

IMPLEMENTATION PLAN

Addressing Community Health Needs



Cut Bank



Cut Bank, Montana

2024-2027

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Disclaimer: The Montana Office of Rural Health strongly encourages an accounting professional's review of this document before submission to the IRS. As of this publishing, this document should be reviewed by a qualified tax professional. Recommendations on its adequacy in fulfillment of IRS reporting requirements are forthcoming.

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The Implementation Planning Process

The implementation planning committee – comprised of Logan Health- Cut Bank’s (LHCB) leadership team and Glacier County Health Department– participated in an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through their community health needs assessment (CHNA) process.

The Community Health Services Development (CHSD), community health needs assessment was performed in the winter of 2024 to determine the most important health needs and opportunities for Glacier County, Montana. The CHSD project is administrated by the Montana Office of Rural Health (MORH) and funded in part through the Montana Health Research and Education Foundation (MHREF) Flex Grant. “Needs” were identified as the top issues or opportunities rated by respondents during the CHSD survey process or during focus groups (see page 10 for a list of “Needs Identified and Prioritized”). For more information regarding the needs identified, as well as the assessment process/approach/methodology, please refer to the facility’s assessment report, which is posted on the facility’s website (logan.org/health/about/community-health-needs-assessment).

The community steering and implementation planning committees identified the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives of the broad interest of the community, including those with public health expertise.

The implementation planning committee reviewed the priority recommendations provided by the community steering committee and determined which needs or opportunities could be addressed considering LHCB’s parameters of resources and limitations. The committee then prioritized the needs/opportunities using the additional parameters of the organizational vision, mission, and values, as well as existing and potential community partners. Participants then created a goal to achieve through strategies and activities, as well as the general approach to meeting the stated goal (i.e., staff member responsibilities, timeline, potential community partners, anticipated impact(s), and performance/evaluation measures).

The prioritized health needs as determined through the assessment process and which the facility will be addressing relates to the following healthcare issues:

- **Access to healthcare services**
- **Knowledge of community services and resources**
- **Primary and specialty care**
- **Mental and behavioral health**

In addressing the aforementioned issues, Logan Health- Cut Bank seeks to:

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

Facility Mission: Quality, compassionate care for all.

Facility Vision: Reimagine health care through connection, service and innovation.

Facility Values: Be Kind, Trust and Be Trusted, Work Together and Strive for Excellence

Implementation Planning Committee Members:

- Nichole Hibl – Purchasing/MM Manager, Logan Health- Cut Bank
- Treasure Berkram – CFO, Logan Health- Cut Bank
- Ashley Kimmet – LCPC, Logan Health- Cut Bank
- Crystal Losing – Nursing, Logan Health- Cut Bank
- Abby Sherwood – Imaging, Logan Health- Cut Bank
- Rachel Dosch – HR, Logan Health- Cut Bank
- Josey Smiedala – Program Manager, Logan Health- Cut Bank
- Cherie Taylor, President, Logan Health- Cut Bank
- Kelsey Roberts, Glacier County Health Department
- Melissa Running Wolf, Glacier County Health Department

Prioritizing the Community Health Needs

The steering and implementation planning committees completed the following to prioritize the community health needs:

1. Reviewed the facility's presence in the community (i.e. activities already being done to address community need).
2. Considered organizations outside of the facility which may serve as collaborators in executing the facility's implementation plan.
3. Assessed the health indicators of the community through available secondary data.
4. Evaluated the feedback received from consultations with those representing the community's interests, including public health.

Logan Health- Cut Bank's Existing Presence in the Community

- The facility hosts and sponsors an annual health fair and Kids Health and Safety Fair that provides free screenings, educational resources, as well as an opportunity to meet the Logan Health- Cut Bank providers.
- The Rural Health Clinic offers sports physicals and recently opened a school based health clinic in the local school district.
- The facility coordinates the Worksite Wellness Program for the school district.
- The facility offers birthday labs at a discounted price to encourage yearly preventive screenings.
- The facility has a member on the County Health Board, the Board of Directors for the Chamber of Commerce, and the Rockies Healthcare Foundation.
- The facility partners with the school to provide learning opportunities for the Health Occupations class and Teen Mental Health First Aid.
- The Rural Health Clinic offers the Diabetes Prevention Program (DPP), which is a lifestyle management program and community access to the InBody compensation scale to promote wellness.
- The facility offers community sponsorships to promote wellness including partnerships with the Cut Bank Farmers Market, Senior Center and City of Cut Bank to offer two weeks of Free Swimming for families.

List of Available Community Partnerships and Facility Resources to Address Needs

- Adult and Child Protective Services
- Alcoholics Anonymous
- BeeHive Assisted Living
- Blackfeet CHR Program
- Blackfeet THIP
- Blackfeet Tribal Health
- Crystal Creek Lodge Treatment Center
- Cut Bank & Seville Head Start
- Cut Bank Chamber of Commerce
- Cut Bank Job Center
- Cut Bank Schools
- Cut Bank Sports Complex
- Cut Bank Trails, Inc
- Cut Bank VA Outpatient Clinic
- Gateway Community Services
- Glacier Community Health Center
- Glacier County Health Department
- Harvest Food Pantry
- Ideal Options
- Illuminate Wellness
- Joe Meagher Memorial Civic Center
- Kids Pack Program
- Montana Department of Health and Human Services
- Montana Hospital Association
- Montana Nutrition and Physical Activity program
- Montana Office of Rural Health/Area Health Education Center
- Montana Resource Line 211
- Montana Tobacco Quit Line
- MSU Extension Office
- MT Child Abuse Hotline
- Northern Pines Rehab and Nursing
- Opportunities, Inc.
- Parkview Senior Center
- Peace Pregnancy Center
- Suicide and Crisis Lifeline 988

Glacier County Indicators

Population Demographics

- 64.2% of Glacier County’s population identifies as American Indian or Alaska Native, and 30.7% is white.
- 11.4% of Glacier County’s population has disability status.
- 13.0% of Glacier County’s population is 65 years and older.
- 8.9% of Glacier County’s population has Veteran status.
- 13.3% of Glacier County’s population has “No High School Diploma” as their highest degree attained; 35.2% are a “High school graduate (includes equivalency)”.

Size of County and Remoteness

- 13,778 people in Glacier County.
- 4.6 people per square mile.

Socioeconomic Measures

- 32.9% of children live in poverty.
- 29.4% of persons are below the federal poverty level.
- 36.8% of adults (age<65) are uninsured; 28.2% of children (age<18) are uninsured.
- 28.5% of the population is enrolled in Medicaid.

Select Health Measures

- 40.0% of adults are considered obese.
- 30.0% of the adult population report physical inactivity.
- Cardiovascular disease prevalence among adults in Glacier County is 8.9 compared to 7.9 for Montana.
- 41.0% of adults living in frontier Montana report two or more chronic conditions.
- Montana’s veteran suicide rate (per 100,000 population) is 65.7 compared to 38.4 for the U.S.

Nearest Major Hospital

- Benefis Healthcare in Great Falls, MT is 110 miles from Logan Health- Cut Bank

Public Health and Underserved Populations Consultation Summaries

Name/Organization

January 31, 2024

Cherie Taylor: President, Logan Health – Cut Bank (LHCB)
 Treasure Berkram: CFO, LHCB
 Crystal Losing: CNO, LHCB
 Heather Nunn: Clinic Manager, LHCB
 Josey Smiedala: Program Manager, LHCB
 Rachel Dosch: Human Resources, LHCB; Chamber of Cut Bank
 Nina Mckenzie: Executive Assistant, LHCB
 Ashley Kimmet, LCPC: Director of Behavioral Health, LHCB
 Kelsey Smedsrud: Marketing and Communications Coordinator, LHCB
 Melissa Giard: Opportunities Inc. Headstart
 Lisa Terry: MSU – Extension
 Wade Johnson: Superintendent, Cut Bank School District
 Melissa Lavedure: Glacier County Health Department
 Kelsey Walsh: Glacier County Health Department

Public and Community Health

- Wow, the stats for maternal/child health. Looks like we have some work to do in this area.
- We have a lot of adult smokers.
- Our drinking and driving and seatbelt use numbers.
- It would be interesting to look at past years secondary data to compare with the current, see if we've moved the needle.
- Public health has been working very hard on infectious disease incidence rate.
- There's not a lot of awareness of what an STI is. Need better education. There is a lot of missed follow up.
- Risky behaviors are almost viewed as "ok" now.
- With the infectious disease rates, I'd be interested to see this broken down by age category.

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- The breast cancer incidence rate is interesting. We are booked every time the mammography bus comes. Do we need to offer more?
- Seems like there is a desire for screenings but we have a back log in availability.
- I see our numbers for cigarette use, does this include vaping? We have a huge vaping population in Glacier County.

Population: Low-Income, Underinsured

- I find it an interesting statistic the number of households without a vehicle. It's high for our population and we have limited transportation.
- I'm surprised by the number of adult uninsured. What are they doing for healthcare.
- Could be IHS influence on those numbers.
- We are the highest or second highest for Medicaid expansion in the state.
- There was a big donation of fruits and vegetables to the local food bank. People turned them down and did not take them. Said they didn't know how to prepare them, didn't know what to do with it.

Population: Seniors

- Looking at the secondary data, I thought we had a higher proportion of 65+ year olds.

Population: Youth

- I'm glad we included hearing checks on the survey as we hear about this in the community.
- Through the schools, students get screened annually and follow up for younger ages. Not seniors or those who slip through the cracks.

Needs Identified and Prioritized

Prioritized Needs to Address

1. Top health concerns for the community were “Alcohol/substance abuse” (59.6%), “Cancer” (32.3%), “Diabetes” (20.2%), and “Mental health issues” (20.2%).
2. Top components of a health community included “Access to healthcare services” (45.4%), “Good jobs and a healthy economy” (39.2%), “Affordable housing” (27.8%), and “Low crime/safe neighborhoods” (27.8%).
3. 23.9% of respondents indicated their knowledge of health services through LHCB was “Fair” or “Poor.” Most respondents learned of health services through “Friends/family” (66.7%), “Word of mouth/reputation” (66.7%), and “Healthcare provider” (61.6%).
4. Respondents most often utilized the following community health resources: “Pharmacy” (83.5%), “Dentist” (71.1%), “Optometrist (eye doctor)” (61.9%), and “Walking trail” (46.4%).
5. Respondents expressed interest in educational classes/programs about “Fitness” (39.1%), “Weight loss” (34.5%), and “Women’s health” (32.3%).
6. 64.0% of respondents did not feel that there was adequate and affordable housing in the community.
7. 55.6% of respondents utilized a “Health checkup” in the past year, 42.4% received a “Mammography,” 22.2% had a “Pap test,” and 18.2% had a “Colonoscopy.”
8. “Didn’t know where to go” increased significantly as a reason respondents delayed or did not receive services since the 2022 survey, from 0.0% then to 16.7% now.
9. Respondents indicated that access to healthcare in the community would be improved by “More primary care providers” (47.9%) and “More specialists” (42.7%).
10. 30.9% of respondents indicated that they delayed getting healthcare services or did not receive them. The top reasons were “Qualified provider not available” (36.7%), “Could not get an appointment” (33.3%), and “Too long to wait for an appointment” (30.0%).
11. 97.0% of respondents had received primary care in the last three years, and 61.5% reported receiving that care in Cut Bank.
12. “Clinic services” at LHCB were given a 3.0 out of 4.0 quality rating.

13. Top desired local healthcare services were “Dermatology (skin)” (46.8%), “ENT (ear/nose/throat)” (39.2%), and “Alternative medicine/Naturopath” (29.1%).
14. 75.5% of respondents had received specialty care in the last three years. Most respondents saw a specialist in Great Falls (63.5%), Kalispell (40.5%), or Cut Bank (31.3%). The top types of specialists seen were “Dentist” (33.8%), “Optometrist (eye)” (23.0%), and “Cardiologist” (20.3%). 18.9% of respondents saw an “OB/GYN.”
15. 80.2% of respondents indicated that they do not currently use telehealth services.
16. “Specialist services” received a 3.1 out of 4.0 quality rating.
17. 16.5% of respondents thought that “Access to mental health services” was a top component of a healthy community.
18. 26.0% of respondents indicated that “More mental health services” would improve the community’s access to healthcare.
19. 18.3% of respondents said they felt lonely or isolated 3-5 days per month or more.
20. 59.6% of respondents rated their stress levels over the last year as “Moderate” or “High.”
21. 28.2% of respondents said their mental health was “Fair” or “Poor.”
22. 58.6% of respondents said their lives were impacted by their own or someone else’s substance abuse.
23. “Behavioral health” services at LHCB received a quality rating of 3.1 out of 4.0.
24. Interviewees voiced the desire for better communication about existing services, and thought a resource hub or information clearinghouse would be a valuable asset.
25. Key informant interviews identified the need for more providers to serve the community.
26. Key informant interviews highlighted the prevalence and negative effects of substance use in the community.
27. Interviewees thought that behavioral specialists in schools would be extremely helpful, as well as more mental and behavioral health counseling for youth and adults.

Needs Unable to Address

(See page 25 for additional information)

1. 32.3% of respondents said their health insurance provided only “Fair” or “Poor” coverage; 37.5% of respondents indicated access to healthcare would be improved with “Payment assistance programs.” 23.3% of respondents indicated that lack of insurance coverage was a reason they delayed or did not receive needed medical services. 33.3% of respondents who lacked health insurance said cost was the primary reason. 23.5% of respondents were unaware of health cost assistance programs.

2. Key informants identified senior care as an area that could use more resources and staffing, including the senior center and nursing home; they brought up the desire for home health care services. “Home health assistance” was the third top resource that would improve access the healthcare.
3. 39.1% of respondents were interested in “Fitness” classes/programs, 34.5% interested in “Weight loss” education, and 27.6% wanted education around “Nutrition/healthy foods.” 22.8% of respondents indicated the desire for “Nutrition/dietician” services in the community. Key informant interviewees also expressed the desire for more recreation, health, fitness, and nutrition resources, education, and programming.

Executive Summary

The following summary briefly represents the goals and corresponding strategies and activities which the facility will execute to address the prioritized health needs (from page 10). For more details regarding the approach and performance measures for each goal, please refer to the Implementation Plan Grid section, which begins on page 15.

Goal 1: Leverage community partnerships to increase access to healthcare services.

Strategy 1.1: Enhance collaboration efforts among area partners.

- Continue partnership with local schools to expand health training and education (e.g. STI prevention, Mental Health First Aid, Stop the Bleed, REACH camp, HOSA student training, drinking and driving prevention).
- Continue partnerships with local housing coalition, emergency preparedness, crisis coalition, and senior center to enhance relationships and resources within Glacier County.
- Collaborate with local public health and other healthcare entities to support community events and resource dissemination.
- Explore opportunities to collaborate with GCHC and MSU Extension to enhance health classes offered in Glacier County.

- Create a list of community partners and facilitate a community communication pipeline to share resources, knowledge, and education locally.

Goal 2: Increase community knowledge of hospital and community services.

Strategy 2.1: Explore opportunities to improve awareness of local health resources and services.

- Design QR code sticker campaign to share information about available services at Logan Health- Cut Bank.
- Explore opportunities to offer additional preventative screenings (e.g. mammography, lung cancer, colonoscopy, women’s annual wellness, echocardiograms).
- Determine the feasibility of re-establishing a mammogram program for tribal members.
- Implement SDoH screening process and documentation for inpatient and outpatient services.
- Create a marketing campaign to educate providers and staff in the region on facilities and services available locally.

Goal 3: Increase access to primary and specialty care in Glacier County.

Strategy 3.1: Enhance access to primary care services.

- Determine the feasibility of expanding school-based clinic hours.
- Determine the feasibility of implementing a Patient Care Navigation/Coordination program.
- Continue recruitment efforts to expand primary care workforce and access to primary care services.

Strategy 3.2: Increase access to specialty care services.

- Continue to explore enhancing specialty services at Logan Health – Cut Bank (e.g. more scope days, telehealth, women’s services, ortho, OBGYN).
- Explore opportunities to maintain and expand telehealth services at LHCB.

Goal 4: Ensure continued access to mental and behavioral health resources and services.

Strategy 4.1: Increase available resources relating to mental and behavioral health through augmenting partnerships and supporting existing community organizations.

- Continue to recruit a mental health professional to support behavioral health services at Logan Health – Cut Bank.
- Create an educational campaign to inform the community of local and national resources (e.g. 988) to support patients in crisis.
- Evaluate the feasibility of hiring a Licensed Addiction Counselor at Logan Health – Cut Bank.
- Identify grants or other resources to support Teen Mental Health First Aid certification and program.
- Coordinate with Logan Health pediatrics mental health program to expand telehealth mental health services at LHCB.

Implementation Plan Grid

Goal 1: Leverage community partnerships to increase access to healthcare services.

Strategy 1.1: Enhance Logan Health- Cut Bank’s collaboration efforts among area partners.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Continue partnership with local schools to expand health training and education (e.g. STI prevention, Mental Health First Aid, Stop the Bleed, REACH camp, HOSA student training, drinking and driving prevention).	Rural Health Clinic	December 2026	Rural Health Clinic Manager	Glacier County Health Department and Cut Bank School District	Resource Limitations Financial Limitations Workforce Limitations
Continue partnerships with local housing coalition, emergency preparedness, tribal suicide and crisis coalition, and senior center to enhance relationships and health resources within Glacier County.	Rural Health Clinic/Quality	July 2026	Rural Health Clinic Manager/ Quality Manager	Tribal Health Partners/Local Law Enforcement	Communication Barriers Workforce Limitations
Collaborate with local public health and other healthcare entities to support community events and resource dissemination.	Rural Health Clinic	January 2027	Rural Health Clinic Manager, Health Department and Marketing	Glacier County Health Department	Workforce Limitations
Explore opportunities to collaborate with GCHC and MSU Extension to enhance health classes offered in Glacier County.	Rural Health Clinic	December 2026	Rural Health Clinic and Marketing	MSU Extension and GCHC	Workforce Limitations
Create a list of community partners and facilitate a community communication pipeline to share resources, knowledge, and education locally.	Marketing	January 2025	Marketing	Glacier Community Health Center/Local	Workforce Limitations

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			Health Department	
<p>Needs Being Addressed by this Strategy:</p> <ul style="list-style-type: none"> ▪ 1. Top health concerns for the community were “Alcohol/substance abuse” (59.6%), “Cancer” (32.3%), “Diabetes” (20.2%), and “Mental health issues” (20.2%). ▪ 2. Top components of a health community included “Access to healthcare services” (45.4%), “Good jobs and a healthy economy” (39.2%), “Affordable housing” (27.8%), and “Low crime/safe neighborhoods” (27.8%). ▪ 3. 23.9% of respondents indicated their knowledge of health services through LHCB was “Fair” or “Poor.” Most respondents learned of health services through “Friends/family” (66.7%), “Word of mouth/reputation” (66.7%), and “Healthcare provider” (61.6%). ▪ 4. Respondents most often utilized the following community health resources: “Pharmacy” (83.5%), “Dentist” (71.1%), “Optometrist (eye doctor)” (61.9%), and “Walking trail” (46.4%). ▪ 5. Respondents expressed interest in educational classes/programs about “Fitness” (39.1%), “Weight loss” (34.5%), and “Women’s health” (32.3%). ▪ 6. 64.0% of respondents did not feel that there was adequate and affordable housing in the community. ▪ 24. Interviewees voiced the desire for better communication about existing services, and thought a resource hub or information clearinghouse would be a valuable asset. 				
<p>Anticipated Impact(s) of these Activities:</p> <ul style="list-style-type: none"> ▪ Improved awareness and utilization of services and programs ▪ Strengthened collaboration between community partners ▪ Build community capacity ▪ Increase access to healthcare services ▪ Increased community knowledge of services and resources ▪ Improved health outcomes ▪ Service, policy, and resources development ▪ Improve access to high quality, coordinated care ▪ Strengthen community partnerships 				
<p>Plan to Evaluate Anticipated Impact(s) of these Activities:</p> <ul style="list-style-type: none"> ▪ Track number of health education and training programs offered with schools 				

- Track participation in school health education and training programs
- Track engagement with local partners over marketing platforms
- Track LHCB collaboration with GCHC and MSU Extension
- Track the engagement resulting from health events and resource dissemination
- Track awareness and access to services/resource measures in subsequent CHNA

Measure of Success:

LHCB will have facilitated or supported additional trainings, education, partnerships by the 2027 CHNA.
Engagement with LHCB marketing and communication efforts

Goal 2: Increase community knowledge of hospital and community services.

Strategy 2.1: Explore opportunities to improve awareness of local health resources and services.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Design QR code sticker campaign to share information about available services at Logan Health- Cut Bank.	Marketing	December 2024	Marketing	Logan Health Marketing	None
Explore opportunities to bring in additional preventative screenings at LHCB (e.g. mammography, lung cancer, colonoscopy, women’s annual wellness, echocardiograms).	Radiology/ DON	July 2026	Radiology Manager/ DON	Logan Health Shelby Logan Health Medical Center	Workforce Limitations
Determine the feasibility of re-establishing a mammogram program for tribal members.	Radiology	July 2026	Radiology Manager	Logan Health Shelby Logan Health Medical Center	Workforce Limitations Equipment Limitations

Implement SDoH screening process and documentation for inpatient and outpatient services.	Clinic/DON	January 2025	IS, Clinic Manager and DON	Outpatient and Inpatient teams	Transition to new EMR
Create a marketing campaign to educate providers and staff in the region on facilities and services available locally.	Marketing	January 2025	Marketing	Logan Health Shelby Logan Health Conrad Logan Health Chester	None

Needs Being Addressed by this Strategy:

- 3. 23.9% of respondents indicated their knowledge of health services through LHCB was “Fair” or “Poor.” Most respondents learned of health services through “Friends/family” (66.7%), “Word of mouth/reputation” (66.7%), and “Healthcare provider” (61.6%).
- 5. Respondents expressed interest in educational classes/programs about “Fitness” (39.1%), “Weight loss” (34.5%), and “Women’s health” (32.3%).
- 7. 55.6% of respondents utilized a “Health checkup” in the past year, 42.4% received a “Mammography,” 22.2% had a “Pap test,” and 18.2% had a “Colonoscopy.”
- 8. “Didn’t know where to go” increased significantly as a reason respondents delayed or did not receive services since the 2022 survey, from 0.0% then to 16.7% now.
- 24. Interviewees voiced the desire for better communication about existing services, and thought a resource hub or information clearinghouse would be a valuable asset.

Anticipated Impact(s) of these Activities:

- Improved awareness and utilization of services and programs
- Strengthened collaboration between community partners
- Build community capacity
- Increase access to healthcare services
- Increased community knowledge of services
- Improved health outcomes
- Service, policy, and resources development

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

- Track progress on and publication of QR code sticker campaign
- Track engagement with QR code sticker campaign
- Track efforts to bring in further specialty services
- Communicate with tribal entities concerning mammogram program re-introduction
- Create SDoH screening process
- Continue to monitor and troubleshoot SDoH screening process
- Track provider and staff engagement with services education campaign

Measure of Success:

Improved utilization of preventative health screenings
 Engagement with LHCB marketing and communication efforts

Goal 3: Increase access to primary and specialty care in Glacier County.

Strategy 3.1: Enhance access to primary care services.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Determine the feasibility of expanding school-based clinic hours.	Rural Health Clinic	January 2026	Rural Health Clinic Manager	Cut Bank Public Schools	Workforce Limitations Financial Limitations
Determine the feasibility of implementing a Patient Care Navigation/Coordination program.	Rural Health Clinic	July 2026	Rural Health Clinic Manager	Rural Health Clinic and Community Resources	Workforce Limitations
Evaluate feasibility of expanding and maintaining primary care workforce to enhance access to primary care services.	Rural Health Clinic/Recruiting	July 2026	Rural Health Clinic Manager	Logan Health Medical Center Recruitment	Workforce Limitations Financial Limitations

Needs Being Addressed by this Strategy:

- 2. Top components of a health community included “Access to healthcare services” (45.4%), “Good jobs and a healthy economy” (39.2%), “Affordable housing” (27.8%), and “Low crime/safe neighborhoods” (27.8%).
- 9. Respondents indicated that access to healthcare in the community would be improved by “More primary care providers” (47.9%) and “More specialists” (42.7%).
- 10. 30.9% of respondents indicated that they delayed getting healthcare services or did not receive them. The top reasons were “Qualified provider not available” (36.7%), “Could not get an appointment” (33.3%), and “Too long to wait for an appointment” (30.0%).
- 11. 97.0% of respondents had received primary care in the last three years, and 61.5% reported receiving that care in Cut Bank.
- 12. “Clinic services” at LHCB were given a 3.0 out of 4.0 rating.
- 25. Key informant interviews identified the need for more providers to serve the community.

Anticipated Impact(s) of these Activities:

- Increase access to primary care services
- Increase access to high quality, coordinated healthcare services
- Improved health outcomes
- Service, policy, and resources development
- Enhanced patient care and follow-up capabilities

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

- Track progress on expansion of school-based clinic hours
- Track progress on Patient Care Navigation/Coordination program
- Track efforts made to expand primary care workforce

Measure of Success:

Number of School Based Clinic appointments and outreach hours
 Successful implementation of additional primary care resources

Goal 3: Increase access to primary and specialty care in Glacier County.

Strategy 3.2: Increase access to specialty services.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Continue to explore enhancing specialty services at Logan Health – Cut Bank (e.g. more scope days, telehealth, women’s services, ortho, OBGYN).	DON/Clinic Manager	December 2026	Rural Health Clinic/ Logan Health Medical Center	Logan Health Medical Center	Workforce Limitations Financial Limitations
Explore opportunities to maintain and expand telehealth services at LHCB.	Rural Health Clinic	July 2025	Rural Health Clinic/Logan Health Medical Center	Logan Health Medical Center	Workforce Limitations

Needs Being Addressed by this Strategy:

- 2. Top components of a health community included “Access to healthcare services” (45.4%), “Good jobs and a healthy economy” (39.2%), “Affordable housing” (27.8%), and “Low crime/safe neighborhoods” (27.8%).
- 5. Respondents expressed interest in educational classes/programs about “Fitness” (39.1%), “Weight loss” (34.5%), and “Women’s health” (32.3%).
- 7. 55.6% of respondents utilized a “Health checkup” in the past year, 42.4% received a “Mammography,” 22.2% had a “Pap test,” and 18.2% had a “Colonoscopy.”
- 9. Respondents indicated that access to healthcare in the community would be improved by “More primary care providers” (47.9%) and “More specialists” (42.7%).
- 10. 30.9% of respondents indicated that they delayed getting healthcare services or did not receive them. The top reasons were “Qualified provider not available” (36.7%), “Could not get an appointment” (33.3%), and “Too long to wait for an appointment” (30.0%).
- 13. Top desired local healthcare services were “Dermatology (skin)” (46.8%), “ENT (ear/nose/throat)” (39.2%), and “Alternative medicine/Naturopath” (29.1%).

- 75.5% of respondents had received specialty care in the last three years. Most respondents saw a specialist in Great Falls (63.5%), Kalispell (40.5%), or Cut Bank (31.3%). The top types of specialists seen were “Dentist” (33.8%), “Optometrist (eye)” (23.0%), and “Cardiologist” (20.3%). 18.9% of respondents saw an “OB/GYN.”
- 14. 80.2% of respondents indicated that they do not currently use telehealth services.
- 15. “Specialist services” received a 3.1 out of 4.0 rating.
- 25. Key informant interviews identified the need for more providers to serve the community.

Anticipated Impact(s) of these Activities:

- Increase access to high quality, coordinated healthcare services
- Enhanced specialty care services
- Increased community knowledge of services
- Improved health outcomes
- Service, policy, and resources development
- Expanded telehealth reach and capabilities

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

- Track efforts to increase specialty service offerings at LHCB
- Continue to receive feedback from community concerning desired specialty services
- Continue to ensure access to telehealth services
- Track efforts to expand telehealth services

Measure of Success:

Number of Telehealth appointments and outreach hours
Successful implementation of new service lines

Goal 4: Ensure continued access to mental and behavioral health resources and services.

Strategy 4.1: Increase available resources relating to mental and behavioral health through community partnerships and supporting existing community organizations.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Continue to recruit a mental health professional to support behavioral health services at Logan Health- Cut Bank.	Behavioral Health	December 2024	Behavioral Health Director	Recruiting Firm/ Logan Health Talent Acquisition/HR	Limitations/ conflicts
Create an educational campaign to inform the community of local and national resources (e.g. 988) to support patients in crisis.	Behavioral Health/ Marketing	July 2026	Behavioral Health Director/ Marketing	Local Radio/Local newspaper/Cut Bank Public Schools	Workforce Limitations
Evaluate the feasibility of hiring a Licensed Addiction Counselor at Logan Health- Cut Bank.	Behavioral Health Director	December 2025	Behavioral Health Director	None	Workforce Limitations
Identify grants or other resources to support a staff member at LHCB to be certified in Teen Mental Health First Aid or other mental health program.	Behavioral Health Director/ Administration	July 2025	Behavioral Health Director/ Administration	DPHHS/MHA/AHA /Public School/Local Health Department	Workforce Limitations
Coordinate with Logan Health pediatrics mental health program to expand tele-mental health services at LHCB.	Behavioral Health Director/RHC Manager	December 2026	Behavior Health Director/RHC Manager	Logan Health Medical Center/Logan Health Whitefish/ Montana Pediatrics	Workforce Limitations

Needs Being Addressed by this Strategy:

- 1. Top health concerns for the community were “Alcohol/substance abuse” (59.6%), “Cancer” (32.3%), “Diabetes” (20.2%), and “Mental health issues” (20.2%).
- 2. Top components of a health community included “Access to healthcare services” (45.4%), “Good jobs and a healthy economy” (39.2%), “Affordable housing” (27.8%), and “Low crime/safe neighborhoods” (27.8%).
- 17. 16.5% of respondents thought that “Access to mental health services” was a top component of a healthy community.
- 18. 26.0% of respondents indicated that “More mental health services” would improve the community’s access to healthcare.
- 19. 18.3% of respondents said they felt lonely or isolated 3-5 days per month or more.
- 20. 59.6% of respondents rated their stress levels over the last year as “Moderate” or “High.”
- 21. 28.2% of respondents said their mental health was “Fair” or “Poor.”
- 22. 58.6% of respondents said their lives were impacted by their own or someone else’s substance abuse.
- 23. “Behavioral health” services at LHCB received a quality rating of 3.1 out of 4.0.
- 26. Key informant interviews highlighted the prevalence and negative effects of substance use in the community.
- 27. Interviewees thought that behavioral specialists in schools would be extremely helpful, as well as more mental and behavioral health counseling for youth and adults.

Anticipated Impact(s) of these Activities:

- Improved access to mental and behavioral health services
- Improved mental and behavioral health outcomes.
- Decrease societal stigma associated with accessing mental and behavioral health resources
- Improved health outcomes
- Service, policy, and resources development
- Improve access to high quality, coordinated care
- Strengthen community partnerships
- Build community capacity
- Increased community knowledge of resources

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

- Track efforts to recruit additional mental health providers
- Track publication of and engagement with awareness campaign
- Track progress towards recruiting and hiring a Licensed Addictions Counselor (LAC)
- Catalog Logan Health- Cut Bank staff that complete youth and teen mental health first aid training
- Track progress towards contracting with Logan Health pediatrics for telehealth services
- Track mental and behavioral health measures in subsequent CHNA

Measure of Success:

Engagement with LHCB marketing and communication efforts
 Successful hiring and implementation of additional behavioral health resources
 Number of participants in Mental Health Teen First Aid

Needs Not Addressed and Justification

Identified health needs unable to address by Logan Health- Cut Bank	Rationale
<p>1. 32.3% of respondents said their health insurance provided only “Fair” or “Poor” coverage; 37.5% of respondents indicated access to healthcare would be improved with “Payment assistance programs.” 23.3% of respondents indicated that lack of insurance coverage was a reason they delayed or did not receive needed medical services. 33.3% of respondents who lacked health insurance said cost was the primary reason. 23.5% of respondents were unaware of health cost assistance programs.</p>	<p>Logan Health- Cut Bank (LHCB) works closely with the Montana Hospital Association and other partners to increase access and awareness for patient health insurance. Access to health insurance is an ongoing challenge for all patients and healthcare systems. LHCB has a team designated to assist and educate on payment assistance programs. LHCB also has a 340B program to pass on savings to patients who are seen in the facility.</p>
<p>2. Key informants identified senior care as an area that could use more resources and staffing, including the senior center and nursing home; they brought up the desire for home</p>	<p>Logan Health- Cut Bank (LHCB) offers monthly senior education luncheons at the senior center and continues to partner with local memory care and nursing home facilities to address aging in the community.</p>

<p>health care services. “Home health assistance” was the third top resource that would improve access the healthcare.</p>	
<p>3. 39.1% of respondents were interested in “Fitness” classes/programs, 34.5% interested in “Weight loss” education, and 27.6% wanted education around “Nutrition/healthy foods.” 22.8% of respondents indicated the desire for “Nutrition/dietician” services in the community. Key informant interviewees also expressed the desire for more recreation, health, fitness, and nutrition resources, education, and programming.</p>	<p>LHCB recently launched a Diabetes Prevention Program (DPP) to offer a new lifestyle coaching program for the community. The facility will continue to partner with Logan Health Kalispell to bring more offerings and referrals to Dietician/ Lifestyle coaching services. LHCB also partners with the City of Cut Bank, MSU Extension and SNAP to collaborate on community projects and educational offerings.</p>

Dissemination of Needs Assessment

Logan Health- Cut Bank “LHCB” disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on their website (logan.org/health/about/community-health-needs-assessment) as well as having copies available at the facility should community members request to view the community health needs assessment or the implementation planning documents.

The Steering Committee, which was formed specifically as a result of the CHSD (Community Health Services Development) process to introduce the community to the assessment process, will be informed of the implementation plan to see the value of their input and time in the CHSD process as well as how LHCB is utilizing their input. The Steering Committee, as well as the Board of Directors, will be encouraged to act as advocates in Glacier County as the facility seeks to address the healthcare needs of their community.

Furthermore, the board members of LHCB will be directed to the hospital’s website to view the complete assessment results and the implementation plan. LHCB board members approved and adopted the plan on **September 10th, 2024**. Board members are encouraged to familiarize themselves with the needs assessment report and implementation plan, so they can publicly promote the facility’s plan to influence the community in a beneficial manner.

Written comments on this 2024-2027 Logan Health- Cut Bank Community Benefit Strategic Plan can be submitted to:

Administration
Logan Health- Cut Bank
802 2nd Street SE
Cut Bank, Montana 59427

Please reach out to Logan Health- Cut Bank’s Market Vice President, Cherie Taylor at 406-873-3736 or cherietaylor@logan.org with questions.