vehicle <sup>2</sup>	149	21,284	-
Households Receiving SNAP <sup>2</sup>	245	56,724	-
Eligible Recipients of Free or Reduced Price Lunch <sup>3</sup> 2019/2020 school year	56.2%	42.9%	-
Enrolled in Medicaid <sup>4, 1</sup>	14.6%	9.7%	19.8%
Uninsured Adults <sup>5, 6</sup> Age <65	15.0%	12.0%	12.1%
Uninsured Children <sup>5, 6</sup> Age <18	7.0%	6.0%	5.1%

<sup>1</sup> US Census Bureau - American Community Survey (2019), <sup>2</sup> US Census Bureau - COVID-19 Impact Planning Report (2021), <sup>3</sup> Kids Count Data Center, Annie E. Casey Foundation (2020), <sup>4</sup> Medicaid Expansion Dashboard, MT-DPHHS (2020), <sup>5</sup> County Health Ranking, Robert Wood Johnson Foundation (2020), <sup>6</sup> Health Insurance Coverage, Centers for Disease Control and Prevention (CDC) (2019)

Maternal Child Health	County	Montana	Nation
General Fertility Rate* <sup>7</sup> Per 1,000 Women 15-44 years of age (2017-2019)	71.3	59.3	-
Preterm Births <sup>7</sup> Born less than 37 weeks (2017-2019)	9.5%	9.4%	-
Adolescent Birth Rate <sup>7</sup> Per 1,000 years females 15-19 years of age (2017-2019)	NA	18.3	-
Smoking during pregnancy <sup>3, 8</sup>	11.7%	16.5%	7.2%
Kotelchuck Prenatal Care** <sup>7</sup> Adequate or Adequate-Plus (2017-2019)	57.4%	75.7%	-
Low and very low birth weight infants <sup>7</sup> Less than 2500 grams (2017-2019)	NA	7.6%	-
Childhood Immunization Up-To-Date (UTD) <sup>§ 9</sup>	72.3%	64.8%	-

<sup>7</sup> IBIS Birth Data Query, MT-DPPHS (2020), <sup>3</sup> Kids Count Data Center, Annie E. Casey Foundation (2020), <sup>8</sup> National Center for Health Statistics (NCHS), CDC (2016), <sup>9</sup> Clinic Immunization Results, MT-DPHHS (2020)

\* General fertility rate is the number of live births per 1,000 females of childbearing age between the ages of 15-44 years.

\*\*The Kotelchuck Index, also called the Adequacy of Prenatal Care Utilization (APNCU) Index, uses two crucial elements obtained from birth certificate data-when prenatal care began (initiation) and the number of prenatal visits from when prenatal care began until delivery (received services). The Kotelchuck index classifies the adequacy of initiation as follows: pregnancy months 1 and 2; months 3 and 4; months 5 and 6; and months 7 to 9. A ratio of observed to expected visits is calculated and grouped into four categories: Inadequate (received less than 50% of expected visits); Intermediate (50%-79%); Adequate (80%-109%); Adequate Plus (110% or more).

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

Behavioral Health	County	Montana	Nation
Adult Smoking <sup>5</sup>	22.0%	19.0%	16.0%
Excessive Drinking <sup>5</sup>	24.0%	22.0%	15.0%
Adult Obesity <sup>5</sup>	32.0%	27.0%	26.0%
Poor Mental Health Days <sup>5</sup> (Past 30 days)	4.4	3.9	3.8
Physical Inactivity <sup>5</sup>	24.0%	22.0%	19.0%
Do NOT wear seatbelts <sup>10</sup> State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	10.3%	6.3%
Drink and Drive <sup>10</sup> State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	3.7%	3.1%

<sup>5</sup> County Health Ranking, Robert Wood Johnson Foundation (2020), <sup>10</sup> Behavioral Risk Factor Surveillance System, CDC (2019)

Cancer prevention & screening	County	Montana	Nation
Human Papillomavirus (HPV) vaccination UTD <sup>++ 11, 12</sup> Adolescents 13-17 years of age (2020)	10.5%	54.4%	58.6%
Cervical cancer screening in past 3 years <sup>13, 10</sup> Age adjusted (county/state) and crude (nation) prevalence among adult women aged 21–65 years (2018)	83.4%	76.8%	80.1%
Mammography in past 2 years <sup>13, 10</sup> Age adjusted (county/state) and crude (nation) prevalence among women 50-74 years (2018)	66.8%	73.4%	78.3%
Colorectal Cancer Screening <sup>13, 10</sup> Age adjusted (county) and crude (state/nation) prevalence among adults age 50-75 years (2018)	55.7%	64.5%	69.7%

<sup>11</sup> Adolescent Immunization Coverage by County, MT-DPHHS (2020), <sup>12</sup> National Center for Immunization and Respiratory Diseases, CDC (2021), <sup>13</sup> PLACES Project, CDC (2020), <sup>10</sup> Behavioral Risk Factor Surveillance System, CDC (2019)

<sup>++</sup> An up-to-date HPV vaccination measure assesses the completion of the HPV vaccine series (2 doses separated by 5 months [minus 4 days] for immunocompetent adolescents initiating the HPV vaccine series before their 15<sup>th</sup> birthday, and 3 doses for all others).

Infectious Disease Incidence Rates <sup>14</sup> Per 100,000 people (2015-2017)	County	Montana
Enteric Diseases *	158.0	80.1
Hepatitis C virus	29.6	93.4
Sexually Transmitted Diseases (STD) †	130.8	551.6
Vaccine Preventable Diseases (VPD) §	87.2	91.5

<sup>14</sup> IBIS Community Snapshot, MT-DPPHS

\* Foodborne illness † STD analyses include chlamydia, gonorrhea, and primary/secondary syphilis

§ VPD analyses include: Chickenpox, *Haemophilus influenzae*, Meningococcal disease, Mumps, Pertussis, *Streptococcus pneumoniae*, Tetanus

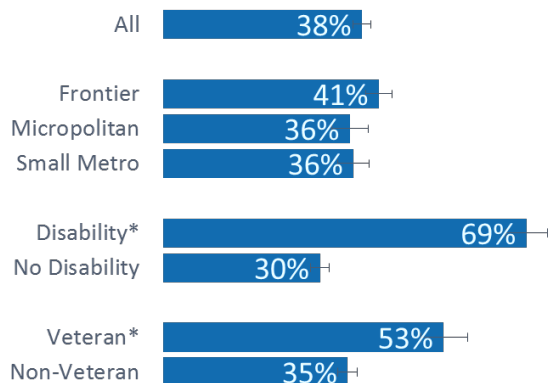
Chronic Conditions <sup>10</sup>	County	Montana	Nation
<b>Cardiovascular Disease (CVD) prevalence</b> <i>Adults aged 18 years and older (2014-2016)</i>	**	7.9	8.6
<b>Chronic Obstructive Pulmonary Disease (COPD) prevalence</b> <i>Adults aged 18 years and older (2014-2016)</i>	**	6.6	6.4
<b>Diabetes Prevalence</b> <i>Adults aged 18 years and older (2014-2016)</i>	**	8.3	10.6
<b>Breast Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	125.0	124.1
<b>Cervical Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	7.9	7.4
<b>Colon and Rectum Cancer (CRC) Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	37.1	38.9
<b>Lung Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	52.2	60.0
<b>Melanoma Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	26.3	21.0
<b>Prostate Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	109.6	103.0

<sup>14</sup> IBIS Community Snapshot, MT-DPPHS  
 \*\* Data were suppressed to protect privacy.

Montana Adults with Self-Reported Chronic Condition <sup>10</sup>	
1. Arthritis	29.0%
2. Depression	24.1%
3. Asthma	10.0%
4. Diabetes	7.6%
5. COPD	6.8%
6. Cardiovascular disease	3.9%
7. Kidney disease	2.4%

<sup>10</sup> Behavioral Risk Factor Surveillance System, CDC (2019)

### Percent of Montana Adults with Two or More Chronic Conditions



Mortality	County	Montana	Nation
<b>Suicide Rate<sup>15</sup></b> <i>Per 100,000 population (2009-2018)</i>	**	23.9	-
<b>Veteran Suicide Rate<sup>15</sup></b> <i>Per 100,000 population (2009-2018)</i>	-	65.7	38.4
<b>Alzheimer's Disease Mortality Rate<sup>16</sup></b> <i>Age-Adjusted per 100,000 population (2017- 2019)</i>	-	21.7	-
<b>Pneumonia/Influenza Mortality Rate<sup>17</sup></b> <i>Age-Adjusted per 100,000</i>	-	10.5	12.3
<b>Leading Causes of Death<sup>16, 18</sup></b>	-	1. Heart Disease 2. Cancer 3. Chronic Lower Respiratory Disease (CLRD)	1. Heart Disease 2. Cancer 3. Unintentional injuries

<sup>15</sup> Suicide in Montana, MT-DPHHS (2021), <sup>16</sup> IBIS Mortality Query, MT- DPPHS (2019), <sup>17</sup> Kaiser State Health Facts, National Pneumonia Death Rate (2019), <sup>18</sup> National Vital Statistics, CDC (2019)

\*\* Data were suppressed to protect privacy.

Montana Health Disparities <sup>10</sup>	White, non-Hispanic	American Indian/Alaska Native	Low Income*
<b>14+ Days when physical health status was NOT good</b> <i>Crude prevalence (2019)</i>	13.0%	17.9%	28.9%
<b>14+ Days when mental health status was NOT good</b> <i>Crude prevalence (2019)</i>	13.2%	19.2%	30.0%
<b>Current smoker</b> <i>Crude prevalence (2019)</i>	14.5%	41.5%	32.9%
<b>Routine checkup in the past year</b> <i>Crude prevalence (2019)</i>	72.8%	74.1%	81.1%
<b>No personal doctor or health care provider</b> <i>Crude prevalence (2019)</i>	26.5%	28.8%	23.8%
<b>No dental visit in the last year for any reason</b> <i>Crude prevalence (2020)</i>	34.9%	41.6%	48.1%
<b>Consumed fruit less than one time per day</b> <i>Crude prevalence (2019)</i>	40.5%	46.8%	49.5%
<b>Consumed vegetables less than one time per day</b> <i>Crude prevalence (2019)</i>	16.7%	18.0%	22.0%
<b>Does not always wear a seat belt</b> <i>Crude prevalence (2020)</i>	10.8%	15.9%	16.0%

<sup>10</sup> Behavioral Risk Factor Surveillance System, CDC (2019)

\*Annual household income < \$15,000

Youth Risk Behavior <sup>19</sup>	Montana		Nation
	White, non-Hispanic	American Indian/Alaska Native	
<b>Felt Sad or Hopeless</b> <i>Almost every day for two weeks or more in a row, during the past 12 months</i>	35.3%	39.6%	36.7%
<b>Attempted Suicide</b> <i>During the past 12 months</i>	8.7%	15.4%	8.9%
<b>Lifetime Cigarette Use</b> <i>Students that have ever tried smoking</i>	28.3%	48.9%	24.1%
<b>Currently Drink Alcohol</b> <i>Students that have had at least one drink of alcohol on at least one day during the past 30 days</i>	34.3%	25.3%	29.2%
<b>Lifetime Marijuana Use</b> <i>Students that have used marijuana one or more times during their life</i>	36.9%	58.9%	36.8%
<b>Texting and Driving</b> <i>Among students who drove a car in the past 30 days</i>	55.2%	39.6%	39.0%
<b>Carried a Weapon on School Property</b> <i>In the last 30 days</i>	7.2%	3.2%	2.8%

<sup>19</sup> Montana Youth Risk Behavior Survey (2019)

## Secondary Data – Healthcare Workforce Data 2021

### Health Professional Shortage Area & Medically Underserved Areas/Populations

The uneven geographic distribution of health system resources has long been a problem in the United States. As a result, many individuals do not have adequate access to health services in their community. State and Federal programs have been put in place to attempt to reduce this problem and decrease the barriers to access healthcare. The Health Professional Shortage Area (HPSA) program and the Medically Underserved Areas/Populations (MUA/P) are among the tools used to increase the supply, capacity, and distribution of health professionals to areas of greatest need. HPSA designations indicate shortages of healthcare professionals who provide primary care, dental, and mental health services. Designation may help communities attract new healthcare workforce and it may increase Medicare and Medicaid reimbursement to already existing healthcare providers.

Health Professional Shortage Area Designation <sup>1</sup> - Pondera County, Montana		
Discipline	HPSA Score	HPSA
Primary Care	15	✓ Rural Health Clinic
Dental Health	18	✓ Low income population
Mental Health	21*	✓ High needs geographic population
HPSA Scores range from 0 to 25 (primary care and mental health) and 0 to 26 (dental health) where the higher the score, the greater the priority		

<sup>1</sup> Health Resources and Services Administration (2021)

\* HPSA score for North Central Montana (Blaine, Chouteau, Glacier, Hill, Liberty, Pondera, Teton and Toole counties)

Provider Supply and Access to Care <sup>2</sup>				
Measure	Description	Pondera Co. (N = 1) **	Montana (N = 49) **	National (N = 1347) **
Primary care physicians	Ratio of population to primary care physicians	2028:1	1349:1	1050:1
Other primary care providers	Ratio of population to other primary care providers including nurse practitioners, physician assistants, and clinical nurse specialists	662:1	878:1	726:1
Dentists	Ratio of population to dentists	2980:1	1388:1	1260:1
Mental health providers	Ratio of population to mental health providers	851:1	356:1	310:1

<sup>2</sup> Critical Access Hospital Measurement and Performance Assessment System (CAHMPAS) - FLEX Monitoring (2019)

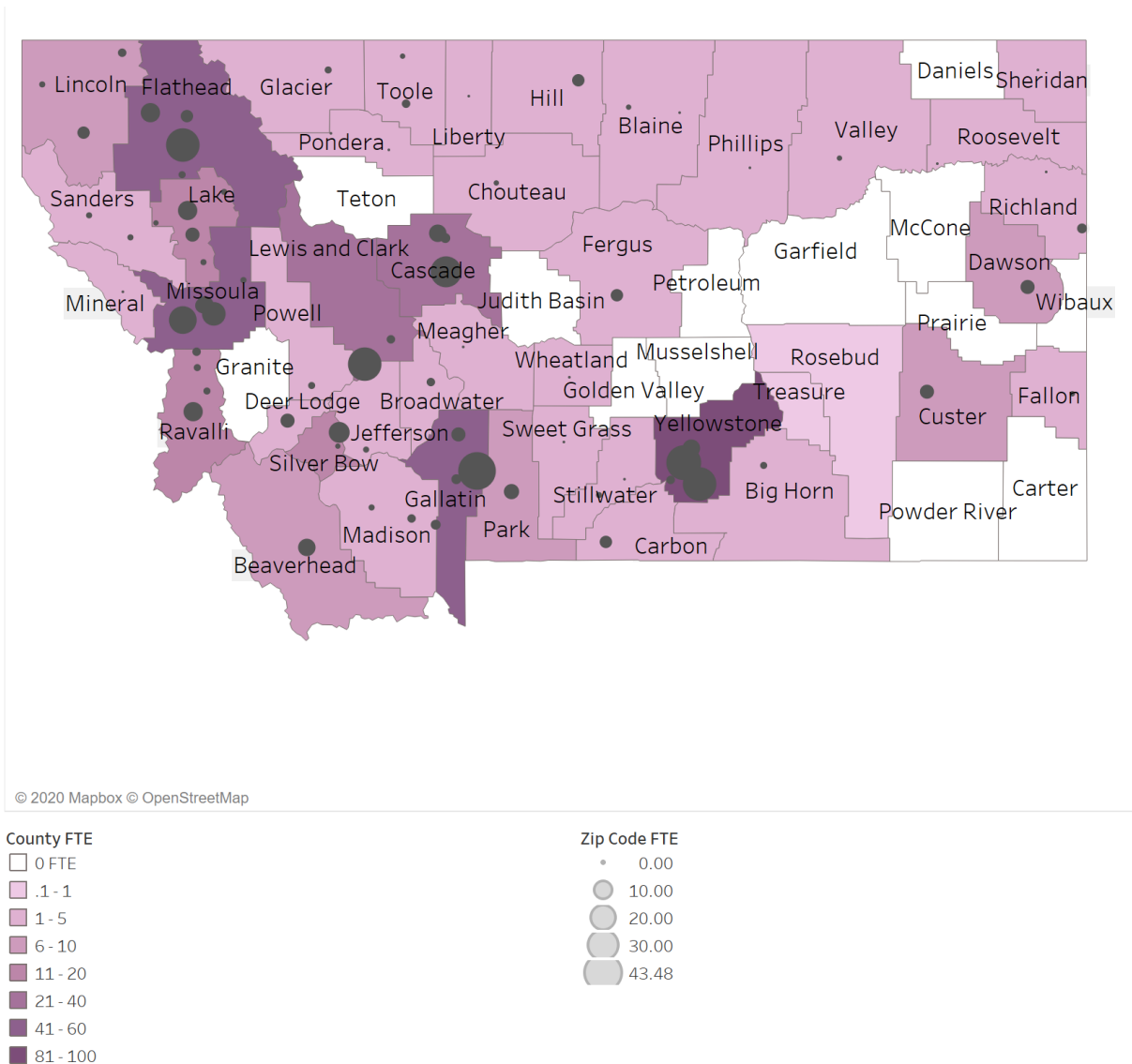
\*\* Total number of CAHs in region

### Healthcare workforce Distribution Maps

WIM Tracking is a Montana-based health workforce research company. WIM Tracking proactively monitors the movement of healthcare professionals in Wyoming, Idaho and Montana and maintains the data within a relational database.

- Counts only include actively practicing providers.
- Counts do not include providers at limited access facilities (VA, Malmstrom AFB, Indian Health Services, Montana State Prison, Montana State Hospital, therapeutic boarding schools)
- Counts only include primary practice locations. Locum Tenens providers are not included.
- Primary Care specialties include Family Medicine, Internal Medicine and Pediatrics.

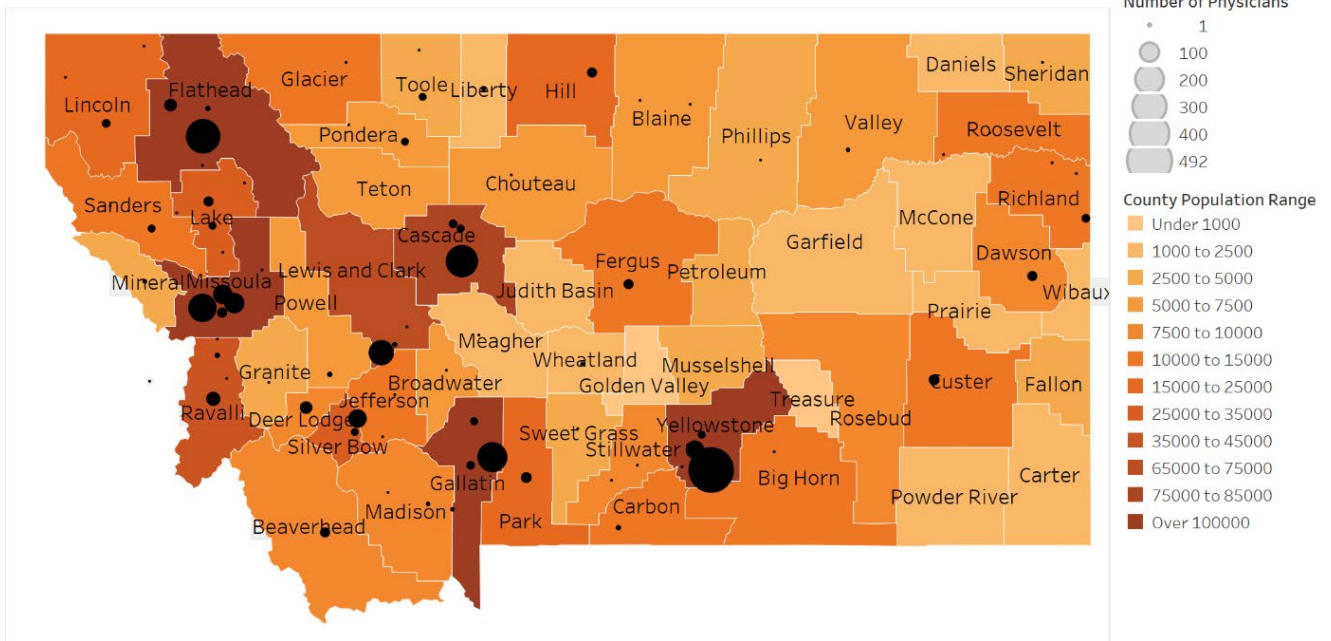
### Primary Care Physician FTE: Practice Locations Plotted by Zip Code



Data Source: Montana Primary Care Office data (2020) compiled and analyzed by WIM Tracking (Sept. 2020)

\*Note: Does not include IHS or Tribal Health physicians.

### Physicians (All Specialties) by County Population Range



Data Source: Montana Primary Care Office data (2020) and WIM Tracking (Sept. 2020)  
 \*Note: Does not include IHS or Tribal Health physicians.



## Appendix D- Survey Cover Letter

January 7, 2022



Conrad

Dear [LASTNAME] household:

Logan Health Conrad (LHC), formerly Pondera 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 planning for future needs.

Your name has been randomly selected as a resident who lives in the LHC 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.

1. Due date to complete survey: February 11, 2022
2. Complete the enclosed survey and return it in the envelope provided - no stamp needed.
3. You can also access the survey at <http://helpslab.montana.edu/survey.html>. Select "Logan Health Conrad Survey." Your access code is [CODED]

All survey responses will go to 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 or need assistance, please call MORH at 406-994-6986. 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,

A handwritten signature in cursive script that reads "Laura Erickson".

Laura Erickson, Vice President

# Appendix E- Survey Instrument

## Community Health Services Development Survey Conrad, 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 406-994-6986. Participation is voluntary, and your responses will remain confidential. 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 significant** health concerns in our community? **(Select ONLY 3)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Alcohol/substance abuse                     | <input type="checkbox"/> Lack of access to mental health          | <input type="checkbox"/> Respiratory issues/illness                               |
| <input type="checkbox"/> Alzheimer's/dementia                        | <input type="checkbox"/> Lack of dental care                      | <input type="checkbox"/> Social isolation/loneliness                              |
| <input type="checkbox"/> Cancer                                      | <input type="checkbox"/> Lack of exercise                         | <input type="checkbox"/> Stroke   |
| <input type="checkbox"/> Child abuse/neglect                         | <input type="checkbox"/> Lack of healthcare education             | <input type="checkbox"/> Suicide  |
| <input type="checkbox"/> Depression/anxiety                          | <input type="checkbox"/> MLS/ALS/Parkinson's                      | <input type="checkbox"/> Tobacco use<br>(cigarettes/cigars, vaping,<br>smokeless) |
| <input type="checkbox"/> Diabetes                                    | <input type="checkbox"/> Motor vehicle accidents                  | <input type="checkbox"/> Trauma/Adverse Childhood<br>Experiences (ACES)           |
| <input type="checkbox"/> Domestic violence                           | <input type="checkbox"/> Overweight/obesity                       | <input type="checkbox"/> Work/economic stress                                     |
| <input type="checkbox"/> Emerging infectious diseases                | <input type="checkbox"/> Poor nutrition                           | <input type="checkbox"/> Work related accidents/injuries                          |
| <input type="checkbox"/> Heart disease                               | <input type="checkbox"/> Prescription/illegal drug use            | <input type="checkbox"/> Other: _____   |
| <input type="checkbox"/> Hunger                                      | <input type="checkbox"/> Post-traumatic stress disorder<br>(PTSD) |   |
| <input type="checkbox"/> Lack of access to affordable<br>medications | <input type="checkbox"/> Recreation related<br>accidents/injuries |   |
| <input type="checkbox"/> Lack of access to healthcare                |   |   |

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

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Access to childcare/after school<br>programs | <input type="checkbox"/> Community involvement/<br>volunteerism       | <input type="checkbox"/> Low death and disease rates    |
| <input type="checkbox"/> Access to healthcare services                | <input type="checkbox"/> Good jobs and a healthy economy              | <input type="checkbox"/> Low level of domestic violence |
| <input type="checkbox"/> Access to healthy foods                      | <input type="checkbox"/> Good schools                                 | <input type="checkbox"/> Parks and recreation           |
| <input type="checkbox"/> Access to mental health<br>services          | <input type="checkbox"/> Healthy behaviors and lifestyles             | <input type="checkbox"/> Religious or spiritual values  |
| <input type="checkbox"/> Affordable housing                           | <input type="checkbox"/> Immunized children                           | <input type="checkbox"/> Strong family life             |
| <input type="checkbox"/> Arts and cultural events                     | <input type="checkbox"/> Improved hospital & patient<br>communication | <input type="checkbox"/> Tolerance for diversity        |
| <input type="checkbox"/> Clean environment                            | <input type="checkbox"/> Low crime/safe neighborhoods                 | <input type="checkbox"/> Transportation services        |
|   |   | <input type="checkbox"/> Other: _____                   |

4. How do you rate your knowledge of the health services that are available through Logan Health Conrad?

- Excellent       Good       Fair       Poor

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

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

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"/> Alternative medicine      | <input type="checkbox"/> Eye doctor                  | <input type="checkbox"/> Mental health |
| <input type="checkbox"/> Assisted living           | <input type="checkbox"/> Food stamps/WIC             | <input type="checkbox"/> Pharmacy      |
| <input type="checkbox"/> Cancer screening programs | <input type="checkbox"/> Health club                 | <input type="checkbox"/> Public health |
| <input type="checkbox"/> Chiropractor              | <input type="checkbox"/> Home health                 | <input type="checkbox"/> Senior center |
| <input type="checkbox"/> Community transportation  | <input type="checkbox"/> Long-term care/nursing home | <input type="checkbox"/> Other: _____  |
| <input type="checkbox"/> Dentist                   | <input type="checkbox"/> Meals on Wheels             |  |

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"/> Outpatient services expanded hours                |
| <input type="checkbox"/> Greater health education services         | <input type="checkbox"/> Payment assistance programs (healthcare expenses) |
| <input type="checkbox"/> Home visit options                        | <input type="checkbox"/> School-based health center                        |
| <input type="checkbox"/> Improved quality of care                  | <input type="checkbox"/> Telemedicine                                      |
| <input type="checkbox"/> Interpreter services                      | <input type="checkbox"/> Transportation assistance (to/from appointments)  |
| <input type="checkbox"/> More information about available services | <input type="checkbox"/> Other: _____                                      |
| <input type="checkbox"/> More primary care providers               |  |
| <input type="checkbox"/> More specialists                          |  |

8. If any of the following classes/programs/education were made available to the community, which would you be most interested in attending? **(Select ALL that apply)**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Alcohol/substance abuse              | <input type="checkbox"/> Health and wellness             | <input type="checkbox"/> Prenatal                  |
| <input type="checkbox"/> Cancer                               | <input type="checkbox"/> Heart disease                   | <input type="checkbox"/> Respite care              |
| <input type="checkbox"/> Caregiver support                    | <input type="checkbox"/> Lactation/breastfeeding support | <input type="checkbox"/> Smoking/tobacco cessation |
| <input type="checkbox"/> Diabetes                             | <input type="checkbox"/> Living will                     | <input type="checkbox"/> Support groups            |
| <input type="checkbox"/> Early childhood care and development | <input type="checkbox"/> Men's health                    | <input type="checkbox"/> Veteran support           |
| <input type="checkbox"/> First aid/CPR                        | <input type="checkbox"/> Mental health                   | <input type="checkbox"/> Weight loss               |
| <input type="checkbox"/> Fitness                              | <input type="checkbox"/> Nutrition                       | <input type="checkbox"/> Women's health            |
| <input type="checkbox"/> Grief counseling                     | <input type="checkbox"/> Parenting                       | <input type="checkbox"/> Other: _____              |

9. What additional healthcare services would you use if available locally? **(Select ALL that apply)**

- |  |  |                                       |
|--|--|---------------------------------------|
| <input type="checkbox"/> Adult day care        | <input type="checkbox"/> Pain management program | <input type="checkbox"/> Urology      |
| <input type="checkbox"/> Dermatology           | <input type="checkbox"/> Pediatrics              | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Gynecology/Obstetrics | <input type="checkbox"/> Psychiatry              |                                       |

10. Which of the following preventive services have you or someone in your household used in the past year? **(Select ALL that apply)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Blood pressure check          | <input type="checkbox"/> Flu shot/immunizations | <input type="checkbox"/> Pap test       |
| <input type="checkbox"/> Children's checkup/ Well baby | <input type="checkbox"/> Health checkup         | <input type="checkbox"/> Prostate (PSA) |
| <input type="checkbox"/> Cholesterol check             | <input type="checkbox"/> Health fair            | <input type="checkbox"/> Vision check   |
| <input type="checkbox"/> Colonoscopy                   | <input type="checkbox"/> Hearing check          | <input type="checkbox"/> None           |
| <input type="checkbox"/> Dental check                  | <input type="checkbox"/> Mammography            | <input type="checkbox"/> Other: _____   |
|  | <input type="checkbox"/> Nutrition support      |   |

11. 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 13)

12. 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 cost too much                   | <input type="checkbox"/> Privacy/confidentiality             |
| <input type="checkbox"/> Could not get off work             | <input type="checkbox"/> It was too far to go               | <input type="checkbox"/> Too long to wait for an appointment |
| <input type="checkbox"/> COVID-19 barriers/concerns         | <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 problems             |
| <input type="checkbox"/> Don't like providers               | <input type="checkbox"/> No insurance                       | <input type="checkbox"/> Unsure if services were available   |
| <input type="checkbox"/> Don't understand healthcare system | <input type="checkbox"/> Not treated with respect           | <input type="checkbox"/> Qualified provider not available    |
| <input type="checkbox"/> Had no childcare                   | <input type="checkbox"/> Office wasn't open when I could go | <input type="checkbox"/> Other: _____                        |

13. 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 16)

14. Where was that primary healthcare provider located? (Select ONLY 1)

- |                                      |   |                                       |
|--------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Conrad      | <input type="checkbox"/> Indian Health Services | <input type="checkbox"/> VA Clinic    |
| <input type="checkbox"/> Choteau     | <input type="checkbox"/> Kalispell              | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Great Falls | <input type="checkbox"/> Shelby                 |                                       |

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

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

16. In the past year, have you or a member of your household utilized pharmacy services?

- Yes       No (If no, skip to question 19)

17. If yes, where is the pharmacy that you use **MOST** often located? (Select ONLY 1)

- |                                      |   |                                       |
|--------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Conrad      | <input type="checkbox"/> Kalispell                  | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Choteau     | <input type="checkbox"/> Mail Order/Online Pharmacy |                                       |
| <input type="checkbox"/> Great Falls | <input type="checkbox"/> Shelby                     |                                       |

18. Why did you select the pharmacy you are currently using? (Select ALL that apply)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Closest to home                   | <input type="checkbox"/> Length of wait time               | <input type="checkbox"/> Recommended by family or friends |
| <input type="checkbox"/> Cost assistance programs          | <input type="checkbox"/> Pharmacy's reputation for quality | <input type="checkbox"/> Required by insurance plan       |
| <input type="checkbox"/> Cost of prescriptions/medications | <input type="checkbox"/> Prior experience with pharmacy    | <input type="checkbox"/> Other: _____                     |

19. Has cost prohibited you from getting a prescription or taking your medication regularly?

- Yes       No       Not applicable

**20.** In the past three years, has anyone in your household received care in a hospital? (i.e. hospitalized overnight, day surgery, obstetrical care, rehabilitation, or emergency care)  
 Yes       No (**If no, skip to question 23**)

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

- |   |   |                                       |
|---|---|---------------------------------------|
| <input type="checkbox"/> Benefis (Great Falls)                  | <input type="checkbox"/> Indian Health Services       | <input type="checkbox"/> VA Hospital  |
| <input type="checkbox"/> Benefis Teton Medical Center (Choteau) | <input type="checkbox"/> Logan Health (Kalispell)     | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Great Falls Clinic (Great Falls)       | <input type="checkbox"/> Logan Health Conrad (Conrad) |                                       |
|   | <input type="checkbox"/> Logan Health Shelby (Shelby) |                                       |

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

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

**23.** 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 26**)

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

- |   |                                    |                                       |
|---|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Conrad                 | <input type="checkbox"/> Kalispell | <input type="checkbox"/> VA Facility  |
| <input type="checkbox"/> Great Falls            | <input type="checkbox"/> Missoula  | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Indian Health Services | <input type="checkbox"/> Shelby    |                                       |

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

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

**26.** The following services are available through Logan Health Conrad. Please rate the overall quality for each service by circling your answer. **(Please circle N/A if you have not used the service)**

	Excellent	Good	Fair	Poor	Haven't Used	Don't Know
Ambulance services	4	3	2	1	N/A	DK
Durable medical equipment (DME)	4	3	2	1	N/A	DK
Emergency room	4	3	2	1	N/A	DK
Home health	4	3	2	1	N/A	DK
Inpatient services	4	3	2	1	N/A	DK
Laboratory	4	3	2	1	N/A	DK
Nursing home/extended care	4	3	2	1	N/A	DK
Oncology	4	3	2	1	N/A	DK
Orthopedics	4	3	2	1	N/A	DK
Radiology	4	3	2	1	N/A	DK
Rehabilitation services	4	3	2	1	N/A	DK
Respiratory services (ex. sleep studies)	4	3	2	1	N/A	DK
Rural Health Clinic services (Logan Health Conrad clinic)	4	3	2	1	N/A	DK
Telemedicine	4	3	2	1	N/A	DK
Visiting specialists (oncology and orthopedist)	4	3	2	1	N/A	DK

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

- Yes       No

**28.** Thinking about your mental health (which includes stress, anxiety, depression, PTSD, and problems with emotions), how would you rate your mental health in general?

- Excellent       Good       Fair       Poor

**29.** Thinking over the past year, how would you describe your stress level?

- High       Moderate       Low       Unsure/rather not say

**30.** In the past year, how often have you felt lonely or isolated?

- Everyday       Sometimes (3-5 days per month)       Never  
 Most days (3-5 days per week)       Occasionally (1-2 days per month)

**31.** To what degree has your life been negatively affected by your own or someone else's substance abuse issues, including alcohol, prescription or other drugs?

- A great deal       Somewhat       A little       Not at all

**32.** Over the past month, how often have you had physical activity for at least 20 minutes?

- Daily       3-5 times per month       No physical activity  
 2-4 times per week       1-2 times per month

**33.** In the past year, did you worry that you would not have enough food?

- Yes       No

**34.** Do you feel that the community has adequate and affordable housing options available?

Yes     No     Don't know

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

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

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

- Excellent                       Good                       Fair                       Poor

**37. If you **do NOT** have health insurance, why? (**Select ALL that apply**)**

- |   |  |
|---|--|
| <input type="checkbox"/> Can't afford to pay for health insurance | <input type="checkbox"/> Too confusing/don't know how to apply |
| <input type="checkbox"/> Employer does not offer insurance        | <input type="checkbox"/> Other: _____                          |
| <input type="checkbox"/> Choose not to have health insurance      |  |

**38. Are you aware of programs that help people pay for healthcare expenses?**

- Yes, and I use them     Yes, but I do not qualify     Yes, but choose not to use     No     Not sure

**Demographics**

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

**39. Where do you currently live, by zip code?**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> 59425 Conrad  | <input type="checkbox"/> 59432 Dupuyer     | <input type="checkbox"/> 59467 Pendroy |
| <input type="checkbox"/> 59422 Choteau | <input type="checkbox"/> 59448 Heart Butte | <input type="checkbox"/> 59486 Valier  |
| <input type="checkbox"/> 59416 Brady   | <input type="checkbox"/> 59456 Ledger      | <input type="checkbox"/> Other: _____  |

**40. What is your gender?**

- Male                       Female                       Non-binary                       Prefer to self-describe: \_\_\_\_\_

**41. What age range represents you?**

- |                                |                                |                                |                                |
|--------------------------------|--------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 35-44 | <input type="checkbox"/> 55-64 | <input type="checkbox"/> 75-84 |
| <input type="checkbox"/> 25-34 | <input type="checkbox"/> 45-54 | <input type="checkbox"/> 65-74 | <input type="checkbox"/> 85+   |

**42. 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"/> Disability compensation | <input type="checkbox"/> Other: _____                     |
| <input type="checkbox"/> Retired        | <input type="checkbox"/> Unemployed, but looking |   |

**[CODED]**

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

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

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

## Appendix F- Cross Tabulation Analysis

### Knowledge Rating of Logan Health Conrad Services by How Respondents Learn About Healthcare Services

	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>Total</b>
<b>Word of mouth/reputation</b>	13.3% (14)	54.3% (57)	23.8% (25)	8.6% (9)	<b>105</b>
<b>Friends/family</b>	8.9% (9)	59.4% (60)	24.8% (25)	6.9% (7)	<b>101</b>
<b>Healthcare provider</b>	15.7% (14)	62.9% (56)	19.1% (17)	2.2% (2)	<b>89</b>
<b>Newspaper</b>	10.7% (6)	60.7% (34)	25.0% (14)	3.6% (2)	<b>56</b>
<b>Radio</b>	13.3% (6)	48.9% (22)	31.1% (14)	6.7% (3)	<b>45</b>
<b>Social Media</b>	10.0% (4)	72.5% (29)	17.5% (7)	-	<b>40</b>
<b>Website/internet</b>	12.9% (4)	54.8% (17)	22.6% (7)	9.7% (3)	<b>31</b>
<b>Billboards/posters</b>	13.0% (3)	69.6% (16)	13.0% (3)	4.3% (1)	<b>23</b>
<b>Mailings/newsletter</b>	10.5% (2)	57.9% (11)	31.6% (6)	-	<b>19</b>
<b>Senior center</b>	5.3% (1)	52.6% (10)	36.8% (7)	5.3% (1)	<b>19</b>
<b>Public Health</b>	16.7% (3)	61.1% (11)	22.2% (4)	-	<b>18</b>
<b>Presentations</b>	66.7% (2)	-	33.3% (1)	-	<b>3</b>
<b>Other</b>	20.0% (1)	20.0% (1)	60.0% (3)	-	<b>5</b>



## Delay or Did Not Get Need Healthcare Services by Residence

	<b>Yes</b>	<b>No</b>	<b>Total</b>
<b>59425 Conrad</b>	24.0% (30)	76.0% (95)	<b>125</b>
<b>59416 Brady</b>	33.3% (3)	66.7% (6)	<b>9</b>
<b>59467 Pendroy</b>	16.7% (1)	83.3% (5)	<b>6</b>
<b>59486 Valier</b>	33.3% (2)	66.7% (4)	<b>6</b>
<b>59432 Dupuyer</b>	33.3% (1)	66.7% (2)	<b>3</b>
<b>59456 Ledger</b>	100.0% (2)	-	<b>2</b>
<b>59448 Heart Butte</b>	100.0% (1)	-	<b>1</b>
<b>TOTAL</b>	<b>26.3%</b> <b>(40)</b>	<b>73.7%</b> <b>(112)</b>	<b>152</b>

\* 59422 Choteau and Other removed from residence (first column) due to non-response.

## Location of primary care clinic most utilized by residence

	<b>Conrad</b>	<b>Choteau</b>	<b>Great Falls</b>	<b>Shelby</b>	<b>Other</b>	<b>TOTAL</b>
<b>59425 Conrad</b>	63.2% (74)	0.9% (1)	17.1% (20)	1.7% (2)	17.1% (20)	<b>117</b>
<b>59416 Brady</b>	88.9% (8)	-	-	-	11.1% (1)	<b>9</b>
<b>59486 Valier</b>	66.7% (4)	-	-	16.7% (1)	16.7% (1)	<b>6</b>
<b>59467 Pendroy</b>	20.0% (1)	20.0% (1)	40.0% (2)	-	20.0% (1)	<b>5</b>
<b>59432 Dupuyer</b>	-	33.3% (1)	33.3% (1)	-	33.3% (1)	<b>3</b>
<b>59456 Ledger</b>	50.0% (1)	-	-	50.0% (1)	-	<b>2</b>
<b>59448 Heart Butte</b>	-	-	-	-	100.0% (1)	<b>1</b>
<b>Other</b>	-	-	-	-	100.0% (1)	<b>1</b>
<b>TOTAL</b>	<b>61.1% (88)</b>	<b>2.1% (3)</b>	<b>16.0% (23)</b>	<b>2.8% (4)</b>	<b>18.1% (26)</b>	<b>100.0% (144)</b>

\* Indian Health Services, Kalispell, and VA Clinic removed from primary care clinic location (top row) due to non-response.

\*\* 59422 Choteau removed from residence (first column) due to non-response.

### Location of primary care provider most utilized by reasons for clinic/provider selection

	<b>Conrad</b>	<b>Choteau</b>	<b>Great Falls</b>	<b>Shelby</b>	<b>Other</b>	<b>TOTAL</b>
<b>Closest to home</b>	80.8% (63)	2.6% (2)	2.6% (2)	1.3% (1)	12.8% (10)	<b>78</b>
<b>Prior experience with clinic</b>	69.8% (37)	-	13.2% (7)	3.8% (2)	13.2% (7)	<b>53</b>
<b>Clinic/provider's reputation for quality</b>	65.3% (32)	-	10.2% (5)	4.1% (2)	20.4% (10)	<b>49</b>
<b>Appointment availability</b>	71.1% (32)	4.4% (2)	11.1% (5)	2.2% (1)	11.1% (5)	<b>45</b>
<b>Recommended by family or friends</b>	68.2% (15)	-	9.1% (2)	4.5% (1)	18.2% (4)	<b>22</b>
<b>Referred by physician or other provider</b>	-	-	50.0% (6)	-	50.0% (6)	<b>12</b>
<b>Length of waiting room time</b>	88.9% (8)	-	-	11.1% (1)	-	<b>9</b>
<b>VA/Military requirement</b>	-	-	-	-	100.0% (3)	<b>3</b>
<b>Cost of care</b>	50.0% (1)	-	50.0% (1)	-	-	<b>2</b>
<b>Required by insurance plan</b>	100.0% (2)	-	-	-	-	<b>2</b>
<b>Indian Health Services</b>	-	-	-	-	100.0% (1)	<b>1</b>
<b>Other</b>	-	-	60.0% (9)	13.3% (2)	26.7% (4)	<b>15</b>

**\* Indian Health Services, Kalispell, and VA Clinic removed from primary care clinic location (top row) due to non-response.**

## Location of pharmacy most utilized by residence

	<b>Conrad</b>	<b>Choteau</b>	<b>Great Falls</b>	<b>Kalispell</b>	<b>Mail Order/Online Pharmacy</b>	<b>Shelby</b>	<b>Other</b>	<b>TOTAL</b>
<b>59425 Conrad</b>	79.2% (99)	-	9.6% (12)	0.8% (1)	4.8% (6)	0.8% (1)	4.8% (6)	<b>125</b>
<b>59416 Brady</b>	75.0% (6)	-	12.5% (1)	-	-	-	12.5% (1)	<b>8</b>
<b>59467 Pendroy</b>	40.0% (2)	20.0% (1)	-	-	20.0% (1)	20.0% (1)	-	<b>5</b>
<b>59486 Valier</b>	60.0% (3)	-	-	-	-	40.0% (2)	-	<b>5</b>
<b>59432 Dupuyer</b>	33.3% (1)	-	33.3% (1)	-	33.3% (1)	-	-	<b>3</b>
<b>59456 Ledger</b>	100.0% (2)	-	-	-	-	-	-	<b>2</b>
<b>59448 Heart Butte</b>	-	-	-	-	-	-	100.0% (1)	<b>1</b>
<b>Other</b>	100.0% (1)	-	-	-	-	-	-	<b>1</b>
<b>TOTAL</b>	<b>76.0% (114)</b>	<b>0.7% (1)</b>	<b>9.3% (14)</b>	<b>0.7% (1)</b>	<b>5.3% (8)</b>	<b>2.7% (4)</b>	<b>5.3% (8)</b>	<b>100.0% (150)</b>

**\*\* 59422 Choteau removed from residence (first column) due to non-response.**

## Location of pharmacy most utilized by reasons for pharmacy selection

	<b>Conrad</b>	<b>Choteau</b>	<b>Great Falls</b>	<b>Kalispell</b>	<b>Mail Order/ Online Pharmacy</b>	<b>Shelby</b>	<b>Other</b>	<b>TOTAL</b>
<b>Closest to home</b>	89.0% (81)	1.1% (1)	1.1% (1)	-	-	1.1% (1)	7.7% (7)	<b>91</b>
<b>Prior experience with pharmacy</b>	88.1% (52)	-	1.7% (1)	1.7% (1)	-	3.4% (2)	5.1% (3)	<b>59</b>
<b>Pharmacy's reputation for quality</b>	83.8% (31)	-	-	2.7% (1)	-	10.8% (4)	2.7% (1)	<b>37</b>
<b>Cost of prescriptions/medications</b>	22.7% (5)	-	36.4% (8)	-	31.8% (7)	-	9.1% (2)	<b>22</b>
<b>Length of wait time</b>	84.6% (11)	-	-	-	-	7.7% (1)	7.7% (1)	<b>13</b>
<b>Required by insurance plan</b>	53.8% (7)	-	23.1% (3)	-	15.4% (2)	-	7.7% (1)	<b>13</b>
<b>Recommended by family or friends</b>	100.0% (6)	-	-	-	-	-	-	<b>6</b>
<b>Cost assistance programs</b>	100.0% (1)	-	-	-	-	-	-	<b>1</b>
<b>Other</b>	55.6% (5)	-	22.2% (2)	-	-	11.1% (1)	11.1% (1)	<b>9</b>

## Location of most utilized hospital by residence

	Benefis (Great Falls)	Great Falls Clinic (Great Falls)	Logan Health (Kalispell)	Logan Health Conrad (Conrad)	Other	Total
<b>59425 Conrad</b>	37.5% (27)	18.1% (13)	6.9% (5)	23.6% (17)	13.9% (10)	<b>72</b>
<b>59416 Brady</b>	77.8% (7)	22.2% (2)	-	-	-	<b>9</b>
<b>59486 Valier</b>	20.0% (1)	20.0% (1)	-	60.0% (3)	-	<b>5</b>
<b>59467 Pendroy</b>	66.7% (2)	-	-	33.3% (1)	-	<b>3</b>
<b>59432 Dupuyer</b>	100.0% (1)	-	-	-	-	<b>1</b>
<b>59448 Heart Butte</b>	-	-	-	-	100.0% (1)	<b>1</b>
<b>59456 Ledger</b>	-	-	-	100.0% (1)	-	<b>1</b>
<b>Other</b>	-	-	-	-	100.0% (1)	<b>1</b>
<b>TOTAL</b>	<b>40.9% (38)</b>	<b>17.2% (16)</b>	<b>5.4% (5)</b>	<b>23.7% (22)</b>	<b>12.9% (12)</b>	<b>100.0% (93)</b>

\* Benefis Teton Medical Center (Choteau), Indian Health Services, Logan Health Shelby (Shelby), and VA hospital removed from hospital location (top row) due to non-response.

\*\* 59422 Choteau removed from residence (first column) due to non-response.

## Location of most recent hospitalization by reasons for hospital selection

	Benefis (Great Falls)	Great Falls Clinic (Great Falls)	Logan Health (Kalispell)	Logan Health Conrad (Conrad)	Other	Total
<b>Referred by physician or other provider</b>	53.5% (23)	18.6% (8)	4.7% (2)	9.3% (4)	14.0% (6)	<b>43</b>
<b>Closest to home</b>	32.4% (12)	-	-	51.4% (19)	16.2% (6)	<b>37</b>
<b>Emergency, no choice</b>	47.1% (16)	-	2.9% (1)	35.3% (12)	14.7% (5)	<b>34</b>
<b>Prior experience with hospital</b>	38.7% (12)	12.9% (4)	3.2% (1)	38.7% (12)	6.5% (2)	<b>31</b>
<b>Hospital's reputation for quality</b>	19.0% (4)	28.6% (6)	14.3% (3)	19.0% (4)	19.0% (4)	<b>21</b>
<b>Recommended by family or friends</b>	11.1% (1)	55.6% (5)	11.1% (1)	11.1% (1)	11.1% (1)	<b>9</b>
<b>Required by insurance plan</b>	16.7% (1)	16.7% (1)	-	33.3% (2)	33.3% (2)	<b>6</b>
<b>Closest to work</b>	25.0% (1)	-	-	75.0% (3)	-	<b>4</b>
<b>Cost of care</b>	-	100.0% (1)	-	-	-	<b>1</b>
<b>Indian Health Services</b>	-	-	-	-	100.0% (1)	<b>1</b>
<b>VA/Military requirement</b>	-	100.0% (1)	-	-	-	<b>1</b>
<b>Other</b>	66.7% (6)	22.2% (2)	-	11.1% (1)	-	<b>9</b>

\* Benefis Teton Medical Center, Indian Health Services, Logan Health Shelby (Shelby), and VA hospital removed from hospital location (top row) due to non-response.

\*\* Financial assistance programs removed from reasons (first column) due to non-response.

## Appendix G- Responses to Other & Comments

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

- COVID (5)
- Lack of alternative, holistic, integrated, and naturopathic healthcare options.
- Comprehensive sexual education (non-abstinence based)
- Racism
- The cost of healthcare by far.
- Not sure

\*Responses when more than 3 were selected (2 participants):

- Alcohol/substance abuse (1)
- Alzheimer's/dementia (1)
- Cancer (1)
- Child abuse/neglect (1)
- Domestic violence (1)
- Lack of access to mental health (1)
- Overweight/obesity (2)
- Prescription/illegal drug use (1)
- Tobacco use (cigarettes/cigars, vaping, smokeless) (1)

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

- No racism.
- Control of illegal drugs.

\*Responses when more than 3 were selected (3 participants):

- Access to childcare/after school programs (2)
- Access to healthcare services (1)
- Access to healthy foods (1)
- Affordable housing (1)
- Community involvement/volunteerism (1)
- Good jobs and a healthy economy (3)
- Good schools (1)
- Immunized children (1)
- Low crime/safe neighborhoods (1)
- Religious or spiritual values (1)
- Tolerance for diversity (1)



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

- I live across the street from the hospital.
- Call & ask
- Ask
- Employment
- Call to ask if they have services.

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

- Pool/Parks

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

- Community education & community wellness facilities such as indoor pool & a space for classes.
- There's a provider who thinks pulmonary embolisms are heartburn.
- Less racism
- Lower price
- Women's health
- For urgent care to have employees working all the time so one does not have to wait for the Dr./PA to come back from lunch (1.25 hrs)
- Counseling
- Get a better eye doctor.
- Lower charges
- Expanded lab services
- More competitive pricing of services
- Service here - not sending people to Great Falls.

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

- Alzheimer's Support
- No pro technology fertility care - Dr. Hilgers, Better women's care
- Family planning
- None

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

- None (2)
- Naturopath
- Dental Affordable
- Cardiac
- Arthritis (2)
- Eye doctor
- ear/nose/throat (ENT)

- Wellness Center
- Endocrinology
- Expanded lab services
- Rheumatology
- Orthopedic
- Functional Medicine
- Better eyecare
- Alternative medicine

**10.** Which of the following preventative services have you or someone in your household used in the past year?

- Bone density
- Labs
- Upper Gastrointestinal (UGI), endoscopy, ultrasound
- COVID Vaccination
- Sport Physical

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

- Racism
- Privacy
- Badly treated from Sunset Dental
- Procrastinated

\*Responses when more than 3 were selected (2 participants):

- Could not get an appointment (1)
- COVID-19 barriers/concerns (1)
- Don't understand healthcare system (1)
- It was too far to go (1)
- My insurance didn't cover it (1)
- Not treated with respect (1)
- Qualified provider not available (1)

**14.** Where was that primary healthcare provider located? (Select ONLY 1)

- Whitefish
- Valier
- Online
- Boise
- Havre
- Cut Bank

\*Responses when more than 1 was selected (22 participants):

- Conrad (18)
- Choteau (2)

- Great Falls (19)
- Indian Health Services (1)
- Shelby (1)
- VA Clinic (4)

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

- Female
- Confidentiality
- Robert Clary
- Found an issue missed by Conrad Dr. Also incorporates God.
- Less racism
- Specialty/pediatric
- Family care provider for many years
- Using my obstetrician (OB) as a primary care provider.
- Used to practice here in Conrad.
- Provider is a DO
- 2 doctors left town
- Wanting naturopath.
- Long Appointments + Holistic Approach
- Needed specialists i.e.: cardio, oncologist, ortho surgeon, pulmonology.

**17. Where is the pharmacy that you use MOST often located? (Select ONLY 1)**

- VA
- Express scrips
- Indian Health Services

**\*Responses when more than 1 was selected (7 participants):**

- Conrad (6)
- Great Falls (6)
- Mail Order/Online Pharmacy (1)

**18. Why did you select the pharmacy you are currently using?**

- Denise Flings
- Convenience. Mail for free.
- Personal care from independent pharmacy.
- VA
- Olson's drug privately owned
- Don't want the local pharmacy in my business.
- Efficiency, customer service
- Only one/two
- Closest to work

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

- Billings Clinic
- Bozeman
- Pondera Medical Center
- Depends on the circumstances - would prefer Conrad.
- Honor Health Med Center (Scottsdale, AZ)
- Butte
- Northern Rockies Orthopedics

**\*Responses when more than 1 was selected (6 participants):**

- Benefis (Great Falls) (5)
- Benefis Teton Medical Center (Choteau)
- Great Falls Clinic (Great Falls) (2)
- Indian Health Services (1)
- Logan Health (Kalispell) (1)
- Logan Health Conrad (Conrad) (4)

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

- Type of care not offered in Conrad.
- Personalized care, treated like a person.
- Cancer
- Went there because Conrad helped us with my grandson who was seriously ill. He was hospitalized there for 3 weeks.
- High risk care
- Dermatology
- Surgery
- Planned procedures, our doctors are in Great Falls.

**\*Responses when more than 3 were selected (1 participant):**

- Emergency, no choice (1)
- Hospital's reputation for quality (1)
- Prior experience with hospital (1)
- Referred by physician or other provider (1)

**24. Where was the healthcare specialist seen?**

- Billings, MT (2)
- Whitefish/Bozeman
- Helena (3)
- Choteau (2)
- Helena, Choteau
- Sacred Heart, Spokane, WA.
- AZ

**25. What type of healthcare specialist was seen?**

- Nephrologist
- Acupuncture
- Orthopedic
- Naturopath
- Internal medicine
- Back surgeon, shoulder surgeon
- Physical therapist
- MD, DABVLM
- Oral Surgeon
- Fertility specialist

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

- Insurance doesn't cover much. I pay out of pocket, deductible too damn high.
- Blue Cross
- AETNA
- Federal Blue Cross Blue Shield
- BCBS MT
- Blue Cross/Blue Shield
- 3 people in house all have different insurances
- Medicare Advantage BC/BS

**\*Responses when more than 1 was selected (24 participants):**

- Christian Health Ministries (1)
- Employer sponsored (3)
- Health Insurance Marketplace (3)
- Health Savings Account (2)
- Healthy MT Kids (3)
- Indian Health (2)
- Medicaid (5)
- Medicare (20)
- Private insurance/private plan (7)
- VA/military (6)

**37. If you do NOT have medical insurance, why?**

- I have Humana
- Not applicable (NA) (2)

**39. Where do you currently live, by zip code?**

- Arizona

**\*Responses when more than 1 was selected (1 participant):**

- 59425 Conrad (1)

**40. What is your gender?**

- Male and Female, completed this together as a couple.

**42. What is your employment status?**

- Seeking disability, I am a rancher so I try to work most of the time but I can't due to surgeries.
- stay at home mom (SAHM)
- Self-employed farming
- Self-employed (2)
- Not currently seeking employment, Mom :)
- Applying for Disability

**\*Responses when more than 1 was selected (5 participants):**

- Work full time (2)
- Work part time (4)
- Retired (2)
- Disability compensation (1)
- Not currently seeking employment (1)

**General comments**

- (Q2)
  - Selected “Diabetes” and wrote “medications”
  - Selected “Lack of access to healthcare” and revised it to read “Lack of access to adequate and competent healthcare”
  - Selected “Prescription/illegal drug use” and wrote “meth”
- (Q3)
  - Selected “Access to healthy foods” and revised it to read “Access to affordable healthy foods”
- (Q32)
  - Selected “No physical activity” and wrote “other than work which is almost 5-7 constant hrs/day 5 days/week”
- (Q42)
  - Selected both “Work full time” and “Work part time” and wrote “(2<sup>nd</sup> Job)” next to “Work part time”.

# Appendix H- Key Informant Interview - Questions

## Key Informant Interview Questions

**Purpose:** The purpose of key informant interviews is to identify motives of local residents when selecting healthcare providers and why people may leave the community to seek health services. This market research will help determine the awareness of local programs and services, as well as satisfaction or dissatisfaction with local services, providers, and facilities.

1. How do you feel about the general health of your community?
  
2. What are your views/opinions about these local services:
  - Hospital/clinic
  - EMS Services (ER/Ambulance)
  - Public/County Health Department
  - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - Services for Low-Income Individuals/Families
  
3. What do you think are the most important local healthcare issues?
  
4. What other healthcare services are needed in the community?
  
5. What would make your community a healthier place to live?

# Appendix I- Key Informant Interviews - Transcript

## **Key Informant Interview #1**

Tuesday, January 25, 2022

Anonymous – Via phone interview

### **1. How do you feel about the general health of your community?**

- You know, I received the survey too and I think my answer on survey was fair to poor. To elaborate more though, I think it's a multifaceted thing. People in this area put off mental health and regular primary care.
- We have a significant amount of domestic violence and substance use disorders (SUDs).
- I think we're improving, but access to local physical activity could be better. There's a hiking path that's currently about a mile, which is a good start!
- We have an aging population.
- As for mental health, there are limited resources for teens and there really isn't a local mental health provider that serves children under 10 years of age.

### **2. What are your views/opinions about these local services:**

- Hospital/clinic
  - I think the hospital is a great safety net. We're lucky to have it!
  - When I hear people talking about Logan Health Conrad, they're typically happy to have it, but they also travel out for regular care.
  - We've been pleased with the clinic providers.
  - I will say that I know that there's an undercurrent of historical conflict between Marias Medical Center (now Logan Health Shelby) and Pondera Medical Center (now Logan Health Conrad). As community members, we're hoping it will improve being that both are part of the Logan Health system.
- EMS Services (ER/Ambulance)
  - I think these services are good!
  - As for the emergency room, if someone presents with something like a mental health crisis, the communication has been good and strong. It's impossible to have full time psych professional, so as community members, we realize that there are limits. Training may be helpful for existing staff of all levels so they feel more confident though.
- Public/County Health Department
  - I think they're good!
  - I feel like each of the three leaders in recent history have done well working with the community.



- Web presence is better than it previously was. They're great about reaching out and aligning efforts with partners.
- I don't think the circumstances of COVID allow the department to shine as they may otherwise.
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - I think there's some good efforts around services for the aging population.
  - The nursing home unfortunately has a bad reputation. They struggle to find enough people to work and it inherently impacts care of their residents.
  - We have the Blue Sky Villa retirement village which is a community for people 55 and older.
  - There's a transportation van that goes around town.
  - Meals on wheels is also very active.
  - A need for seniors, though, are more opportunities to be active.
- Services for Low-Income Individuals/Families
  - These services are pretty limited. There's a food bank and domestic violence call center in town.
  - There's limited section 8 housing – perhaps about 20-30 units in town. But we don't have any homeless services available locally.
  - We also don't have a local Medicaid or Supplemental Nutrition Assistance Program (SNAP) office.

**3. What do you think are the most important local healthcare issues?**

- Community involvement and engagement is such a big need for this area.
- Obesity and cancer are always a concern.
- I would like to see access to more robust mental health services.

**4. What other healthcare services are needed in the community?**

- I would like to see more child specific care available locally such as mental health and pediatrics.
- Transportation is also a concern for our community.
- I think we could really use more community coordinated efforts (i.e. interdisciplinary approaches). There was a healthcare foundation that had momentum, but it's waned since COVID.

**5. What would make your community a healthier place to live?**

- A new hospital building with recreation center and pool!
- I also think we need a counseling center that specializes in kids 11 years old and under.
- We could also use someone to coordinate annual community activities in the winter months of October to March.

## **Key Informant Interview #2**

Tuesday, February 8, 2022

Anonymous–Via phone interview

### **1. How do you feel about the general health of your community?**

- It worries me a little bit.
- We have very elderly population in this area and more recently, have had a lot of rare cancer diagnosis among the community.
- There are also a lot of issues around mental health locally. I know there's still some stigma associated with accessing mental health services/resources among the elderly population.
- But also access to mental health services for the local teens would be great. Some parents may still have a hard time believing their teens may benefit from accessing these services.

### **2. What are your views/opinions about these local services:**

- Hospital/clinic:
  - I'm very happy we have Logan Health Conrad here. I'd really hate to ever lose this service in our community.
- EMS Services (ER/Ambulance)
  - I've never had to deal with ambulance, so I can't speak to that service.
  - But I have had experience with the ER. It's tough to say, but I feel like with some of my encounters, the providers feel put out to be there. The nurses have been incredible though!
- Public/County Health Department
  - *Not asked.*
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - I'd say we really excel in this area! We have so many options.
  - We have a wonderful nursing home that's now under new management.
  - There's a senior living facility and you can really tell that they care about their residents.
  - We also have a senior center. They serve lunch on weekdays and elderly can choose to eat in house, pick up a meal or even have them deliver to their residence. The senior center has a transportation service for wherever folks need to go. I think they also host a bunch of events like weekly card games and monthly birthday parties.
  - While this isn't just for seniors, there's also a Northern Transit bus that runs to places like Shelby and Great Falls. This can be used for appointments!
  - We also have some senior apartments and military barracks that have been refurbished to provide more independent living options for seniors. These have their own yards and lawn work is provided for them.
- Services for Low-Income Individuals/Families

- We do have some options locally.
- There is Women, Infants and Children (WIC) available through the local health department in Conrad. And the Area on Aging helps people sign up for Medicare. Like other areas, we no longer have a Medicaid office locally. If you need support with Medicaid, I think you have to travel to Great Falls or they occasionally have people come from either Choteau or Shelby to help signup or questions.
- I don't think we have any low-income housing in Conrad anymore. I think we used to have a couple of options, but I'm not sure what happened to them. Housing affordability is hard here too.

**3. What do you think are the most important local healthcare issues?**

- Other than what I've mentioned above, I'm really not sure what to add here.

**4. What other healthcare services are needed in the community?**

- I know Logan Health Conrad has traveling specialty providers that come in, but it would be nice to have them visit more frequently so our community members don't have to travel out of town.
- I would like to see more access to counseling services. There are a few offering mental health services in town, but it's tough to get in for an appointment with the local demand. More access to telemental health services would be nice!

**5. What would make your community a healthier place to live?**

- Mental health in this area just really needs to improve.
- It would also be good to dig into why cancer is so prevalent.

**Key Informant Interview #3**

Wednesday, February 16, 2022

Anonymous—Via phone interview

**1. How do you feel about the general health of your community?**

- I feel like it could be better.
- Our community is knowledgeable, but we don't have all of the facilities.
- The pool is such an asset to this area, but the hours and season are short/limited due to it being outdoors.
- I would love to see a culture of abundance in health opportunities fostered in this area.
- A key determinant of health around here is isolation. If we can get people off their couches and moving, it does wonders for your mind and body.

**2. What are your views/opinions about these local services:**

- Hospital/clinic:

- I feel like it's a quality product and service in general.
- The people that work there really care about experience of each patient.
- We view hospital an extension of our home and family. It's very important to us that this remains a place that provides personalized care.
- EMS Services (ER/Ambulance)
  - I don't know much about these services, but I've seen them posting jobs recently, so that has to be good!
- Public/County Health Department
  - I don't know much about the public health department other than the fact that they recently moved into a remodeled facility.
  - My only interacted with them was to get a copy of childhood immunizations and they were very helpful.
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - Nursing home is always valued. It's viewed as extension of people's homes. They provide personalized care and are thought of as a safe place among community members. Family is very welcome at the nursing home.
  - The senior services are pretty good in this area. There seems to be more of an emphasis on senior services than early childhood services.
- Services for Low-Income Individuals/Families
  - I don't really know about these services.

**3. What do you think are the most important local healthcare issues?**

- I think community health education is something that is needed in this community. I've seen fliers for fall prevention classes, but it would be nice to see a calendar that shows the full array of offerings.
- Along similar lines, having dedicated space such as a community classroom would be wonderful!
- An indoor pool in Conrad could solve so many problems across the lifespan – swimming is therapeutic, that instead of turning to something like opioids for pain, we could have a healthier option available.

**4. What other healthcare services are needed in the community?**

- For things like durable medical equipment (DME), vendors often have to travel at least 60 miles if not 140 for specialized equipment for children.
- I would like to see more support for specialty services such as pediatrics.
- IHS also has huge needs that often go unmet or delayed since they have to drive to Great Falls.

**5. What would make your community a healthier place to live?**

- I would like to see a public indoor space in Conrad where community members can come together and practice movement.
- In addition to a dedicated space, there would also need to be some sort of coordinator to facilitate active involvement of the indoor space.

### **Key Informant Interview #4**

Thursday, February 17, 2022

Anonymous–Via phone interview

#### **1. How do you feel about the general health of your community?**

- This is a limited view for me.
- Generally speaking though, I would rate it as somewhat healthy.
- There seems as though a lot of cancer, but maybe that's normal everywhere.
- It seems like people are fairly active, mainly within jobs like agriculture.

#### **2. What are your views/opinions about these local services:**

- Hospital/clinic:
  - I would say it's good for a rural community.
  - I've noticed that in recent years, they've been able to bring in more specialty care providers on a rotating basis.
  - I have also noticed that blood work comes back quicker which is an improvement!
- EMS Services (ER/Ambulance)
  - I don't have any experience with the ambulance.
  - We've had good experience with emergency room, but that was several years ago.
  - I've heard some not so great things about the ER recently, particularly around admissions. I'm not sure if it's been due to COVID concerns and limiting access though.
- Public/County Health Department
  - Fine – I think they are great at communicating.
  - The public view may differ from me though.
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - There's a lot of options locally!
  - I would say they are seemingly good and allowing visitors which is nice for the residents.
- Services for Low-Income Individuals/Families
  - I believe there's quite a few providers – both medical and dental that are able to care for low income individuals and families.
  - I've heard it's very easy to access assistance programs locally if you need them.
  - We also have a food pantry that seems well stocked!

#### **3. What do you think are the most important local healthcare issues?**

- I think being able to be seen the same day by providers is something that needs to be addressed. It's important for families in particular when you have a sick kid and need to access care.
- I would like to see more frequent visits from specialists.

**4. What other healthcare services are needed in the community?**

- In addition to more frequent visits from specialists, to my knowledge, there's not an Obstetrician/Gynecologist (OB/GYN). That would be helpful for women!
- I know we have an orthopedic surgeon and some other surgeons that visit frequently.

**5. What would make your community a healthier place to live?**

- Maybe some dietary workshops.
- I can't think of anything else though!

## Appendix J- Request for Comments

Written comments on this 2022 Community Health Needs Assessment Report can be submitted to the Marketing Department at Logan Health Conrad:

Marketing  
Logan Health Conrad  
805 Sunset Blvd.  
Conrad, Montana 59425

Contact Logan Health Conrad's Marketing Department, Jael Johnson at [jaeljohnson@logan.org](mailto:jaeljohnson@logan.org) with questions.

