

2023 COMMUNITY HEALTH NEEDS ASSESSMENT

Shelby, Montana

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





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INTRODUCTION

Introduction

Logan Health Shelby (LHS) in Shelby, Montana is a licensed 21-bed Critical Access Hospital (CAH) and clinic. LHS has a primary service area of approximately 1,946 square miles and provides medical services to a base population of approximately 5,000 residents throughout Toole County.

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





Mission: Improve health and quality of life by delivering exceptional, compassionate care with an outstanding experience for all.

Vision: To be the center for health and healing for our communities, where access to high quality, outstanding care helps achieve healthier and more fulfilling lives.

Values:

Integrity In out actions and in our words, we approach every moment with integrity. We feel deeply the need to respect our patients and each other no matter the situation. We take ownership and responsibility to protect the organization and provide exceptional care for our patients.

Quality We provide evidence-based care that delivers on the patient's individual needs ensuring that patients and caregivers are safe.

Service We are here to serve the needs of our patients and our communities by providing excellence in care at each and every interaction.

Compassion This is at the center of everything we do. Wherever and whenever people seek us, they will find open hearts, ready to listen in order to deliver patient-centered care.

Unity We are connected in our purpose, to each other and to our community. We create an environment where everyone is valued and respected for their contributions and we deliver a welcome, inclusive, seamless experience.

Logan Health Shelby 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, focus groups, and key informant interviews enhance community engagement in the assessment process.

Over the months of January and February 2023, Toole County 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.

Health Assessment Process

A steering committee was convened to assist Logan Health Shelby 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 2022. 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 2023, surveys were mailed out to the residents in Toole 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 Shelby provided a list of aggregated outpatient and inpatient admissions from Toole County. 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. 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 ¹	Community Name	Total Distribution	# Male	# Female
59474	3153	Shelby	539	269	269
59482	362	Sunburst	99	50	50
59444	284	Galata	59	30	30
59454	169	Kevin	32	16	16
59466	58	Oilmont	32	16	16
59435	31	Ethridge	20	10	10
59484	56	Sweet Grass	20	10	10
Total	4,113		800	400	400

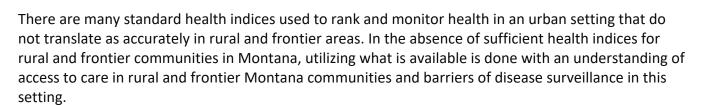
¹ US Census Bureau - American Community Survey (2019)

Focus groups and 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.



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



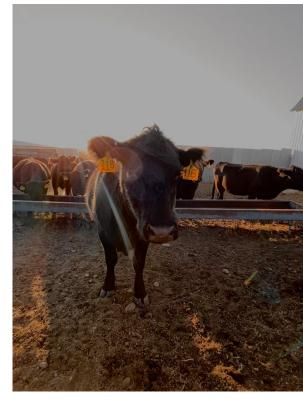
makes it impossible to set the target population aside from the five more-developed Montana counties.

Limitations in Survey, Focus Group, and 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 focus groups and 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 focus group and 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, these 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 focus groups and key informant interviews for LHS to ensure impartiality. However, given the small size of the community, focus group and key informant interview participants may still be hesitant to express their opinions freely. Personal identifiers are not included in the transcripts.



Survey Implementation

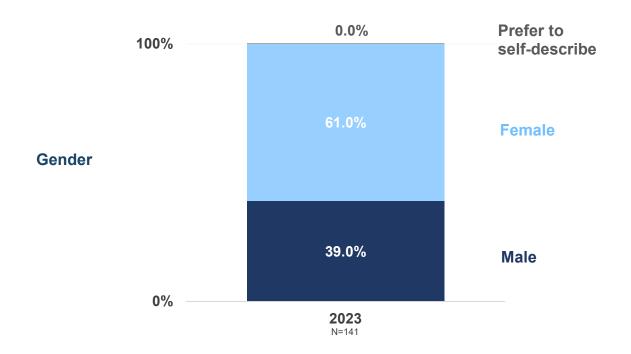
In January 2023, a survey, cover letter on Logan Health Shelby's letterhead with the President's signature, and a postage paid envelope were mailed to 800 randomly selected residents in the hospital's service area. A news release was sent to the local newspaper as well as social media postings prior to the survey distribution announcing that Logan Health Shelby would be conducting a community health services survey throughout Toole County in cooperation with the Montana Office of Rural Health.

One hundred forty-three surveys were returned out of 800. Of those 800 surveys, 57 surveys were returned undeliverable for a 19.3% response rate. From this point on, the total number of surveys will be out of 743. 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 8.1%.

Survey Respondent Demographics

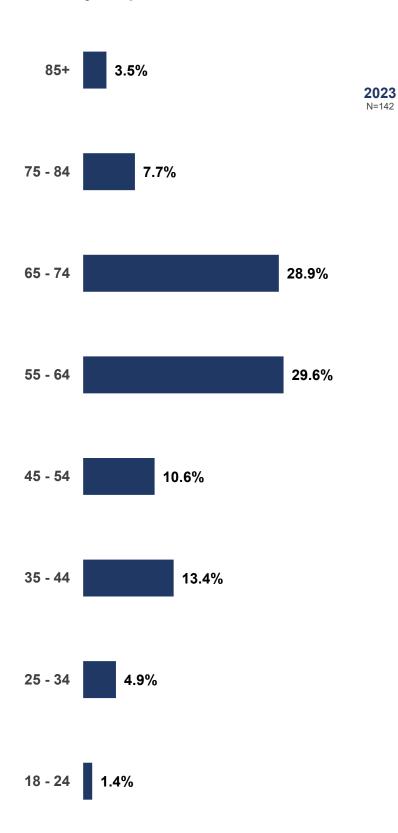
A total of 743 surveys were distributed amongst Logan Health Shelby's service area. One hundred forty-three were completed for a 19.3% response rate. The following tables and visualizations indicate the demographic characteristics of the survey respondents. Information on location, gender, age, and employment 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.

	2023
Place of Residence	% (n)
Number of respondents	142
59474 Shelby	66.2% (94)
59482 Sunburst	17.6% (25)
59444 Galata	7.7% (11)
59435 Ethridge	2.8% (4)
59454 Kevin	2.1% (3)
59466 Oilmont	2.1% (3)
59484 Sweet Grass	1.4% (2)
Other	0.0% (0)
TOTAL	100.0% (142)



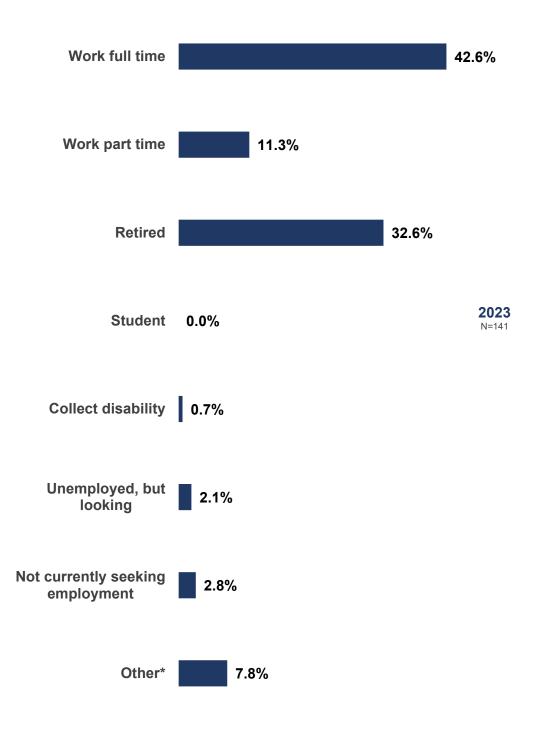
Women are frequently the healthcare decision makers for their families and more likely to respond to a health-related survey.

Age of survey respondents



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

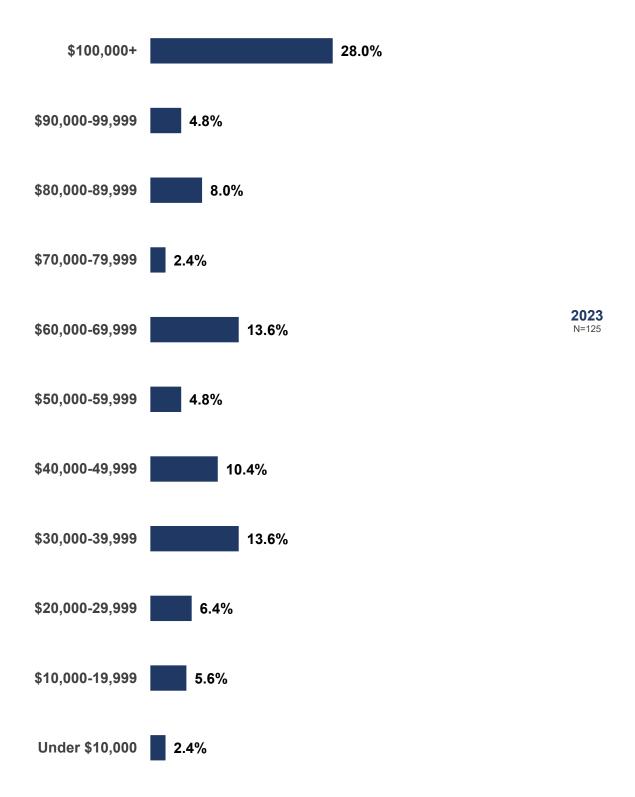
The majority of 2023 respondents are retired or work full time.



^{*}Respondents (N=8) who selected over the allotted amount were moved to "Other."

[&]quot;Other" comments included: Stay at home mom and Volunteer

Household income for respondents





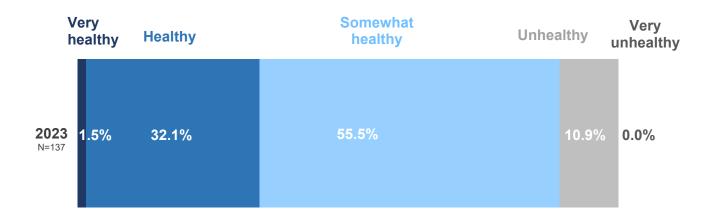
SURVEY RESULTS

Survey Results

Rating the Health of Toole County (Question 1)

Respondents were asked to indicate how they would rate the general health in Toole County. Fifty-five point five percent of respondents (n=76) rated their community as "Somewhat healthy," 32.1% of respondents (n=44) felt their community was "Healthy," and 10.9% (n=15) rated it "Unhealthy." One point five percent of respondents (n=2) rated their community "Very healthy."

The majority of 2023 respondents rate their community as somewhat healthy



Majority of survey respondents feel Toole County is somewhat healthy.

Health Concerns for Toole County (Question 2)

Respondents were asked what they felt the three most serious health concerns were in Toole County. The top identified health concern was "Alcohol/substance abuse" at 59.6% (n=81). "Overweight/ obesity" was also of concern at 30.1% (n=41), followed by "Cancer" and "Depression/anxiety" at 22.1% (n=30, each).

Health Conserve	2023
Health Concern	% (n)
Number of respondents	136
Alcohol/substance abuse	59.6% (81)
Overweight/obesity	30.1% (41)
Cancer	22.1% (30)
Depression/anxiety	22.1% (30)
Tobacco use (cigarettes/cigars, vaping, smokeless)	21.3% (29)
Heart disease	16.9% (23)
Mental health issues	16.9% (23)
Diabetes	14.0% (19)
Work/economic stress	12.5% (17)
Social isolation/loneliness	11.0% (15)
Lack of access to healthcare	10.3% (14)
Lack of exercise	8.8% (12)
Lack of dental care	6.6% (9)
Domestic violence	5.9% (8)
Respiratory issues/illness	4.4% (6)
Child abuse/neglect	3.7% (5)
Stroke	3.7% (5)
Alzheimer's/dementia	2.9% (4)
Suicide	2.9% (4)
Hunger	2.2% (3)
Recreation related accidents/injuries	1.5% (2)
Work related accidents/injuries	1.5% (2)
Motor vehicle accidents	0.7% (1)
Other	5.9% (8)

Respondents were asked to pick their top three serious health concerns, so percentages do not equal 100%.

[&]quot;Other" comments included: Need more paramedics (View all comments in Appendix G)

Components of a Healthy Community (Question 3)

Respondents were asked to identify the three most important things for a healthy community. Forty-five point five percent of respondents (n=65) indicated that "Access to healthcare services" is important for a healthy community, followed by "Good jobs and a healthy economy" at 42.7% (n=61), and "Affordable housing" at 30.8% (n=44).

Components of a Healthy Community	2023 % (n)
Number of respondents	143
Access to healthcare services	45.5% (65)
Good jobs and a healthy economy	42.7% (61)
Affordable housing	30.8% (44)
Strong family life	30.1% (43)
Healthy behaviors and lifestyles	25.2% (36)
Good schools	23.1% (33)
Low crime/safe neighborhoods	21.7% (31)
Religious or spiritual values	18.2% (26)
Access to childcare/after school programs	14.7% (21)
Access to healthy foods	14.7% (21)
Community involvement	9.1% (13)
Clean environment	4.2% (6)
Low level of domestic violence	3.5% (5)
Low death and disease rates	2.8% (4)
Parks and recreation	2.8% (4)
Tolerance for diversity	2.1% (3)
Transportation services	2.1% (3)
Arts and cultural events	0.0% (0)
Other*	2.1% (3)

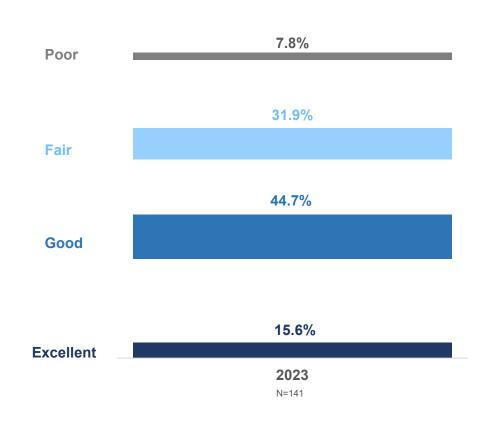
Respondents were asked to pick their top three components of a healthy community, so percentages do not equal 100%. *Respondents (N=1) who selected over the allotted amount were moved to "Other."

[&]quot;Other" comments included: Assisted living facilities and clean water delivery

Knowledge of Health Services (Question 4)

Respondents were asked to rate their knowledge of the health services available through Logan Health Shelby. Forty-four point seven percent (n=63) of respondents rated their knowledge of health services as "Good." "Fair" was selected by 31.9% (n=45), "Excellent" was chosen by 15.6% (n=22), and 7.8% of respondents (n=11) rated their knowledge of health services as "Poor."





How Respondents Learn of Health Services (Question 5)

When asked about modes for learning of health services available in Toole County, the most frequently indicated method was "Word of mouth/reputation" at 61.3% (n=87). "Friends/family" was also frequently used to learn about health services at 53.5% (n=76), followed by "Healthcare provider" at 43.7% (n=62).

How Design doubt Learn About Community Health Comings	2023
How Respondents Learn About Community Health Services	% (n)
Number of respondents	142
Word of mouth/reputation	61.3% (87)
Friends/family	53.5% (76)
Healthcare provider	43.7% (62)
Newspaper	35.9% (51)
Radio	31.0% (44)
Social media	21.8% (31)
Website/internet	19.0% (27)
Toole County Public Health	17.6% (25)
Mailings/newsletter	16.2% (23)
Billboards/posters	9.2% (13)
Presentations	0.0% (0)
Other	4.2% (6)

Respondents were asked to indicate all methods of receiving information, so percentages do not equal 100%.

View a cross tabulation of how respondents learn with how they rate their knowledge on p. 76

[&]quot;Other" comments included: VA community care and Personal experience

Utilized Community Health Resources (Question 6)

Respondents were asked which community health resources, other than Logan Health Shelby or Marias Healthcare, they had used in the last three years. "Pharmacies" was the most frequently utilized community health resource cited by respondents at 70.7% (n=99). "Dentistry" was utilized by 45.7% (n=64) of respondents, followed by "Optometry" at 45.0% (n=63).

Use of Community Health Possuress	2023
Use of Community Health Resources	% (n)
Number of respondents	140
Pharmacies	70.7% (99)
Dentistry	45.7% (64)
Optometry	45.0% (63)
Health Department	38.6% (54)
Family Medicine (private practice)	38.6% (54)
Civic Center	20.7% (29)
Food pantry	12.1% (17)
Ministry services	6.4% (9)
Audiology	5.7% (8)
Mental Health Services	5.7% (8)
Substance use treatment services	0.7% (1)
Other	8.6% (12)

Respondents were asked to select all other community health resources used, so percentages do not equal 100%.

"Other" comments included: Dr. Clary (3) and None (3)

Improve Toole County's Access to Healthcare (Question 7)

Respondents were asked to indicate what they felt would improve Toole County's access to healthcare. The majority of respondents (51.4%, n=71) reported that "Improved quality of care" would make the greatest improvement. Forty-eight point six percent of respondents (n=67) indicated "More primary care providers," followed closely by "More specialists" at 45.7% (n=63) would improve access to healthcare.

Improved quality of care would make the greatest improvement

What Would Improve Toole County's Access to Healthcare	2023 % (n)
Number of respondents	138
Improved quality of care	51.4% (71)
More primary care providers	48.6% (67)
More specialists	45.7% (63)
More information about available services	28.3% (39)
Payment assistance programs (healthcare expenses)	27.5% (38)
Outpatient services expanded hours	21.7% (30)
Telemedicine	16.7% (23)
Transportation assistance	16.7% (23)
Greater health education services	10.9% (15)
Cultural sensitivity	2.2% (3)
Interpreter services	0.7% (1)
Other	12.3% (17)

Respondents were asked to select any items that would improve community access to healthcare, so percentages do not equal 100%.

"Other" comments included: Pediatrician, Baby delivery OB/GYN delivery, and Affordable health care

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 37.4% (n=46). Interest in "Weight loss" followed with 35.8% (n=44), while 33.3% of respondents (n=41) were interested in "Fitness."

Interest in Classes or Broadens	2023
Interest in Classes or Programs	% (n)
Number of respondents	123
Health and wellness	37.4% (46)
Weight loss	35.8% (44)
Fitness	33.3% (41)
Women's health	31.7% (39)
Nutrition	27.6% (34)
Living will	26.8% (33)
First aid/CPR	26.0% (32)
Men's health	23.6% (29)
Alzheimer's	13.0% (16)
Diabetes	13.0% (16)
Mental health	12.2% (15)
Grief counseling	10.6% (13)
Cancer	8.9% (11)
Heart disease	8.9% (11)
Support groups	7.3% (9)
Smoking/tobacco cessation	6.5% (8)
Parenting	5.7% (7)
Prenatal	4.9% (6)
Alcohol/substance abuse	2.4% (3)
Lactation/breastfeeding support	0.8% (1)
Other	2.4% (3)

Respondents were asked to pick all classes or programs that are of interest, so percentages do not equal 100%.

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 "Home health" at 38.7% (n=41). Twenty-four point five percent (n=26) of respondents were interested in "OB/GYN," while 21.7% (n=23) desire "Durable Medical Equipment (DME) – medical devices/equipment" locally.

Interest in Local Services	2023
	% (n)
Number of respondents	106
Home Health	38.7% (41)
OB/GYN	24.5% (26)
Durable Medical Equipment (DME) – medical devices/equipment	21.7% (23)
Health insurance enrollment and navigation	19.8% (21)
Hospice	19.8% (21)
Pediatric Specialists	16.0% (17)
Memory Care	15.1% (16)
VA outreach clinic	15.1% (16)
Remote patient monitoring	13.2% (14)
Other	7.5% (8)

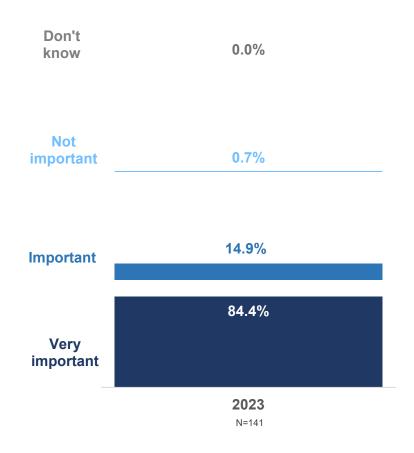
Respondents were asked to pick all desired local healthcare services that are of interest, so percentages do not equal 100%.

[&]quot;Other" comments included: Nutrition counseling, Telemedicine, and Urgent Care

Economic Importance of Healthcare (Question 10)

The majority of respondents (84.4%, n=119) indicated that local healthcare providers and services (i.e., hospitals, clinics, nursing homes, assisted living, etc.) are "Very important" to the economic well-being of the area. Fourteen point nine percent of respondents (n=21) indicated they are "Important," and 0.7% (n=1) respondents felt they are "Not important."

Nearly all 2023 respondents indicated that local healthcare providers and services are very important or important to the economic well-being of the area.



Utilization of Preventive Services (Question 11)

Respondents were asked if they had utilized any of the preventive services listed in the past year. "Dental check" was selected by 66.4% of respondents (n=93), followed by "Blood pressure check" at 62.9% (n=88). Survey respondents could select all services that applied.

Has of Duscontine Comices	2023
Use of Preventive Services	% (n)
Number of respondents	140
Dental check	66.4% (93)
Blood pressure check	62.9% (88)
Flu shot/immunizations	59.3% (83)
Health checkup	59.3% (83)
Vision check	56.4% (79)
Cholesterol check	49.3% (69)
Mammography	33.6% (47)
Prostate (PSA)	18.6% (26)
Pap test	16.4% (23)
Children's checkup/Well baby	15.0% (21)
Colonoscopy	15.0% (21)
Health fair	12.9% (18)
Hearing check	10.7% (15)
None	3.6% (5)
Other	5.7% (8)

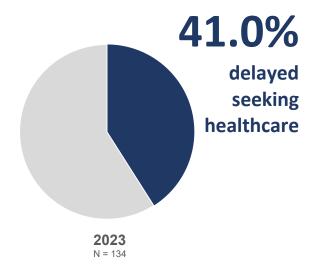
Respondents could select any of the preventive services listed, so percentages do not equal 100%.

View a cross tabulation of household income and 'utilization of preventive services' on p. 77

[&]quot;Other" comments included: Dermatology checkup (2), Birthday blood check, and Radiology

Delay of Services (Question 12)

Forty-one percent of respondents (n=55) 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. Fifty-nine percent of respondents (n=79) felt they were able to get the healthcare services they needed without delay.



View a cross tabulation of where respondents live and 'delay of healthcare services' on p. 78

Reason for Not Receiving/Delaying Needed Services (Question 13)

For those who indicated they were unable to receive or had to delay services (n=55), the reason most cited was "Qualified provider not available" (33.3%, n=18). "Don't like doctors" followed with 29.6% (n=16). Two respondents were moved to "Other" for selecting more than three reasons for not receiving or delaying healthcare services. One person chose not to provide a response.

Reasons for Delay in Receiving Needed Healthcare	2023
Reasons for Delay III Receiving Needed Healthcare	% (n)
Number of respondents	54
Qualified provider not available	33.3% (18)
Don't like doctors	29.6% (16)
It cost too much	25.9% (14)
Could not get an appointment	22.2% (12)
My insurance didn't cover it	18.5% (10)
Office wasn't open when I could go	18.5% (10)
Not treated with respect	13.0% (7)
No insurance	9.3% (5)
Too long to wait for an appointment	9.3% (5)
Too nervous or afraid	9.3% (5)
Didn't know where to go	7.4% (4)
Could not get off work	5.6% (3)
It was too far to go	5.6% (3)
Transportation problems	3.7% (2)
Unsure if services were available	3.7% (2)
Don't understand healthcare system	0.0% (0)
Had no childcare	0.0% (0)
Language barrier	0.0% (0)
Other*	16.7% (9)

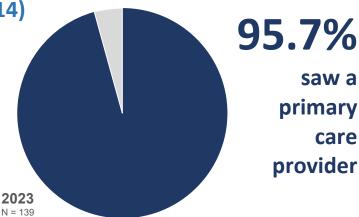
Respondents were asked to indicate the top three reasons for a delay in seeking healthcare, so percentages do not equal 100%. *Respondents (N=2) who selected over the allotted amount were moved to "Other."

View a cross tabulation of household income and 'reason for delaying care' on p. 79

[&]quot;Other" comments included: COVID-19 restrictions and Provider not available

Primary Care Services (Question 14)

Ninety-five point seven percent of respondents (n=133) 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 three percent of respondents (n=6) indicated they had not received primary care.



Location of Primary Care Services (Question 15)

Of the 133 respondents who indicated receiving primary care services in the previous three years, 130 respondents shared the location of their primary care provider. The majority (58.5%, n=76) reported receiving care in Shelby. Seventeen respondents were moved to "Other" due to selecting more than one primary care provider location.

Location of Primary Care Provider	2023
	% (n)
Number of respondents	130
Shelby	58.5% (76)
Great Falls	11.5% (15)
Conrad	5.4% (7)
Sunburst	3.8% (5)
Kalispell	3.1% (4)
Cut Bank	2.3% (3)
Valier	0.0% (0)
Other*	15.4% (20)
TOTAL	100.0% (130)

^{*}Respondents (N=17) who selected over the allotted amount were moved to "Other."

View a cross tabulation of where respondents live with where they utilize primary care services on p. 80

[&]quot;Other" comments included: Tele/video, Helena, and Fairfield

Reasons for Primary Care Provider Selection (Question 16)

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. "Clinic/provider's reputation for quality" was the most frequently selected reason at 43.8% (n=57), followed by "Closest to home" at 35.4% (n=46), and "Prior experience with clinic" at 33.1% (n=43).

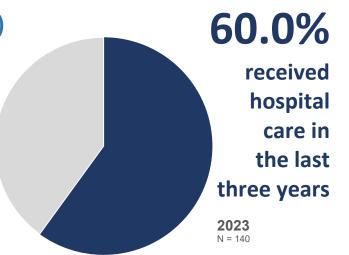
Reasons for Selecting Primary Care Provider	2023
	% (n)
Number of respondents	130
Clinic/provider's reputation for quality	43.8% (57)
Closest to home	35.4% (46)
Prior experience with clinic	33.1% (43)
Appointment availability	32.3% (42)
Recommended by family or friends	23.8% (31)
Privacy/confidentiality	15.4% (20)
Length of waiting room time	9.2% (12)
Referred by physician or other provider	8.5% (11)
Closest to work	7.7% (10)
Cost of care	5.4% (7)
VA/Military requirement	3.1% (4)
Required by insurance plan	2.3% (3)
Indian Health Services	0.8% (1)
Other	12.3% (16)

Respondents were asked to pick all reasons for selection of their primary care provider, so percentages do not equal 100%.

"Other" comments included: Trust in provider and facility, Listens to my needs, and Personal preference

View a cross tabulation of where respondents utilize primary care services with their reasons for selecting their provider on p. 81 **Hospital Care Services (Question 17)**

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 percent of respondents (n=84) reported that they or a member of their family had received hospital care during the previous three years, and 40.0% (n=56) had not received hospital services.



Location of Hospital Services (Question 18)

Among respondents who indicated receiving hospital care in the last three years (n=84), they were then asked to share the location of the hospital that their household used most often. The majority (32.1%, n=27) of respondents reported receiving care at "Logan Health – Shelby." Twenty-six point two percent of respondents (n=22) received services at "Benefis." Eight respondents were moved to "Other" for selecting more than one location.

Hospital Used Most Often	2023
	% (n)
Number of respondents	84
Logan Health - Shelby	32.1% (27)
Benefis	26.2% (22)
Great Falls Clinic Hospital	11.9% (10)
Logan Health – Kalispell	8.3% (7)
Logan Health – Cut Bank	2.4% (2)
Logan Health – Conrad	1.2% (1)
Other*	17.9% (15)
TOTAL	100.0% (84)

^{*}Respondents (N=8) who selected over the allotted amount were moved to "Other."

View a cross tabulation of where respondents live with where they utilize hospital services on p. 82

[&]quot;Other" comments included: VA (2), Yuma, Arizona, and St Patrick's in Missoula

Reasons for Hospital Selection (Question 19)

Among respondents who indicated receiving hospital care in the last three years (n=84), the primary reason given for selecting the hospital used most often was "Closest to home" at 42.9% (n=36). "Referred by physician or other provider" was selected by 40.5% of the respondents (n=34), and 36.9% (n=31) indicated "Prior experience with hospital" was a top reason for their hospital selection.

Reasons for Selecting Hospital	2023 % (n)
Closest to home	42.9% (36)
Referred by physician or other provider	40.5% (34)
Prior experience with hospital	36.9% (31)
Hospital's reputation for quality	28.6% (24)
Emergency, no choice	26.2% (22)
Privacy/confidentiality	6.0% (5)
Recommended by family or friends	4.8% (4)
Closest to work	3.6% (3)
Required by insurance plan	3.6% (3)
VA/Military requirement	3.6% (3)
Cost of care	1.2% (1)
Financial assistance programs	1.2% (1)
Other*	11.9% (10)

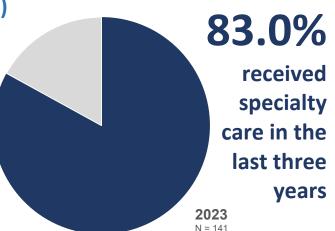
Respondents were asked to pick their top three reasons for selecting a hospital, so percentages do not equal 100%. *Respondents (N=1) who selected over the allotted amount were moved to "Other."

View a cross tabulation of where respondents utilize hospital services with their reasons for selecting that facility p. 83

[&]quot;Other" comments included: Services not offered in Shelby, Specialists not available in Shelby, Had health issues in Arizona, and OB/GYN

Specialty Care Services (Question 20)

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-three percent of the respondents (n=117) indicated they or a household member had seen a healthcare specialist during the past three years, while 17.0% (n=24) indicated they had not.



Location of Healthcare Specialist(s) (Question 21)

Of the respondents who indicated they saw a healthcare specialist in the past three years (n=117), the majority of respondents (75.2%, n=88) sought care in Great Falls. Twenty-seven point four percent of respondents (n=32) utilized specialty services in Kalispell, while 20.5% of respondents (n=24) received specialty care in Shelby. Respondents could select more than one location, so percentages do not equal 100%.

Location of Specialist	2023
	% (n)
Number of respondents	117
Great Falls	75.2% (88)
Kalispell	27.4% (32)
Shelby	20.5% (24)
Telehealth (from home)	6.0% (7)
Other	15.4% (18)

Respondents were asked to indicate the location of any specialist seen in the past three years, so percentages do not equal 100%.

[&]quot;Other" comments included: Missoula (5), Cut Bank (3), Denver, and Billings

Type of Healthcare Specialist Seen (Question 22)

Among the respondents who saw a healthcare specialist in the last three years (n=117), the most frequently utilized specialist was the "Dentist" at 33.3% (n=39), followed by "Optometrist" at 25.6% (n=30). Respondents were asked to choose all that apply, so percentages do not equal 100%.

Type of Specialists Seen	2023
	% (n)
Number of respondents	117
Dentist	33.3% (39)
Optometrist	25.6% (30)
Orthopedic surgeon	23.9% (28)
Dermatologist	21.4% (25)
OB/GYN	17.9% (21)
Urologist	17.9% (21)
Cardiologist	17.1% (20)
Chiropractor	12.8% (15)
ENT (ear/nose/throat)	12.8% (15)
Neurologist	12.8% (15)
Gastroenterologist	11.1% (13)
Ophthalmologist	11.1% (13)
Radiologist	11.1% (13)
Oncologist	8.5% (10)
Physical therapist	8.5% (10)
Pulmonologist	8.5% (10)
Allergist	7.7% (9)
General surgeon	6.8% (8)
Audiologist	6.0% (7)
Dietician	6.0% (7)
Mental health counselor	5.1% (6)
Pediatrician	5.1% (6)

Table continued on the next page.

Podiatrist	5.1% (6)
Rheumatologist	5.1% (6)
Neurosurgeon	4.3% (5)
Occupational therapist	4.3% (5)
Endocrinologist (hormones)	3.4% (4)
Speech therapist	2.6% (3)
Psychiatrist (M.D.)	0.9% (1)
Social worker	0.9% (1)
Geriatrician	0.0% (0)
Licensed addiction counselor	0.0% (0)
Psychologist	0.0% (0)
Other	8.5% (10)

Respondents were asked to indicate each type of specialist seen, so percentages do not equal 100%.

"Other" comments included:

- Hematologist (2)
- Sports injury care
- Geneticist
- Cardiac Surgeon
- Breast center
- Plastic surgeon
- Orthodontist
- Pain management

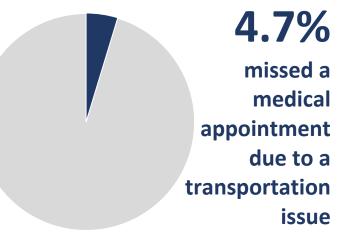
Overall Quality of Care through Logan Health Shelby (Question 23)

Respondents were asked to rate various services available through Logan Health Shelby using the scale of 4= Excellent, 3= Good, 2= Fair, 1=Poor, and Haven't Used. The service that received the highest score was "Physical therapy" with a rating of 3.5 (n=65) out of 4.0. Overall, the average rating on quality and availability of the health services listed was 3.1 out of 4.0.

Quality of Care Deting at Larger Health Challes	2023	
Quality of Care Rating at Logan Health - Shelby	Average (n)	
Total number of respondents	124	
Physical therapy	3.5 (65)	
Radiology services (x-ray, ultrasound, CT scan, MRI, mammography)	3.3 (92)	
Ambulance services (county owned)	3.3 (57)	
Laboratory	3.2 (96)	
Cardiac rehabilitation	2.8 (25)	
Emergency room	2.6 (81)	
Specialty outreach clinics (i.e., sleep labs, gynecology, cardiology, pulmonology, etc.)	2.6 (21)	
Hospital stay (including swing bed, rehabilitation)	2.5 (30)	
Surgical services	2.5 (22)	
Aging Services (nursing home, assisted living)	2.4 (39)	
Telehealth	2.2 (10)	
Overall average	3.1 (124)	

Missed Appointment due to Transportation Issue (Question 24)

Respondents were asked if they have ever missed a medical appointment due to a transportation issue. Four point seven percent of respondents (n=6) indicated they had missed a medical appointment due to a transportation issue, while 95.3% (n=123) said transportation had not caused them to miss a medical appointment.



Reasons for Missing Medical Care Due to Transportation Issue (Question 25)

Of the respondents (n=6) who indicated they have missed a medical appointment due to a transportation issue, the top reason cited was "Unsafe roads/sidewalks for walking or biking" (83.3%, n=5). Sixty-six point seven percent of respondents (n=4) indicated "Weather conditions" caused them to be late or miss a medical appointment, while 16.7% of respondents (n=1) stated a "Too far to travel" made them late or miss a medical appointment.

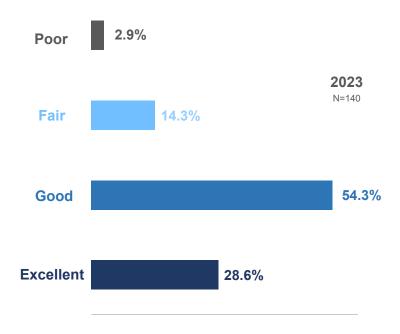
Transportation issues	2023
	% (n)
Number of respondents	6
Unsafe roads/sidewalks for walking or biking	83.3% (5)
Weather conditions	66.7% (4)
Too far to travel	16.7% (1)
Lack of transportation (no car, broke down)	0.0% (0)
Unreliable/No transit service	0.0% (0)
Time of appointment	0.0% (0)
Other	16.7% (1)

Respondents were asked to indicate all transportation issues encountered, so percentages do not equal 100%.

[&]quot;Other" comments included: Couldn't drive for 18 months and Physically unable to go

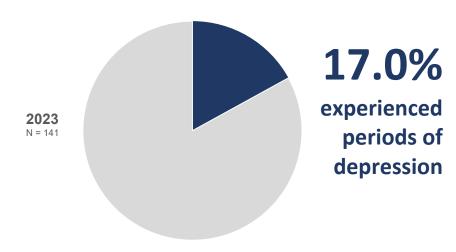
Rating of Mental Health (Question 26)

Respondents were asked to indicate how they would describe their mental health in general when considering stress, anxiety, depression, and emotional problems. Fifty-four point three percent of respondents (n=76) felt their mental health was "Good," 28.6% (n=40) rated their mental health as "Excellent," 14.3% of respondents (n=20) felt their mental health was "Fair," and 2.9% of respondents (n=4) rated their mental health as "Poor."



Prevalence of Depression (Question 27)

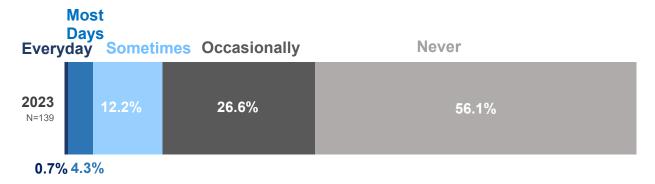
Respondents were asked to indicate if there were periods of at least three consecutive months in the past three years where they felt depressed on most days. Seventeen percent of respondents (n=24) indicated they had experienced periods of depression, and 83.0% of respondents (n=117) indicated they had not.



Social Isolation (Question 28)

Respondents were asked to indicate how often they felt lonely or isolated in the past year. Fifty-six point one percent of respondents (n=78) indicated they never felt lonely or isolated, and 26.6% of respondents (n=37) indicated they "Occasionally (1-2 days per month)" felt lonely or isolated. Twelve point two percent (n=17) reported they felt lonely or isolated "Sometimes (3-5 days per month)," 4.3% (n=6) indicated they felt lonely or isolated on "Most days (3-5 days per week)," and 0.7% (n=1) reported they felt lonely or isolated "Everyday."

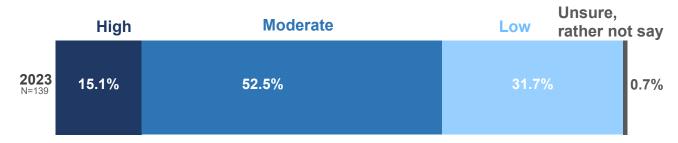
Over a quarter of respondents occasionally felt lonely (1-2 days per month) in the past year.



Perception of Stress (Question 29)

Respondents were asked to indicate how they would describe their stress level over the past year. Fifty-two point five percent of respondents (n=73) indicated they experienced a "moderate" level of stress, 31.7% (n=44) had a "low" level of stress, 15.1% of respondents (n=21) indicated they had experienced a "high" level of stress. Point seven percent of respondents (n=1) indicated they were "Unsure/rather not say."

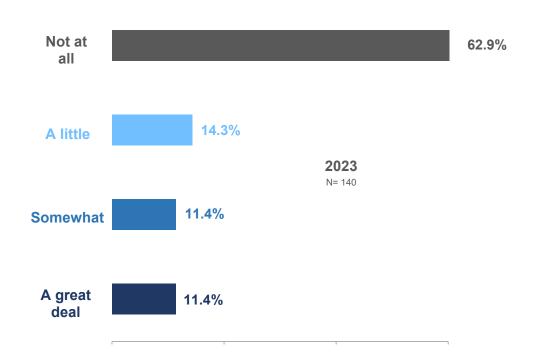
Over half of respondents describe their stress level in the past year as moderate.



Impact of Substance Abuse (Question 30)

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. Sixty-two point nine percent of respondents (n=88) indicated their life was "Not at all" affected.

Fourteen point three percent (n=20) were "A little" affected, 11.4% (n=16, each) were either "Somewhat" affected or "A great deal" negatively affected.



Physical Activity (Question 31)

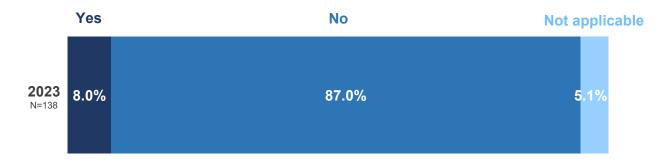
Respondents were asked to indicate how frequently they had physical activity for a continuous twenty minutes over the past month. Twenty-nine point nine percent of respondents (n=41) indicated they had physical activity of at least twenty minutes "2-4 times per week," 25.5% (n=35) indicated they had physical activity "Daily," 19.7% (n=27) said they had physical activity "3-5 times per month," and 16.1% (n=22) shared that they had physical activity "1-2 times per month." Eight point eight percent of respondents (n=12) indicated they had physical "No physical activity."





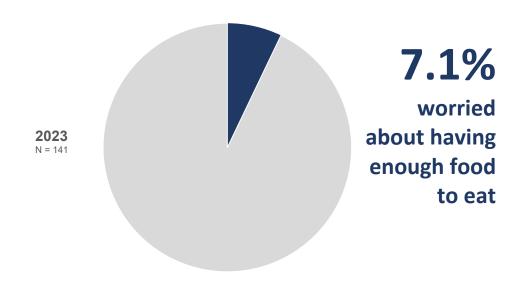
Difficulty Getting Prescriptions (Question 32)

Respondents were asked to indicate if, during the last year, costs had prohibited them from getting a prescription or taking their medication regularly. Eight percent of respondents (n=11) indicated that they had difficulty getting a prescription or taking their medication regularly in the last year. Eighty-seven percent of respondents (n=120) indicated that they did not have trouble getting or taking prescriptions, while 5.1% of respondents (n=7) stated it was not a pertinent question for them.



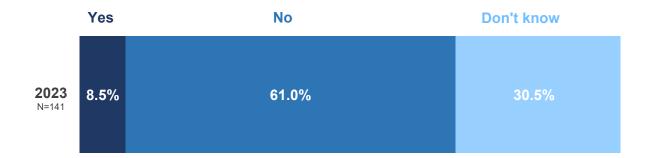
Food Insecurity (Question 33)

Respondents were asked to indicate if, during the last year, they had worried that they would not have enough food to eat. The majority, 92.9% (n=131), were not worried, but 7.1% (n=10) were concerned about not having enough to eat.



Housing (Question 34)

Respondents were asked to indicate if they felt the community has adequate and affordable housing options available. Sixty-one percent of respondents (n=86) indicated that they feel there are not adequate and affordable housing options available in the community, 8.5% (n=12) felt there are adequate and affordable options available, and 30.5% (n=43) didn't know.



Health Insurance Type (Question 35)

Respondents were asked to indicate what type of health insurance covers the majority of their medical expenses. Thirty-five point seven percent (n=50) indicated they have "Employer sponsored" coverage, followed by "Medicare" coverage at 24.3% (n=34). Thirteen respondents were moved to "Other" for selecting more than one health insurance type.

Time of Health Incomes	2023		
Type of Health Insurance	% (n)		
Number of respondents	140		
Employer sponsored	35.7% (50)		
Medicare	24.3% (34)		
Private insurance/private plan	8.6% (12)		
Medicaid	5.7% (8)		
Health Insurance Marketplace	5.0% (7)		
VA/Military	3.6% (5)		
Health Savings Account	2.9% (4)		
None/pay out of pocket	2.1% (3)		
Healthy MT Kids	1.4% (2)		
Indian Health	0.0% (0)		
Other*	10.7% (15)		
TOTAL	100.0% (140)		

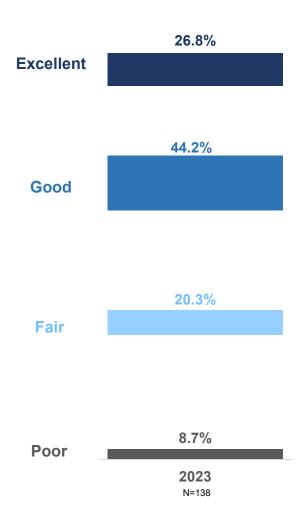
^{*}Respondents (N=13) who selected over the allotted amount were moved to "Other."

"Other" comments included: Supplement (2), Retired federal employee plan, and Christian Healthcare Missionaries

Insurance and Healthcare Costs (Question 36)

Respondents were asked to indicate how well they felt their health insurance covers their healthcare costs. Forty-four point two percent of respondents (n=61) indicated they felt their insurance covers a "Good" amount of their healthcare costs. Twenty-six point eight percent of respondents (n=37) indicated they felt their insurance covered an "Excellent" amount, 20.3% of respondents (n=28) indicated they felt their insurance covered a "Fair" amount, and 8.7% (n=12) thought their insurance covered a "Poor" amount of their health costs.

71.0% of respondents 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=3), two shared their top barriers to having health insurance. The top reasons selected for not having insurance were "Can't afford to pay for health insurance," "Choose not to have health insurance," and "Too confusing/don't know how to apply." Respondents could select all that apply.

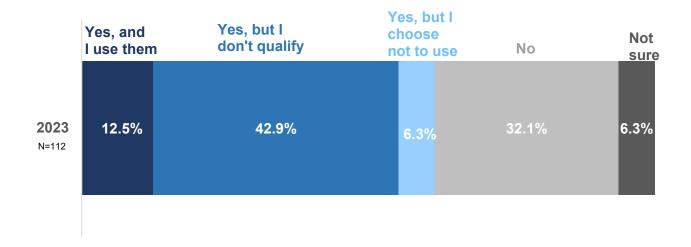
Reasons for No Health Insurance	2023 % (n)
Number of respondents	2
Can't afford to pay for health insurance	50.0% (1)
Choose not to have health insurance	50.0% (1)
Too confusing/don't know how to apply	50.0% (1)
Employer does not offer insurance	0.0% (0)
Other	50.0% (1)

Respondents were asked to indicate all barriers to having health insurance, so percentages do not equal 100%.

[&]quot;Other" comments included: No affordable health insurance

Awareness of Health Cost Assistance Programs (Question 38)

Respondents were asked to indicate their awareness of programs that help people pay for healthcare bills. Forty-two point nine percent of respondents (n=48) indicated they were aware of these programs but did not qualify to utilize them, 32.1% (n=36) indicated that they were not aware of these programs, 12.5% (n=14) stated they were aware of the programs, and use them, 6.3% (n=7, each) were not sure if they are aware of the programs or shared that they were aware of these health cost assistance programs, but choose not to use them.





FOCUS GROUP & KEY INFORMANT RESULTS

Focus Group and Key Informant Interview Methodology

Two focus groups and two key informant interviews were conducted between January-February 2023. Participants were identified as people living in Logan Health Shelby (LHS) service area.

In total, 21 people participated in the focus groups and key informant interviews. Each of the focus groups lasted 60 minutes in length. The two key informant interviews were conducted over the telephone and lasted up to 15 minutes in length. The focus groups and key informant interviews followed the same line of questioning and were facilitated by Montana Office of Rural Health staff. Focus group and key informant interview transcripts can be found in Appendix I.



Focus Group and 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.



AWARENESS OF SERVICES & RESOURCES

The most common thread of interviews was a desire for more outreach and awareness of available services and resources. Specifically, there was a yearning for more education and information to support living a healthy life and resources available for Veterans.

While community members were generally pleased with the local health organizations, several shared an interest in health education opportunities be it on a particular topic, such as diabetes prevention or accessing/navigating support programs. For those residing in outlying areas, like Sunburst and Sweet Grass, there was a desire to have occasional local opportunities.

As for resources available to support local Veterans, a community member shared that "[m]any Veterans don't know about the services available to them and they receive less than adequate assistance as a result." They offered that, "[e]ven just letting them know to contact their VA office representative to see what help is available."



AGING IN PLACE

Another frequent theme of the focus groups and key informant interviews was a concern for the area's aging population. In particular, community members expressed value in supporting elders to age in place locally through home health, a senior companion program, and senior housing solutions for outlying areas.

There was a general appreciation for the local nursing home and assisted living facilities. Yet, there was a strong desire to keep community members of advanced age in a familiar place rather than having to be faced with a potential move to a congregate living facility either in Shelby or out of the area. To keep community members in their homes longer, community members felt like local home health services would be immensely beneficial. If home health services are needed currently, the individual and/or family members have to coordinate with an organization based in Great Falls which is 85 miles away from Shelby – that distance is inherently further if the individual lives in Sunburst or Sweet Grass.

In addition to home health services, a senior companion program was thought to be equally beneficial in reducing social isolation. It was brainstormed that pairing people with someone to go with them to the grocery store and simply even sitting and visiting would go a long way for their elderly community members.

During the Sunburst focus group, it was discussed that it would be helpful to have senior housing solutions in areas such as theirs. If seniors outside of Shelby cannot stay in their home, there often aren't places where they can turn unless they move to Shelby or a larger municipality.



TRANSPORTATION

Transportation was a common theme identified among community members in the focus groups and key informant interviews. Community members expressed appreciation for the Toole County Transit system, but discussed opportunities for enhancements. In particular, community members thought it would be helpful to have a shuttle service that ran more frequently and helped people get around to medical appointments and even the grocery store. Inherently, this need is compounded if individuals live in one of the outlying areas.



SERVICES NEEDED IN THE COMMUNITY

- Primary care providers
- EMS workforce and funding
- Home health
- More local paramedics
- Senior companions (i.e., support visiting the grocery store, someone to visit with, etc.)
- Expanded transportation services
- Enhanced Veteran's services
- Senior housing solutions for outlying communities (outside of Shelby)
- Delivery service for prescriptions to homes (especially out of town)
- More traveling specialists (cardiology, foot doctor, knees & hips, podiatry, etc.)
- Healthcare workforce recruitment and retention
- Drug rehabilitation services
- Grief counseling
- More awareness and navigation support for accessing programs like Medicaid and Supplemental Nutrition Assistance Program (SNAP) benefits
- More outreach and awareness of local services to support healthy lifestyles, such as diabetes prevention, etc. (including outreach to outlying communities)
- Mental and behavioral health services and resources (including suicide awareness/prevention, alcohol and substance abuse prevention/resources, etc.)
- Safe space to exercise indoors in the winter months



EXECUTIVE SUMMARY

Executive Summary

The table below shows a summary of results from the Logan Health Shelby'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 partners through focus group and key informant interviews; and the potential impact of a given issue.

Areas of Opportunity	Secondary Data	Survey	Focus Groups & Interviews
Access to Healthcare Services			
Consistent primary care providers	\otimes	\checkmark	\checkmark
Specialty services (i.e., mental health, pediatrics, OB/GYN)		✓	$\overline{\checkmark}$
Expanded Veteran's services and resources		\checkmark	\checkmark
Transportation to medical appointments		\checkmark	\checkmark
Enhanced aging in place services (i.e., affordable/accessible housing, more workforce, additional services, etc.)		✓	\checkmark
Awareness of available healthcare services/resources		\checkmark	\checkmark
Chronic Disease Prevention			
Cancer	\otimes	\checkmark	\checkmark
Diabetes		\checkmark	\checkmark
Healthy behaviors and lifestyles- weight loss, fitness, health & wellness, nutrition		✓	$\overline{\checkmark}$
Mental and Behavioral Health			
More mental health services/resources	\otimes	✓	\checkmark
Alcohol/substance abuse	\otimes	\checkmark	\checkmark
Socioeconomic and Health Measures			
Housing accessibility and affordability		\checkmark	$\overline{\checkmark}$
Space to exercise/move year-round			$\overline{\checkmark}$



NEXT STEPS & RESOURCES

Prioritization of Health Needs

The community steering committee, comprised of staff leaders from Logan Health Shelby (LHS) and community members from Toole 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:

- Health and wellness
- Mental health

Logan Health Shelby will determine which needs or opportunities could be addressed considering LHS'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.

- Logan Health Shelby
- Logan Health Assisted Living Facility Shelby
- Logan Health Long Term Care Shelby
- Toole County Public Health Department
- Toole County Sheriff's Office
- Marias Healthcare Service Inc.
- Shelby School District
- City of Shelby
- MSU Extension Office
- Youth Dynamics
- Shelby Ministerial Association
- First Baptist Church
- Opportunities Inc.
- Senior Centers Shelby, Sunburst, Kevin
- Toole County Disaster and Emergency Services
- Sunburst Public Schools
- Toole County Mental Health Advisory Board
- Shelby Area Chamber of Commerce
- RECCS
- Kiwanis
- Hi-Line Help for Abused Spouses
- Sagebrush Food Pantry
- Sunburst Food Pantry
- Gateway Prevention
- Montana Hospital Association
- Montana Office of Rural Health and Area Health Education Center

Evaluation of Previous CHNA & Implementation Plan

Logan Health Shelby (LHS) provided the Montana Office of Rural Health with an update on their Implementation Plan activities from their previous CHNA process. The LHS Board of Directors approved its previous implementation plan in 2017. The plan prioritized the following health issues:

- Mental health
- Youth risk behavior
- Obesity prevention

The following tables include completed activities, accomplishments and impacts/outcomes within the facility's proposed goals. To view LHS's full Implementation Plan visit: logan.org/health/about/community-health-needs-assessment

Mental Health

Logan Health Shelby supports the Annual Community Suicide Prevention Memorial Walk in partnership with the local Mental Health Advisory Board. The annual walk is an event intended to remember, encourage, support and share information about available suicide prevention resources and programs.

In addition to the annual walk, Logan Health Shelby has mental health providers in clinic available to patients in acute need - both ER and inpatient settings.

Youth Risk Behavior

There was a speaker about kids and social media that spoke at the local school in 2020.

Obesity Prevention

Logan Health Shelby champions an array of wellness activities locally, including physical activity challenges, etc.

- improvements at civic center to increase access to physical activity
- improvements to walking trail to increase access to physical activity
- new bike trail at Shel-oole to increase access to physical activity
- skate park and new park by old middle school to increase access to physical activity for kids



APPENDICES

Appendix A- Steering Committee

Steering Committee Member	Organization Affiliation
Vicki Newmiller	President – Logan Health Shelby (LHS)
Josh Simonds	Executive Director of Facilities and Support Services – LHS
Blair Tomsheck	Toole County Public Health Department
Bob Winney	Toole County EMS
Jessi La Tray	Shelby Civic Center
Loretta Carter	City of Shelby
Billiette Coolidge	Community Member
Bonnie Wiegand	Community Member
Jamie Brownell	Marias Healthcare
Mary Ann Harwood	Commissioner – Toole County
Chad Scarborough	Pastor – First Baptist Shelby











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

Vicki Newmiller, President – Logan Health Shelby (LHS)
Josh Simonds, Executive Director of Facilities and Support Services – LHS
Blair Tomsheck – Toole County Public Health Department
Bob Winney – Toole County EMS
Jessi La Tray – Shelby Civic Center
Lorette Carter, Community Development Director – City of Shelby
Chad Scarborough, Pastor – First Baptist Shelby
Mary Ann Harwood, Commissioner – Toole County
Jamie Brownell – Marias Healthcare
Billiette Coolidge – Community Member
Bonnie Wiegand – Community Member

Type of Consultation (Steering Committees, Focus Groups, Key Informant Interviews, etc.)

First Steering Committee Meeting December 1, 2022
Focus Groups January 25-26, 2023
Key Informant Interviews February 2023
Second Steering Committee Meeting March 16, 2023

Public and Community Health

- Gosh looking at our behavioral health data, we look like fat, lazy, drunks. So I suppose there's room for improvement!
- As a lay person, I would be curious how the hospital's data compares to secondary data.
- Unfortunately, most of these data are not collected by the hospital, but rather we also rely on data sources like these.
- The percentages feel high for mammography and cervical cancer screening rates, but they were pre-COVID. It would be interesting to see updated data for cancer screening and prevention for the last three years.
- In terms of a survey distribution, I think it would be more useful to survey those closer in proximity, say Toole County. Other nearby hospitals have recently

- conducted community health needs assessments of their service areas, so we could always review their findings for data relevant to Logan Health Shelby.
- To make sure we get a good response we should really promote this process across our local organizations as much as possible.
- Since a lot of completed surveys will likely trend towards older adults, we should also try and coordinate a focus group for younger community members by using social media.
- Logan Health Shelby has a powerful marketing and communications team so we could possibly utilize them to help with outreach to the younger adult participants.
- I do love that Logan Health Shelby is providing a survey incentive in the form of a raffle it makes it exciting! Hopefully that helps to motivate respondents. I sure hope I receive a survey so I can be entered to win!
- It'll be interesting how survey data comes back considering COVID-19. I know it's been hard for some community members to keep up on things like preventive and routine services.
- I think it would be good to modify the language from "abuse" to "use" when referring to things like substance use disorders (SUD).
- I'm probably opening a can of worms here, but since we've decided on sending this survey to residents in Toole County, what do we mean by "community" in this survey language. I think it might be less confusing if we standardize the language to be focused on Toole County in general.
- Especially that the hospital is now under the Logan Health umbrella, it would be interesting to gauge the community's knowledge of healthcare services. Perhaps it might provide some insights into more effective outreach and education!

Population: Youth

 On the survey question #2, I haven't heard the term "Childhood ACES" or adverse childhood experiences used much around here. I'd be concerned that the general population may not understand the term; If we are talking "trauma," it's perhaps encompassed in other variables so we could just remove it.

Population: Veterans

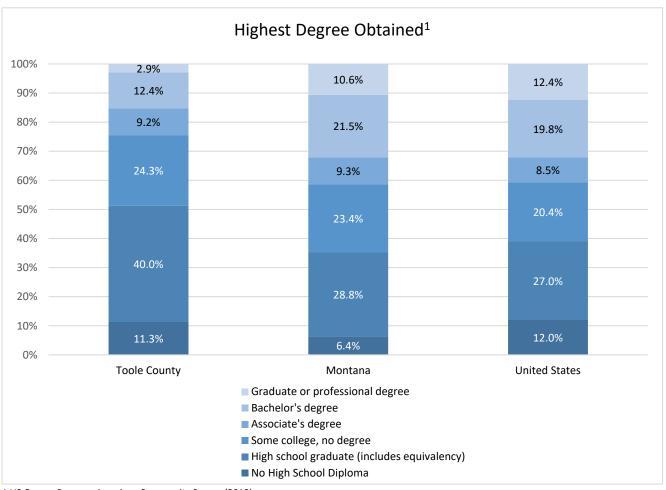
• Community members have to travel to Cut Bank to see providers at the VA Outreach Clinic. I know it can be challenging and a barrier for some, so it'll be interesting to see if the survey respondents are interested in having that service available locally.

Appendix C- Toole Co. Secondary Data

Demographi	c Measure (%)		Count	у	Montana		Nation			
Population ¹		4,892		1,050,649		324,697,795				
Population De	nsity ¹		2.5		7.1		85.5			
Veteran Status	,1		11.3%		10.4%		7.3%			
Disability Statu	ıs ¹	16.9%			13.6%			12.6%		
Ago ¹		<5	18-64	l 65+	<5	18-64	65+	<5	18-64	65+
Age ¹		5.3%	64.1%	6 16.9%	5.8%	60.1%	18.2%	6.1%	61.7%	15.6%
Gender ¹		Male		Female	Male	Fe	emale	Male	F	emale
Gender		55.6%	, 5	44.4%	50.3% 49.7%		49.2%	,	50.8%	
	White		90.9%		91.4%			75.3%		
Race/Ethnic Distribution ¹	American Indian or Alaska Native	8.5%		8.3%			1.7%			
	Other [†]		2.1%		3.7%		26.5%			

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

[†] Black, Asian/Pacific Islanders, Hispanic & Non-Hispanic Ancestry



1 US Census Bureau - American Community Survey (2019)

Socioeconomic Measures (%)	County	Montana	Nation
Median Income ¹	\$50,721	\$54,970	\$62,843
Unemployment Rate ¹	2.0%	4.0%	5.3%
Persons Below Poverty Level ¹	12.3%	13.1%	13.4%
Children in Poverty ¹	11.5%	15.8%	18.5%
Internet at Home ²	78.5%	81.5%	-
Households with Population Age 65+ Living Alone ²	214	52,166	-
Households Without a Vehicle ²	267	21,284	-
Households Receiving SNAP ²	174	56,724	-
Eligible Recipients of Free or Reduced Price Lunch ³ 2019/2020 school year	43.9%	42.9%	-
Enrolled in Medicaid ^{4, 1}	10.7%	9.7%	19.8%
Uninsured Adults^{5, 6} <i>Age <65</i>	13.0%	12.0%	12.1%
Uninsured Children ^{5, 6} Age <18	8.0%	6.0%	5.1%

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

Maternal Child Health	County	Montana	Nation
General Fertility Rate* ⁷ Per 1,000 Women 15-44 years of age (2017-2019)	95.7	59.3	-
Preterm Births ⁷ Born less than 37 weeks (2017-2019)	NA	9.4%	-
Adolescent Birth Rate ⁷ Per 1,000 years females 15-19 years of age (2017-2019)	NA	18.3	-
Smoking during pregnancy ^{3, 8}	16.3%	16.5%	7.2%
Kotelchuck Prenatal Care** ⁷ Adequate or Adequate-Plus (2017-2019)	52.9%	75.7%	-
Low and very low birth weight infants ⁷ <i>Less than 2500 grams (2017-2019)</i>	NA	7.6%	-
Childhood Immunization Up-To-Date (UTD)§9	72.7%	64.8%	-

7 IBIS Birth Data Query, MT-DPPHS (2020), 3 Kids Count Data Center, Annie E. Casey Foundation (2020), 8 National Center for Health Statistics (NCHS), CDC (2016), 9 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 ⁵	24.0%	19.0%	16.0%
Excessive Drinking ⁵	23.0%	22.0%	15.0%
Adult Obesity ⁵	30.0%	27.0%	26.0%
Poor Mental Health Days ⁵ (Past 30 days)	4.6	3.9	3.8
Physical Inactivity ⁵	27.0%	22.0%	19.0%
Do NOT wear seatbelts ¹⁰ State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	10.3%	6.3%
Drink and Drive ¹⁰ State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	3.7%	3.1%

⁵_County Health Ranking, Robert Wood Johnson Foundation (2020), 10 Behavioral Risk Factor Surveillance System, CDC (2019)

Cancer prevention & screening	County	Montana	Nation
Human Papillomavirus (HPV) vaccination UTD ++ 11, 12 Adolescents 13-17 years of age (2020)	25.0%	54.4%	58.6%
Cervical cancer screening in past 3 years ^{13, 10} Age adjusted (county/state) and crude (nation) prevalence among adult women aged 21–65 years (2018)	82.3%	76.8%	80.1%
Mammography in past 2 years ^{13, 10} Age adjusted (county/state) and crude (nation) prevalence among women 50-74 years (2018)	67.1%	73.4%	78.3%
Colorectal Cancer Screening ^{13, 10} Age adjusted (county) and crude (state/nation) prevalence among adults age 50-75 years (2018)	55.4%	64.5%	69.7%

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

^{††} 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 15th birthday, and 3 doses for all others).

Infectious Disease Incidence Rates ¹⁴ Per 100,000 people (2015-2017)	County	Montana
Enteric Diseases *	172.9	80.1
Hepatitis C virus	393.1	93.4
Sexually Transmitted Diseases (STD) †	166.2	551.6
Vaccine Preventable Diseases (VPD) §	66.5	91.5

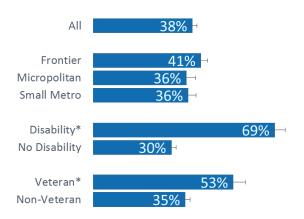
¹⁴ IBIS Community Snapshot, MT-DPPHS

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

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

Montana Adults with Self-Reported Chronic Condition¹⁰ 1. Arthritis 29.0% 2. Depression 24.1% 10.0% 3. Asthma 4. Diabetes 7.6% 5. COPD 6.8% 6. Cardiovascular disease 3.9% 7. Kidney disease 2.4%

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



¹⁴ IBIS Community Snapshot, MT-DPPHS
** Data were suppressed to protect privacy.

¹⁰ Behavioral Risk Factor Surveillance System, CDC (2019)

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

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

** Data were suppressed to protect privacy.

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

¹⁰ Behavioral Risk Factor Surveillance System, CDC (2019)

^{*}Annual household income < \$15,000

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

¹⁹ 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 ¹ - Toole County, Montana				
Discipline	HPSA Score	HPSA		
Primary Care	14	Federally Qualified Health Center (FQHC)		
Dental Health	24	Federally Qualified Health Center (FQHC)		
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

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

Provider Supply and Access to Care ²				
Measure	Description	Toole Co. (N = 1) **	Montana (N = 49) **	National (N = 1347) **
Primary care physicians	Ratio of population to primary care physicians	4977:1	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	1629:1	878:1	726:1
Dentists	Ratio of population to dentists	1222:1	1388:1	1260:1
Mental health providers	Ratio of population to mental health providers	698:1	356:1	310:1

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

¹ Health Resources and Services Administration (2021)

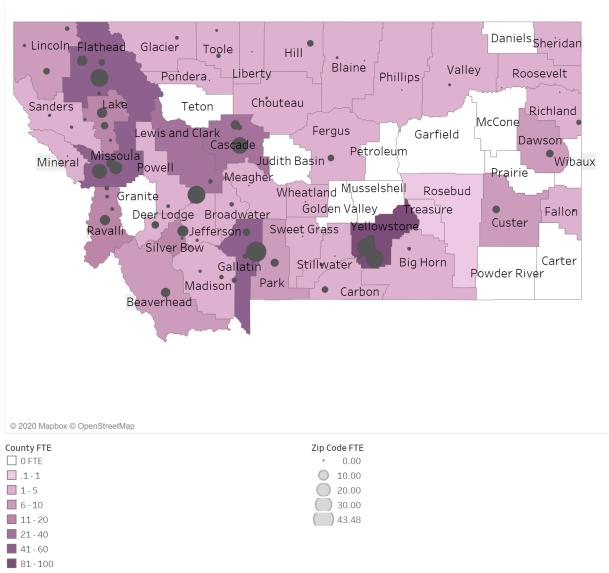
^{**} Total number of CAHs in region

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.

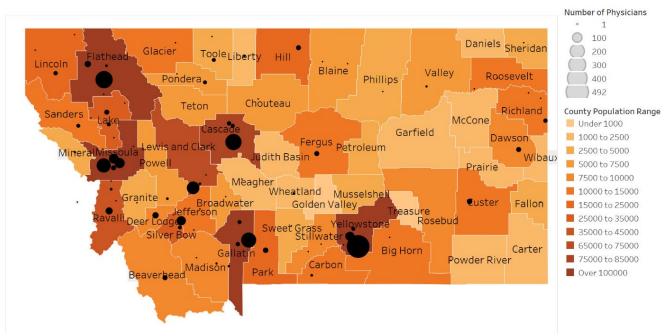
Primary Care Physician FTE: Practice Locations Plotted by Zip Code



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 11, 2023



Dear [LASTNAME] household:

Participate in our Community Health Needs Assessment survey for a chance to **WIN one of five \$50 gift cards!**

Logan Health Shelby (LHS) 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 LHS 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 15, 2023
- 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 Shelby Survey." Your access code is [CODED]
- 4. The winners of the \$50 gift cards will be contacted the week of February 20th.

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, 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,

Vicki Newmiller, President

Appendix E- Survey Instrument

Community Health Needs Assessment Survey Shelby, 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 in Toole County?						
	□ Very healthy	□ Healthy	☐ Somewhat healthy	□ Unhealth	ny □ Very unhealthy		
2.	In the following list, w (Select ONLY 3)	hat do you think	are the three most serious health	h concerns in	Toole County?		
	☐ Alcohol/substance	use	☐ Lack of access to healthcare	□ Soci	ial isolation/loneliness		
	☐ Alzheimer's/demer	ntia	□ Lack of dental care	□ Stro	ke		
	□ Cancer		□ Lack of exercise	□ Suic	cide		
	☐ Child abuse/negle	ct	☐ Mental health issues	☐ Toba	acco use		
	☐ Depression/anxiety	y	☐ Motor vehicle accidents		arettes/cigars, vaping,		
	☐ Diabetes		☐ Overweight/obesity		okeless)		
	☐ Domestic violence		☐ Recreation related	□ Wor	k/economic stress		
	☐ Heart disease		accidents/injuries	□ Wor	k related accidents/injuries		
	☐ Hunger		□ Respiratory issues/illness	☐ Othe	er:		
3.	 ☐ Access to childcare programs ☐ Access to healthcare Access to healthy ☐ Affordable housing ☐ Arts and cultural experience ☐ Clean environment 	e/after school are services foods vents	□ believe are most important for a □ Community involvement □ Good jobs and a healthy economy □ Good schools □ Healthy behaviors and lifest □ Low crime/safe neighborhool □ Low death and disease rate	□ Lo □ Pa □ Re □ Str tyles □ To ods □ Tra	w level of domestic violence arks and recreation eligious or spiritual values rong family life lerance for diversity ansportation services her:		
4.	How do you rate you ☐ Excellent	r knowledge of th □ Goo	ne health services that are available od □ Fair	e through Lo	gan Health Shelby? □ Poor		
5.	•	out the health se	ervices available in Toole County? (•			
	☐ Billboards/posters		□ Newspaper		ial media		
	☐ Friends/family		☐ Presentations	□ Web	osite/internet		
	☐ Healthcare provide	er	□ Toole County Public Health	□ Wor	d of mouth/reputation		
	☐ Mailings/newslette	r	□ Radio	□ Othe	er:		

6.	Which community health resc three years? (Select ALL tha		an Logan He	ealth Shelby or Mar	as Healthcare, have you use	ed in the last	
	☐ Audiology	t apply/		☐ Mental health s	ervices		
	☐ Civic Center			☐ Ministry service			
	☐ Dentistry			☐ Optometry			
	☐ Food pantry			☐ Pharmacies			
	☐ Health Department			☐ Substance use	treatment services		
	☐ Family Medicine (private p	oractice)		☐ Other:			
7.	In your opinion, what would ir	n your opinion, what would improve Toole County's access to healthcare? (Select ALL that apply)					
	☐ Cultural sensitivity		•	☐ More specialist			
	☐ Greater health education	services		•	ices expanded hours		
	☐ Improved quality of care			•	ance programs (healthcare e	expenses)	
	☐ Interpreter services			☐ Telemedicine	, ,	. ,	
	☐ More information about a	vailable services	3	☐ Transportation	assistance		
	☐ More primary care provide			·			
8.	If any of the following classes in attending? (Select ALL that		e made avail	lable to the commu	nity, which would you be mos	st interested	
	☐ Alcohol/substance use		th and welln	ess	☐ Parenting		
	☐ Alzheimer's	□ Hear	t disease		☐ Prenatal		
	□ Cancer	□ Lacta	ation/breastf	eeding support	☐ Smoking/tobacco cessa	tion	
	□ Diabetes	☐ Livin		•	☐ Support groups		
	☐ First aid/CPR	□ Men'	s health		☐ Weight loss		
	□ Fitness	□ Ment	al health		☐ Women's health		
	☐ Grief counseling	□ Nutri	tion		□ Other:		
^	NA/leat additional backbooks are		if a i	labla lacally 2 (Sala)	of All that amply		
9.	What additional healthcare ser	-		lable locally? (Selec			
	☐ Durable Medical Equipmer(DME) – medical		ne Health		☐ Pediatric Specialists		
	devices/equipment	□ Hos	-		☐ Remote patient monito	ring	
	□ Health insurance enrollmer	nt	nory Care		☐ VA outreach clinic		
	and navigation	□ OB/	GYN		☐ Other:	-	
10	1. How important are local healthcare providers and services (i.e.: hospitals, clinics, nursing homes, assisted living, etc. to the economic well-being of the area?						
	□ Very important	□ Important		☐ Not important	☐ Don't know		
11	. Which of the following preventive services have you or someone in your household used in the past year? (Select ALL that apply)						
	☐ Blood pressure check		☐ Flu shot	/ immunizations	□ Pap test		
	☐ Children's checkup/ Wel	I	□ Health c	heckup	□ Prostate (PSA)		
	baby		☐ Health fair		☐ Vision check		
	☐ Cholesterol check		☐ Hearing	check	□ None		
	☐ Colonoscopy		☐ Mammography		□ Other:		
	☐ Dental check			· ———			
12	. In the past three years, was services but did NOT get or d				nousehold thought you need	ed healthcare	
	☐ Yes ☐ No (If no ,	skip to questic	on #14)				

13.	If yes, what were the three most important reasons why you did not receive healthcare services? (Select ONLY 3)					
	☐ Could not get an appointment	☐ It cost too much	☐ Qualified provider not available			
	☐ Could not get off work	☐ It was too far to go	☐ Too long to wait for an			
	☐ Didn't know where to go	☐ Language barrier	appointment			
	☐ Don't like doctors	☐ My insurance didn't cover it	☐ Too nervous or afraid			
	☐ Don't understand healthcare	☐ No insurance	☐ Transportation problems			
	system	☐ Not treated with respect	☐ Unsure if services were available			
	☐ Had no childcare	☐ Office wasn't open when I could go	□ Other:			
14.		or a household member seen a primary he urse practitioner for healthcare services?	ealthcare provider such as a family			
	☐ Yes ☐ No (If	no, skip to question #17)				
15.	Where was that primary healthcare	e provider located? (Select ONLY 1)				
	☐ Conrad	□ Kalispell	□ Valier			
	☐ Cut Bank	☐ Shelby	☐ Other:			
	☐ Great Falls	☐ Sunburst				
16.	Why did you select the primary car	e provider you are currently seeing? (Sele	ect ALL that apply)			
	☐ Appointment availability	☐ Indian Health Services	☐ Referred by physician or other			
	☐ Clinic/provider's reputation for	☐ Length of waiting room time	provider			
	quality	☐ Prior experience with clinic	\square Required by insurance plan			
	☐ Closest to home	□ Privacy/confidentiality	☐ VA/Military requirement			
	☐ Closest to work	☐ Recommended by family or friends	☐ Other:			
	☐ Cost of care					
17.		e in your household received care in a hostion, radiology, or emergency care)	spital? (i.e., hospitalized overnight, day			
	☐ Yes ☐ No (If no, skip					
	intes into (ii iio, skip	to question #20)				
18.	If yes, which hospital does your ho	usehold use MOST for hospital care? (Se	elect ONLY 1)			
	☐ Benefis	□ Logan Health - Cut Bank	☐ Other:			
	☐ Great Falls Clinic Hospital	□ Logan Health - Kalispell				
	□ Logan Health - Conrad	□ Logan Health - Shelby				
19.	Thinking about the hospital you were at most frequently, what were the three most important reasons for selecting that hospital? (Select ONLY 3)					
	☐ Closest to home	☐ Hospital's reputation for quality	☐ Required by insurance plan			
	☐ Closest to work	☐ Prior experience with hospital	☐ VA/Military requirement			
	☐ Cost of care	☐ Privacy/confidentiality	☐ Other:			
	☐ Emergency, no choice	☐ Recommended by family or friends				
	☐ Financial assistance programs	☐ Referred by physician or other provider				
20.	In the past three years, have you provider/family doctor) for healthca	or a household member seen a healthca	re specialist (other than your primary ca			
	☐ Yes ☐ No (If no, skip	to question #23)				

21.	Where was the healthcare specialist	seen? (Sel	ect ALL that	apply)							
	☐ Great Falls	□ Shelby			□ Ot	her:					
	☐ Kalispell	☐ Telehea	alth (from hom	e)							
22.	What type of healthcare specialist wa	s seen? (S	select ALL tha	at apply)							
	☐ Allergist	☐ License	d addiction co	unselor	□Po	☐ Podiatrist					
	☐ Audiologist	☐ Mental I	health counse	lor	☐ Psychiatrist (M.D.)						
	☐ Cardiologist	□ Neurolo	gist		□Ps						
	☐ Chiropractor	☐ Neurosi	urgeon		□ Pu	ılmonologis	st				
	☐ Dentist	□ OB/GYN	N		□Ra	adiologist					
	☐ Dermatologist	□ Occupa	tional therapis	st	□Rh	neumatolog	jist				
	☐ Dietician	☐ Oncolog	gist		□ Sc	cial worke	r				
	☐ Endocrinologist	☐ Ophthal	lmologist		□Sp	eech thera	pist				
	☐ ENT (ear/nose/throat)	□ Optome	etrist		□ Ur	ologist					
	☐ Gastroenterologist	☐ Orthope	edic surgeon		□ Ot	her:					
	☐ General surgeon	□ Pediatri	cian								
	☐ Geriatrician	☐ Physica	l therapist								
	The following services are available t ling your answer. (Please circle N/A				rate the o	verall qualit					
			Excellent	Good	Fair	Poor	Haven't Used	Don't Know			
	Aging Services (nursing home, assist	ted living)	4	3	2	1	N/A	DK			
	Ambulance services (county owned)		4	3	2	1	N/A	DK			
	Cardiac rehabilitation		4	3	2	1	N/A	DK			
	Emergency room		4	3	2	1	N/A	DK			
	Hospital stay (including swing bed, rehabilitation)		4	3	2	1	N/A	DK			
	Laboratory		4	3	2	1	N/A	DK			
	Physical therapy		4	3	2	1	N/A	DK			
	Radiology services (x-ray, ultrasound scan, MRI, mammography)		4	3	2	1	N/A	DK			
	Specialty outreach clinics (i.e., sleep gynecology, cardiology, pulmonology		4	3	2	1	N/A	DK			
	Surgical services		4	3	2	1	N/A	DK			
	Telehealth		4	3	2	1	N/A	DK			
	Have you ever missed a medical app ☐ Yes ☐ No (if no, skip		-	ortation issu	e?						
25. What issue(s) caused you to either be late or miss medical care? (Select ALL that apply)											
	☐ Lack of transportation (no car, broke down)	☐ Unsafe roads/sidewalks for walking or biking				☐ Weather conditions					
	☐ Unreliable/No transit service		far to travel		□ Tir □ Ot	ne of appo her:	ıntment				

26 .	Thinking about	your mental	health (whic	h includes st	tress, anxiet	ty, depressior	n and problems with emot	ions), how
	would you rate	your mental	health in ge	neral?				
	□ Excellent		□ Good		□ Fair		□ Poor	
27 .	In the past thre most days?	e years, hav	e there beer	periods of a	at least three	e consecutive	e months where you felt de	epressed on
	☐ Yes	□ No						
28.	In the past year	, how often	have you felt	lonely or iso	olated?			
	□ Everyday		- [_ □ Sometime	s (3-5 davs	per month)	□ Never	
	☐ Most days (3	-5 days per			` ,	s per month)		
29	Thinking over th	ne nast vear	how would	vou describe	vour stress	s level?		
_0.	☐ High	.o paot your □ Mod			your ouroo		ather not say	
	□ Fligh		erate	□ Low		□ Ulisule/ia	attlet flot say	
30.	To what degree alcohol, prescri			tively affecte	d by your o	wn or someo	ne else's substance use is	ssues, including
	☐ A great deal		□ Somewh	at	☐ A little		☐ Not at all	
24	Over the past m	anth how	often have ve	u had abyoir	aal aativity f	or a continua	ua 20 minutaa2	
3 1.	Over the past n	ionin, now o	nien nave yc		•			
	□ Daily				imes per mo		☐ No physical a	ctivity
	☐ 2-4 times pe	r week		□ 1-2 t	imes per mo	onth		
32.	Has cost prohib	ited you from	n getting a p	rescription o	r taking you	r medication	regularly?	
	☐ Yes	□ No	□ Not appli	cable				
33.	In the past year	, did you wo	orry that you	or your hous	ehold would	I not have en	ough food?	
	□ Yes	□ No		•				
34.	Do you feel that	the commu	nitv has ade	guate and af	fordable ho	usina options	available?	
	□ Yes	□ No	•	Don't know		9		
35	What type of he	alth incurar	oce covers th	e maiority o	of your hous	ehold's medic	cal expenses? (Select ON	II V 1\
.					-	crioia 3 mean	☐ Private insurance/priva	-
	☐ Employer sp			Healthy MT			•	ate plan
	☐ Health Insura Marketplace			Indian Healt	ın		□ VA/Military	
	☐ Health Savin			Medicaid			☐ None/pay out of pocke	
	- Health Gavin	gs Account	Ц	Medicare			☐ Other:	
36.	How well do yo	u feel your h	nealth insura	nce covers y	our healthc	are costs?		
	☐ Excellent		☐ Good		□ Fair		□ Poor	
37.	If you do NOT	have health	insurance, w	hy? (Select	ALL that a	pply)		
	☐ Can't afford to insurance		ealth	□ Choose insuran	not to have ce	health	☐ Other:	
	☐ Employer do insurance	es not offer		☐ Too con to apply	fusing/don't ⁄	know how		

	Yes, and I use the						
		m ⊔ Yes, bi	ut I do not qualify	☐ Yes, but o	choose not to use	□ No	☐ Not sure
<u>Demog</u>	<u>graphics</u>						
All info	ormation is kept cor	nfidential and you	ır identity is not ass	ociated with a	any answers.		
39. Wh	here do you curren	tly live, by zip co	de?				
	59474 Shelby		□ 59444 Galata		□ 59484 \$	Sweet Gras	S
	59482 Sunburst		☐ 59454 Kevin		□ Other: _		
	59435 Ethridge		☐ 59466 Oilmont				
40. Wł	hat is your gender?	•					
	Male [∃ Female	☐ Non-binary	<i>(</i>	☐ Prefer to self-des	scribe:	
41. W	hat age range repr	esents you?					
	18-24	□ 35-44		□ 55-64		□ 75-84	
	25-34	□ 45-54		□ 65-74		□ 85+	
42 . W	hat is your employi	ment status?					
	Work full time		□ Student		☐ Not curr	ently seeki	ng employment
	Work part time		☐ Collect disability	,	☐ Other: _		
	Retired		☐ Unemployed, bu	ıt looking			
43 . W	hat is your househ	old income range	e before taxes?				
	Under \$10,000	J	□ \$40,000-49,999		□ \$80,000)-89,999	
	\$10,000-19,999		□ \$50,000-59,999		□ \$90,000)-99,999	
	\$20,000-29,999		□ \$60,000-69,999		□ \$100,00)0+	
	\$30,000-39,999		□ \$70,000-79,999				

[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 Shelby by How Respondents Learn About Healthcare Services

	Excellent	Good	Fair	Poor	Total
Word of mouth/reputation	15.1% (13)	50.0% (43)	29.1% (25)	5.8% (5)	86
Friends/family	15.8% (12)	47.4% (36)	30.3% (23)	6.6% (5)	76
Healthcare provider	22.6% (14)	51.6% (32)	22.6% (14)	3.2% (2)	62
Newspaper	9.8% (5)	39.2% (20)	43.1% (22)	7.8% (4)	51
Radio	11.4% (5)	54.5% (24)	27.3% (12)	6.8% (3)	44
Social media	25.8% (8)	41.9% (13)	25.8% (8)	6.5% (2)	31
Website/internet	14.8% (4)	44.4% (12)	29.6% (8)	11.1% (3)	27
Toole County Public Health	16.0% (4)	56.0% (14)	24.0% (6)	4.0% (1)	25
Mailings/newsletter	17.4% (4)	52.2% (12)	26.1% (6)	4.3% (1)	23
Billboards/posters	30.8% (4)	38.5% (5)	30.8% (4)	-	13
Other	16.7% (1)	33.3% (2)	33.3% (2)	16.7% (1)	6

Presentations removed from modes of learning (first column) due to non-response.

Preventive Services by Income

	Under \$10,000	\$10,000-19,999	\$20,000-29,999	\$30,000-39,999	\$40,000-49,999	\$50,000-59,999	\$60,000-69,999	\$70,000-79,999	\$80,000-89,999	\$90,000-99,999	\$100,000+	Total
Dental check	1.3% (1)	5.1% (4)	5.1% (4)	13.9% (11)	10.1% (8)	6.3% (5)	11.4% (9)	2.5% (2)	8.9% (7)	5.1% (4)	30.4% (24)	79
Flu shot/ immunizations	1.3% (1)	2.6% (2)	6.6% (5)	10.5% (8)	11.8% (9)	5.3% (4)	7.9% (6)	3.9% (3)	7.9% (6)	5.3% (4)	36.8% (28)	76
Blood pressure check	2.7% (2)	8.0% (6)	5.3% (4)	12.0% (9)	13.3% (10)	5.3% (4)	13.3% (10)	1.3% (1)	6.7% (5)	2.7% (2)	29.3% (22)	75
Health checkup	1.4% (1)	5.6% (4)	5.6% (4)	12.7% (9)	14.1% (10)	4.2% (3)	11.3% (8)	4.2% (3)	8.5% (6)	1.4% (1)	31.0% (22)	71
Vision check	1.5% (1)	6.1% (4)	7.6% (5)	15.2% (10)	7.6% (5)	6.1% (4)	9.1% (6)	3.0% (2)	9.1% (6)	4.5% (3)	30.3% (20)	66
Cholesterol check	-	4.8% (3)	6.5% (4)	9.7% (6)	11.3% (7)	4.8% (3)	12.9% (8)	3.2% (2)	4.8% (3)	4.8% (3)	37.1% (23)	62
Mammography	-	5.1% (2)	7.7% (3)	17.9% (7)	17.9% (7)	2.6% (1)	17.9% (7)	-	10.3% (4)	2.6% (1)	17.9% (7)	39
Prostate (PSA)	-	-	4.3% (1)	8.7% (2)	17.4% (4)	4.3% (1)	4.3% (1)	4.3% (1)	8.7% (2)	4.3% (1)	43.5% (10)	23
Children's checkup/ Well baby	-	5.3% (1)	-	21.1% (4)	5.3% (1)	-	-	-	15.8% (3)	5.3% (1)	47.4% (9)	19
Pap test	-	-	5.3% (1)	26.3% (5)	10.5% (2)	-	-	-	10.5% (2)	15.8% (3)	31.6% (6)	19
Colonoscopy	5.9% (1)	5.9% (1)	11.8% (2)	11.8% (2)	23.5% (4)	5.9% (1)	5.9% (1)	-	-	-	29.4% (5)	17
Health fair	-	-	5.9% (1)	5.9% (1)	17.6% (3)	11.8% (2)	11.8% (2)	5.9% (1)	5.9% (1)	11.8% (2)	23.5% (4)	17
Hearing check	8.3% (1)	8.3% (1)	-	16.7% (2)	8.3% (1)	8.3% (1)	-	8.3% (1)	8.3% (1)	-	33.3% (4)	12
None	-	-	20.0% (1)	60.0% (3)	-	-	-	-	-	20.0% (1)	-	5
Other	-	12.5% (1)	-	-	12.5% (1)	25.0% (2)	25.0% (2)	-	-	-	25.0% (2)	8

Delay or Did Not Get Need Healthcare Services by Residence

	Yes	No	Total
59474 Shelby	47.2% (42)	52.8% (47)	89
59482 Sunburst	26.1% (6)	73.9% (17)	23
59444 Galata	40.0% (4)	60.0% (6)	10
59435 Ethridge	33.3% (1)	66.7% (2)	3
59454 Kevin	-	100.0% (3)	3
59466 Oilmont	33.3% (1)	66.7% (2)	3
59484 Sweet Grass	50.0% (1)	50.0% (1)	2
TOTAL	40.9% (54)	59.1% (78)	132

Other removed from residence (first column) due to non-response.

Reason for Delayed Medical Care by Income

	Under \$10,000	\$10,000- 19,999	\$20,000- 29,999	\$30,000- 39,999	\$40,000- 49,999	\$50,000- 59,999	\$60,000- -000,09\$	\$70,000- 79,999	\$80,000- -000,08\$	-000'06\$	\$100,000+	Total
Qualified provider not available	5.9% (1)	-	5.9% (1)	5.9% (1)	11.8% (2)	11.8% (2)	17.6% (3)	5.9% (1)	-	5.9% (1)	29.4% (5)	17
It cost too much	7.1% (1)	7.1% (1)	7.1% (1)	42.9% (6)	7.1% (1)	-	-	-	7.1% (1)	-	21.4% (3)	14
Don't like doctors	7.7% (1)	-	7.7% (1)	23.1%	15.4% (2)	7.7% (1)	-	-	-	15.4% (2)	23.1% (3)	13
Could not get an appointment	8.3% (1)	8.3% (1)	-	8.3% (1)	8.3% (1)	-	16.7% (2)	8.3% (1)	-	16.7% (2)	25.0% (3)	12
Office wasn't open when I could go	-	11.1% (1)	11.1% (1)	-	11.1% (1)	11.1% (1)	-	-	11.1% (1)	11.1% (1)	33.3% (3)	9
My insurance didn't cover it	_	12.5% (1)	-	12.5% (1)	-	-	12.5% (1)	-	12.5% (1)	25.0% (2)	25.0% (2)	8
Not treated with respect	-	14.3% (1)	-	42.9% (3)	14.3% (1)	-	-	-	14.3% (1)	-	14.3% (1)	7
Too long to wait for an appointment	-	-	-	20.0%	-	-	40.0% (2)	-	-	20.0%	20.0%	5
Too nervous or afraid	20.0%	-	20.0%	20.0%	-	-	20.0%	20.0%	-	-	-	5
No insurance	25.0% (1)	25.0% (1)	-	25.0% (1)	-	-	25.0% (1)	-	-	-	-	4
Could not get off work	-	-	33.3% (1)	33.3% (1)	-	33.3% (1)	-	-	-	-	-	3
Didn't know where to go	_	-	-	66.7% (2)	-	33.3% (1)	-	-	-	-	-	3
It was too far to go	-	-	-	-	33.3% (1)	-	33.3% (1)	-	-	33.3% (1)	-	3
Transportation problems	-	100.0% (2)	-	-	-	-	-	-	-	-	-	2
Unsure if services were available	_	-	-	50.0% (1)	-	-	-	-	-	-	50.0% (1)	2
Other	-	33.3% (3)	-	-	22.2% (2)	11.1% (1)	11.1% (1)	-	11.1% (1)	-	11.1% (1)	9

Don't understand healthcare system, Had no childcare, and Language barrier removed from reason clinic selected (first column) due to non-response.

Location of primary care clinic most utilized by residence

	Conrad	Cut Bank	Great Falls	Kalispell	Shelby	Sunburst	Other	TOTAL
59474 Shelby	8.2% (7)	2.4% (2)	7.1% (6)	3.5% (3)	63.5% (54)	-	15.3% (13)	85
59482 Sunburst	-	4.3% (1)	21.7% (5)	4.3% (1)	30.4% (7)	21.7% (5)	17.4% (4)	23
59444 Galata	-	-	20.0%	-	70.0% (7)	-	10.0% (1)	10
59435 Ethridge	-	-	25.0% (1)	-	50.0% (2)	-	25.0% (1)	4
59466 Oilmont	-	-	-	-	66.7% (2)	-	33.3% (1)	3
59454 Kevin	-	-	-	-	100.0% (2)	-	-	2
59484 Sweet Grass	-	-	50.0% (1)	-	50.0% (1)	-	-	2
TOTAL	5.5% (7)	2.3% (3)	11.7% (15)	3.1% (4)	58.6% (75)	3.9% (5)	14.8% (19)	128

Valier removed from primary care clinic location (first row) due to non-response. Other removed from residence location (first column) due to non-response.

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

		/ 1		Sciectio				
	Conrad	Cut Bank	Great Falls	Kalispell	Shelby	Sunburst	Other	TOTAL
Clinic/provider's reputation for quality	5.4% (3)	3.6% (2)	10.7% (6)	1.8% (1)	66.1% (37)	5.4% (3)	7.1% (4)	56
Closest to home	4.4% (2)	2.2% (1)	-	-	66.7% (30)	8.9% (4)	17.8% (8)	45
Prior experience with clinic	4.7% (2)	7.0% (3)	11.6% (5)	-	55.8% (24)	7.0% (3)	14.0% (6)	43
Appointment availability	-	4.8% (2)	7.1% (3)	-	61.9% (26)	4.8% (2)	21.4% (9)	42
Recommended by family or friends	3.2% (1)	3.2% (1)	16.1% (5)	-	61.3% (19)	-	16.1% (5)	31
Privacy/confidentiality	5.0% (1)	10.0% (2)	30.0% (6)	-	40.0% (8)	5.0% (1)	10.0% (2)	20
Length of waiting room time	8.3% (1)	-	-	-	66.7% (8)	8.3% (1)	16.7% (2)	12
Referred by physician or other provider	-	9.1% (1)	27.3% (3)	9.1% (1)	18.2% (2)	-	36.4% (4)	11
Closest to work	-	10.0% (1)	-	-	70.0% (7)	-	20.0% (2)	10
Cost of care	-	-	28.6% (2)	-	14.3% (1)	14.3% (1)	42.9% (3)	7
Required by insurance plan	-	-	-	-	66.7% (2)	33.3% (1)	-	3
VA/Military requirement	-	-	-	33.3% (1)	-	-	66.7% (2)	3
Indian Health Services	-	-	-	-	100.0% (1)	-	-	1
Other	12.5% (2)	-	31.3% (5)	-	31.3% (5)	12.5% (2)	12.5% (2)	16

Valier removed from primary care clinic location (first row) due to non-response.

Location of most utilized hospital by residence

	Benefis	Great Falls Clinic Hospital	Logan Health – Conrad	Logan Health – Cut Bank	Logan Health – Kalispell	Logan Health - Shelby	Other	Total
59474 Shelby	26.8% (15)	8.9% (5)	1.8% (1)	3.6% (2)	8.9% (5)	28.6% (16)	21.4% (12)	56
59482 Sunburst	25.0% (4)	25.0% (4)	-	-	6.3% (1)	37.5% (6)	6.3% (1)	16
59444 Galata	50.0% (3)	-	-	-	16.7% (1)	33.3% (2)	-	6
59466 Oilmont	-	50.0% (1)	-	-	-	50.0% (1)	-	2
59435 Ethridge	-	-	-	-	-	100.0% (1)	-	1
59454 Kevin	-	-	-	-	-	100.0%	-	1
59484 Sweet Grass	-	-	-	-	-	-	100.0% (1)	1
TOTAL	26.5% (22)	12.0% (10)	1.2% (1)	2.4% (2)	8.4% (7)	32.5% (27)	16.9% (14)	83

Other removed from residence (first column) due to non-response.

Location of most recent hospitalization by reasons for hospital selection

	Benefis	Great Falls Clinic Hospital	Logan Health – Conrad	Logan Health – Cut Bank	Logan Health – Kalispell	Logan Health - Shelby	Other	Total
Closest to home	8.3% (3)	5.6% (2)	-	2.8%	-	69.4% (25)	13.9% (5)	36
Referred by physician or other provider	35.3% (12)	20.6% (7)	-	5.9% (2)	11.8% (4)	11.8% (4)	14.7% (5)	34
Prior experience with hospital	32.3% (10)	19.4% (6)	-	3.2% (1)	6.5% (2)	32.3% (10)	6.5% (2)	31
Hospital's reputation for quality	33.3% (8)	16.7% (4)	-	-	20.8% (5)	16.7% (4)	12.5% (3)	24
Emergency, no choice	13.6% (3)	-	4.5% (1)	-	-	54.5% (12)	27.3% (6)	22
Privacy/confidentiality	40.0% (2)	20.0% (1)	-	-	40.0% (2)	-	-	5
Recommended by family or friends	-	50.0% (2)	-	-	25.0% (1)	25.0% (1)	-	4
Closest to work	-	-	-	-	-	100.0% (3)	-	3
Required by insurance plan	-	33.3% (1)	-	-	-	33.3% (1)	33.3% (1)	3
VA/Military requirement	-	-	-	-	_	33.3% (1)	66.7% (2)	3
Cost of care	100.0% (1)	-	-	-	-	-	-	1
Financial assistance programs	100.0% (1)	-	-	-	-	-	-	1
Other	40.0% (4)	20.0% (2)	-	-	10.0% (1)	10.0% (1)	20.0%	10

Appendix G- Responses to Other & Comments

- 2. In the following list, what do you think are the **three most serious** health concerns in Toole County? (Select ONLY 3)
 - Need more paramedics
 - Trust in facility and it's employees
 - Meth
 - Drugs
 - Vaccinated individuals
 - Don't know
 - Chronic illnesses that precipitate others cancer, dementia, heart disease
 - Lack of providers
- Select the three items below that you believe are most important for a healthy community (select ONLY 3):
 - Assisted living places
 - Better school lunches
 - Clean water delivery
- *Responses when more than 3 were selected (1 participants):
 - Affordable housing (1)
 - Good jobs and a healthy economy (1)
 - Good schools (1)
- 5. How do you learn about the health services available in Toole County? (Select ALL that apply)
 - Job Related
 - Personal experience
 - None
 - Only one around
 - VA community care
 - In the field
- **6.** Which community health resources, other than Logan Health Shelby or Marias Healthcare, have you used in the last three years? (Select ALL that apply)
 - Dr. Clary (3)
 - None (3)
 - OB/GYN
 - Dermatology, ENT
 - Podiatry and Physical Therapy

- VA
- Oncology Great Falls
- Health Fair
- **7.** In your opinion, what would improve Toole County's access to healthcare? (Select ALL that apply)
 - Retention of the quality medical staff. The good ones leave for various reasons and the poor-quality physicians are the ones who are left and end up leaving after many complaints.
 - Pediatrician
 - Keep government out of healthcare
 - Better doctors
 - Providers not associated with Marias Healthcare
 - Logan Health leaves
 - Facilities/pharmacies/clinic "play nice" by putting the patient is first, not politics/business.
 - Baby delivery OB/GYN delivery
 - Have Dr. Clark utilize Marias Healthcare
 - Better primary care providers, not more
 - Affordable health care
 - Quick care clinic
 - Not sure
 - Retaining physicians
 - Food gathering assistance
 - Home Health Services (I help quite a few here)
- **8.** If any of the following classes/programs were made available to the community, which would you be most interested in attending? (Select ALL that apply)
 - I live 50 miles from Shelby so plan trips
 - I was a nurse for several years, so don't need a lot of these now
 - None
- 9. What additional healthcare services would you use if available locally? (Select ALL that apply)
 - Orthopedic care knee, hip, back
 - Nutrition Counseling
 - Urgent Care
 - Assisted living
 - Telemedicine
 - Doctor
 - None
 - Primary care physician options

- **11.** Which of the following preventive services have you or someone in your household used in the past year? (Select ALL that apply)
 - Primary healthcare out of town
 - Dermatology, massage, chiropractic
 - Birthday blood check
 - Dermatology Skin Care
 - Need stitches, no doctor available, sent to Great Falls
 - Radiology
 - Birthday labs and specialty bloodwork
 - Labs, x-ray, EEG [electroencephalogram]
- **13.** If yes, what were the **three** most important reasons why you did not receive healthcare services? (Select ONLY 3)
 - The nurse on the phone told us not to come because they were too busy to deal with our "little" problem.
 - No OB [obstetrics]
 - Do not like providers here
 - Horrible experience at doctor visit
 - Hoped it would heal itself
 - Services were not available
 - Unsure if needed
 - COVID-19 Restrictions
- *Responses when more than 3 were selected (2 participants):
 - Could not get an appointment (1)
 - Could not get off work (1)
 - It was too far to go (1)
 - My insurance didn't cover it (2)
 - Not treated with respect (2)
 - Qualified provider not available (2)
 - Transportation problems (1)
- 15. Where was that primary healthcare provider located? (Select ONLY 1)
 - Tele/video
 - Helena
 - Fairfield
- *Responses when more than 1 was selected (17 participants):
 - Conrad (3)
 - Cut Bank (3)
 - Great Falls (8)
 - Kalispell (4)
 - Shelby (14)
 - Sunburst (3)

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

- Treated with respect, takes time and cares. Listens to my concerns.
- Treated with respect and understanding.
- No FAA [Federal Aviation Administration] Examiner
- Trust in provider and facility
- Good place Doctor and staff
- Long time doctor
- My family member is one of the workers
- Pediatrician listened to me; saved my child's life when no one else would give me the time of day.
- Listens to my needs
- Personal preference
- I like my PA [physicians assistant]. They are someone I can talk to and also knows my health. Been seeing them for years.
- Closest to where I used to live
- Only available option locally
- I started going to Conrad when my doctor moved to Conrad years ago.
- Doctor I've been seeing for years
- No longevity with doctors

18. Which hospital does your household use MOST for hospital care? (Select ONLY 1)

- St Patrick's in Missoula
- LHS [Logan Health Shelby], then transferred to Benefis
- Yuma, Arizona
- VA (2)
- Providence in Missoula
- Where the doctor that needs to be seen practices

*Responses when more than 1 was selected (8 participants):

- Benefis (8)
- Great Falls Clinic Hospital (3)
- Logan Health Conrad (1)
- Logan Health Cut Bank
- Logan Health Kalispell (2)
- Logan Health Shelby (5)

- **19.** Thinking about the hospital you were at most frequently, what were the **three** most important reasons for selecting that hospital? (Select ONLY 3)
 - Services not offered in Shelby
 - Specialists not available in Shelby
 - Had health issues in Arizona
 - OB/GYN
 - Services offered
 - They aren't Shelby
 - This hospital is not equipped to care for my child who is in the hospital frequently
 - Where the doctor that needs to be seen practices
 - Only available option locally
 - Close to house in summer
- *Responses when more than 3 were selected (1 participants):
 - Prior experience with hospital (1)
 - Recommended by family or friends (1)
 - VA/Military requirement (1)
- 21. Where was the healthcare specialist seen? (Select ALL that apply)
 - Missoula (5)
 - Helena
 - Denver
 - Yuma Arizona
 - Cut Bank (3)
 - Billings
 - Issaquah, WA care for grandkids in Seattle area
 - VA- Cut Bank
 - Las Vegas, NV; Coeur d'Alene, ID
 - Conrad, Cut Bank
- 22. What type of healthcare specialist was seen? (Select ALL that apply)
 - Sports injury care
 - Geneticist
 - Cardiac Surgeon
 - Breast center
 - Plastic surgeon
 - Hematologist (2)
 - Orthodontist
 - Pain management

- 25. What issue(s) caused you to either be late or miss medical care? (Select ALL that apply)
 - Wasn't late
 - N/A
 - Couldn't drive for 18 months
 - I don't know
 - Physically unable to go
- **35.** What types of health insurance cover the majority of your household's medical expenses? (Select ONLY 1)
 - Supplement (2)
 - Retired federal employee plan
 - Christian Healthcare Missionaries
- *Responses when more than 1 was selected (13 participants):
 - Employer sponsored (3)
 - Health Savings Account (1)
 - Medicaid (1)
 - Medicare (12)
 - Private insurance/private plan (7)
 - VA/Military (1)
- **37.** If you **do NOT** have health insurance, why?
 - No affordable health insurance
 - N/A
 - I have Medicare
- **38.** Where do you currently live, by zip code?
 - (no other responses)
- **40.** What is your gender? Prefer to self-describe:
 - (no responses)

42. What is your employment status?

- Farm
- Stay at home mom
- Volunteer
- Self-employed
- *Responses when more than 1 was selected (8 participants):
 - Work full time (2)
 - Work part time (6)
 - Retired (3)
 - Student (3)
 - Not currently seeking employment (1)

General comments

- (Q1)
 - Selected "Unhealthy" and wrote "Many people think they are healthy but are unhealthy. Chronic illnesses, diabetes, obesity."
- (Q2)
 - Selected "Lack of dental care" and wrote "Need more than one doctor"
- (Q3)
 - Selected "Access to healthy foods" and added "and affordable"
- (Q7)
 - Selected "More primary care providers" and wrote "Doctors not PA's"
 - Selected "More primary care providers" and wrote "MD [Medical Doctor]"
 - Selected "Improved quality of care" and wrote "(Doctors)"
 - Selected "More primary care providers" and wrote "Better primary care providers, not more."
 - Selected "More primary care providers" and wrote "on duty not on call."
- (Q9)
 - Selected "Home Health" and wrote "I don't need yet, but this is needed in the community."
- (Q11)
 - Selected several services and wrote "Not at Logan Health"
 - Selected "Hearing check" and wrote "Not in Shelby"
 - Selected "Mammography" and wrote "Not in Shelby"
 - Selected "Colonoscopy" and "Health checkup" and wrote "In Great Falls not in Shelby"
- (Q13)
 - Selected "Don't like doctors" and wrote "Don't like current doctors, arrogant and rude, don't listen to patients. God complexes."
- (Q15)
 - Selected "Cut Bank" and next to "Shelby" wrote "unless needed hospital Cut Bank"

- (Q19)
 - Selected "Referred by physician to other provider" and wrote "Dr. Clay to Cut Bank"
- (Q23)
 - Selected "2" for "Hospital stay (including swing bed, rehabilitation)" and wrote "Often no patience"
 - Selected "3" for "Laboratory" and wrote "Great Falls won't accept results"
 - Selected "3" for "Radiology services (x-ray, ultrasound, CT scan, MRI, mammography)" and wrote "None here"
 - Wrote "Don't use many services" next to the question.
 - Selected "3" for "Radiology services (x-ray, ultrasound, CT scan, MRI, mammography)" and wrote "Tried to get Bone density in both Conrad and Shelby but machine broken and haven't contacted me that machine repaired since September."
 - Selected "4" for "Hospital stay (including swing bed, rehabilitation)" and wrote "except the food – poor."
- (Q24)
 - Selected "Yes" and "No" under "Yes" wrote "In Great Falls", under "No" wrote "Shelby."
- (Q25)
 - Selected "Lack of transportation", "Too far to travel", and "Weather conditions" and wrote "All in Great Falls."
- (Q26)
 - Selected "Poor" and wrote "Getting better."
- (Q27)
 - Selected "Yes" and wrote "Because of COVID lockdowns! For no reason!"
- (Q28)
 - Did not make a selection and wrote "Rarely"
- (Q32)
 - Did not make a selection and wrote "My medications are not that expensive, my spouse on the other hand has made that choice [sic. to not fill a prescription or take medication regularly] but did get great help at the Logan pharmacy."
- (Q35)
 - Selected "Medicare" and wrote "Plus Employer Sponsored"
 - Did not make a selection, circled "(Select ONLY 1)" and wrote "Not really answerable as I am on Medicare and my wife is using the Health Insurance Marketplace."
 - Selected "Medicare" and wrote "Plus co-insurance"
- (Q36)
 - Selected "Good" and wrote "I have fairly high deductible"
- (Q38)
 - Did not make a selection and wrote "Yes" next to the question.

- (Q42)
 - o Selected "Retired" and wrote "Do cleaning for"
- (Q43)
 - o Selected "\$20,000-29,999" and wrote "No taxes"
- General:
 - Please note, it is ridiculous that we have to go to Great Falls for dental because the dentists can't do root canals or the other stuff we can't get here. Not everyone can wait for when they have an opening."

Appendix H- Focus Group and Key Informant Interview - Questions

Focus Group and Key Informant Interview Questions

Purpose: The purpose of focus groups and key informant interviews are 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- Focus Group and Key Informant Interviews - Transcripts

Focus Group #1

Wednesday, Jan. 25, 2023 – 12-1 p.m. – Shelby Senior Center 9 participants

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

- We're getting to be an older community!
- There's a lot of old people, so that's a good thing (individuals living longer)!
- I think we have some health challenges since we have a lot of drugs and usage problems.
- Just with COVID and the pandemic, it really hit this community hard. It sure didn't help that we had an older community.
- The other day, someone mentioned that a shuttle bus would be helpful for a lot of those community members who don't have help getting around to appointments and the grocery store.
- I believe Northern Transit Interlocal only runs on Wednesdays, so it's a challenge if you need support on other days of the week.

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

- Hospital/clinic:
 - I feel like Logan Health Shelby is doing a great job!
 - Most care I've received there was good, but I thought the food was pretty lousy. The biggest thing I noticed during my hospital stay, was that I missed a lot of my medications due to of all of the emergencies coming in. It seemed that all of the staff were being pulled from the floor to help with the incoming emergencies. They apologized to me, but if it was life threatening, that could have been really bad. My room was kept clean, so that was good!
 - I know workforce is short everywhere, not just here.
 - Well, I think that the Logan Health Shelby staff should eat down in their dining room once a week to know what they're serving.
 - I wonder why it takes so long for billing. Just recently, I have been getting some bills from services I had back in 2021.
- EMS Services (ER/Ambulance)
 - There need to be more paramedics here, so the ambulance doesn't need to fly everyone out all of the time.

- Sometimes the ambulance has to come over from Cut Bank to support our community.
- Being flown somewhere could really be financially crippling for those that don't have health insurance that might cover that level of care. Even if you do have health insurance, being transported via air is very expensive.
- It's purely a volunteer EMS service here. I would like to see improvements in funding and workforce.
- With the new clinic, I wonder if that will help with transports or if it will also require us to be shuffled around in an emergency situation.
- One final thing that should be noted here is that if you live in the country (I.e., outside of Shelby), it often takes some time to get an ambulance to you.
- Public/County Health Department
 - I don't use it.
 - I went in a while back with some questions and no one could answer my questions. It was an unproductive trip.
 - They come to the Senior Center once a year and host a flu shot clinic.
 - They lost a lot of good employees during the pandemic.
- Senior Services (i.e., Nursing homes, assisted living, home health, senior center, etc.)
 - It's wonderful at the Senior Center the food is wonderful, but prices have recently increased. The increased prices can be a barrier to a lot of our seniors on social security!
 - People are always looking for home health care. A lot of community members call around looking for this service, and to my knowledge, there's nowhere locally to refer them.
 - We're more or less speaking to the perspectives of living in the town. They're even worse off in the country!
 - The only thing I hear about from the nursing home is that there is a lack of employees, and it starts to show in the quality of care.
 - I heard that the local assisted living facility, Heritage Center, is now going to start taking food from the hospital to serve at Heritage. I'm not sure that's going to be good since, as someone mentioned earlier, the food can be rather lousy.
 - I think the Heritage Center is wonderful. They've always had such great food, so it's a disappointing shift. I can understand what Logan's trying to do to save money, but still!
- Services for Low-Income Individuals/Families
 - All the apartments around here are subsidized housing.

- In North Dakota, I know they're building housing to help with the workforce challenges. I wonder if something like that might help our area.

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

- Recruiting and retaining qualified employees. I received so much misinformation here that it's ridiculous. I know a ton of people that will travel to Great Falls just to avoid care here.
- We can't keep good doctors around. I haven't heard good things about some of the doctors that we do have locally.
- I know that some doctors have been known to allude that their patients should just "tough it out," only to find something as serious as cancer later down the road.
- I would like to establish care with someone who really knows me.
- VA services. Many veterans don't know about the services available to them and they receive less than adequate assistance as a result. Even just letting them know to contact their VA office representative to see what help is available.

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

- Home health
- Consistent doctors
- Mental health services are desperately needed here. If you're on Medicare, you could potentially see someone at Logan Health, but if the relationship isn't good, the only other option is Great Falls. The wait time for some of the mental health providers in Great Falls can often be at least 6 months, which is really hard for something as time sensitive as mental health.

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

- I don't think electric cars are the answer!
- In a small town, you can only afford to have so much locally.
- Unfortunately, I suppose Logan Health is a money-making situation, which I'm sure is normal, but I heard they just hired a doctor that got his license taken away in Oregon. What I've seen is that they'll hire anyone. It's not promising to see.
- There are a lot of traveling nurses here!
- Home health would be really great for this area. That way we could keep people here rather than moving away.
- More outreach for services would be helpful I know we have a lot of things locally, but for things like the Fitness Center located at the Civic Center, a lot of

- folks can't afford that! People need to be informed of everything that is available to support a healthy lifestyle.
- Senior companions to support going to store, sitting, and even visiting could be helpful for our community.
- We have plenty of fresh air here!

Focus Group #2

Thursday, Jan. 26, 2023 – 12-1 p.m. – Sunburst Senior Center 10 participants

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

- I think we are very average, when COVID-19 and the flu come around people often get them.

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

- Hospital/clinic:
 - The clinic in town is very beneficial, the only issue is if you need medications you have to travel to Shelby to get them. The clinic does a good job of coordinating with the hospital to get those medications though.
- EMS Services (ER/Ambulance)
 - We are very fortunate to have our EMS services. Our fire department and EMS is entirely volunteer-based. The response times are very good for such a rural area. They also offer training for new EMTs.
- Public/County Health Department
 - The local health department is helpful when it comes to setting up vaccination sites and they even offer some mobile clinics for immunizations.
- Senior Services (i.e., Nursing homes, assisted living, home health, senior center, etc.)
 - The biggest need I see is senior housing. There are also no home health services in the community, and with the aging population, it is a huge issue.
 - Community members with chronic conditions are out of luck and often must leave the community or rely on family members for care. It can be very stressful for the elderly and the families that they rely on. Services outside of the senior center are largely lacking in Sunburst.
 - Transportation is a big need as well. Seniors often need help getting to medical appointments, the grocery store, etc. We do have some free public transit that comes infrequently and can take people to Great Falls or Kalispell.

- Services for Low-Income Individuals/Families
 - There needs to be more information available to low-income individuals because people often don't know where to go for assistance. There aren't many people in this community who can help with that assistance either.

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

- Home health services
- Transportation
- Awareness of services
- Suicide awareness/prevention

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

- Delivery service for prescriptions to homes (especially out of town)
- More traveling specialists would be helpful for our area (cardiology, foot doc, knees & hips, podiatry, etc.)
- More mental health services for both adults and youth populations
- Drug rehabilitation services
- Grief counseling

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

- Affordable (quality) housing
- A place to exercise indoors since it can be especially difficult in the winter.
- It would be nice to have representatives from the hospital come and speak to groups like us at the Senior Center to talk about programs and available services.
 We previously had someone come and talk about diabetic awareness and that was very beneficial!

Key Informant Interview #1

Thursday, February 2, 2023 Anonymous –Via phone interview

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

- Being newer to the area, I'm not sure I can give you an accurate assessment for the general health of the area.

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

- Hospital/clinic:
 - I haven't had experience with the hospital yet, but the clinic services at Marias Healthcare were great for what I needed at the time.
- EMS Services (ER/Ambulance)
 - I don't have experience in this area yet, so I can't provide an opinion.
- Public/County Health Department
 - I don't have experience in this area yet, so I can't provide an opinion.
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - With my limited knowledge, it sounds like the community has good views of the senior services around here.
- Services for Low-Income Individuals/Families
 - There's an ongoing food drive in the area I suppose that is helpful to ensure individuals have the food they need.

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

- I'm not sure if this is an issue here, but generally speaking for rural areas, I think there's a need to have doctors on hand at all times.

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

Being newer to the area, I can't give exact needs. But off the top of my head I
would suggest exploring the feasibility for adding and/or expanding the services
that community members have to travel out of the area for most.

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

Ensuring we're able to retain good doctors locally so community members don't
have to travel as much. Especially in the winter months, it can be pretty
dangerous on the roads and a burden for community members to travel long
distances to receive the care they need.

Key Informant Interview #2

Thursday, February 2, 2023 Anonymous –Via phone interview

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

- I would say the health of our area is improving.
- In my experience, I think access to mental health has improved.
- Occupational therapy and physical therapy services have also improved.
- In general, I think we are very lucky to have what we have locally for such a rural community.

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

- Hospital/clinic:
 - I think we have amazing care here Logan Health is great!
 - I feel like we have big city care in a small community. That to say, I don't think you don't have to leave town for care as much as some think that you do.
 - I'd say appointment availability is pretty good. They do well at prioritizing if things are an emergency and needing to be addressed that day.
- EMS Services (ER/Ambulance)
 - We often have to wait for someone to come over from Cut Bank.
 - Unfortunately, there's a doctor and a nurse at the Emergency Room that are harder to work with. They can be kind of rude, so I try and avoid going when they are there.
- Public/County Health Department
 - Our County Health Department does a good job with what they're able to help with.
 - They are very hands on with car seat fittings they even provide demonstrations.
 - They help navigating the Women, Infants and Children (WIC) program which is nice to have locally.
 - Under the previous leadership they were be more active in the community. They used to partner on a lot of different events like a suicide awareness walk, red ribbon week sponsorship, but now I don't think they're doing any of that.
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - I think we need more senior services, but I'm sure everyone's saying that!
 - We have the Heritage Center, which is an assisted living facility. We also have a nursing home and independent living facility. While we have these

- facilities, I believe some have long waiting lists. I think it's important to keep our seniors here, rather than them potentially having to move away to access the type of living situation they need.
- We don't have any home health services locally. If there are home health needs, the services have to come up from Great Falls, which is 85 miles one way!
- Services for Low-Income Individuals/Families
 - We have a local food bank, WIC office, school lunch program, and Youth Dynamics.
 - Providers around here are great at making sure kids are cared for.
 - Prices in Shelby are high, but I think that's everywhere right now!
 - Youth Dynamics hosts an annual back to school drive which provides school supplies, clothes, etc. to school age children. It seems to be well utilized.
 - We seem to do well taking care of each other. The services are here, but people need to reach out. I wonder if the local organizations could do more outreach to connect services and resources to those in need.

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

- We can already do so much here in Shelby, so I'm not sure we need anything more.

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

- More mental health specialists we only have one provider currently, but mental health care is a need across the lifespan.
- There's often nowhere to turn locally if someone is experiencing suicide ideation. In these situations, the local providers try to refer patients out for that higher level of care, but often they're placed on a wait list which is just not appropriate given the gravity of the situation.
- I would like to note a couple of truly great individuals here Amber Mathey, a nurse at Logan Health Shelby is amazing! Mack Donald is also great at supporting kids in crisis.
- The final note I'd like to make is that transportation to appointments can be a challenge for community members. We don't have a taxi service here, but we do have the Toole County Transit which provides some transportation support. I suppose it would be helpful if transportation support could be expanded.

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

- This is a tough question. I think we would be better off if people were more helpful and less critical of each other. Look after your neighbor – have you seen them around lately? Take a step back and realize that your neighbor might need support.

Appendix J- Request for Comments

Written comments on this 2023 Community Health Needs Assessment Report can be submitted to the Josh Simonds, Executive Director of Facilities and Support Services at Logan Health Shelby:

Josh Simonds Logan Health Shelby PO Box 915 Shelby, MT 59474

Contact Logan Health Shelby's Executive Director of Facilities and Support Services at 406-966-7021 or jsimonds@logan.org with questions.

