



# 2024

## COMMUNITY HEALTH NEEDS ASSESSMENT

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**Cut Bank**, Montana

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

**LOGAN**  
HEALTH

Cut Bank



**MONTANA**  
STATE UNIVERSITY

Office of Rural Health  
Area Health  
Education Center

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# INTRODUCTION

# Introduction

Logan Health – Cut Bank (LHCB), formerly Northern Rockies Medical Center, is a 20-bed nonprofit Critical Access Hospital (CAH) and rural health clinic based in Cut Bank, Montana. Logan Health – Cut Bank serves Glacier County of just under 3,000 square miles and provides medical services to a service population of approximately 13,780 people. Logan Health – Cut Bank provides both hospital and clinic services to Cut Bank and surrounding communities; with most of the County’s populated communities located along US 2 or US 89. Glacier County, located in northwestern Montana, is geographically and culturally diverse and includes both Glacier National Park as well as the Blackfeet Indian Reservation.

Logan Health – Cut Bank offers a wide array of services including lab, diagnostic imaging, a rural health clinic, a school-based health clinic, emergency services, and physical/occupational therapies. Additionally, LHCB provides visiting outreach physicians who specialize in cardiology, orthopedics, pediatrics, neurology, gastroenterology, perinatology, and general surgery.

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

**Mission:** Quality, compassionate care for all.

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

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



Logan Health – Cut Bank conducted this assessment in partnership with the Glacier County Health Department. Both entities participated in the Community Health Services Development (CHSD) Project administrated by the Montana Office of Rural Health (MORH). This project was funded in part through the Montana Health Research and Education Foundation (MHREF) Flex Grant. Community involvement in steering committee meetings and key informant interviews enhance community engagement in the assessment process.

In March 2024, LHCB and Glacier County Health Department surveyed their service area to determine community health need priority areas. 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).



Please note, LHCB can compare some of the 2024 survey data with data from previous surveys. These surveys were conducted in partnership with the Montana Office of Rural Health in 2022 and 2019. If any statistical significance exists, it will be reported. The significance level was set at 0.05.

## Health Assessment Process

A steering committee was convened to assist Logan Health – Cut Bank 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 January 2024. 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

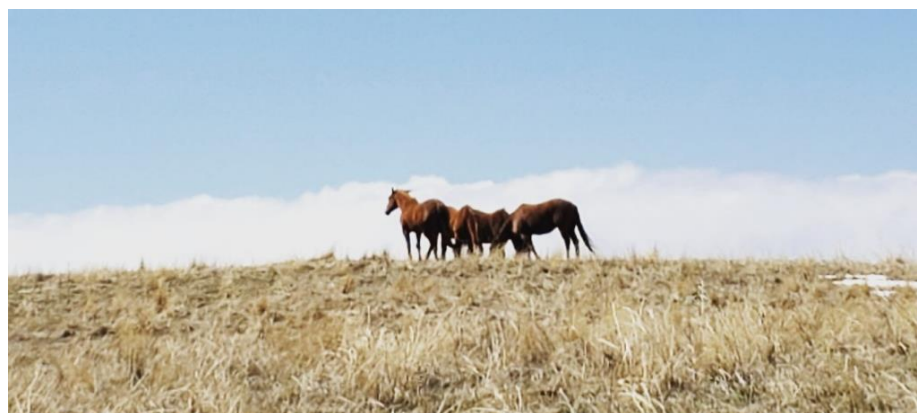
In March 2024, surveys were mailed out to the residents in Glacier County, Montana. Survey respondents had the ability to complete the survey mailed to them, or via an online survey hosted at Montana State University's HELPS Lab

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 – Cut Bank provided a list of aggregated outpatient and inpatient admissions. Those zip codes with the greatest number of admissions were selected to be included in the survey. A random list of 800 residents was then selected with the assistance of the MSU HELPS lab. Residence was stratified in the initial sample selection so that each area would be represented in proportion to the overall served population and the proportion of past admissions. (Note: although the survey samples



were proportionately selected, actual surveys returned from each population area varied, which may result in slightly less proportional results.). See survey distribution table on the next page.

Zip Code	Population <sup>1</sup>	Community Name	Total Distribution	# Male	# Female
59417	1018	Browning	80	40	40
59427	3056	Cut Bank	652	326	326
59411	130	Babb	2	1	1
59474	3169	Shelby	20	10	10
59482	333	Sunburst	4	2	2
59484	60	Sweetgrass	2	1	1
59486	530	Valier	14	7	7
59454	154	Kevin	6	3	3
59434	311	East Glacier Park	12	6	6
59448	484	Heart Butte	4	4	4
<b>Total</b>	<b>9245</b>		<b>800</b>	<b>400</b>	<b>400</b>

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

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

## Information Gaps- Data

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

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

The low population density of rural and frontier communities often requires regional reporting of many major health indices, including chronic disease burden and behavior health indices. The Montana BRFSS (Behavioral Risk Factor Surveillance System), through a cooperative agreement with the Center for Disease Control and Prevention (CDC), is used to identify regional trends in health-related behaviors. The fact that many health indices for rural and frontier counties are reported regionally

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

## Limitations in Survey & Key Informant Methodology

A common approach to survey research is the mailed survey. However, this approach is not without limitations. There is always the concern of non-response as it may affect the representativeness of the sample. Thus, a mixture of different data collection methodologies is recommended.



Conducting key informant interviews in addition to the random sample survey allows for a more robust sample, and ultimately, these efforts help to increase the community response rate. Partnering with local community organizations such as public health, community health centers, and senior centers, just to name a few, assists in reaching segments of the population that might not otherwise respond to a survey.

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

## Survey Implementation

In March 2024, a survey, cover letter on Logan Health – Cut Bank's letterhead with the Vice President's signature, and postage paid envelopes 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 – Cut Bank would be conducting a community health services survey throughout the region in cooperation with the Montana Office of Rural Health.

Of those 800 surveys, 137 surveys were returned undeliverable for a 15.1% response rate. From this point on, the total number of surveys will be out of 663. 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 9.8%.

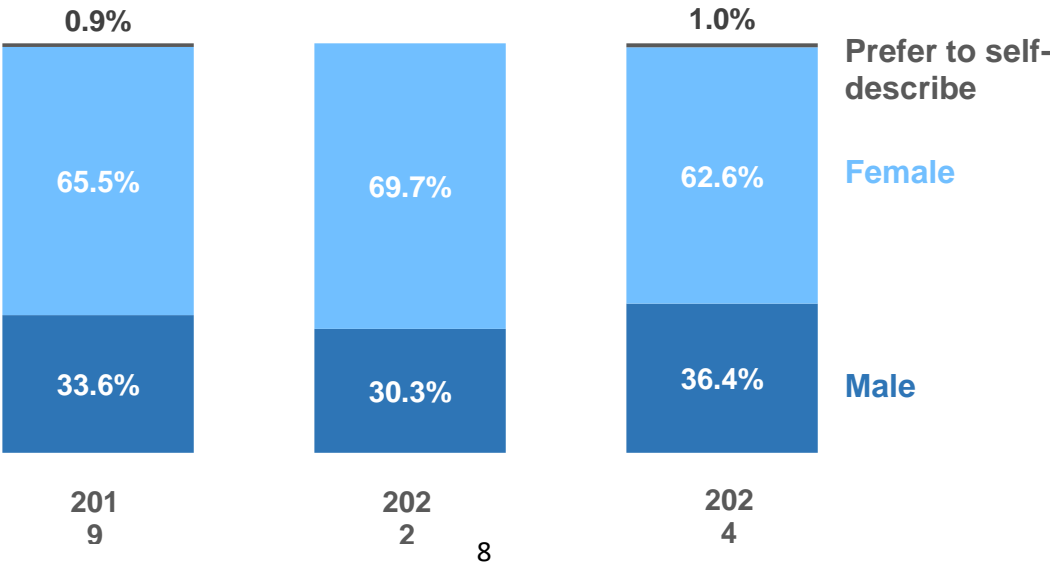
## Survey Respondent Demographics

A total of 663 surveys were distributed amongst Logan Health Cut Bank’s service area. 100 were completed for a 15.1% response rate. The following tables indicate the demographic characteristics of the survey respondents. Information on location, gender, age, and employment is included. Percentages indicated on the tables and graphs are based upon the total number of responses for each individual question, as some respondents did not answer all questions.

Place of Residence	2019 % (n)	2022 % (n)	2024 % (n)
Number of respondents	110	109	100
59427 Cut Bank	64.5% (71)	76.1% (83)	89.0% (89)
59474 Shelby	0.9% (1)	1.8% (2)	4.0% (4)
59486 Valier	6.4% (7)	3.7% (4)	2.0% (2)
59434 East Glacier	2.7% (3)	1.8% (2)	1.0% (1)
59417 Browning	17.3% (19)	12.8% (14)	1.0% (1)
59411 Babb	2.7% (3)	0.9% (1)	0.0% (0)
59448 Heart Butte	0.9% (1)	0.0% (0)	0.0% (0)
Other	4.5% (5)	2.8% (3)	3.0% (3)
TOTAL	100.0% (110)	100.0% (109)	100.0% (100)

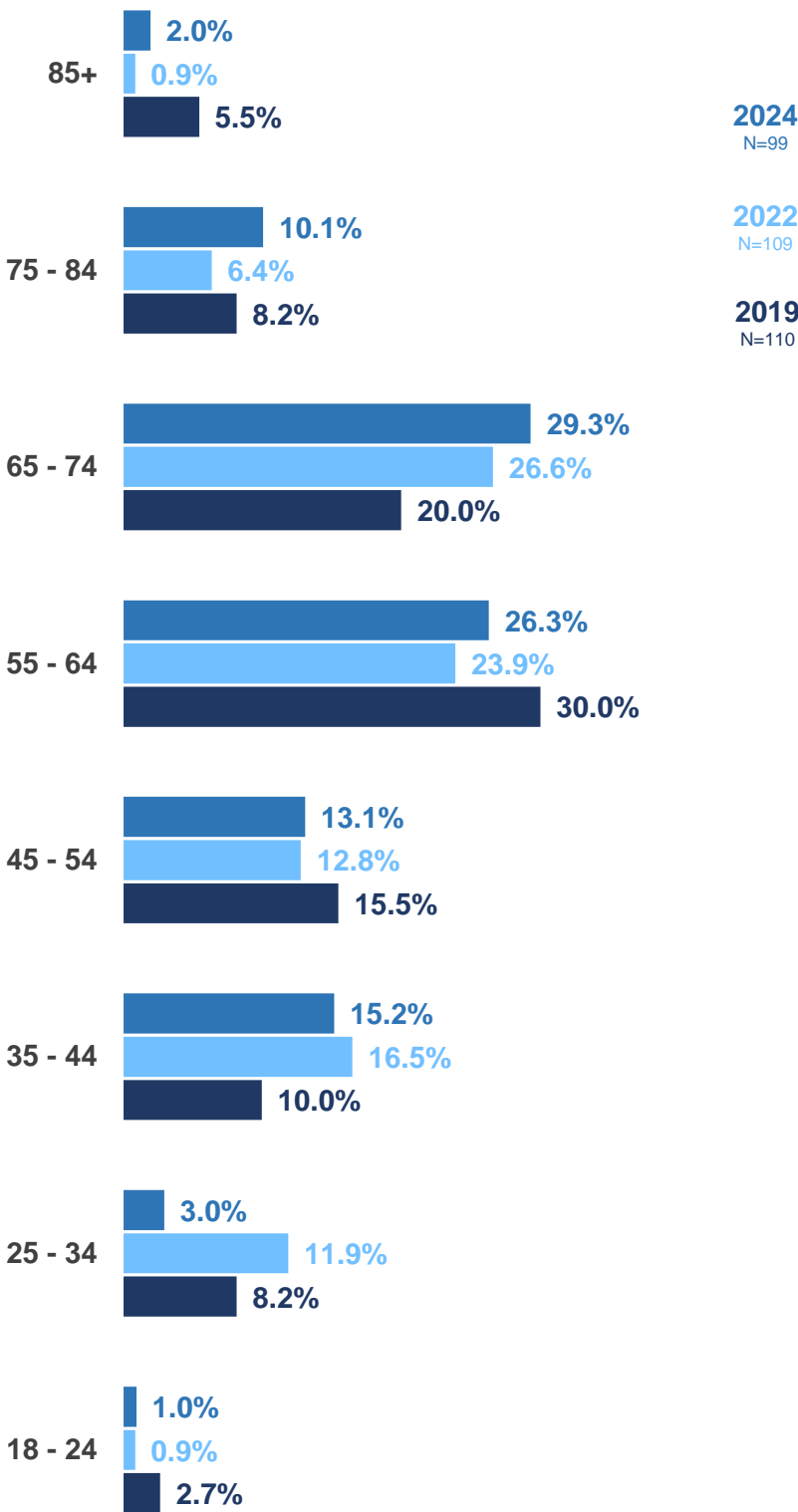
## Gender

Gender of respondents over the last three surveys:



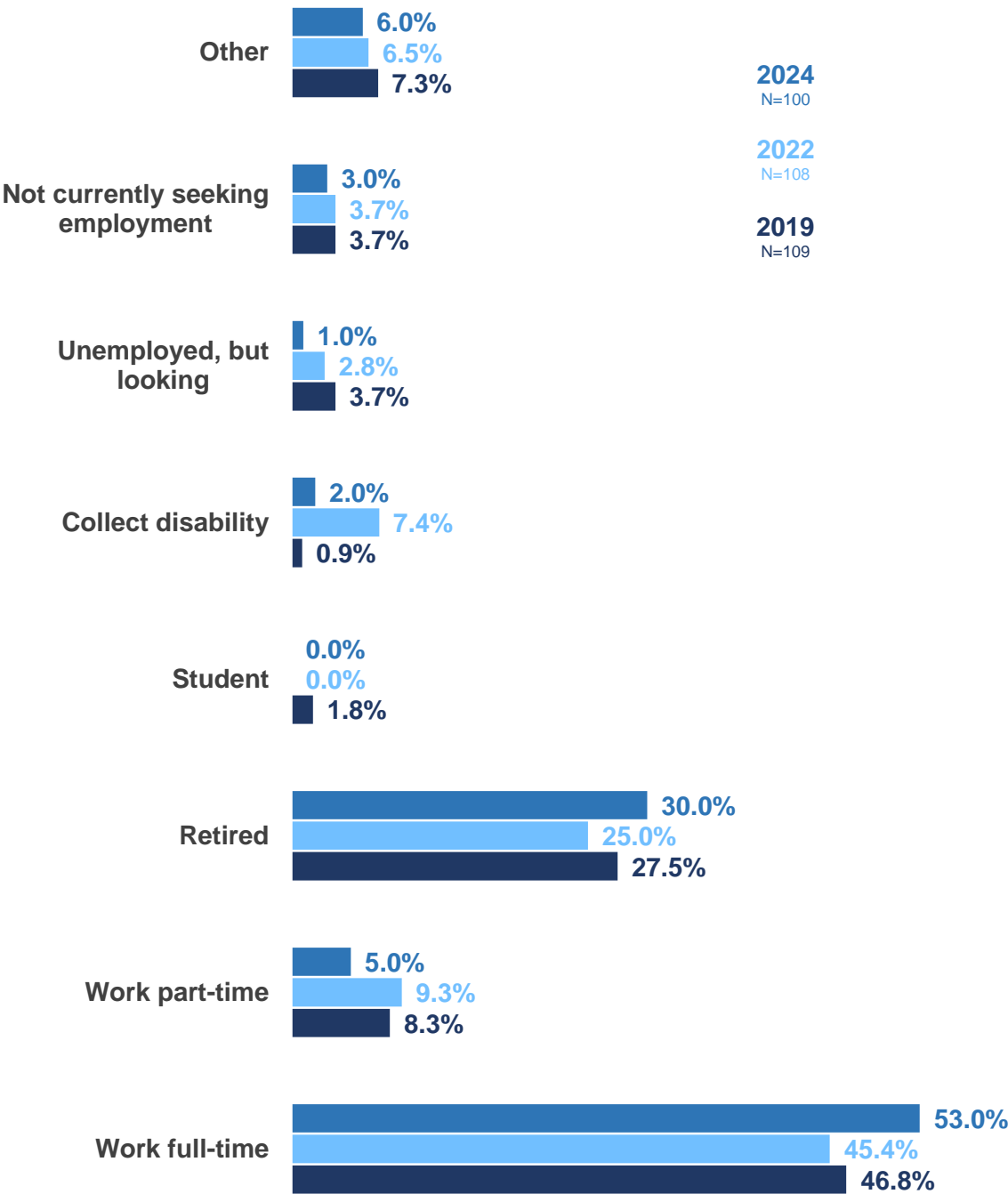


## Age of Respondents



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

# Employment Status of Respondents



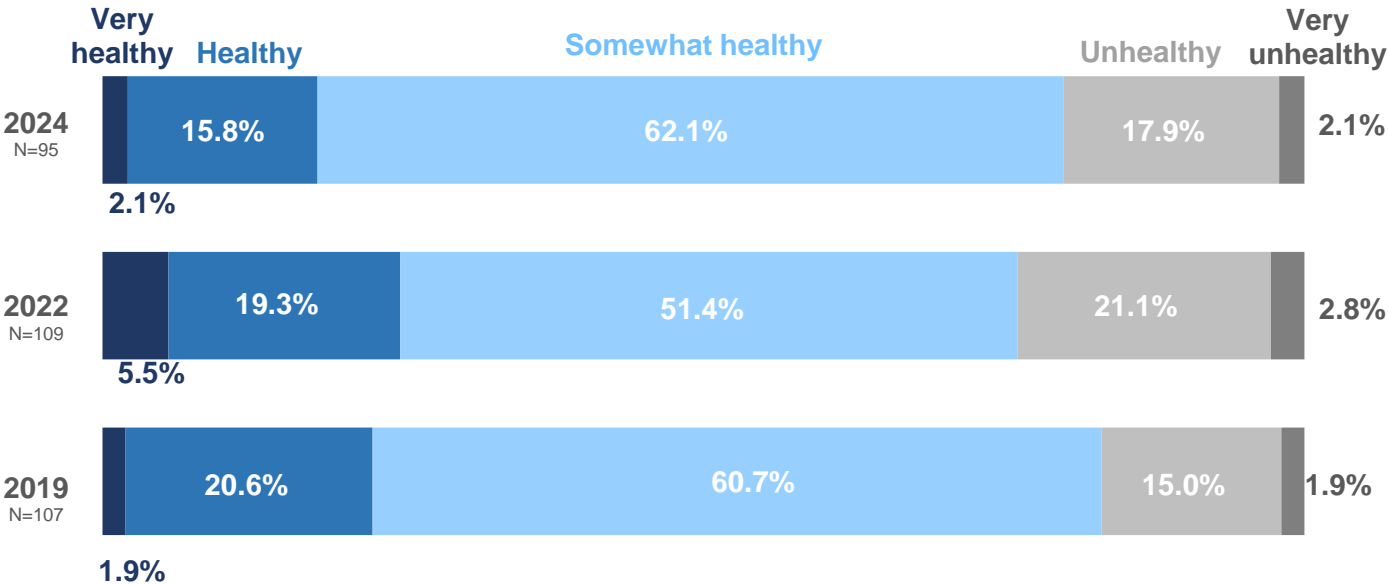


# **SURVEY RESULTS**

# Survey Results

## Rating of Healthy Community (Question 1)

Respondents were asked to indicate how they would rate the general health of their community. 62.1% of respondents (n=59) thought that their community was “Somewhat healthy,” followed by 17.9% (n=17) who thought it was “Unhealthy.” 15.8% (n=15) chose “Healthy,” while “Very healthy” and “Very unhealthy” were each indicated by 2.1% of respondents (n=2, each).



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

## Health Concerns for Community (Question 2)

Respondents were asked what they felt the three most serious health concerns were in their community. The top identified health concern was “Alcohol/substance abuse” at 59.6% (n=59), which has significantly decreased as a concern since the 2022 survey. “Cancer” was the second top concern at 32.3% (n=32), followed by “Diabetes” and “Mental health issues” both at 20.2% (n=20, each). “Work/economic stress” also increased in importance since the 2022 survey.

Health Concern	2019 % (n)	2022 % (n)	2024 % (n)	SIGNIFICANT CHANGE
Number of respondents	110	109	99	
Alcohol/substance abuse	80.0% (88)	78.0% (85)	59.6% (59)	■
Cancer	33.6% (37)	29.4% (32)	32.3% (32)	□
Diabetes	31.8% (35)	20.2% (22)	20.2% (20)	□
Mental health issues	16.4% (18)	21.1% (23)	20.2% (20)	□
Tobacco use (cigarettes/cigars, vaping, smokeless)	14.5% (16)	12.8% (14)	19.2% (19)	□
Overweight/obesity	25.5% (28)	15.6% (17)	16.2% (16)	□
Child abuse/neglect	16.4% (18)	18.3% (20)	12.1% (12)	□
Lack of access to healthcare	8.2% (9)	7.3% (8)	12.1% (12)	□
Work/economic stress		5.5% (6)	12.1% (12)	□
Depression/anxiety		14.7% (16)	10.1% (10)	□
Domestic violence	9.1% (10)	6.4% (7)	9.1% (9)	□
Lack of exercise	10.9% (12)	10.1% (11)	9.1% (9)	□
Housing security			7.1% (7)	□
Alzheimer’s/dementia	3.6% (4)	4.6% (5)	6.1% (6)	□
Trauma/Adverse Childhood Experiences (ACES)		8.3% (9)	6.1% (6)	□
Social isolation/loneliness	1.8% (2)	3.7% (4)	5.1% (5)	□
Respiratory issues/illness	5.5% (6)	3.7% (4)	4.0% (4)	□
Suicide	6.4% (7)	6.4% (7)	4.0% (4)	□
Heart disease	5.5% (6)	8.3% (9)	3.0% (3)	□
Lack of dental care	2.7% (3)	2.8% (3)	3.0% (3)	□
Sexually transmitted illness			3.0% (3)	□
Hunger	2.7% (3)	3.7% (4)	2.0% (2)	□
Motor vehicle accidents	3.6% (4)	1.8% (2)	2.0% (2)	□



Stroke	2.7% (3)	0.9% (1)	2.0% (2)	<input type="checkbox"/>
Work related accidents/injuries	1.8% (2)	0.0% (0)	1.0% (1)	<input type="checkbox"/>
Recreation related accidents/injuries	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other	5.5% (6)	6.4% (7)	5.1% (5)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to pick their top three serious health concerns, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. \*Respondents (N=5) who selected over the allotted amount were moved to “Other.”

“Other” comments included: “Misinformation about vaccines,” “COVID,” and “Politicalization”

**(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. 45.4% of respondents (n=44) indicated that “Access to healthcare” is the most important component for a healthy community, followed by “Good jobs and a healthy economy” at 39.2% (n=38). “Affordable housing” and “Low crime/safe neighborhoods” were tied at 27.8% (n=27, each), and “Clean environment” significantly increased as a component of a healthy community since 2022.

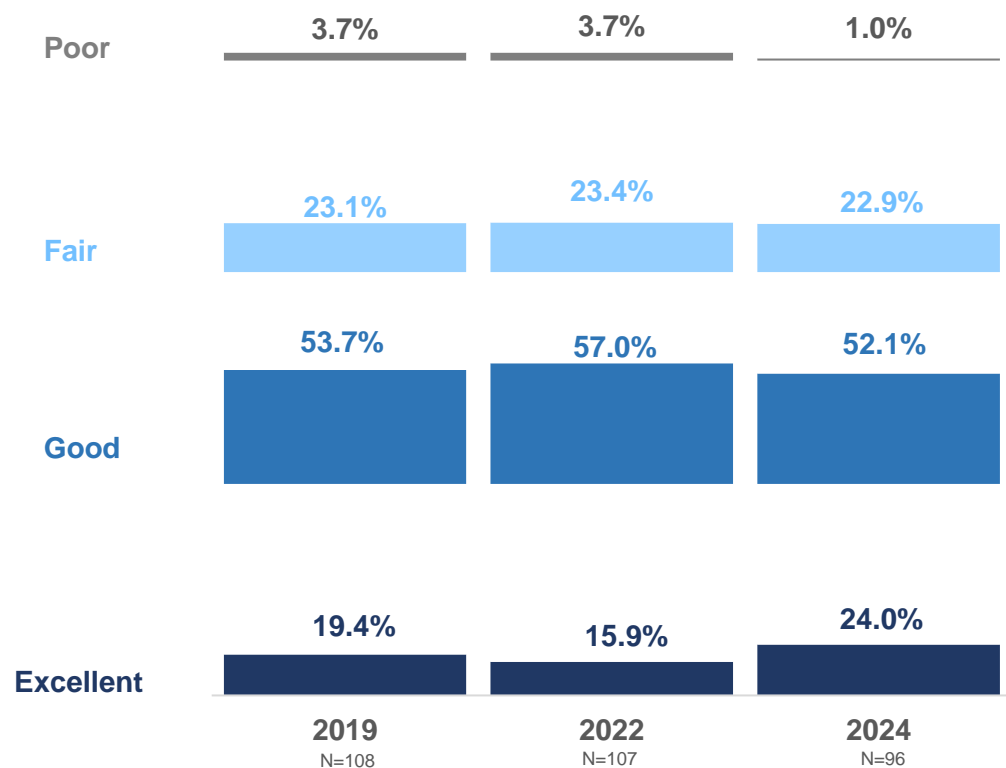
Components of a Healthy Community	2019 % (n)	2022 % (n)	2024 % (n)	SIGNIFICANT CHANGE
Number of respondents	110	110	97	
Access to healthcare services	29.1% (32)	39.1% (43)	45.4% (44)	<input checked="" type="checkbox"/>
Good jobs and a healthy economy	40.9% (45)	31.8% (35)	39.2% (38)	<input type="checkbox"/>
Affordable housing	11.8% (13)	15.5% (17)	27.8% (27)	<input checked="" type="checkbox"/>
Low crime/safe neighborhoods	30.0% (33)	20.9% (23)	27.8% (27)	<input type="checkbox"/>
Healthy behaviors and lifestyles	28.2% (31)	34.5% (38)	22.7% (22)	<input type="checkbox"/>
Strong family life	20.9% (23)	20.0% (22)	22.7% (22)	<input type="checkbox"/>
Access to healthy food options	15.5% (17)	8.2% (9)	16.5% (16)	<input type="checkbox"/>
Access to mental health services	18.2% (20)	19.1% (21)	16.5% (16)	<input type="checkbox"/>

Religious or spiritual values	13.6% (15)	19.1% (21)	16.5% (16)	<input type="checkbox"/>
Good schools	16.4% (18)	11.8% (13)	14.4% (14)	<input type="checkbox"/>
Clean environment	14.5% (16)	4.5% (5)	8.2% (8)	<input checked="" type="checkbox"/>
Community involvement	5.5% (6)	7.3% (8)	7.2% (7)	<input type="checkbox"/>
Access to childcare/after school programs	7.3% (8)	14.5% (16)	7.2% (7)	<input type="checkbox"/>
Home health services	8.2% (9)	6.4% (7)	5.2% (5)	<input type="checkbox"/>
Parks and recreation	4.5% (5)	5.5% (6)	5.2% (5)	<input type="checkbox"/>
Social support services	2.7% (3)	3.6% (4)	5.2% (5)	<input type="checkbox"/>
Tolerance for diversity	2.7% (3)	3.6% (4)	4.1% (4)	<input type="checkbox"/>
Low level of domestic violence	4.5% (5)	3.6% (4)	2.1% (2)	<input type="checkbox"/>
Welcoming community	1.8% (2)	3.6% (4)	2.1% (2)	<input type="checkbox"/>
Low death and disease rates	0.9% (1)	0.9% (1)	0.0% (0)	<input type="checkbox"/>
Arts and cultural events	0.0% (0)	1.8% (2)	0.0% (0)	<input type="checkbox"/>
Transportation services	3.6% (4)	4.5% (5)	0.0% (0)	<input type="checkbox"/>
Other	2.7% (3)	0.9% (1)	1.0% (1)	<input type="checkbox"/>

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

## Knowledge of Health Services (Question 4)

Respondents were asked to rate their knowledge of the health services available through Logan Health – Cut Bank. 52.1% of respondents (n=50) rated their knowledge of health services as “Good.” “Excellent” was selected by 24.0% percent (n=23), “Fair” was chosen by 22.9% of respondents (n=22), and “Poor” by 1% (n=1).



# How Respondents Learn of Health Services (Question 5)

The most frequently indicated methods of learning about available services were “Friends/family” and “Word of mouth/reputation,” both at 66.7% (n=66). “Healthcare provider” was also frequently used to learn about health services at 61.6% (n=61). “Newspaper,” “Social media/Facebook,” and “Radio” all decreased in utilization since the 2022 survey.

How Respondents Learn about Community Health Services	2019 % (n)	2022 % (n)	2024 % (n)	SIGNIFICANT CHANGE
Number of respondents	110	109	99	
Friends/family	65.5% (72)	56.0% (61)	66.7% (66)	<input type="checkbox"/>
Word of mouth/reputation	57.3% (63)	53.2% (58)	66.7% (66)	<input type="checkbox"/>
Healthcare provider	60.9% (67)	64.2% (70)	61.6% (61)	<input type="checkbox"/>
Newspaper	34.5% (38)	43.1% (47)	27.3% (27)	<input type="checkbox"/>
Social media/Facebook	18.2% (20)	33.9% (37)	27.3% (27)	<input checked="" type="checkbox"/>
Internet search	18.2% (20)	29.4% (32)	26.3% (26)	<input type="checkbox"/>
Mailings/newsletter	18.2% (20)	15.6% (17)	26.3% (26)	<input type="checkbox"/>
Local publications	25.5% (28)	22.9% (25)	21.2% (21)	<input type="checkbox"/>
Radio	10.0% (11)	23.9% (26)	17.2% (17)	<input checked="" type="checkbox"/>
Website	9.1% (10)	18.3% (20)	14.1% (14)	<input type="checkbox"/>
Television	11.8% (13)	11.9% (13)	12.1% (12)	<input type="checkbox"/>
Emergency response	12.7% (14)	11.0% (12)	10.1% (10)	<input type="checkbox"/>
Public Health	11.8% (13)	13.8% (15)	10.1% (10)	<input type="checkbox"/>
Presentations	4.5% (5)	5.5% (6)	5.1% (5)	<input type="checkbox"/>
Other	4.5% (5)	2.8% (3)	3.0% (3)	<input type="checkbox"/>

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

“Other” comments included: “Work,” “I am a nurse,” and “Have lived here 36 years and am involved in the community”

View a cross tabulation of how respondents learn with how they rate their knowledge on p. 81

## Utilized Community Health Resources (Question 6)

Respondents were asked which community health resources, other than the hospital or clinic, they had used in the last three years. “Pharmacy” was the most frequently utilized community health resource cited by respondents at 83.5% (n=81). The “Dentist” was utilized by 71.1% (n=69) of respondents, followed by “Optometrist” at 61.9% (n=60), an increase since 2022. The “Walking trail,” “Civic/fitness center,” and “Mental health” have all increased in use since 2022, while “Public health” decreased significantly.

Use of Community Health Resources	2019 % (n)	2022 % (n)	2024 % (n)	SIGNIFICANT CHANGE
Number of respondents	110	107	97	
Pharmacy	73.6% (81)	74.8% (80)	83.5% (81)	<input type="checkbox"/>
Dentist	76.4% (84)	72.9% (78)	71.1% (69)	<input type="checkbox"/>
Optometrist (eye doctor)	51.8% (57)	46.7% (50)	61.9% (60)	<input type="checkbox"/>
Walking trail	29.1% (32)	37.4% (40)	46.4% (45)	<input checked="" type="checkbox"/>
Chiropractor	38.2% (42)	29.9% (32)	36.1% (35)	<input type="checkbox"/>
Civic/fitness center	18.2% (20)	15.9% (17)	30.9% (30)	<input checked="" type="checkbox"/>
Pool	21.8% (24)	17.8% (19)	18.6% (18)	<input type="checkbox"/>
Senior center	14.5% (16)	6.5% (7)	14.4% (14)	<input type="checkbox"/>
Mental health	5.5% (6)	6.5% (7)	13.4% (13)	<input type="checkbox"/>
Public health	11.8% (13)	20.6% (22)	8.2% (8)	<input checked="" type="checkbox"/>
Food banks	10.0% (11)	11.2% (12)	4.1% (4)	<input type="checkbox"/>
Diabetes center	4.5% (5)	2.8% (3)	3.1% (3)	<input type="checkbox"/>
Home care services	2.7% (3)	0.0% (0)	2.1% (2)	<input type="checkbox"/>
Meals on Wheels	2.7% (3)	3.7% (4)	2.1% (2)	<input type="checkbox"/>
Substance abuse services	2.7% (3)	0.9% (1)	1.0% (1)	<input type="checkbox"/>
Transportation services	2.7% (3)	4.7% (5)	1.0% (1)	<input type="checkbox"/>
Other	2.7% (3)	4.7% (5)	5.2% (5)	<input type="checkbox"/>

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

“Other” comments included: “None” (2), “Massage therapist,” “Doctor,” and “VA clinic”



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

Respondents were asked to indicate what they felt would improve their community's access to healthcare. The most respondents (47.9%, n=46) reported that "More primary care providers" would make the greatest improvement. 42.7% of respondents (n=41) indicated "More specialists," followed by "Home health assistance" and "Payment assistance programs" tied at 37.5% (n=36, each). "Cultural sensitivity" significantly decreased in importance since 2022.

**"More primary care providers" would make the greatest improvement**

What Would Improve Community Access to Healthcare	2019 % (n)	2022 % (n)	2024 % (n)	SIGNIFICANT CHANGE
Number of respondents	110	104	96	
More primary care providers	36.4% (40)	40.4% (42)	47.9% (46)	<input type="checkbox"/>
More specialists	31.8% (35)	43.3% (45)	42.7% (41)	<input type="checkbox"/>
Home Health assistance	35.5% (39)	29.8% (31)	37.5% (36)	<input type="checkbox"/>
Payment assistance programs (healthcare expenses)		32.7% (34)	37.5% (36)	<input type="checkbox"/>
Expanded hours for clinic services	23.6% (26)	29.8% (31)	30.2% (29)	<input type="checkbox"/>
More information about available services	36.4% (40)	25.0% (26)	30.2% (29)	<input type="checkbox"/>
More mental health services	20.0% (22)	29.8% (31)	26.0% (25)	<input type="checkbox"/>
Financial assistance/counseling	26.4% (29)	26.0% (27)	22.9% (22)	<input type="checkbox"/>
Improved quality of care	26.4% (29)	31.7% (33)	20.8% (20)	<input type="checkbox"/>
Greater health education services	20.0% (22)	19.2% (20)	15.6% (15)	<input type="checkbox"/>
Transportation assistance	20.9% (23)	13.5% (14)	15.6% (15)	<input type="checkbox"/>
Telemedicine	10.9% (12)	20.2% (21)	14.6% (14)	<input type="checkbox"/>
Cultural sensitivity	12.7% (14)	15.4% (16)	4.2% (4)	<input checked="" type="checkbox"/>
Interpreter services	1.8% (2)	1.0% (1)	2.1% (2)	<input type="checkbox"/>
Other	7.3% (8)	8.7% (9)	3.1% (3)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to select any items that would improve community access to healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

**"Other"** comments included: "Respectful ER providers," "Not sure," and "Personable responsibility"

## 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 “Fitness” at 39.1% (n=34). Interest in “Weight loss” followed with 34.5% (n=30), then “Women’s health” at 32.2% (n=28). Interest declined notably since 2022 for “Health coaching/lifestyle management,” “First aid/CPR,” “Stress management,” “Men’s health,” “Cultural/traditional health,” “Smoking/tobacco cessation,” and “Alcohol/substance abuse.”

Interest in Classes or Programs	2019 % (n)	2022 % (n)	2024 % (n)
Number of respondents	110	98	87
Fitness	39.1% (43)	46.9% (46)	39.1% (34)
Weight loss	40.0% (44)	31.6% (31)	34.5% (30)
Women’s health	32.7% (36)	30.6% (30)	32.2% (28)
Living will	24.5% (27)	34.7% (34)	27.6% (24)
Nutrition/healthy foods	33.6% (37)	40.8% (40)	27.6% (24)
Health coaching/lifestyle management	32.7% (36)	41.8% (41)	25.3% (22)
Diabetes	17.3% (19)	23.5% (23)	23.0% (20)
First aid/CPR	22.7% (25)	36.7% (36)	23.0% (20)
Stress management	32.7% (36)	37.8% (37)	21.8% (19)
Budgeting/finances	17.3% (19)	19.4% (19)	18.4% (16)
Heart disease	11.8% (13)	9.2% (9)	13.8% (12)
Men’s health	14.5% (16)	25.5% (25)	13.8% (12)
Cancer	18.2% (20)	14.3% (14)	11.5% (10)
Mental health	16.4% (18)	18.4% (18)	11.5% (10)
Support groups	12.7% (14)	13.3% (13)	11.5% (10)
Alzheimer’s	15.5% (17)	7.1% (7)	10.3% (9)
Grief counseling	16.4% (18)	18.4% (18)	10.3% (9)
Cultural/traditional health	11.8% (13)	18.4% (18)	8.0% (7)
Parenting	10.0% (11)	9.2% (9)	6.9% (6)
Career development	9.1% (10)	11.2% (11)	4.6% (4)
Prenatal			3.4% (3)

Lactation/breastfeeding support			2.3% (2)
Smoking/tobacco cessation	5.5% (6)	10.2% (10)	2.3% (2)
Alcohol/substance abuse	11.8% (13)	9.2% (9)	0.0% (0)
Other	1.8% (2)	4.1% (4)	6.9% (6)

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

**“Other”** comments included: “None” (4), and “Bike trails”

## Utilization of Preventive Services (Question 9)

Respondents were asked if they had utilized any of the preventive services listed in the past year, and could select all services they had visited. “Eye exam” was selected by 74.7% of respondents (n=74), followed closely by “Blood pressure check” and “Dental check,” both at 69.7% (n=69, each). “Mammography” and “Yearly blood screening” utilization increased since 2022, while “Children’s checkup/Well baby” significantly declined since then.

Use of Preventive Services	2019 % (n)	2022 % (n)	2024 % (n)	SIGNIFICANT CHANGE
Number of respondents	110	107	99	
Eye exam	69.1% (76)	70.1% (75)	74.7% (74)	<input type="checkbox"/>
Blood pressure check	68.2% (75)	63.6% (68)	69.7% (69)	<input type="checkbox"/>
Dental check	71.8% (79)	66.4% (71)	69.7% (69)	<input type="checkbox"/>
Flu shot/immunizations	54.5% (60)	53.3% (57)	57.6% (57)	<input type="checkbox"/>
Health checkup	50.0% (55)	44.9% (48)	55.6% (55)	<input type="checkbox"/>
Yearly blood screening (birthday labs)	35.5% (39)	49.5% (53)	52.5% (52)	<input checked="" type="checkbox"/>
Cholesterol screening	41.8% (46)	36.4% (39)	48.5% (48)	<input type="checkbox"/>
Mammography	28.2% (31)	34.6% (37)	42.4% (42)	<input type="checkbox"/>
Pap test	20.0% (22)	16.8% (18)	22.2% (22)	<input type="checkbox"/>
Prostate (PSA)	11.8% (13)	14.0% (15)	21.2% (21)	<input type="checkbox"/>
Colonoscopy	18.2% (20)	15.9% (17)	18.2% (18)	<input type="checkbox"/>
Hearing exam	9.1% (10)	9.3% (10)	14.1% (14)	<input type="checkbox"/>
Mental health counseling	6.4% (7)	7.5% (8)	12.1% (12)	<input type="checkbox"/>
Health fair			11.1% (11)	<input type="checkbox"/>
Children’s checkup/Well baby	9.1% (10)	17.8% (19)	7.1% (7)	<input checked="" type="checkbox"/>
None	3.6% (4)	2.8% (3)	2.0% (2)	<input type="checkbox"/>

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

## Desired Local Health Services (Question 10)

Respondents were asked to indicate which additional services they would utilize if available locally. Respondents were most interested in “Dermatology” at 46.8% (n=37). “ENT (ear/nose/throat)” was the second most-desired service at 39.2% (n=37), though it saw a decrease in interest since 2022. Interest in “Oncology (cancer)” increased since the last survey, while “Ophthalmologist (eye disease),” “Surgery,” “Orthodontia (braces),” “Pediatrician (children),” and “Emergency mental health” all decreased, at times significantly.

Desired Local Healthcare Services	2019 % (n)	2022 % (n)	2024 % (n)
Number of respondents	110	96	79
Dermatology (skin)	30.0% (33)	41.7% (40)	46.8% (37)
ENT (ear/nose/throat)	28.2% (31)	43.8% (42)	39.2% (31)
Alternative medicine/Naturopath	21.8% (24)	32.3% (31)	29.1% (23)
Audiologist (hearing)	17.3% (19)	20.8% (20)	27.8% (22)
Nutrition/dietician	20.0% (22)	26.0% (25)	22.8% (18)
Rheumatology	16.4% (18)	13.5% (13)	16.5% (13)
Oncology (cancer)	5.5% (6)	6.3% (6)	15.2% (12)
Psychiatrist (mental health Dr.)	10.0% (11)	7.3% (7)	13.9% (11)
Home health assistance	21.8% (24)	13.5% (13)	11.4% (9)
Ophthalmologist (eye disease)	15.5% (17)	26.0% (25)	11.4% (9)
Surgery	9.1% (10)	19.8% (19)	11.4% (9)
Urology	10.9% (12)	17.7% (17)	8.9% (7)
Orthodontia (braces)	5.5% (6)	17.7% (17)	6.3% (5)
Medication management	8.2% (9)	6.3% (6)	3.8% (3)
Pediatrician (children)	9.1% (10)	17.7% (17)	3.8% (3)
Addictions counselor	4.5% (5)	7.3% (7)	2.5% (2)
Family planning (reproductive health)	7.3% (8)	6.3% (6)	2.5% (2)
Speech therapy	2.7% (3)	6.3% (6)	2.5% (2)
Emergency mental health	10.9% (12)	10.4% (10)	1.3% (1)



Other	3.6% (4)	8.3% (8)	8.9% (7)
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A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to pick all desired local healthcare services that are of interest, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “None” (3), “OB/GYN,” “Midwife, home birth option,” and “Back and bone specialist”

## Aspects of Community (Question 11)

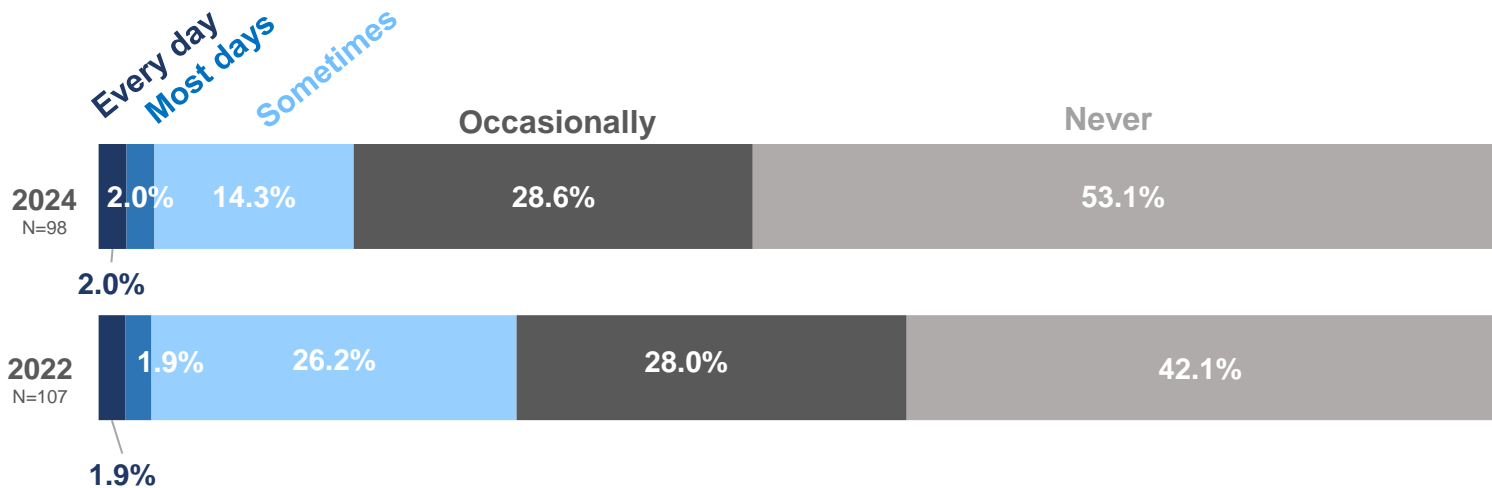
Respondents were asked to rate their level of agreement with a number of statements regarding aspects of the community. The scale given had the following options: 4 = “Strongly Agree”; 3 = “Agree”; 2 = “Disagree”; 1 = “Strongly Disagree”; and DK = “Don’t Know.” Most respondents showed agreement that “There are places to be physically active near my home,” which got a rating of 3.1 out of 4.0. The least agreement was over the statement that “My community is a good place to grow old,” which received a rating of 2.6 out of 4.0.

Rate Community - Glacier County	2024 Average (n)
Total number of respondents	99
There are places to be physically active near my home	3.1 (98)
My community is a good place to raise children	2.9 (97)
I can get the health care I need in Glacier County	2.7 (92)
I feel safe in my community	2.6 (99)
My community is a good place to grow old	2.6 (92)
Overall average	2.8 (473)

Respondents were asked to rate their community in Glacier County on a scale of 1 to 4 with 1 being Strongly Disagree, 2 being Disagree, 3 being Agree and 4 being Strongly Agree. A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Grayed out cells indicate the question was not asked that year.

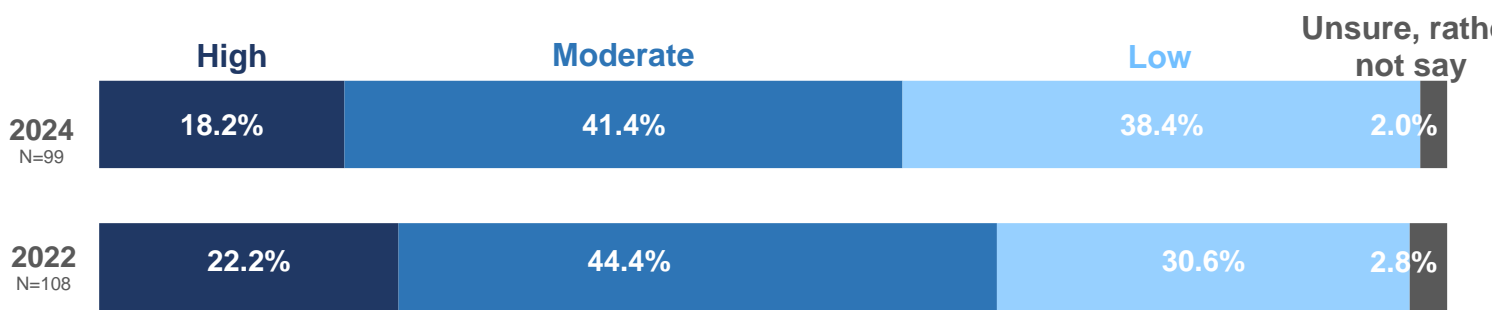
## Social Isolation (Question 12)

Respondents were asked to indicate how often they felt lonely or isolated in the past year. 53.1% of respondents (n=52) indicated they “Never” felt lonely or isolated, 28.6% of respondents (n=28) indicated they “Occasionally” (1-2 days per month) felt lonely or isolated, and 14.3% felt lonely or isolated “Sometimes,” meaning 3-5 days per month. 2.0% of respondents (n=2, each) felt lonely “Most days” or “Every day.”



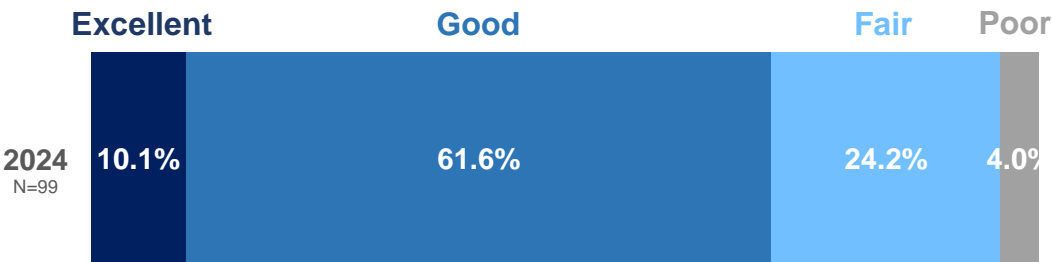
## Perception of Stress (Question 13)

Respondents were asked to indicate how they would describe their stress level over the past year. Most respondents indicated they felt “Moderate” levels of stress (41.4%, n=41), followed closely by “Low” stress at 38.4% (n=38). 18.2% of respondents said they had “High” stress levels (n=18), and 2.0% (n=2) were “Unsure, or would rather not say.”



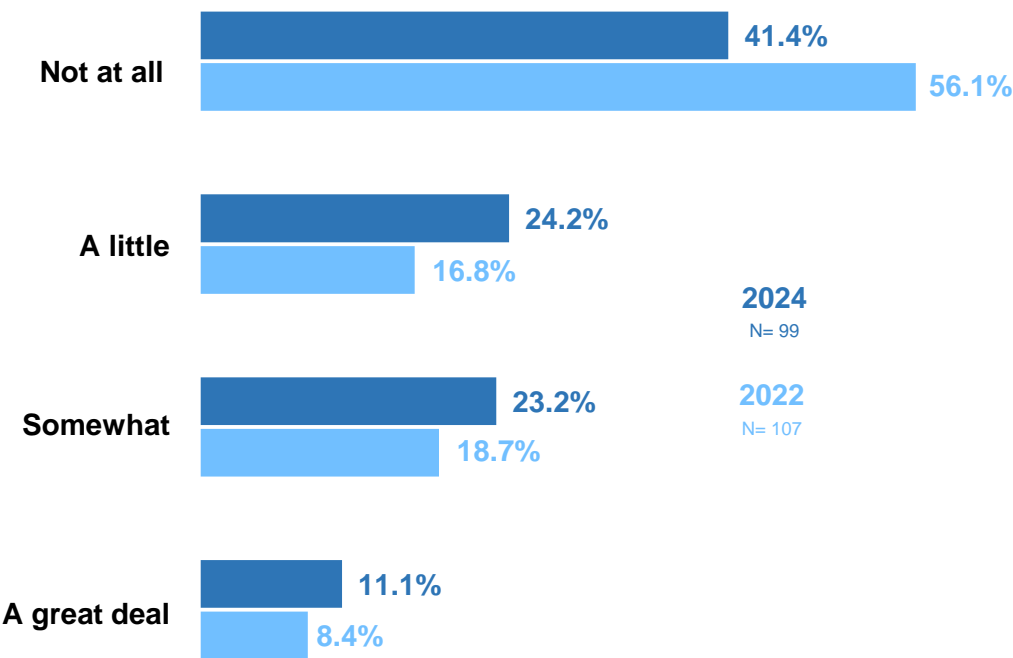
## Mental Health (Question 14)

Respondents were asked to rate their mental health in general, taking into account stress, anxiety, depression, and problems with emotions. The majority of respondents (61.6%, n=61), indicated their mental health was “Good.” 24.2% (n=24) thought theirs was “Fine,” 10.1% (n=10) chose “Excellent” mental health, and 4.0% (n=4) indicated their mental health was “Poor.”



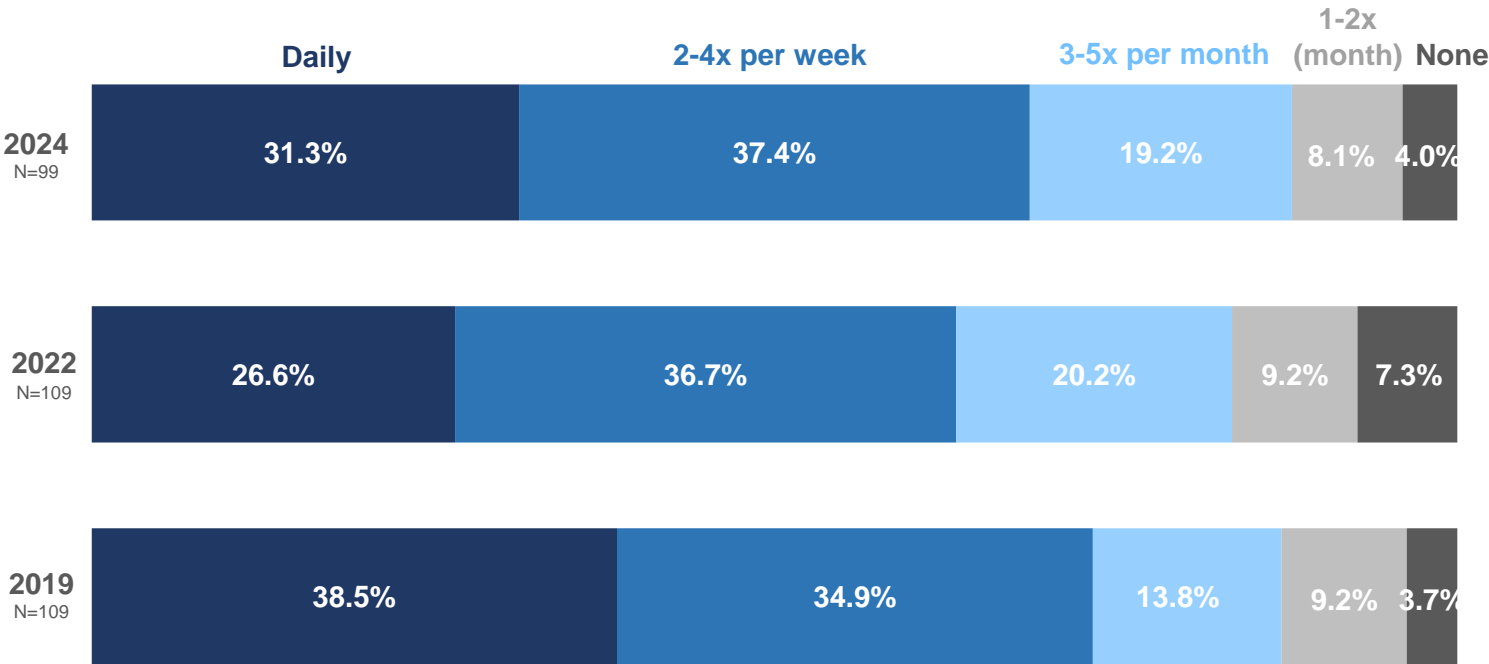
## Impact of Substance Abuse (Question 15)

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. 41.4% of respondents (n=41) indicated their life had “Not at all” been negatively affected by substance abuse, a notable decrease since 2022. 24.2% (n=24) said their lives were “A little” affected, 23.2% (n=23) were “Somewhat” affected, and the lives of 11.1% of respondents (n=11) were “A great deal” affected by substance abuse.



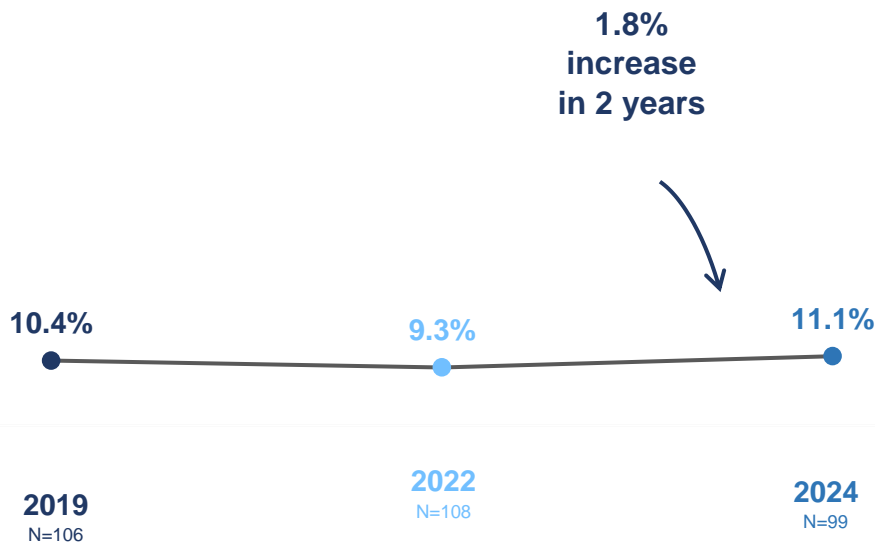
## Physical Activity (Question 16)

Respondents were asked to indicate how frequently they had physical activity for at least twenty minutes over the past month. 37.4% of respondents (n=37) had been physically active “2-4x per week” and 31.3% (n=31) got exercise “Daily,” which is slightly more than the 2022 survey respondents. 19.2% (n=19) were active “3-5x per month,” 8.1% (n=8) “1-2x per month,” and 4.0% of respondents (n=4) had not been physically active for more than 20 minutes in the last month.



## Prescription and Medication Cost (Question 17)

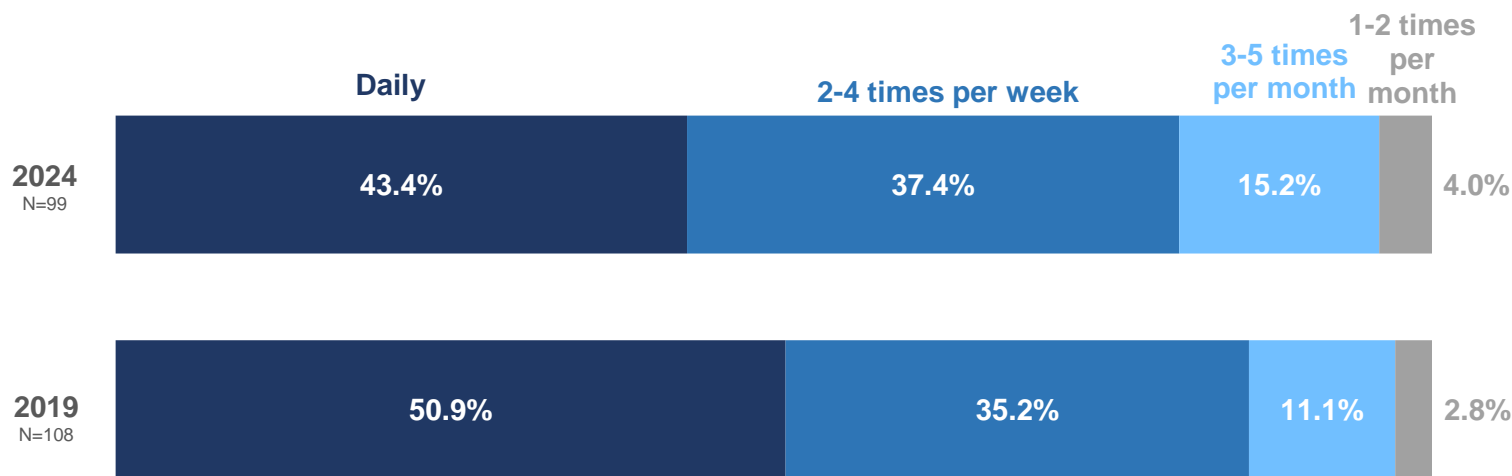
Respondents were asked to indicate if, during the last year, medication costs had prohibited them from getting a prescription or taking their medication regularly. 11.1% of respondents (n=11) indicated that cost had prevented them from getting their medication/prescription. 82.8% of respondents (n=82) said cost had not been prohibitive for them, and 6.1% (n=6) answered that the question was “Not applicable” to them.





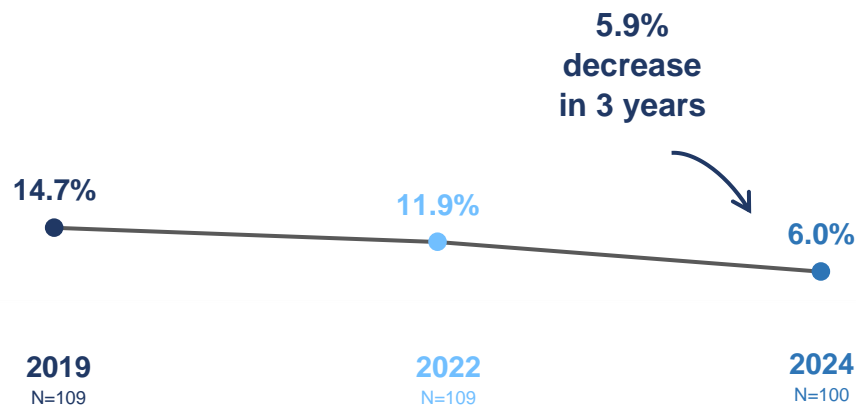
## Fruits and Vegetables (Question 18)

Respondents were asked to indicate how often in the last month they included fresh fruits and vegetables in their diet. Most respondents (43.4%, n=43) ate fresh produce “Daily,” and 37.4% (n=37) ate them “2-4 times per week.” 15.2% (n=15) included fresh produce in their diets “3-5 times per month” in the last month, and 4.0% (n=4) included them “1-2 times per month.” No respondents “Never” consumed fresh produce in the last month.



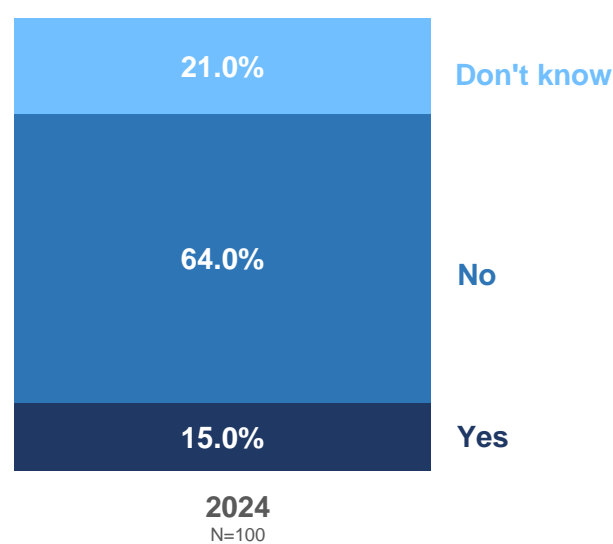
## Food Insecurity (Question 19)

Respondents were asked to indicate if, during the last year, they had worried that they would not have enough food to eat. The majority, 94.0% (n=94), were not worried, but 6.0% (n=6) were concerned about not having enough to eat.



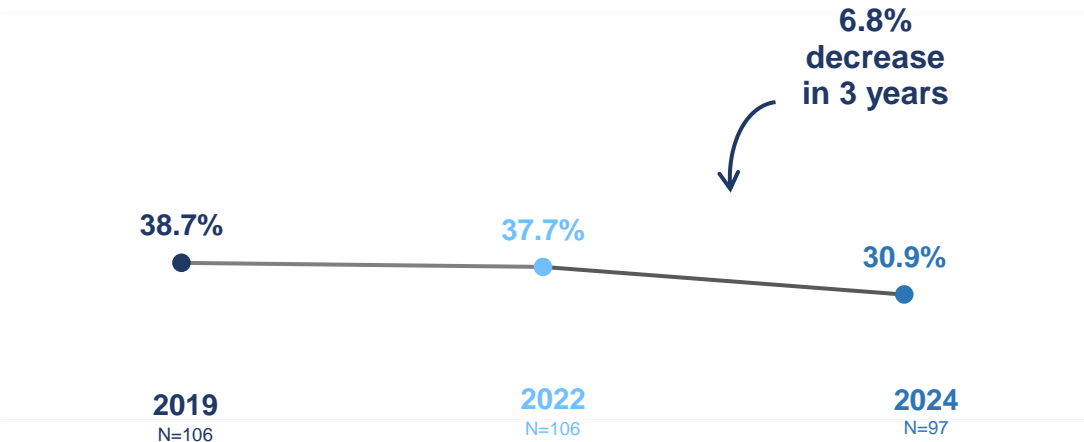
## Housing (Question 20)

Respondents were asked if they felt that the community has adequate and affordable housing options. The majority of respondents (64.0%, n=64) indicated they do not think affordable and adequate housing is prevalent, 21.0% (n=21) reported that they “Don’t know,” and 15.0% (n=15) thought that housing in the community was sufficient.



## Delay of Services (Question 21)

30.9% of respondents (n=30) 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. 69.1% of respondents (n=67) 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. 82

## Reason for Not Receiving/Delaying Needed Services (Question 22)

For those who indicated they were unable to receive or had to delay services (n=30), the most-cited reason was that a “Qualified provider was not available” (36.7%, n=11). Second was “Could not get an appointment” at 33.3% (n=10), followed by “Too long to wait for an appointment” at 30.0% (n=9). Reasons that increased notably since 2022 included “My insurance didn’t cover it,” “Didn’t know where to go,” and “It cost too much.”

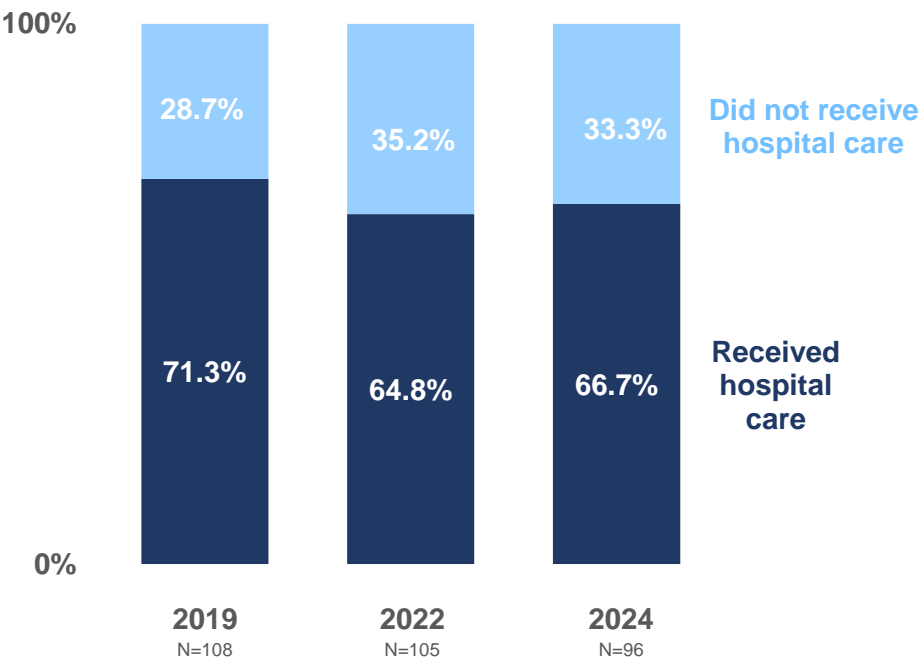
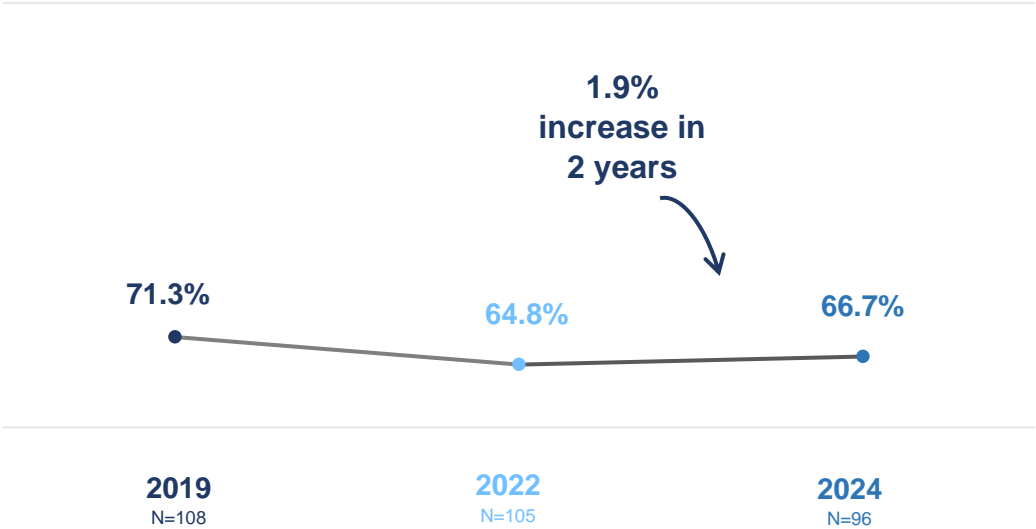
Reasons for Delay in Receiving Needed Healthcare	2019 % (n)	2022 % (n)	2024 % (n)	SIGNIFICANT CHANGE
Number of respondents	41	39	30	
Qualified provider not available		23.1% (9)	36.7% (11)	<input type="checkbox"/>
Could not get an appointment	17.1% (7)	23.1% (9)	33.3% (10)	<input type="checkbox"/>
Too long to wait for an appointment	22.0% (9)	25.6% (10)	30.0% (9)	<input type="checkbox"/>
My insurance didn’t cover it	12.2% (5)	5.1% (2)	23.3% (7)	<input type="checkbox"/>
Didn’t know where to go	4.9% (2)	0.0% (0)	16.7% (5)	<input checked="" type="checkbox"/>
It cost too much	34.1% (14)	5.1% (2)	16.7% (5)	<input checked="" type="checkbox"/>
Don’t like doctors	9.8% (4)	5.1% (2)	13.3% (4)	<input type="checkbox"/>
Office wasn’t open when I could go	12.2% (5)	17.9% (7)	13.3% (4)	<input type="checkbox"/>
Could not get off work	7.3% (3)	7.7% (3)	10.0% (3)	<input type="checkbox"/>
It was too far to go	24.4% (10)	25.6% (10)	10.0% (3)	<input type="checkbox"/>
Not treated with respect	12.2% (5)	2.6% (1)	6.7% (2)	<input type="checkbox"/>
Too nervous or afraid	19.5% (8)	5.1% (2)	6.7% (2)	<input type="checkbox"/>
Transportation problems	14.6% (6)	12.8% (5)	6.7% (2)	<input type="checkbox"/>
Unsure if services were available	0.0% (0)	7.7% (3)	6.7% (2)	<input type="checkbox"/>
Don’t understand healthcare system		2.6% (1)	3.3% (1)	<input type="checkbox"/>
No insurance	9.8% (4)	5.1% (2)	3.3% (1)	<input type="checkbox"/>
Had no childcare	4.9% (2)	5.1% (2)	0.0% (0)	<input type="checkbox"/>
Language barrier	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other	9.8% (4)	25.6% (10)	16.7% (5)	<input type="checkbox"/>

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

“Other” comments included: “Busy schedule” and “Surgery delayed and told no hospital bed because of no insurance”

## Hospital Care Services (Question 23)

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. 66.7% of respondents (n=64) reported that they or a member of their family had received hospital care during the previous three years, and 33.3% (n=32) had not received hospital services.



## Location of Hospital Services (Question 24)

Of the 64 respondents who indicated receiving hospital care in the last three years, 32.8% (n=21) reported receiving care at "Logan Health Cut Bank." 18.8% of respondents (n=12) received services at "Benefis – Great Falls," while 15.6% (n=10) utilized services at "Logan Health Medical Center – Kalispell."

Hospital Used Most Often	2019 % (n)	2022 % (n)	2024 % (n)
Number of respondents	77	68	64
Logan Health Cut Bank	29.9% (23)	25.0% (17)	32.8% (21)
Benefis - Great Falls	11.7% (9)	36.8% (25)	18.8% (12)
Logan Health Medical Center - Kalispell	15.6% (12)	11.8% (8)	15.6% (10)
Great Falls Clinic Hospital	2.6% (2)	4.4% (3)	6.3% (4)
Logan Health - Shelby	2.6% (2)	1.5% (1)	4.7% (3)
VA	1.3% (1)	0.0% (0)	3.1% (2)
Indian Health Services (IHS) - Browning	13.0% (10)	4.4% (3)	1.6% (1)
Logan Health - Whitefish	3.9% (3)	0.0% (0)	1.6% (1)
Logan Health - Conrad	0.0% (0)	1.5% (1)	0.0% (0)
Logan Health - Chester			0.0% (0)
Other	19.5% (15)	14.7% (10)	15.6% (10)
<b>TOTAL</b>	<b>100.0% (77)</b>	<b>100.0% (68)</b>	<b>100.0% (64)</b>

Grayed out cells indicate the question was not asked that year. \*Respondents (N=11) who selected over the allotted amount were moved to "Other." 1 respondent who selected "Other" did not provide a location for the hospital they visited, so their reply was left out of the analysis.

**"Other"** comments included: "Billings"

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

## Reasons for Hospital Selection (Question 25)

Of the 64 respondents who had a personal or family experience at a hospital within the past three years, the primary reason given for selecting the facility used most often was “Referred by physician or other provider” at 54.7% (n=35), and “Closest to home” was a close second at 48.4% (n=31). “VA/Military requirement” increased significantly as a reason for hospital selection since the 2022 survey, while “Financial assistance programs” decreased significantly since then.

Reasons for Selecting Hospital	2019 % (n)	2022 % (n)	2024 % (n)	SIGNIFICANT CHANGE
Number of respondents	77	68	64	
Referred by physician or other provider	45.5% (35)	42.6% (29)	54.7% (35)	<input type="checkbox"/>
Closest to home	42.9% (33)	47.1% (32)	48.4% (31)	<input type="checkbox"/>
Emergency, no choice	19.5% (15)	29.4% (20)	29.7% (19)	<input type="checkbox"/>
Prior experience with hospital	44.2% (34)	36.8% (25)	29.7% (19)	<input type="checkbox"/>
Hospital’s reputation for quality	22.1% (17)	23.5% (16)	20.3% (13)	<input type="checkbox"/>
Recommended by family or friends	11.7% (9)	13.2% (9)	12.5% (8)	<input type="checkbox"/>
VA/Military requirement	3.9% (3)	0.0% (0)	9.4% (6)	<input checked="" type="checkbox"/>
Closest to work	10.4% (8)	4.4% (3)	4.7% (3)	<input type="checkbox"/>
Cost of care	7.8% (6)	2.9% (2)	3.1% (2)	<input type="checkbox"/>
Required by insurance plan	2.6% (2)	0.0% (0)	3.1% (2)	<input type="checkbox"/>
Privacy/confidentiality		2.9% (2)	1.6% (1)	<input type="checkbox"/>
Financial assistance programs	2.6% (2)	8.8% (6)	0.0% (0)	<input checked="" type="checkbox"/>
Other	7.8% (6)	20.6% (14)	3.1% (2)	<input checked="" type="checkbox"/>

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

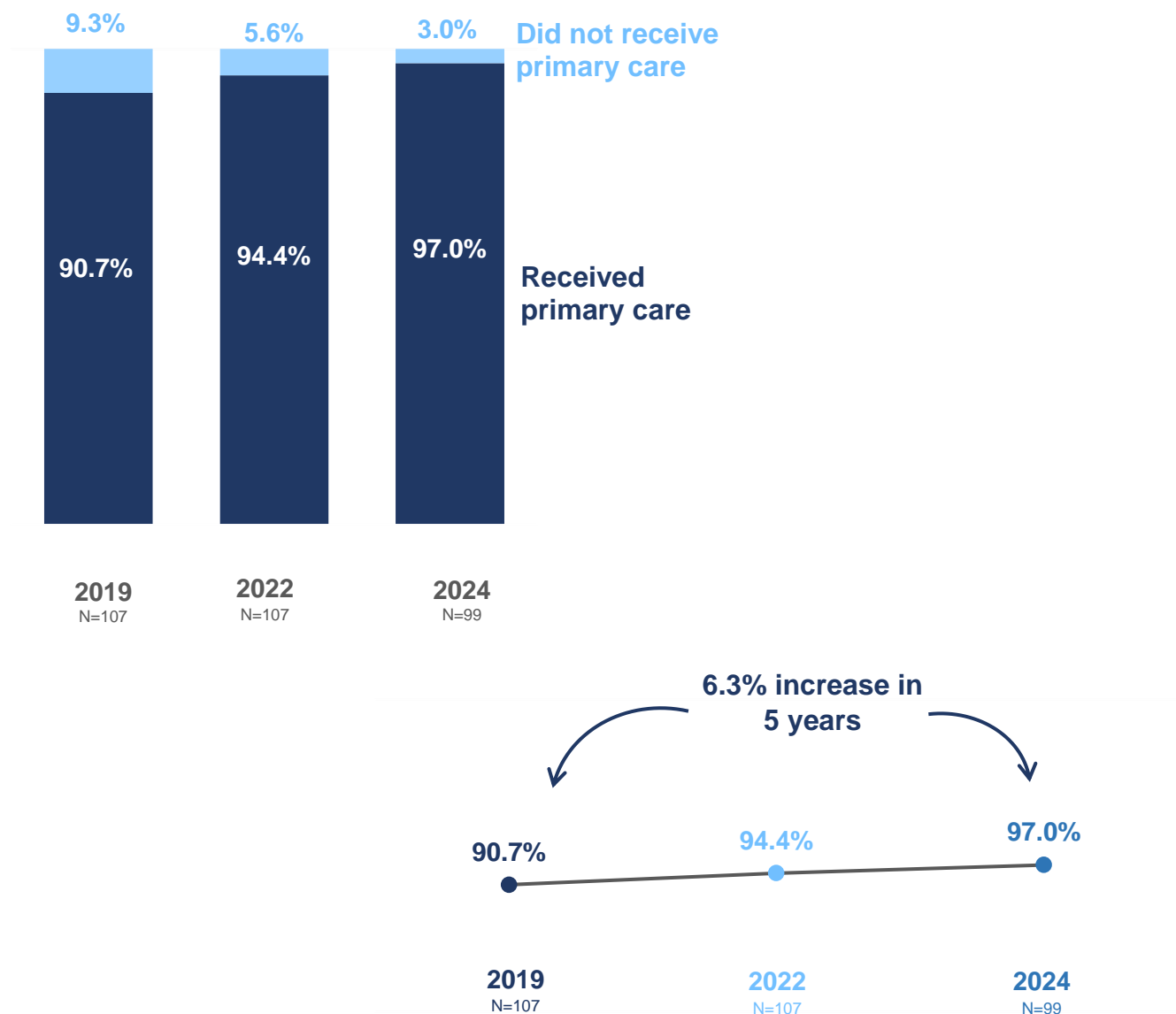
“Other” comments included: “No other option” and “Had the required doctors”

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



## Primary Care Services (Question 26)

97.0% of respondents (n=96) 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. 3.0% of respondents (n=3) indicated they had not received primary care.



## Location of Primary Care Services (Question 27)

Of the 96 respondents who indicated receiving primary care services in the previous three years, 61.5% (n=59) reported receiving care in Cut Bank. 7.3% (n=7) went to Great Falls and 6.3% (n=6) went to Shelby. Browning and Kalispell were both visited by 6.3% of respondents (n=5, each).

Location of Primary Care Provider	2019 % (n)	2022 % (n)	2022 % (n)
Number of respondents	97	99	96
Cut Bank	55.7% (54)	61.6% (61)	61.5% (59)
Great Falls	4.1% (4)	6.1% (6)	7.3% (7)
Shelby	5.2% (5)	9.1% (9)	6.3% (6)
Browning	12.4% (12)	8.1% (8)	5.2% (5)
Kalispell	4.1% (4)	2.0% (2)	5.2% (5)
Conrad	2.1% (2)	5.1% (5)	2.1% (2)
VA	2.1% (2)	0.0% (0)	2.1% (2)
Chester			0.0% (0)
Heart Butte	0.0% (0)	0.0% (0)	0.0% (0)
Sunburst	0.0% (0)	0.0% (0)	0.0% (0)
Valier	1.0% (1)	0.0% (0)	0.0% (0)
Whitefish			0.0% (0)
Other	13.4% (13)	8.1% (8)	10.4% (10)
<b>TOTAL</b>	<b>100.0% (97)</b>	<b>100.0% (99)</b>	<b>100.0% (96)</b>

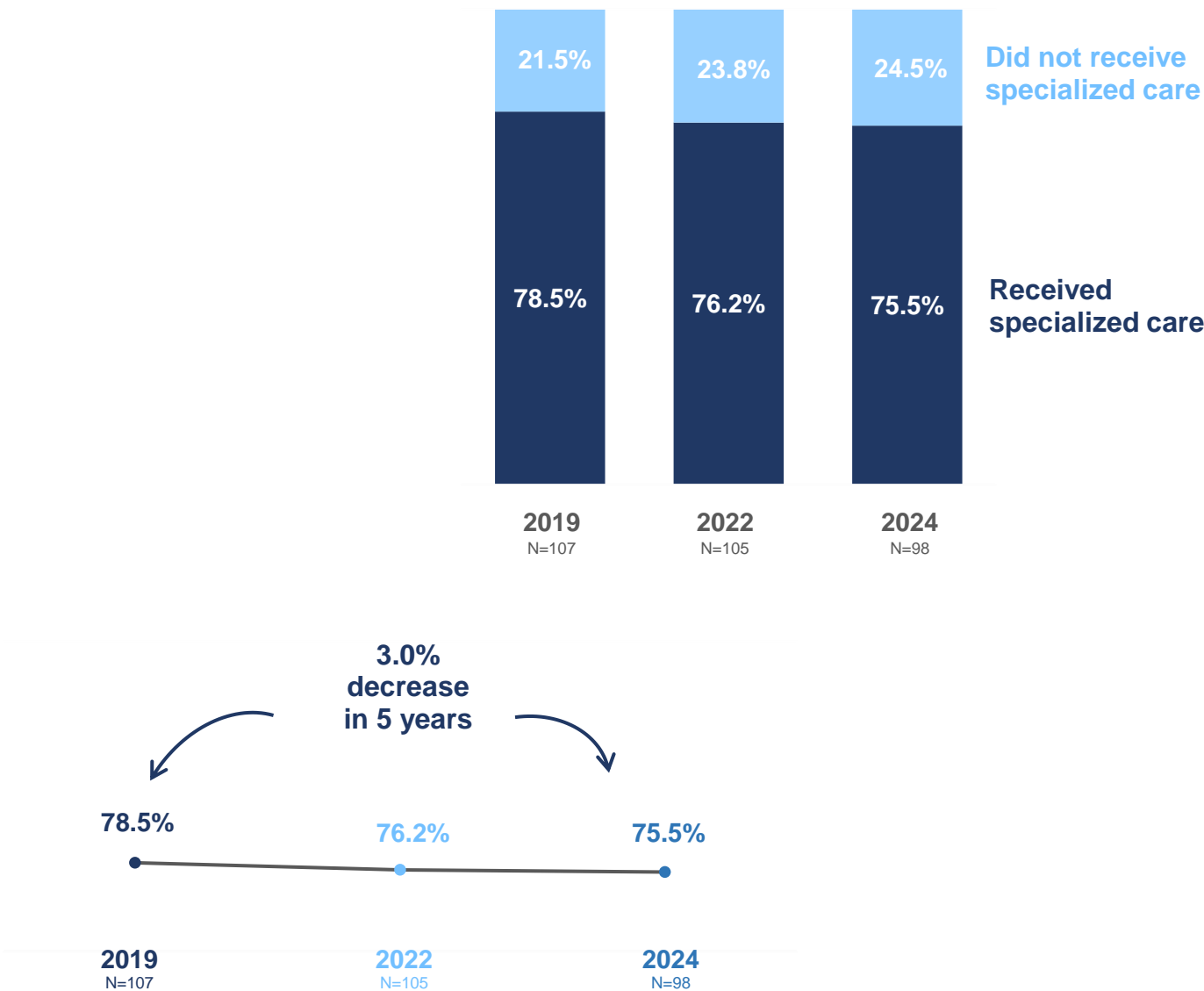
Grayed out cells indicate the question was not asked that year. \*Respondents (N=7) who selected over the allotted amount were moved to "Other."

**"Other"** comments included: "Helena" (2) and "20% of Family uses Cut Bank. 80% uses Browning"

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

## Specialty Care Services (Question 28)

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. 75.5% of the respondents (n=74) indicated they or a household member had seen a healthcare specialist during the past three years, while 24.5% (n=24) indicated they had not.



## Location of Healthcare Specialist(s) (Question 29)

Of the 74 respondents who indicated they saw a healthcare specialist in the past three years, 63.5% (n=47) sought care in Great Falls, and 40.5% of respondents (n=30) utilized specialty services in Kalispell. 31.3% (n=13) saw a specialist in Cut Bank, which is a significant increase since the previous survey. Respondents could select more than one location, so percentages do not equal 100%.

Location of Specialist	2019 % (n)	2022 % (n)	2024 % (n)	SIGNIFICANT CHANGE
Number of respondents	84	80	74	
Great Falls	63.1% (53)	73.8% (59)	63.5% (47)	<input type="checkbox"/>
Kalispell	45.2% (38)	40.0% (32)	40.5% (30)	<input type="checkbox"/>
Cut Bank	28.6% (24)	13.8% (11)	31.1% (23)	<input checked="" type="checkbox"/>
Shelby	8.3% (7)	16.3% (13)	12.2% (9)	<input type="checkbox"/>
Conrad	2.4% (2)	2.5% (2)	8.1% (6)	<input type="checkbox"/>
Whitefish	2.4% (2)	3.8% (3)	8.1% (6)	<input type="checkbox"/>
Helena	4.8% (4)	3.8% (3)	5.4% (4)	<input type="checkbox"/>
Browning	11.9% (10)	2.5% (2)	4.1% (3)	<input checked="" type="checkbox"/>
Other	9.5% (8)	2.5% (2)	12.2% (9)	<input checked="" type="checkbox"/>

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

“Other” comments included: “Billings” (3), “Bozeman,” and “Missoula”

***(View all comments in Appendix G)***

## Type of Healthcare Specialist Seen (Question 30)

The respondents (n=74) saw a wide array of healthcare specialists in the past two years. The most frequently utilized specialist was the “Dentist” at 33.8% (n=25). “Optometrist” visits increased since 2022 to 23.0% (n=17) for this year’s survey. “Cardiologist” and “Gastroenterologist” were also popular, at 20.3% (n=15) and 18.9% (n=14) respectively. Visits to “Ophthalmologist (medical/eye surgery)” and “Radiologist” also increased notably since 2022. Respondents were asked to choose all that apply, so percentages do not equal 100%.

Type of Specialists Seen	2019 % (n)	2022 % (n)	2024 % (n)	SIGNIFICANT CHANGE
Number of respondents	84	80	74	
Dentist	28.6% (24)	28.7% (23)	33.8% (25)	<input type="checkbox"/>
Optometrist (eye)	15.5% (13)	11.3% (9)	23.0% (17)	<input type="checkbox"/>
Cardiologist	22.6% (19)	21.3% (17)	20.3% (15)	<input type="checkbox"/>
Gastroenterologist	11.9% (10)	15.0% (12)	18.9% (14)	<input type="checkbox"/>
OB/GYN	14.3% (12)	15.0% (12)	18.9% (14)	<input type="checkbox"/>
Ophthalmologist (medical/surgical eye)	14.3% (12)	7.5% (6)	17.6% (13)	<input type="checkbox"/>
Dermatologist	19.0% (16)	23.8% (19)	16.2% (12)	<input type="checkbox"/>
Radiologist	10.7% (9)	8.8% (7)	16.2% (12)	<input type="checkbox"/>
Orthopedic surgeon	20.2% (17)	16.3% (13)	14.9% (11)	<input type="checkbox"/>
Physical therapist	13.1% (11)	8.8% (7)	14.9% (11)	<input type="checkbox"/>
Audiologist	7.1% (6)	5.0% (4)	13.5% (10)	<input type="checkbox"/>
Chiropractor	17.9% (15)	7.5% (6)	12.2% (9)	<input type="checkbox"/>
Oncologist	6.0% (5)	7.5% (6)	12.2% (9)	<input type="checkbox"/>
Urologist	17.9% (15)	17.5% (14)	12.2% (9)	<input type="checkbox"/>
ENT (ear/nose/throat)	13.1% (11)	8.8% (7)	10.8% (8)	<input type="checkbox"/>
Neurologist	9.5% (8)	10.0% (8)	9.5% (7)	<input type="checkbox"/>
General surgeon	10.7% (9)	11.3% (9)	8.1% (6)	<input type="checkbox"/>
Mental health counselor	8.3% (7)	5.0% (4)	8.1% (6)	<input type="checkbox"/>
Allergist	11.9% (10)	3.8% (3)	6.8% (5)	<input type="checkbox"/>

Podiatrist (foot)	7.1% (6)	7.5% (6)	6.8% (5)	<input type="checkbox"/>
Pulmonologist (lung)	13.1% (11)	6.3% (5)	6.8% (5)	<input type="checkbox"/>
Rheumatologist	6.0% (5)	6.3% (5)	5.4% (4)	<input type="checkbox"/>
Endocrinologist (diabetes)	8.3% (7)	3.8% (3)	4.1% (3)	<input type="checkbox"/>
Neurosurgeon	6.0% (5)	6.3% (5)	2.7% (2)	<input type="checkbox"/>
Psychiatrist (M.D.)	1.2% (1)	1.3% (1)	2.7% (2)	<input type="checkbox"/>
Occupational therapist	2.4% (2)	2.5% (2)	1.4% (1)	<input type="checkbox"/>
Pediatrician	3.6% (3)	5.0% (4)	1.4% (1)	<input type="checkbox"/>
Psychologist	1.2% (1)	1.3% (1)	1.4% (1)	<input type="checkbox"/>
Speech therapist	0.0% (0)	1.3% (1)	1.4% (1)	<input type="checkbox"/>
Substance abuse counselor	1.2% (1)		1.4% (1)	<input type="checkbox"/>
Dietician		0.0% (0)	0.0% (0)	<input type="checkbox"/>
Geriatrician	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Licensed Addiction Counselor		1.3% (1)	0.0% (0)	<input type="checkbox"/>
Social worker	2.4% (2)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other	8.3% (7)	15.0% (12)	10.8% (8)	<input type="checkbox"/>

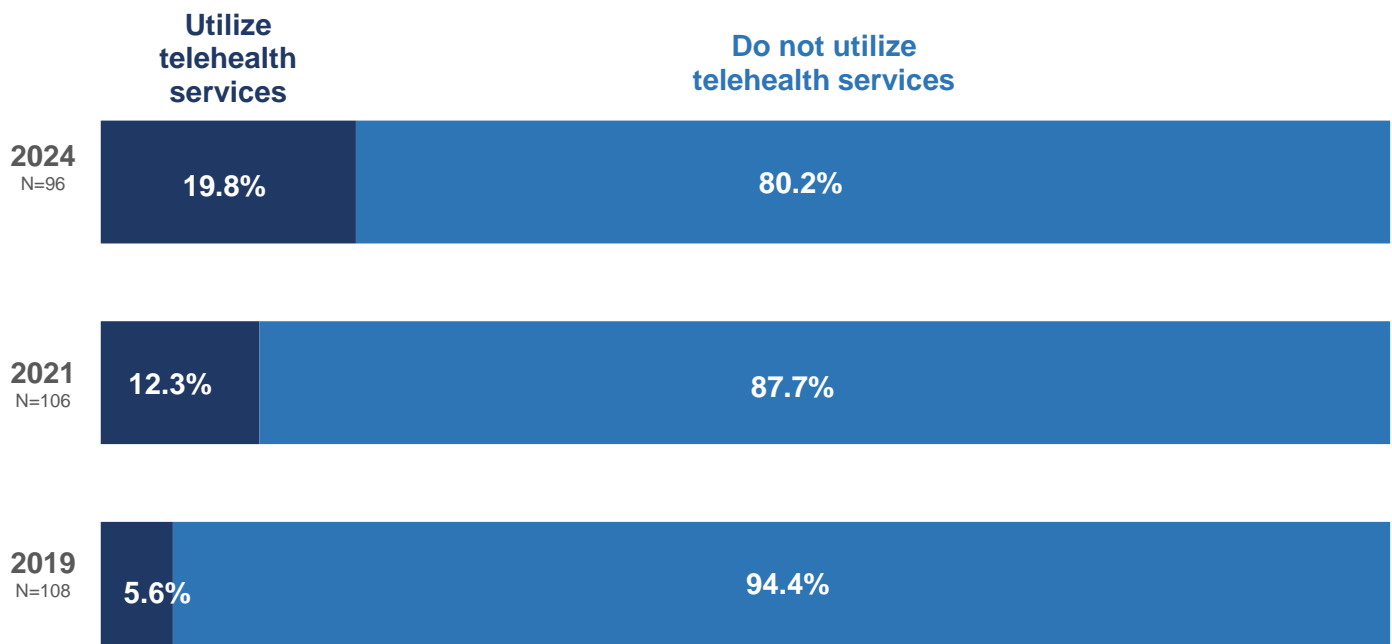
A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to indicate each type of specialist seen, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

**“Other”** comments included: “Nephrologist” (2), “Pediatric urologist,” and “Midwife”

***(View all comments in Appendix G)***

## Use of Telehealth (Question 31)

Respondents were asked to indicate if they currently use telehealth services. The majority of respondents, 80.2% (n=77), did not utilize telehealth services. 19.8% of respondents (n=19), however, did utilize telehealth services in the past year.



## Overall Quality of Care through Logan Health Cut Bank (Question 32)

Respondents were asked to rate various services available through Logan Health Cut Bank using the scale of 4= Excellent, 3= Good, 2= Fair, 1=Poor, and Haven't Used. The services that received the highest score were the "Other outpatient services," "Telehealth," and "Radiology" (3.4, 3.3, and 3.2, out of 4.0, respectively). Overall, the average rating on quality and availability of the health services listed was 3.0 out of 4.0.

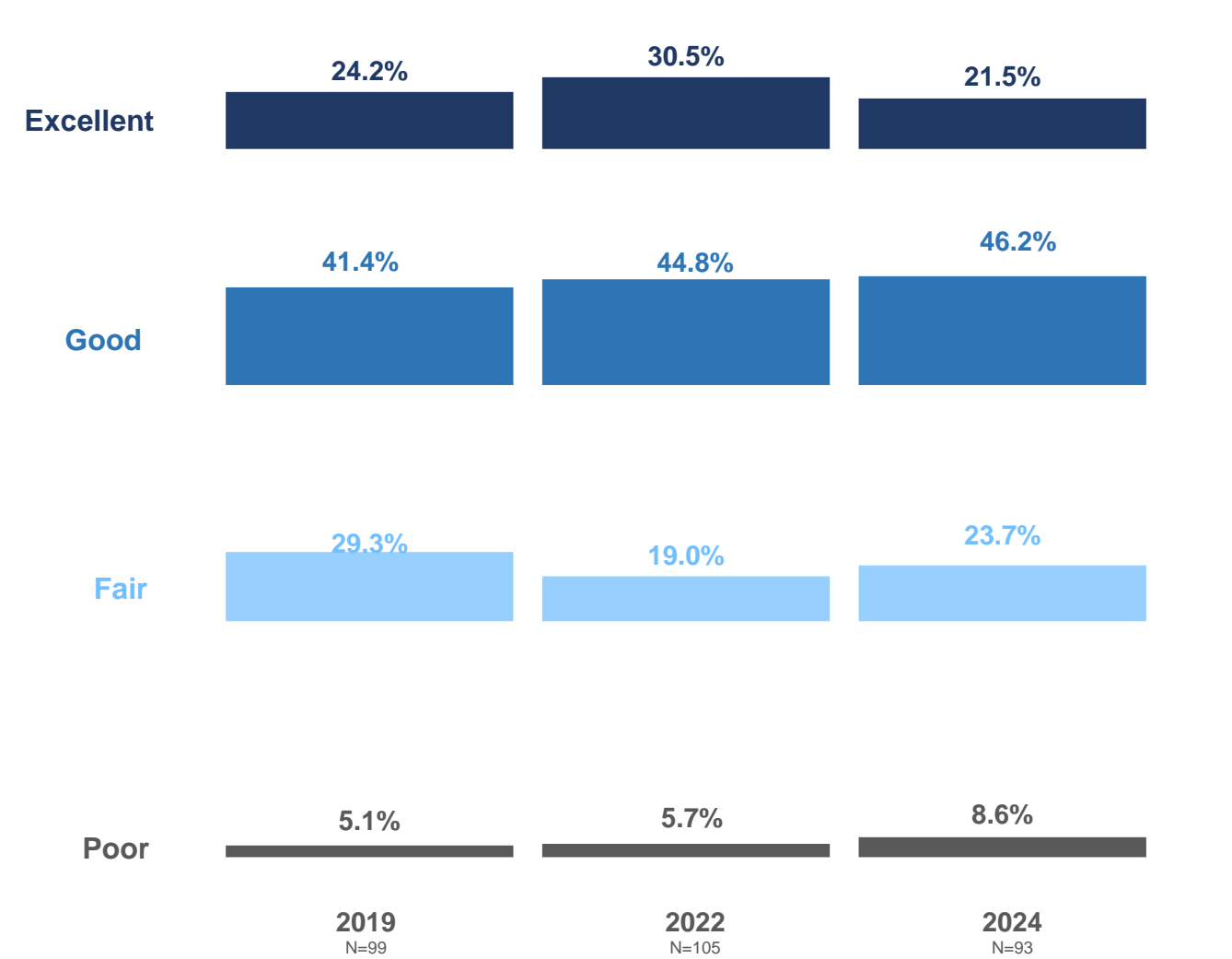
Quality of Care Rating at Logan Health – Cut Bank	2019 Average (n)	2022 Average (n)	2024 Average (n)	SIGNIFICANT CHANGE
Total number of respondents	88	88	86	
Other outpatient services (infusion, wound care)	3.1 (15)	2.9 (15)	3.4 (11)	<input type="checkbox"/>
Telehealth	2.8 (5)	3.0 (8)	3.3 (6)	<input type="checkbox"/>
Radiology	3.3 (47)	3.2 (58)	3.2 (44)	<input type="checkbox"/>
Laboratory	3.3 (73)	3.3 (68)	3.1 (70)	<input type="checkbox"/>
Physical therapy	3.0 (24)	3.0 (26)	3.1 (36)	<input type="checkbox"/>
Behavioral health		2.8 (12)	3.1 (16)	<input type="checkbox"/>
Specialist services (ortho, heart, dermatology, etc.)	3.0 (28)	2.8 (22)	3.1 (15)	<input type="checkbox"/>
Surgical services	2.4 (9)	2.6 (11)	3.1 (11)	<input type="checkbox"/>
OB/GYN	3.3 (12)	3.0 (22)	3.1 (7)	<input type="checkbox"/>
Clinic services	3.1 (61)	3.1 (72)	3.0 (64)	<input type="checkbox"/>
Swing bed/Transitional care	2.5 (6)	2.8 (6)	2.8 (4)	<input type="checkbox"/>
Emergency room	3.0 (61)	2.7 (54)	2.6 (53)	<input checked="" type="checkbox"/>
<b>Overall average</b>	<b>3.1 (376)</b>	<b>3.0 (411)</b>	<b>3.0 (337)</b>	<input type="checkbox"/>

Respondents were asked to rate the quality of care at Logan Health - Cut Bank on a scale of 1 to 4 with 1 being Poor, 2 being Fair, 3 being Good and 4 being Excellent. A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Grayed out cells indicate the question was not asked that year.



## Insurance and Healthcare Costs (Question 33)

Respondents were asked to indicate how well they felt their health insurance covers their healthcare costs. 46.2% of respondents (n=43) indicated they felt their insurance covers a “Good” amount of their healthcare costs. 23.7% of respondents (n=21) indicated they felt their insurance covered a “Fair” amount, and 21.5% (n=20) indicated they felt their insurance covered an “Excellent” amount of their health costs. 8.6% of respondents (n=8) felt their insurance provided “Poor” coverage of their costs.



## Barriers to Having Insurance (Question 34)

Respondents, if they did not have health insurance, were asked why. The top reasons selected for not having insurance was “Can’t afford to pay for health insurance” and “Employer does not offer insurance.” Respondents could select all that apply.

Reasons for No Health Insurance	2024 % (n)
Number of respondents	18
Can’t afford to pay for health insurance	33.3% (6)
Employer does not offer insurance	5.6% (1)
Choose not to have health insurance	5.6% (1)
Too confusing/don’t know how to apply	0.0% (0)
Other	61.1% (11)

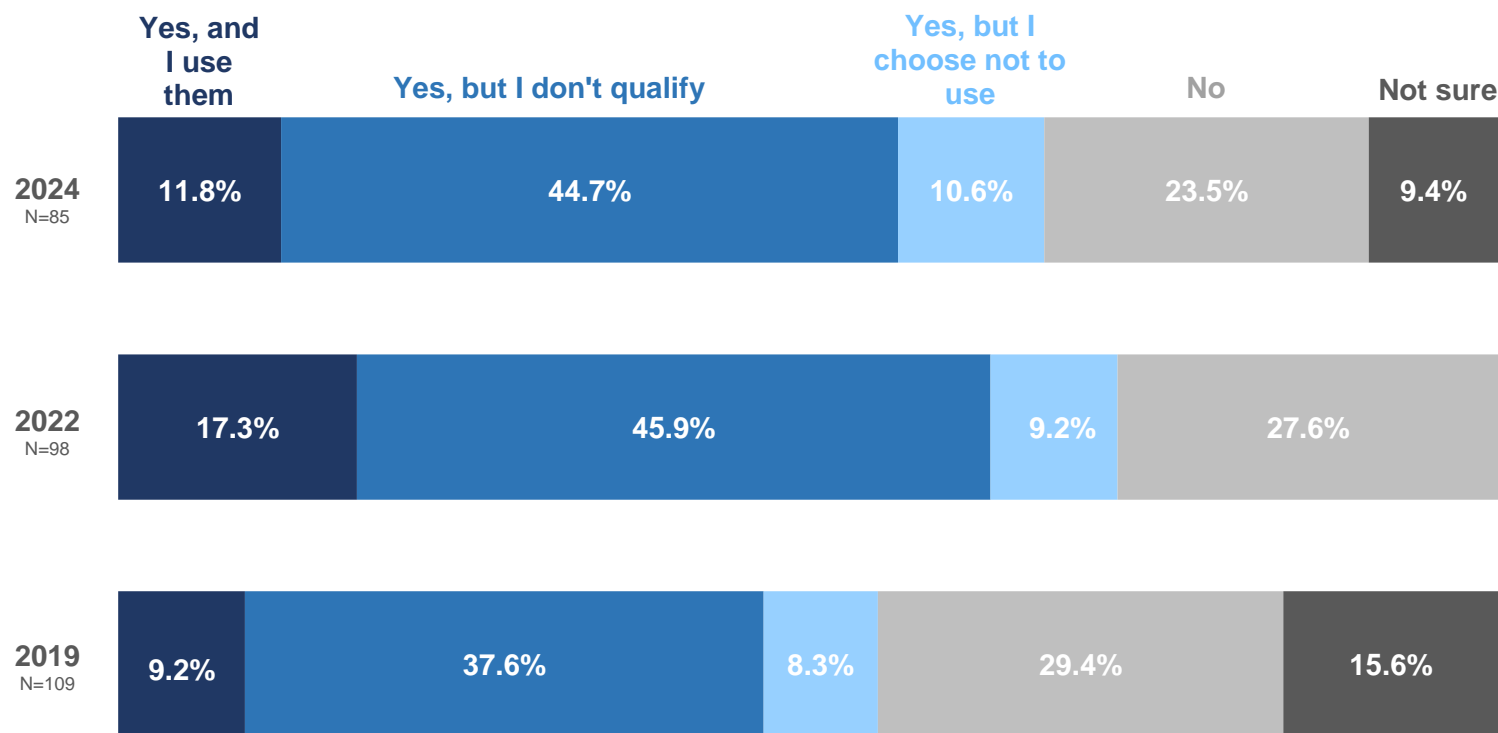
Respondents were asked to select any reason for being uninsured that applied, so percentages do not equal 100%.

“Other” comments included: “Medicare” (3), “IHS,” “It is cheapest to pay out of pocket”

*(View all comments in Appendix G)*

## Awareness of Health Cost Assistance Programs (Question 35)

Respondents were asked to indicate their awareness of programs that help people pay for healthcare bills. 44.7% of respondents (n=38) indicated they were aware of these programs but did not qualify to utilize them, while 23.5% (n=20) indicated that they were not aware of health cost assistance programs.





# **KEY INFORMANT RESULTS**

# Key Informant Interviews

## Key Informant Interviews: Methodology

Five key informant interviews were conducted in March-April 2024. Participants were identified as people living in Logan Health – Cut Bank’s service area.

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



## Key Informant Interviews: 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.



### SUBSTANCE USE

The prevalence and negative effects of alcohol and drug use were brought up in every interview. Each interviewee described widespread substance use problems in the community, and expressed frustration with its visibility and pervasiveness. Multiple negative views of the opioid rehabilitation clinic were also expressed, alongside extreme frustration with the prevalence of opioid use.



### RECREATION RESOURCES

Across all interviews, health education, nutrition, and fitness were identified as areas of improvement for the community. Most interviewees mentioned the need for more indoor recreation opportunities to sustain fitness throughout the winter. There was also high interest in education about healthy lifestyles, nutrition and healthy eating, diabetes prevention, and exercise.



## WORKFORCE

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The interviewees identified the need for more staffing across care facilities. They said that the one primary care provider at the clinic does a fantastic job, but that one provider for an entire community is not sustainable for the provider or the community. Additional nurses and other staff in the clinic/hospital are also needed. Senior care is another area that could use more staffing; creation of a home health service could help alleviate burden on the hospital and nursing home, and the nursing home and senior center could always use more help, both with providers and all other staff.



## SERVICES NEEDED IN THE COMMUNITY

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- Better communication about existing resources
- Resource information hub/clearinghouse
- Mental and behavioral health counseling
- Behavioral specialists in schools
- Crisis center
- Substance use resources
- Home health services
- Senior center & nursing home staffing
- STI education
- Hospital/clinic staffing





# **EXECUTIVE SUMMARY**

## Executive Summary

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

Areas of Opportunity	Secondary Data	Survey	Interviews
<b>Access to Healthcare Services</b>			
<i>More primary care providers</i>	⊗	✓	☑
<i>Specialty services (i.e., urgent care, pediatrics, and women's health)</i>	⊗	✓	☑
<i>Awareness of available services (i.e., traveling specialists)</i>		✓	☑
<i>Affordability and insurance</i>	⊗	✓	☑
<i>Home health</i>		✓	☑
<i>Expanded clinic hours</i>		✓	
<b>Chronic Disease Prevention</b>			
<i>Cancer</i>		✓	☑
<i>Diabetes</i>	⊗	✓	☑
<i>Nutrition: Access to affordable produce and education</i>	⊗	✓	☑
<i>Overweight/obesity/physical inactivity</i>	⊗	✓	☑
<i>Health education: weight loss, fitness, health &amp; wellness, nutrition</i>		✓	☑
<i>Indoor recreation resources</i>			☑
<b>Mental and Behavioral Health</b>			
<i>More mental health services/resources</i>	⊗	✓	☑
<i>Alcohol/substance abuse</i>	⊗	✓	☑
<i>Stress management</i>		✓	



### Health Measures

<i>Vaccination [i.e., HPV up-to-date (UTD), vaccine preventable diseases]</i>	⊗		
<i>Adolescent birth rate</i>	⊗		
<i>Cancer screenings</i>	⊗	✓	☑
<i>STI rates</i>	⊗		☑

### Neighborhood and Built Environment

<i>Good jobs</i>	✓
<i>Affordable housing</i>	✓
<i>Clean environment</i>	✓



# **NEXT STEPS & RESOURCES**

## Prioritization of Health Needs

The community steering committee, comprised of staff leaders from Logan Health – Cut Bank (LHCB) and community members from Glacier County, convened to begin an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through the Community Health Services Development (CHSD) Process.

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

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

Logan Health – Cut Bank will determine which needs or opportunities could be addressed considering LHCB'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.

- 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

# Evaluation of Previous CHNA & Implementation Plan

Logan Health Cut Bank provided the Montana Office of Rural Health with an update on their Implementation Plan activities from their previous CHNA process. The LHCB Board of Directors approved its previous implementation plan in December 2022. The plan prioritized the following health issues:

- Community Coordination and Collaboration
- Mental and behavioral health
- Health and wellness

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

[logan.org/cutbank](https://logan.org/cutbank).

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***Goal 1: Improve access to, and awareness of, available resources and services through enhanced coordination and collaboration with community partners.***

	Activities	Accomplishments	Community Impact/Outcomes
<b>Strategy 1.1: Enhance Logan Health Cut Bank's coordination and collaboration efforts among area partners to enhance access to healthcare and community resources.</b>	Enhance the web-based resource page and look to further expand and develop the Logan Health Cut Bank website.	Added a Community Resource page to the website and information on Montana 211. Created and distributed community resource magnets.	Increased awareness of community health resources and improved access to care.
	Develop a health resource, education, and outreach plan.	Plan addressed opportunities for education and outreach with community partners.	Enhanced community collaboration.
	Produce and distribute a biannual publication inclusive of the local health resources available.	Marketing began mailers for "Report to the Community" quarterly. Created and distributed community resource magnets.	Increased community collaboration and awareness of resources.

	Develop a regional outreach and community relations plan for Logan Health including strategies related to health education.	Developed a regional committee to discuss upcoming community relations and community health outreach.	Increased collaboration at events across the region.
	Assemble a community network comprised of healthcare entities in the Cut Bank area. Host quarterly meetings to discuss community health challenges and opportunities.	Met with Tribe and other community organizations quarterly to collaborate on community health challenges and strategies.	Increased community collaboration and awareness of resources.
	Develop a charter for the community health network to be formed in the Logan Health Cut Bank service area.	Partnerships have been formed with other health providers in the community.	While partnerships have been formed, a network was no longer identified as a need due to ongoing collaborative work.

***Goal 2: Enhance access to mental and behavioral health services in Glacier County.***

	Activities	Accomplishments	Community Impact/Outcomes
<b>Strategy 2.1: Explore opportunities to improve local mental and behavioral health resources and services.</b>	Collaborate with Logan Health system partners to explore the feasibility of recruiting hiring a Licensed Addictions Counselor (LAC).	Still working to hire an LAC. Developed the Behavioral Health toolbox to support this work in the meantime.	Utilized toolbox for mental health first aid at schools, for employees and patients. An LAC is still a need in the community.
	Provide staff training on youth and teen mental health first aid.	Provided Mental Health First Aid to the entire Sophomore class in Cut Bank.	Increased education and awareness in the schools for mental health.
	Collaborate with Logan Health system partners to explore the feasibility of contracting with a psychiatrist or psychiatric nurse	Worked with Montana Pediatrics and Logan Health System to provide additional psychiatric support for patients. and	Increase access to specialty care for mental health.

	practitioner to open the opportunity of telemental health options locally.		
	Identify viable screening tools for substance use issues [ex. Screening, Brief Intervention and Referral to Treatment (SBIRT)].	Developed SBIRT toolbox and process for inpatient and outpatient settings.	Expanded focus on mental health support and documentation for patients.
	Collaborate with Logan Health system partners – particularly Logan Health Conrad and Shelby – to explore and enhance local mental and behavioral health referral options.	Worked with Montana Pediatrics and Logan Health System to provide additional psychiatric support for patients. Opened up School-Based Health Clinic with a half-day per week of behavioral health services.	Increase access to specialty care for mental health.
	Define and develop care coordination protocols for behavioral health.	Working with Logan Health System and Tribal Health to develop protocols for behavioral health.	Expanded access and outreach between local partners to create standard protocol for behavioral health patients.

***Goal 3: Enhance Logan Health Cut Bank programs and services that promote health and wellness in Glacier County.***

	<b>Activities</b>	<b>Accomplishments</b>	<b>Community Impact/Outcomes</b>
<b>Strategy 3.1: Increase knowledge and access to programs and services that improve population health.</b>	Continue to host and support chronic disease prevention programming (ex. Annual Health Fair, associated screenings, lifestyle management programs).	We offered an annual Kids Health Fair, annual Community Health Fair, Preventative Health Screenings with UM IPHARM, hosted local blood drives with American Red Cross and offered a senior	Increased awareness of community health resources, and improved access and education. Both health fairs had over 250 community members in attendance in partnership with over

		education series at the Senior Center.	20 local community resources.
	Develop a health promotion outreach plan for chronic disease management.	Developed a health promotion outreach plan and created preventative health postcards.	Improve access to care and encourage regular preventative health screenings for chronic disease management.
	Identify the most effective modes of communication for health education.	Further developed web resource page, created resource magnet. Partnered with the School District and Health Department.	Improve access to care and knowledge of local resources available.
	Explore health promotion opportunities for collaboration with tribal health entities.	Meeting Quarterly to discuss health promotion opportunities. Partnering for local health fairs.	Reduce disease burden and improve collaboration between communities.
<b>Strategy 3.2: Explore opportunities to enhance Logan Health Cut Bank care coordination and population health efforts</b>	Explore the feasibility of managing preventive health screenings through care coordination services.	Created preventative health follow-up cards due to no care coordination. Will have more capabilities with new EHR.	Improve health accessibility and education for preventative health services.
	Determine the demand for expanding the worksite wellness program among local employers.	Continued to host school district wellness screenings and expand health fair opportunities. Unlikely to expand the program at this time, working with the health department to partner on additional outreach.	Inability to expand program due to resources and FTE's. Offered DPP program and additional health fair to community.
	Research the suitability for expanding the worksite wellness program among LHCB employees.	Created a regional worksite wellness group to expand opportunities for employees across the Hi-Line.	Increased access for health and wellness for employees.
	Explore the creation of a single lifestyle	Created and implemented the	Improved health outcomes and access to



	management program, meeting national guidelines and standards for chronic disease prevention and management programs.	National Diabetes Prevention Program	preventative health programs.
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# APPENDICES

# Appendix A – Steering Committee

Steering Committee Member	Organizational Affiliation
Cherie Taylor	President Logan Health – Cut Bank & Chester
Treasure Berkram	Chief Financial Officer, Logan Health – Cut Bank
Crystal Losing	Chief Nursing Officer, Logan Health – Cut Bank
Heather Nunn	Clinic Manager, Logan Health – Cut Bank
Josey Smiedala	Program Manager, Logan Health – Cut Bank
Rachel Dosch	Human Resources, Logan Health – Cut Bank and Chamber of Cut Bank
Nina Mckenzie	Executive Assistant, Logan Health – Cut Bank
Ashley Kimmet, LCPC	Director of Behavioral Health, Logan Health – Cut Bank
Kelsey Smedsrud	Marketing and Communications Coordinator, Logan Health – Cut Bank
Jodi Duncan	SNAP-Ed
Melissa Giard	Opportunities Inc. Headstart
Lisa Terry	MSU-Extension
Wade Johnson	Superintendent, Cut Bank School District
Brandi Heagy	City Of Cut Bank – Rec Director
Kim Winchell	Mayor of Cut Bank and Glacier Community Health Center
Melissa Lavedure	Glacier County Health Department
Kelsey Walsh	Glacier County Health Department



# 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

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  
Jodi Duncan: SNAP-Ed  
Melissa Giard: Opportunities Inc. Headstart  
Lisa Terry: MSU – Extension  
Wade Johnson: Superintendent, Cut Bank School District  
Brandi Heagy: Recreation Director, City of Cut Bank  
Kim Winchell: Mayor of Cut Bank; Glacier Community Health Center  
Melissa Lavedure: Glacier County Health Department  
Kelsey Walsh: Glacier County Health Department

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

First Steering Committee Meeting	January 31, 2024
Key Informant Interviews	April 2024

## 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.
- We are the number one county per capita for murder.
- With the infectious disease rates, I'd be interested to see this broken down by age category.
  - I would say it's high for our 16-30 year olds.
- The breast cancer incidence rate is interesting. We are booked every time the mammography bus comes. Do we need to offer more?
  - For scopes too.
  - 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.

# Appendix C – Glacier County Secondary Data

Demographic Measure (%)		County			Montana			Nation		
Population <sup>1</sup>		13,778			1,084,225			331,449,281		
Population Density <sup>1</sup>		4.6			7.1			93.3		
Veteran Status <sup>1</sup>		8.9%			9.6%			7.0%		
Disability Status <sup>1</sup>		11.4%			13.8%			13.5%		
Age <sup>1</sup>		<5	18-64	65+	<5	18-64	65+	<5	18-64	65+
		7.7%	79.3%	13.0%	5.1%	74.9%	20.0%	6.1%	61.7%	15.6%
Gender <sup>1</sup>		Male		Female	Male		Female	Male		Female
		49.5%		50.5%	50.7%		49.3%	49.2%		50.8%
Race/Ethnic Distribution <sup>1</sup>	White	30.7%			86.4%			75.3%		
	American Indian or Alaska Native	64.2%			5.8%			1.7%		
	Other <sup>†</sup>	5.1%			7.8%			26.5%		

<sup>1</sup> US Census Bureau - American Community Survey (2022)

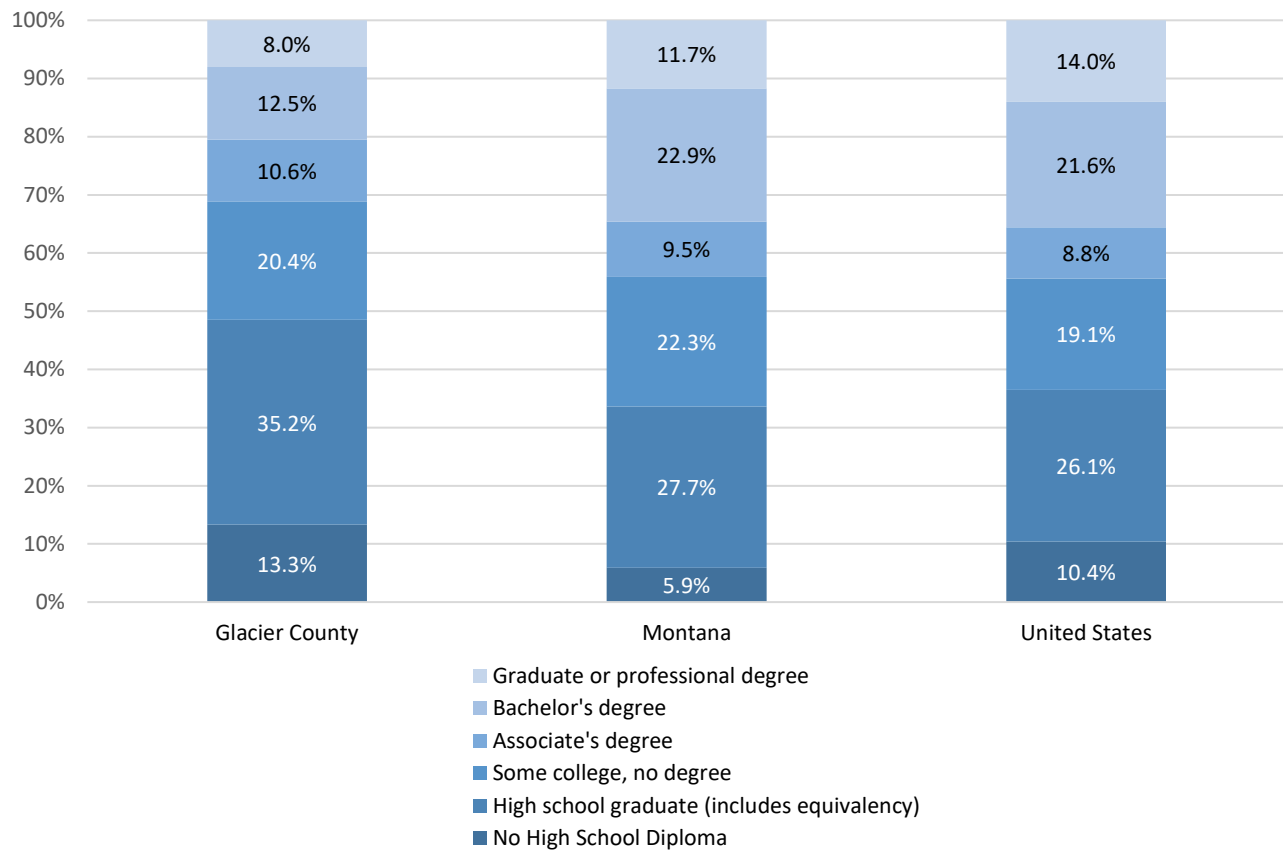
<sup>†</sup> Black, Asian/Pacific Islanders, Hispanic & Non-Hispanic Ancestry

Socioeconomic Measures (%)	County	Montana	Nation
Median Income <sup>1</sup>	\$ 41,078	\$ 67,631	\$ 74,755
Unemployment Rate <sup>5</sup>	7.4%	3.4%	5.4%
Persons Below Poverty Level <sup>1</sup>	29.4 %	12.1 %	12.6%
Children in Poverty <sup>1</sup>	32.9%	13.4%	16.3%
Internet at Home <sup>2</sup>	66.4%	81.5%	-
Households with Population Age 65+ Living Alone <sup>2</sup>	605	52,166	-
Households Without a Vehicle <sup>2</sup>	216	21,284	-
Households Receiving SNAP <sup>2</sup>	870	56,724	-
Eligible Recipients of Free or Reduced Price Lunch <sup>3</sup> 2019/2020 school year	86.2%	42.9%	-
Enrolled in Medicaid <sup>4, 1</sup>	28.5%	13.3%	18.0%
Uninsured Adults <sup>5, 6</sup> Age <65	36.8%	11.6%	16.3%
Uninsured Children <sup>5, 6</sup> Age <18	28.2%	6.9%	6.0%

<sup>1</sup> US Census Bureau - American Community Survey (2022)

<sup>1</sup> US Census Bureau - American Community Survey (2022), <sup>2</sup> US Census Bureau - COVID-19 Impact Planning Report (2021), <sup>3</sup> Kids Count Data Center, Annie E. Casey Foundation (2020), <sup>4</sup> Medicaid Expansion Dashboard, MT-DPHHS (2020), <sup>5</sup> County Health Ranking, Robert Wood Johnson Foundation (2023), <sup>6</sup> Health Insurance Coverage, Centers for Disease Control and Prevention (CDC) (2019)

## Highest Degree Obtained<sup>1</sup>



Maternal Child Health	County	Montana	Nation
<b>General Fertility Rate* <sup>7</sup></b> <i>Per 1,000 Women 15-44 years of age (2017-2019)</i>	83.2	59.3	-
<b>Preterm Births<sup>7</sup></b> <i>Born less than 37 weeks (2017-2019)</i>	14.9%	9.4%	-
<b>Adolescent Birth Rate<sup>7</sup></b> <i>Per 1,000 years females 15-19 years of age (2017-2019)</i>	45.9	18.3	-
<b>Smoking during pregnancy<sup>3, 8</sup></b>	20.5%	16.5%	7.2%
<b>Kotelchuck Prenatal Care** <sup>7</sup></b> <i>Adequate or Adequate-Plus (2017-2019)</i>	46.6%	75.7%	-
<b>Low and very low birth weight infants<sup>7</sup></b> <i>Less than 2500 grams (2017-2019)</i>	10.6%	7.6%	-
<b>Childhood Immunization Up-To-Date (UTD)<sup>§ 9</sup></b>	48.1%	64.8%	-

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

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

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

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

Behavioral Health	County	Montana	Nation
Adult Smoking <sup>5</sup>	28.0%	18.0%	16.0%
Excessive Drinking <sup>5</sup>	22.0%	24.0%	19.0%
Adult Obesity <sup>5</sup>	40.0%	29.0%	32.0%
Poor Mental Health Days <sup>5</sup> (Past 30 days)	5.3	4.5	4.4
Physical Inactivity <sup>5</sup>	30.0%	18.0%	22.0%
Do NOT wear seatbelts <sup>10</sup>	28.2%	11%	5.8%
Drink and Drive <sup>10</sup>	36.8%	4.0%	2.3%

<sup>5</sup> County Health Ranking, Robert Wood Johnson Foundation (2023), <sup>10</sup> Behavioral Risk Factor Surveillance System, CDC (2020)

Cancer prevention & screening	County	Montana	Nation
Human Papillomavirus (HPV) vaccination UTD <sup>†† 11, 12</sup> <i>Adolescents 13-17 years of age (2020)</i>	22.8%	54.4%	58.6%
Cervical cancer screening in past 3 years <sup>13, 10</sup> <i>Age adjusted (county/state) and crude (nation) prevalence among adult women aged 21–65 years (2018)</i>	81.1%	76.8%	80.1%
Mammography in past 2 years <sup>13, 10</sup> <i>Age adjusted (county/state) and crude (nation) prevalence among women 50-74 years (2018)</i>	68.1%	73.4%	78.3%
Colorectal Cancer Screening <sup>13, 10</sup> <i>Age adjusted (county) and crude (state/nation) prevalence among adults age 50-75 years (2018)</i>	49.9%	64.5%	69.7%

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

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

Infectious Disease Incidence Rates <sup>14</sup> <i>Per 100,000 people (2015-2017)</i>	County	Montana
Enteric Diseases *	68.2	80.1
Hepatitis C virus	541.6	93.4
Sexually Transmitted Diseases (STD) †	1467.0	551.6
Vaccine Preventable Diseases (VPD) §	102.4	91.5

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

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

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



Chronic Conditions <sup>10</sup>	County	Montana	Nation
Cardiovascular Disease (CVD) prevalence <i>Adults aged 18 years and older (2014-2016)</i>	8.9	7.9	8.6
Chronic Obstructive Pulmonary Disease (COPD) prevalence <i>Adults aged 18 years and older (2014-2016)</i>	5.7	6.6	6.4
Diabetes Prevalence <i>Adults aged 18 years and older (2014-2016)</i>	12.6	8.3	10.6
Breast Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	158.1	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 <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	54.8	37.1	38.9
Lung Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	46.9	52.2	60.0
Melanoma Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	26.3	21.0
Prostate Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	109.6	103.0

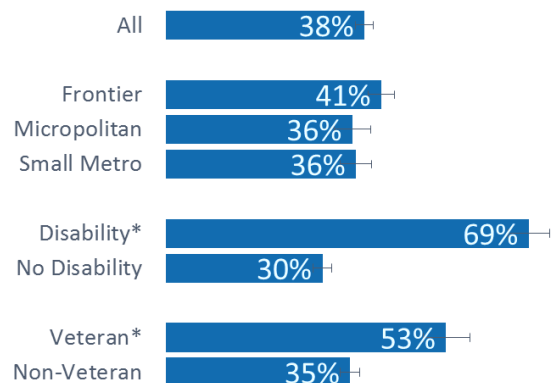
<sup>14</sup> IBIS Community Snapshot, MT-DPPHS

\*\* Data were suppressed to protect privacy.

Montana Adults with Self-Reported Chronic Condition <sup>11</sup>	
1. Arthritis	30.8%
2. Depression	24.5%
3. Asthma	11.7%
4. Diabetes	8.4%
5. COPD	6.7%
6. Cardiovascular disease	4.1%
7. Kidney disease	3.0%

<sup>10</sup> Behavioral Risk Factor Surveillance System, CDC (2022)

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



Mortality	County	Montana	Nation
Suicide Rate <sup>15</sup> <i>Per 100,000 population (2009-2018)</i>	20.7	23.9	-
Veteran Suicide Rate <sup>15</sup> <i>Per 100,000 population (2009-2018)</i>	-	65.7	38.4
Alzheimer's Disease Mortality Rate <sup>16</sup> <i>Age-Adjusted per 100,000 population (2017- 2019)</i>	-	21.7	-
Pneumonia/Influenza Mortality Rate <sup>17</sup> <i>Age-Adjusted per 100,000</i>	-	7.5	10.5
Leading Causes of Death <sup>16, 18</sup>	-	1. Heart Disease 2. Cancer 3. Chronic Lower Respiratory Disease (CLRD)	1. Heart Disease 2. Cancer 3. COVID-19

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

\*\* Data were suppressed to protect privacy.

Montana Health Disparities <sup>10</sup>	White, non-Hispanic	American Indian/Alaska Native	Low Income*
14+ Days when physical health status was NOT good <i>Crude prevalence (2022)</i>	12.6%	22.4%	35.6%
14+ Days when mental health status was NOT good <i>Crude prevalence (2022)</i>	15.5%	26.0%	34.5%
Current smoker <i>Crude prevalence (2022)</i>	13.1%	35.0%	36.7%
Routine checkup in the past year <i>Crude prevalence (2022)</i>	74.0%	75.7%	74.3%
No personal doctor or health care provider <i>Crude prevalence (2022)</i>	19.3%	20.4%	21.0%
No dental visit in the last year for any reason <i>Crude prevalence (2022)</i>	34.4%	47.0%	57.0%
Consumed fruit less than one time per day <i>Crude prevalence (2021)</i>	40.1%	41.4%	46.6%
Consumed vegetables less than one time per day <i>Crude prevalence (2021)</i>	16.0%	24.8%	23.8%
Does not always wear a seat belt <i>Crude prevalence (2020)</i>	10.8%	15.9%	16.0%

<sup>10</sup> Behavioral Risk Factor Surveillance System, CDC (2022)

\*Annual household income < \$15,000

Youth Risk Behavior <sup>19</sup>	Montana		Nation
	All respondents	American Indian/Alaska Native	
Felt Sad or Hopeless <i>Almost every day for two weeks or more in a row, during the past 12 months</i>	41.4%	49.0%	42.3%
Attempted Suicide <i>During the past 12 months</i>	10.2%	17.6%	10.2%
Lifetime Cigarette Use <i>Students that have ever tried smoking</i>	27.8%	52.2%	17.8%
Currently Drink Alcohol <i>Students that have had at least one drink of alcohol on at least one day during the past 30 days</i>	31.4%	24.4%	22.7%
Lifetime Marijuana Use <i>Students that have used marijuana one or more times during their life</i>	37.0%	55.1%	27.8%
Texting and Driving <i>Among students who drove a car in the past 30 days</i>	57.1%	37.0%	36.1%
Carried a Weapon on School Property <i>In the last 30 days</i>	9.1%	7.4%	3.1%

<sup>19</sup> Montana Youth Risk Behavior Survey (2022)

# Appendix D – Survey Cover Letter

March 8, 2024

Dear [LASTNAME] household:

Participate in our Community Health Needs Assessment survey for a chance to  
**Win one of 4 \$25 Amazon Gift Cards!**



Logan Health - Cut Bank (LHCB) and Glacier County Public Health Department (GCHD) are 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 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 tried to keep the survey to about 15 minutes. Participating in this survey is completely voluntary and your identity and answers will remain confidential.

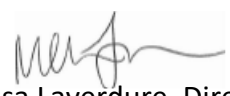
1. Due date to complete survey: April 12<sup>th</sup>
2. Complete the enclosed survey and return it in the envelope provided - no stamp needed.
3. You can also access the survey at <http://helpslab.montana.edu/survey.html>. Select "Logan Health Cut Bank Survey." Your access code is [CODED]
4. The winners of the \$25 Amazon gift cards will be contacted the week of April 22<sup>nd</sup>.

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 406-994-6001. We believe, with your help, we can continue to improve health care services in our region.

Thank you for your assistance. We appreciate your time.

Sincerely,

  
Cherie Taylor, President  
Logan Health- Cut Bank

  
Melissa Laverdure, Director  
Glacier County Health Department

# Appendix E – Survey Instrument

## Community Health Needs Assessment Survey Cut Bank, Montana

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

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

- ☐ Very healthy      ☐ Healthy      ☐ Somewhat healthy      ☐ Unhealthy      ☐ Very unhealthy

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

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Alcohol/substance use | <input type="checkbox"/> Lack of access to healthcare          | <input type="checkbox"/> Social isolation/loneliness                 |
| <input type="checkbox"/> Alzheimer's/dementia  | <input type="checkbox"/> Lack of dental care                   | <input type="checkbox"/> Stroke                                      |
| <input type="checkbox"/> Cancer                | <input type="checkbox"/> Lack of exercise                      | <input type="checkbox"/> Suicide                                     |
| <input type="checkbox"/> Child abuse/neglect   | <input type="checkbox"/> Mental health issues                  | <input type="checkbox"/> Tobacco use                                 |
| <input type="checkbox"/> Depression/anxiety    | <input type="checkbox"/> Motor vehicle accidents               | (cigarettes/cigars, vaping, smokeless)                               |
| <input type="checkbox"/> Diabetes              | <input type="checkbox"/> Overweight/obesity                    | <input type="checkbox"/> Trauma/Adverse Childhood Experiences (ACES) |
| <input type="checkbox"/> Domestic violence     | <input type="checkbox"/> Recreation related accidents/injuries | <input type="checkbox"/> Work/economic stress                        |
| <input type="checkbox"/> Heart disease         | <input type="checkbox"/> Respiratory issues/illness            | <input type="checkbox"/> Work related accidents/injuries             |
| <input type="checkbox"/> Housing security      | <input type="checkbox"/> Sexually transmitted illness          | <input type="checkbox"/> Other: _____                                |
| <input type="checkbox"/> Hunger                |  |  |

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

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

4. How do you rate your knowledge of the health services that are available to you?

- ☐ Excellent      ☐ Good      ☐ Fair      ☐ Poor

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

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Emergency response  | <input type="checkbox"/> Mailings/newsletter | <input type="checkbox"/> Social media/Facebook    |
| <input type="checkbox"/> Friends/family      | <input type="checkbox"/> Newspaper           | <input type="checkbox"/> Television               |
| <input type="checkbox"/> Healthcare provider | <input type="checkbox"/> Presentations       | <input type="checkbox"/> Website                  |
| <input type="checkbox"/> Internet search     | <input type="checkbox"/> Public health       | <input type="checkbox"/> Word of mouth/reputation |
| <input type="checkbox"/> Local publications  | <input type="checkbox"/> Radio               | <input type="checkbox"/> Other: _____             |

6. Which community health resources, other than the hospital or clinic, have you used in the last three years? **(Select ALL that apply)**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Chiropractor         | <input type="checkbox"/> Meals on Wheels          | <input type="checkbox"/> Senior center            |
| <input type="checkbox"/> Civic/fitness center | <input type="checkbox"/> Mental health            | <input type="checkbox"/> Substance abuse services |
| <input type="checkbox"/> Dentist              | <input type="checkbox"/> Optometrist (eye doctor) | <input type="checkbox"/> Transportation services  |
| <input type="checkbox"/> Diabetes center      | <input type="checkbox"/> Pharmacy                 | <input type="checkbox"/> Walking trail            |
| <input type="checkbox"/> Food banks           | <input type="checkbox"/> Pool                     | <input type="checkbox"/> Other: _____             |
| <input type="checkbox"/> Home care services   | <input type="checkbox"/> Public health            |   |

7. In your opinion, what would improve our community's access to healthcare? **(Select ALL that apply)**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Cultural sensitivity               | <input type="checkbox"/> Interpreter services                      | <input type="checkbox"/> Payment assistance programs (healthcare expenses) |
| <input type="checkbox"/> Expanded hours for clinic services | <input type="checkbox"/> More information about available services | <input type="checkbox"/> Telehealth  |
| <input type="checkbox"/> Financial assistance/counseling    | <input type="checkbox"/> More mental health providers              | <input type="checkbox"/> Transportation assistance                         |
| <input type="checkbox"/> Greater health education services  | <input type="checkbox"/> More primary care providers               | <input type="checkbox"/> Other: _____                                      |
| <input type="checkbox"/> Home health assistance             | <input type="checkbox"/> More specialists                          |  |
| <input type="checkbox"/> Improved quality of care           |  |  |

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

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Alcohol/substance use       | <input type="checkbox"/> Grief counseling                      | <input type="checkbox"/> Parenting                 |
| <input type="checkbox"/> Alzheimer's                 | <input type="checkbox"/> Health coaching/ lifestyle management | <input type="checkbox"/> Prenatal                  |
| <input type="checkbox"/> Budgeting/finances          | <input type="checkbox"/> Heart disease                         | <input type="checkbox"/> Smoking/tobacco cessation |
| <input type="checkbox"/> Cancer                      | <input type="checkbox"/> Lactation/breastfeeding support       | <input type="checkbox"/> Stress management         |
| <input type="checkbox"/> Career development          | <input type="checkbox"/> Living will                           | <input type="checkbox"/> Support groups            |
| <input type="checkbox"/> Cultural/traditional health | <input type="checkbox"/> Men's health                          | <input type="checkbox"/> Weight loss               |
| <input type="checkbox"/> Diabetes                    | <input type="checkbox"/> Mental health                         | <input type="checkbox"/> Women's health            |
| <input type="checkbox"/> First aid/CPR               | <input type="checkbox"/> Nutrition/healthy foods               | <input type="checkbox"/> Other: _____              |
| <input type="checkbox"/> Fitness                     |  |  |

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

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Blood pressure check          | <input type="checkbox"/> Eye exam               | <input type="checkbox"/> Mental health counseling               |
| <input type="checkbox"/> Children's checkup/ Well baby | <input type="checkbox"/> Flu shot/immunizations | <input type="checkbox"/> Pap test                               |
| <input type="checkbox"/> Cholesterol screening         | <input type="checkbox"/> Health checkup         | <input type="checkbox"/> Prostate (PSA)                         |
| <input type="checkbox"/> Colonoscopy                   | <input type="checkbox"/> Health fair            | <input type="checkbox"/> Yearly blood screening (birthday labs) |
| <input type="checkbox"/> Dental check                  | <input type="checkbox"/> Hearing check          | <input type="checkbox"/> None                                   |
|  | <input type="checkbox"/> Mammography            |   |

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

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Addictions counselor            | <input type="checkbox"/> Family planning (reproductive health) | <input type="checkbox"/> Orthodontia (braces)             |
| <input type="checkbox"/> Alternative medicine/Naturopath | <input type="checkbox"/> Home health assistance                | <input type="checkbox"/> Pediatrician (children)          |
| <input type="checkbox"/> Audiologist (hearing)           | <input type="checkbox"/> Nutrition/dietician                   | <input type="checkbox"/> Psychiatrist (mental health Dr.) |
| <input type="checkbox"/> Dermatology (skin)              | <input type="checkbox"/> Speech therapy                        | <input type="checkbox"/> Rheumatology                     |
| <input type="checkbox"/> Emergency mental health         | <input type="checkbox"/> Medication management                 | <input type="checkbox"/> Surgery                          |
| <input type="checkbox"/> ENT (ear/nose/throat)           | <input type="checkbox"/> Oncology (cancer)                     | <input type="checkbox"/> Urology                          |
|  | <input type="checkbox"/> Ophthalmologist (eye disease)         | <input type="checkbox"/> Other: _____                     |

**11.** The following questions focus on aspects of your community. Please rate your level of agreement with each of these statements thinking specifically about your community as you see it. Please circle the number that best represents your opinion of each statement below.

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>	<b>Don't Know</b>
<b>11.1) I can get the healthcare I need in Glacier County.</b> Consider the cost and quality, number of options, and availability of healthcare within a reasonable distance to your home.	4	3	2	1	DK
<b>11.2) I feel safe in my community.</b> Consider how safe you feel in and around your neighborhood, schools, playgrounds, parks, businesses, and shopping centers.	4	3	2	1	DK
<b>11.3) There are places to be physically active near my home.</b> Consider parks, trails, places to walk, and playgrounds.	4	3	2	1	DK
<b>11.4) My community is a good place to raise children.</b> Consider the quality and safety of schools and childcare, after school care, and places to play in your neighborhood.	4	3	2	1	DK
<b>11.5) My community is a good place to grow old.</b> Consider elder-friendly housing, transportation to medical services, access to shopping centers and businesses, recreation, and services for the elderly.	4	3	2	1	DK

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

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

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

- ☐ High
 ☐ Moderate
 ☐ Low
 ☐ Unsure/rather not say

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

- ☐ Excellent
 ☐ Good
 ☐ Fair
 ☐ Poor

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

- ☐ A great deal
 ☐ Somewhat
 ☐ A little
 ☐ Not at all

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

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

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

- ☐ Yes
 ☐ No
 ☐ Not applicable

**18.** In the past month, how often did you include fresh fruits and vegetables in your diet?

- ☐ Daily
 ☐ 2-4 times per week
 ☐ 3-5 times per month
 ☐ 1-2 times per month
 ☐ Never

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

☐ Yes ☐ No

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

☐ Yes ☐ No ☐ Don't know

21. In the past three years, was there a time when you or a member of your household thought you needed healthcare services but did NOT get or delayed getting medical services?

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

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

<input type="checkbox"/> Could not get an appointment	<input type="checkbox"/> It cost too much	<input type="checkbox"/> Qualified provider not available
<input type="checkbox"/> Could not get off work	<input type="checkbox"/> It was too far to go	<input type="checkbox"/> Too long to wait for an appointment
<input type="checkbox"/> Didn't know where to go	<input type="checkbox"/> Language barrier	<input type="checkbox"/> Too nervous or afraid
<input type="checkbox"/> Don't like doctors	<input type="checkbox"/> My insurance didn't cover it	<input type="checkbox"/> Transportation problems
<input type="checkbox"/> Don't understand healthcare system	<input type="checkbox"/> No insurance	<input type="checkbox"/> Unsure if services were available
<input type="checkbox"/> Had no childcare	<input type="checkbox"/> Not treated with respect	<input type="checkbox"/> Other: _____
	<input type="checkbox"/> Office wasn't open when I could go	

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

☐ Yes ☐ No (If no, skip to question 26)

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

<input type="checkbox"/> Logan Health – Cut Bank	<input type="checkbox"/> Logan Health – Shelby	<input type="checkbox"/> Logan Health – Conrad
<input type="checkbox"/> Indian Health Services (IHS) – Browning	<input type="checkbox"/> Great Falls Clinic Hospital	<input type="checkbox"/> Logan Health – Chester
<input type="checkbox"/> Logan Health Medical Center – Kalispell	<input type="checkbox"/> Benefis – Great Falls	<input type="checkbox"/> VA
	<input type="checkbox"/> Logan Health – Whitefish	<input type="checkbox"/> Other: _____

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

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

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

☐ Yes ☐ No (If no, skip to question 28)

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

<input type="checkbox"/> Cut Bank	<input type="checkbox"/> Conrad	<input type="checkbox"/> Shelby	<input type="checkbox"/> Whitefish
<input type="checkbox"/> Browning	<input type="checkbox"/> Great Falls	<input type="checkbox"/> Sunburst	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Chester	<input type="checkbox"/> Heart Butte	<input type="checkbox"/> VA	
	<input type="checkbox"/> Kalispell	<input type="checkbox"/> Valier	



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

- ☐ Yes ☐ No **(If no, skip to question 31)**

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

- |                                   |                                      |                                       |
|-----------------------------------|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Cut Bank | <input type="checkbox"/> Great Falls | <input type="checkbox"/> Shelby       |
| <input type="checkbox"/> Browning | <input type="checkbox"/> Helena      | <input type="checkbox"/> Whitefish    |
| <input type="checkbox"/> Conrad   | <input type="checkbox"/> Kalispell   | <input type="checkbox"/> Other: _____ |

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

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

**31.** Do you currently use Telehealth?

- ☐ Yes ☐ N

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

	Excellent	Good	Fair	Poor	Haven't Used	Don't Know
Behavioral health	4	3	2	1	N/A	DK
Clinic services	4	3	2	1	N/A	DK
Emergency room	4	3	2	1	N/A	DK
Laboratory	4	3	2	1	N/A	DK
OB/GYN	4	3	2	1	N/A	DK
Other outpatient services (infusion, wound care)	4	3	2	1	N/A	DK
Physical therapy	4	3	2	1	N/A	DK
Radiology	4	3	2	1	N/A	DK
Specialist services (ortho, heart, dermatology, etc.)	4	3	2	1	N/A	DK
Surgical services	4	3	2	1	N/A	DK
Swing bed/Transitional care	4	3	2	1	N/A	DK
Telehealth	4	3	2	1	N/A	DK

33. How well do you feel your health payor covers your healthcare costs?

- ☐ Excellent
 ☐ Good
 ☐ Fair
 ☐ Poor

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

- ☐ Can't afford to pay for health insurance
 ☐ Too confusing/don't know how to apply  
☐ Employer does not offer insurance
 ☐ Other: \_\_\_\_\_  
☐ Choose not to have health insurance

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

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

### **Demographics**

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

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

- ☐ 59427 Cut Bank
 ☐ 59434 East Glacier
 ☐ 59448 Heart Butte  
☐ 59486 Valier
 ☐ 59411 Babb
 ☐ Other: \_\_\_\_\_  
☐ 59474 Shelby
 ☐ 59417 Browning

37. What is your gender?

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

38. What age range represents you?

- ☐ 18-24
 ☐ 45-54
 ☐ 75-84  
☐ 25-34
 ☐ 55-64
 ☐ 85+  
☐ 35-44
 ☐ 65-74

39. What is your employment status?

- ☐ Work full-time
 ☐ Work part-time

- ☐ Retired
- ☐ Student
- ☐ Collect disability

- ☐ Unemployed, but looking
- ☐ Not currently seeking employment
- ☐ Other: \_\_\_\_\_

**40. With which ethnicity do you most identify? (Select ONLY 1)**

- ☐ American Indian or Alaskan Native
- ☐ Asian
- ☐ Black or African American

- ☐ Hispanic or Latino
- ☐ White or Caucasian
- ☐ Multiracial or Biracial
- ☐ A race/ethnicity not listed here: \_\_\_\_\_

**[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 – Cut Bank Services by How Respondents Learn About Healthcare Services

	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>Total</b>
<b>Emergency response</b>	11.1% (1)	66.7% (6)	22.2% (2)	-	<b>9</b>
<b>Friends/family</b>	25.0% (16)	54.7% (35)	18.8% (12)	1.6% (1)	<b>64</b>
<b>Healthcare provider</b>	28.3% (17)	55.0% (33)	15.0% (9)	1.7% (1)	<b>60</b>
<b>Internet search</b>	30.8% (8)	53.8% (14)	15.4% (4)	-	<b>26</b>
<b>Local publications</b>	28.6% (6)	61.9% (13)	9.5% (2)	-	<b>21</b>
<b>Mailings/newsletter</b>	32.0% (8)	48.0% (12)	20.0% (5)	-	<b>25</b>
<b>Newspaper</b>	37.0% (10)	40.7% (11)	22.2% (6)	-	<b>27</b>
<b>Presentations</b>	33.3% (1)	66.7% (2)	-	-	<b>3</b>
<b>Public Health</b>	30.0% (3)	60.0% (6)	-	10.0% (1)	<b>10</b>
<b>Radio</b>	31.3% (5)	50.0% (8)	18.8% (3)	-	<b>16</b>
<b>Social media/Facebook</b>	25.9% (7)	48.1% (13)	22.2% (6)	3.7% (1)	<b>27</b>
<b>Television</b>	25.0% (3)	33.3% (4)	41.7% (5)	-	<b>12</b>
<b>Website</b>	42.9% (6)	35.7% (5)	21.4% (3)	-	<b>14</b>
<b>Word of mouth/reputation</b>	20.3% (13)	56.3% (36)	21.9% (14)	1.6% (1)	<b>64</b>
<b>Other</b>	66.7% (2)	33.3% (1)	-	-	<b>3</b>

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

	<b>Yes</b>	<b>No</b>	<b>Total</b>
<b>59427 Cut Bank</b>	31.4% (27)	68.6% (59)	<b>86</b>
<b>59486 Valier</b>	-	100.0% (2)	<b>2</b>
<b>59474 Shelby</b>	25.0% (1)	75.0% (3)	<b>4</b>
<b>59434 East Glacier</b>	-	100.0% (1)	<b>1</b>
<b>59417 Browning</b>	-	100.0% (1)	<b>1</b>
<b>Other</b>	66.7% (2)	33.3% (1)	<b>3</b>
<b>TOTAL</b>	<b>30.9% (30)</b>	<b>69.1% (67)</b>	<b>97</b>

**\* 59411 Babb and 59448 Heart Butte removed due to non-response**

## Location of most recent hospitalization by residence

	Logan Health - Cut Bank	Indian Health Services (IHS) - Browning	Logan Health Medical Center - Kalispell	Logan Health - Shelby	Great Falls Clinic Hospital	Benefis - Great Falls	Logan Health - Whitefish	VA	Other	Total
<b>59427 Cut Bank</b>	36.8% (21)	1.8% (1)	17.5% (10)	1.8% (1)	5.3% (3)	19.3% (11)	1.8% (1)	1.8% (1)	14.0% (8)	<b>57</b>
<b>59474 Shelby</b>	-	-	-	-	33.3% (1)	33.3% (1)	-	-	33.3% (1)	<b>3</b>
<b>59417 Browning</b>	-	-	-	-	-	-	-	100.0% (1)	-	<b>1</b>
<b>Other</b>	-	-	-	66.7% (2)	-	-	-	-	33.3% (1)	<b>3</b>
<b>TOTAL</b>	<b>32.8% (21)</b>	<b>1.6% (1)</b>	<b>15.6% (10)</b>	<b>4.7% (3)</b>	<b>6.3% (4)</b>	<b>18.8% (12)</b>	<b>1.6% (1)</b>	<b>3.1% (2)</b>	<b>15.6% (10)</b>	<b>64</b>

\* Logan Health – Conrad and Logan Health – Chester removed from hospital location (top row) due to non-response.

\*\* 59486 Valier, 59434 East Glacier, 59411 Babb, and 59448 Heart Butte removed from residence (first column) due to non-response.

## Location of most recent hospitalization by reasons hospital selected

	Logan Health - Cut Bank	Indian Health Services (IHS) - Browning	Logan Health Medical Center - Kalispell	Logan Health - Shelby	Great Falls Clinic Hospital	Benefis - Great Falls	Logan Health - Whitefish	VA	Other	Total
<b>Closest to home</b>	64.5% (20)	-	6.5% (2)	3.2% (1)	-	9.7% (3)	-	3.2% (1)	12.9% (4)	<b>31</b>
<b>Closest to work</b>	100.0% (3)	-	-	-	-	-	-	-	-	<b>3</b>
<b>Cost of care</b>	-	50.0% (1)	-	50.0% (1)	-	-	-	-	-	<b>2</b>
<b>Emergency, no choice</b>	31.6% (6)	-	10.5% (2)	10.5% (2)	-	31.6% (6)	-	-	15.8% (3)	<b>19</b>
<b>Hospital's reputation for quality</b>	15.4% (2)	-	23.1% (3)	7.7% (1)	15.4% (2)	15.4% (2)	-	-	23.1% (3)	<b>13</b>
<b>Prior experience with hospital</b>	47.4% (9)	-	10.5% (2)	-	10.5% (2)	15.8% (3)	5.3% (1)	-	10.5% (2)	<b>19</b>
<b>Privacy/ confidentiality</b>	100.0% (1)	-	-	-	-	-	-	-	-	<b>1</b>
<b>Recommended by family or friends</b>	25.0% (2)	-	12.5% (1)	-	25.0% (2)	37.5% (3)	-	-	-	<b>8</b>
<b>Referred by physician or other provider</b>	20.0% (7)	-	25.7% (9)	-	5.7% (2)	28.6% (10)	2.9% (1)	-	17.1% (6)	<b>35</b>
<b>Required by insurance plan</b>	50.0% (1)	-	-	-	-	50.0% (1)	-	-	-	<b>2</b>
<b>VA/Military requirement</b>	-	-	16.7% (1)	-	16.7% (1)	16.7% (1)	-	33.3% (2)	16.7% (1)	<b>6</b>
<b>Other</b>	50.0% (1)	-	-	-	-	50.0% (1)	-	-	-	<b>2</b>

\* Logan Health – Conrad and Logan Health – Chester removed from hospital location (top row) due to non-response. \*\* Financial assistance programs removed from reason selected (first column) due to non-response.

## Location of primary care clinic by residence

	<b>Cut Bank</b>	<b>Browning</b>	<b>Conrad</b>	<b>Great Falls</b>	<b>Kalispell</b>	<b>Shelby</b>	<b>VA</b>	<b>Other</b>	<b>TOTAL</b>
<b>59427 Cut Bank</b>	67.4% (58)	4.7% (4)	-	7.0% (6)	4.7% (4)	4.7% (4)	2.3% (2)	9.3% (8)	<b>86</b>
<b>59486 Valier</b>	-	-	100.0% (1)	-	-	-	-	-	<b>1</b>
<b>59474 Shelby</b>	25.0% (1)	-	-	25.0% (1)	-	25.0% (1)	-	25.0% (1)	<b>4</b>
<b>59434 East Glacier</b>	-	-	-	-	100.0% (1)	-	-	-	<b>1</b>
<b>59417 Browning</b>	-	-	-	-	-	-	-	100.0% (1)	<b>1</b>
<b>Other</b>	-	33.3% (1)	33.3% (1)	-	-	33.3% (1)	-	-	<b>3</b>
<b>TOTAL</b>	<b>61.5% (59)</b>	<b>5.2% (5)</b>	<b>2.1% (2)</b>	<b>7.3% (7)</b>	<b>5.2% (5)</b>	<b>6.3% (6)</b>	<b>2.1% (2)</b>	<b>10.4% (10)</b>	<b>96</b>

\* Chester, Heart Butte, Sunburst, Valier, and Whitefish removed from primary care clinic location (top row) due to non-response.

\*\* 59411 Babb and 59448 Heart Butte removed from residence (first column) due to non-response.



## Appendix G – Responses to ‘Other’ & Comments

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

- Misinformation about vaccines, COVID, Politicalization

\*Responses when more than 3 were selected (5 participants):

- Alcohol/substance abuse (4)
- Alzheimer's/dementia (1)
- Cancer (3)
- Child abuse/neglect (2)
- Depression/anxiety (2)
- Diabetes (1)
- Heart disease (1)
- Housing security (3)
- Lack of access to healthcare (1)
- Lack of exercise (1)
- Mental health issues (1)
- Overweight/obesity (2)
- Sexually transmitted illness (1)
- Social isolation/loneliness (1)
- Suicide (3)
- Tobacco use (vaping, cigarettes, smokeless) (3)
- Trauma/Adverse Childhood Experiences (ACES) (1)
- Work/economic stress (1)

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

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

- Access to healthy food (1)
- Affordable housing (1)
- Good jobs and a healthy economy (1)
- Healthy behaviors and lifestyles (1)

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

- Work
- I am a nurse
- Have lived here 36 years and am involved in the community

**6.** Which community health resources, other than the hospital or clinic, have you used in the last three years? (Select ALL that apply)

- Massage therapist
- Doctor
- None (2)
- VA clinic

**7.** In your opinion, what would improve our community's access to healthcare? (Select ALL that apply)

- Respectful ER providers
- Not sure
- Personable responsibility

**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)

- None (4)
- Bike trails

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

- None (3)
- OB/GYN
- Midwife, home birth option
- Back and bone specialist

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

- Busy schedule
- Surgery delayed and told no hospital bed because of no insurance

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

- Could not get an appointment (2)
- Could not get off work (1)
- It cost too much (2)
- It was too far to go (1)
- No insurance (1)
- Office wasn't open when I could go (1)
- Qualified provider not available (1)
- Too long to wait for an appointment (2)
- Unsure if services were available (1)

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

- Billings

\*Responses when more than 1 was selected (10 participants):

- Logan Health – Cut Bank (7)
- Indian Health Services (IHS) – Browning (2)
- Logan Health Medical Center – Kalispell (6)
- Logan Health – Shelby (1)
- Great Falls Clinic Hospital (2)
- Benefis – Great Falls (5)
- VA (1)

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

- No other option
- Had the required doctors

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

- 20% of Family uses Cut Bank. 80% uses Browning
- Helena (2)

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

- Cut Bank (3)
- Kalispell (3)
- Shelby (4)
- VA (3)
- Whitefish (2)

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

- Bozeman
- Missoula, Helena
- Billings (3)
- Seattle, WA
- Missoula
- Spokane, WA
- Mayo Hospital, Arizona

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

- Pediatrician urologist
- Oral surgeon
- Kidney doctor
- Midwife
- Nephrologist (2)
- Breast cancer center

- Pain management

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

- 80% of family use Indian Health Services
- VA
- Only have medicine B can't afford sub
- Medicare (3)
- I have Medicaid
- Health Share Ministry
- It is cheapest to pay out of pocket
- IHS

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

- 59454 Kevin
- 59411 St Mary 59417
- 59482 Sunburst

**37. What is your gender? Prefer to self-describe:**

- Male, female

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

- Rancher
- SAHM/Homemaker
- Self employed
- Social security

**\*Responses when more than 1 was selected (4 participants):**

- Work full-time (2)
- Work part-time (2)
- Retired (2)

**40. With which ethnicity do you most identify? (Select ONLY 1) - A race/ethnicity not listed here:**

- American (2)

**General comments**

- (Q1)
  - Selected “Unhealthy” and wrote “due to drug problem” next to it.
  - Didn’t select a choice and wrote “No idea” next to it.
- (Q2)
  - Didn’t select a choice and wrote “No idea” next to it.
  - Selected “Lack of access to healthcare” and wrote “homecare” next to it.

- (Q7)
  - Selected “Greater home education services” and wrote “possibly work with the Food Pantry” next to it.
- (Q9)
  - Added “Sport physical” below the question.
- (Q11.1)
  - Selected both “3” and “2”.
- (Q11.2)
  - Selected “2” and wrote “:( not lately” next to it.
  - Selected “2” and wrote “political extremists” next to it.
- (Q11.3)
  - Selected “1” and wrote “Needs to be indoor” next to the question.
- (Q11.4)
  - Selected both “3” and “2”.
- (Q16)
  - Selected “No physical activity” and wrote “Just at work... always working” next to it.
- (Q17)
  - Selected “No” and wrote “except stupid having to go to doctor to get refills” next to it.
- (Q18)
  - Selected “Daily” and wrote “at work M-F” next to the question.
- (Q24)
  - Wrote in “Billings” and also wrote “In ambulance tricked into going to Billings. I should not have had to have gone to Billings if they had looked at chart in Cut Bank.”
- (Q27)
  - Selected “Cut Bank” and wrote “Nurse Practitioner, never ever given a doctor” next to the question.
- (Q30)
  - Wrote “Not Sure” next to the question.
  - Selected “Optometrist (eye)” and wrote “Walmart” next to it.
- (Q31)
  - Selected “Yes” and wrote “maybe 2-3 times, not one located in Cut Bank” next to it.
- (Q32)
  - Emergency Room – Selected “1” and wrote “\$988 to get to the airport when I could have made it there myself. Shouldn’t have been flown to Billings. I was told that I wouldn’t get to see the doctor if I didn’t go.”
- (Q33)
  - Didn’t select a choice and wrote “I don’t know. I have to come up with a deductible I don’t understand it and can’t afford the deductible.”
  - Didn’t select a choice and wrote “Not sure” below the question.

- (Q34)
  - Didn't select any of the choices and wrote "I have it now, but didn't when I needed it."
  - Didn't select any of the choices and wrote "I have insurance" below the question.
- (Q35)
  - Selected "Yes, and I use them" and wrote "Only because of the emergency I experienced, and a really good nurse practitioner in Cut Bank."
- General:
  - I am so far in debt I don't know what I'm going to do... over my gall bladder being removed.

# Appendix H – Key Informant Interviews: Questions

## Key Informant Interview Questions

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

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

# Appendix I – Key Informant Interviews: Transcripts

## **Key Informant Interview #1**

March 27, 2024

Anonymous

Via phone interview

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

- It's probable less than average. There is a lot of drug/alcohol/substance abuse here. Obesity and diabetes are big as well, and chronic conditions in general. There's a lack of nutritional knowledge, which goes with the demographics of the community.

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

- **Hospital/clinic:**
  - They are a great asset to the community, and I very much appreciate services they provide and expertise. I've had great care there. They're short on providers – there is one GP who is excellent, and I hope he doesn't get burned out. As in all rural communities staffing is an issue; I hope they find ways to maintain/increase staffing so they can continue to provide good-quality care.
- **EMS Services (ER/Ambulance)**
  - I don't have a ton of familiarity here. When I have used the ER it's been positive; I don't have experience with EMS.
  - Heard from different people that the ER is overused, kind of like an urgent care for some people. They just opened an Urgent Care in Shelby which is exciting so hopefully that resource will be available for people instead of always going to the ER.
  - Some of the drug issues as well – law enforcement just drops people off in ER (esp. mental health patients) and they have to deal, which causes issues and frustration and safety concerns for the nurses.
- **Public/County Health Department**
  - Haven't had a ton of interactions with them lately.
  - More advertising/promotion would be good, so people know what they're doing. And more consistent staffing hours, having people at the office consistent days and times.
- **Senior Services (Nursing homes, assisted living, home health, senior center, etc.)**
  - No home health available here, which is a big need, and would keep folks out of nursing home/hospital.
  - More communication/publicity around those facilities would be nice to let the community know what's going on with them.



- **Services for Low-Income Individuals/Families**

- We do have a lot of resources in the community, but the challenge is lack of coordination. It's hard to know which office does what, when an office is open, if you have to go in person or online. There's not a good clearinghouse to find out about all these logistics of accessing resources.

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

- Substance abuse is very prevalent and has ramifications throughout the community. There are three marijuana shops and maybe a fourth coming, all within 1 mile of town. How does that impact the community, with marijuana as a gateway drug? The suboxone clinic has also been very negative for the town. We have a lot of prescription drug abuse.
- Weather here is challenging – it's difficult for people to get out and get exercise as much as would be helpful. There's the civic center but it requires a membership, and there's not much for kids there. Some place indoor and things for kids would be nice.

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

- Indoor recreation facilities.
- More mental health/substance abuse resources.
- Somewhere for homeless folks to go/get help.
- Some sort of clearinghouse for resources/directions – listing of resources not just in Logan but resources that people in Logan would need (contact info, hours, etc); knowledge of all the different things that are out there because there are lots of offerings and people offering things, but it's hard to know that all.

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

- If the suboxone clinic was gone and the marijuana shops gone. The prevailing thing here is substance abuse. We've found needles in the alley outside our house – substance abuse carries through community.

**Key Informant Interview #2**

March 27, 2024

Anonymous

Via phone interview

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

- Overall it's okay. I'm a little concerned about drug issues I guess.

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

- **Hospital/clinic:**
  - I have positive things to say, and have had good luck with both of them.

- They're short-handed, and it's hard to get in quickly. They need more staffing.
  - **EMS Services (ER/Ambulance)**
    - That's not something I've used but I see them around and they seem awful busy.
  - **Public/County Health Department**
    - I did get a vaccine there, that was good. I've had good luck with them
  - **Senior Services (Nursing homes, assisted living, home health, senior center, etc.)**
    - There's good stuff available. The senior center is terrific for the elders.
    - The nursing home needs a lot of upkeep, the outside needs maintenance. That's a concern for me.
  - **Services for Low-Income Individuals/Families**
    - Don't even know about that.
- 3. What do you think are the most important local healthcare issues?**
- Drug and alcohol problems. Its bad, and it seems like it's gotten worse since they put the methadone clinic in.
- 4. What other healthcare services are needed in the community?**
- It would be nice to have some specialty services so you're not having to travel. A diabetes specialist would be nice.
  - It would be nice to be able to get more doctors. Right now it's hard to get in to see one, and more choices would be nice.
- 5. What would make your community a healthier place to live?**
- Well-care training, personal trainer, exercise resources. I think it's available but not sure that people use it. Maybe it could be advertised better.

### **Key Informant Interview #3**

March 28, 2024

Anonymous

Via phone interview

- 1. How do you feel about the general health of your community?**
- We're probably obese. People don't work out as much as they should.
- 2. What are your views/opinions about these local services:**
- **Hospital/clinic:**
    - I haven't had any issues, but I don't clinic here. We doctor in Shelby since there's such a big turnover here, and my husband's family has always doctored there. I feel bad.

- I've taken my kids into the Glacier clinic for quick tests, and they've been good about getting us in.
- Logan Health Cut Bank does a wellness program/check/birthday panel for teachers at the school that the school pays for so it's free for the teachers, and this is great.
- **EMS Services (ER/Ambulance)**
  - I've had some ER experience, and sometimes it seems like it takes quite a while to get in but there's also times where nobody is there and you get in super fast. It depends on how many people are in line. They've been good when we have been there with treating, monitoring, and sending us home. It's really nice having it here so you don't have to travel to Shelby. We had to take an ambulance to Great Falls and they were quick to respond and responsible.
  - It's nice to see EMS personnel at sports games. It makes you feel better as a parent to know professionals are there if someone gets hurt. It's huge for parents, it makes them feel more comfortable.
- **Public/County Health Department**
  - We went there for shots when the kids were little. And for flu shots/mist. I think they came into the school to give Hepatitis B shots, and that was nice. It's also really easy to get shot records from them, which is good. Linda & Carol are great, and Jenny was really phenomenal during Covid.
- **Senior Services (Nursing homes, assisted living, home health, senior center, etc.)**
  - 4H Club does Soup & Bread through senior center, where they let us use their building to raise money for them. One 4Her got a partnership grant to plant flowers outside senior center. 4H also does a Christmas activity giving gifts to the elderly. The grade school goes to sing in the nursing home and the Beehives somewhat regularly.
- **Services for Low-Income Individuals/Families**
  - Through the school they have Shop with a Cop, where people raise money to take kids shopping for Christmas. They used to have bags of food for low-income kids at school, but kids didn't want to carry around a huge bag of food so now they do that through the food bank. It's free and there are bags of food and meals and all families have to do is go pick up their bag. Kids can also get free and reduced lunch, and they do breakfast at the school too, so kids are getting at least 2 meals through there.

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

- Nobody wants to work – I'm not sure if it's mental illness or laziness. We're so short of subs in the school because nobody wants to work and people are getting paid more for not working than they are for working. We're short-handed all around.
- I've seen random people stumbling in the streets in Cut Bank, and videos of that stuff on Facebook, and that scares me because that's what people think Cut Bank is like. Since the suboxone clinic has come in Cut Bank has gone downhill. I'm not sure

if more people have come or with phones now these people are documented and seen and shared more. It seemed like during Covid people from Browning came here and there were more break-ins and homeless people here. I'm not sure if they're still here or if they've gone back to Browning. There are lots of people giving you the heebie jeebies, and it seems like crazy things are happening more often. There are people bumming money – it makes people coming through think that Cut Bank is some sort of town.

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

- We need more general counselors, especially for the kids. Behavioral specialists. Bigger schools have more rooms and resources for kids who need space, etc. They need more one on one, someone to talk to. Some go to the hospital to see the counselors up there. There is a disconnect between special ed and counseling in schools – we need a step for these kids. We wouldn't have so many behaviors if they could talk to counselors before it got so severe. Kids just don't know how to deal. And the loads for teachers are already huge. We need more resources to help these kids.
- Not many kids here have both of their parents together & live with them. Dynamics of society have changed such that most parents aren't still together. And so the kids need more help and support.

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

- If we had more options at the civic center, more exercise classes like zumba, spin, etc. We need more opportunities to be healthy.
- More healthy food available too. Healthy foods are more expensive than fast food, and it makes people more unhealthy. MSU Nutrition comes into the school to teach kids about eating healthy and nutrition (Jodi does a phenomenal job), but we could use more education for parents and the community about healthy eating.

**Key Informant Interview #4**

April 4, 2024

Anonymous

Via phone interview

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

- Like a 7/10 for health in the community. For the most part we have enough clinics and hospitals to support our population. And there are a lot of extra activities and groups for folks.
- Nutrition here is low, kids especially aren't getting enough fruits and vegetables and whole grains. There are lots of processed foods, and obesity in kids because of the lack of healthy foods.

- Crime rate is #1 in state, and we also have a drug problem. Also STIs are a big problem here, I think we have the highest rates in the state for that. I'm not sure how to address/fix that, if it's education or clinics or what.

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

- **Hospital/clinic:**
  - We are short on MD doctors – there are a couple NPs but only one MD between 2 clinics. Always kind of an issue.
  - We get lots of specialists in which is really nice. Logan does a great job with that so you don't have to travel as much.
  - With the two clinics in town you can pretty much get an appointment when you need one.
- **EMS Services (ER/Ambulance)**
  - We have a great EMS barn. We've had to use EMS/ambulance a few times and we've had great service, same with ER. Never had any issue.
- **Public/County Health Department**
  - They do a really good job. They're always advertising on Facebook and letting people know what they're doing. The immunization clinic is great, and really easy to schedule. They're thinking about coming to the schools to do presentations about vaping. They do a great job, and they're seen and heard in the community.
- **Senior Services (Nursing homes, assisted living, home health, senior center, etc.)**
  - We have a nursing home and senior center. The senior center does a great job, they have meals once a day, and take it to home-bound folks or you can go in person. The nursing home has changed hands a few times, and staff turnover is extremely high. They're definitely not adequately staffed, and they just laid off half of their staff so I'm not sure what is going on. We need help there.
- **Services for Low-Income Individuals/Families**
  - The school does free and reduced lunches. The electric company does reduced rates too. I'm not sure of all the other programs.

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

- Access, availability of getting an appointment. There were times you would call and they would have nothing for a week, which is frustrating. They are getting better, but we could still use more MDs.
- Logan has recently provided a therapist who comes into the school one day a week for counseling, and this is huge. It makes sure kids make it to their appointments, and it's been really helpful.
- Continuing to get lots of specialists visiting is important. The people they have coming now are great, I can take an hour off of work to see someone instead of a whole day. They do a great job with that.

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

- More MDs (even one more).
- Keep specialists coming in.

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

- The last couple years have been great, lots of changes for the better. We have a farmers market now and a shop that sells fresh meat. Parks does a great job, and we just got a new walking trail. I think we're headed in right direction.

**Key Informant Interview #5**

April 5, 2024

Anonymous

Via phone interview

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

- I think generally it's poor. I devote time every day to exercise, 6-7 times per week. The community does far less. Plus the number of people who are managed for multiple comorbidities is huge. There's a high level of non-compliance with exercise and dietary habits. People rarely do everything they can. People take meds but don't do much for lifestyle modification. And that's reflected in population here—the vast majority are overweight or obese. People may be active but they're not exercising, they don't understand what 'exercise' is.

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

- **Hospital/clinic:**
  - As far as what they offer for size of our community I really do believe it's adequate. There are services here for preventative care, specialists come in from Kalispell for lots of things. PT, cardiology, for example. Kalispell has offered/provided a lot for us, services we wouldn't have otherwise. Patients are able to access lots of services. But again there's so much resistance, people don't want to inconvenience themselves. The services are here, people just need to take advantage of them.
  - They offer birthday labs, and I think that's well-received and taken advantage of.
- **EMS Services (ER/Ambulance)**
  - It was voluntary EMS but is now paid. We have EMTs and paramedics on ambulance, which is a restricted range from the past but they're still able to transport locally and coordinate air service from Great Falls and Kalispell.
  - Our ER sees a lot more than other smaller communities on the Hi-Line. It's a demographic issue—we have a lot more substance abuse around Cut Bank than other communities do. Other ERs see pure emergencies but ours mostly sees people OD-ing on medication/alcohol/etc. Ours doesn't get genuine

emergencies, trauma emergencies. There are a lot more substance abuse related visits to the ER here.

- **Public/County Health Department**
  - I'm not that familiar with them. I know we have an excellent fire crew, but not sure about other departments.
- **Senior Services (Nursing homes, assisted living, home health, senior center, etc.)**
  - We once had 2 providers who went to nursing home/assisted living to provide services to seniors. The nursing home has 1 primary provider, but she's gone or leaving. There is quite a turn over in help there, and it's sad because there's not a lot of people to draw from. And the work ethic here is like everywhere else, it's not the best, people don't want to work. And that's reflected in the services. It's tough to find good help.
- **Services for Low-Income Individuals/Families**
  - The clinic accepts everyone, and the other clinic downtown is federal so they accept everyone too. There are dental services for people on Medicaid too.
  - The services are there for sure.
  - There is also low income housing here. The owners are not local though I think. The upper floors of the Super 8 are reserved for homeless folks.

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

- Diabetes and high blood pressure; overweight/obesity.

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

- What could really be a benefit is diabetic education, dietary services. Preventative help/education/services. It doesn't have to be local, just access to it would help. We need to help people start to manage things now with lifestyle changes and not medication, which will prevent trouble down the road. We keep pushing the same thing (lifestyle changes), but people are clueless as to what changes they should be making on a day to day basis. The lack of motivation is an issue; people don't want to do this stuff or realize its importance. We need more preventative information/education. And for new studies about that to be more widely known, so people know they need to get screenings or change their behaviors.

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

- It would be nice if the grocery stores would offer more healthy foods to eat.
- We could have team groups to exercise together and be active together and provide variations in active activities so it doesn't get boring and people keep doing it. There could be regular events on the walking trail for the community, or discount days at the Civic Center. The hospital could organize walking/outdoor/health events.
- The hospital website could be better about pushing healthier lifestyles. They could have a link that connects to resources about prevention/education/guidelines so folks would know where to go or what to do with the problems they're having.

- The hospital could have a program to provide incentives for people to get their health under control, like a rate cut in insurance, or something else to incentivize them. You have to give people something they can get back.
- There also has to be a way of gauging progress.



## Appendix J – Request for Comments

Written comments on this 2024 Community Health Needs Assessment Report can be submitted to the President at Logan Health – Cut Bank:

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

Contact Logan Health – Cut Bank’s President, Cherie Taylor at 406-873-3736 or [cherietaylor@logan.org](mailto:cherietaylor@logan.org) with questions.

