

IMPLEMENTATION PLAN

Addressing Community Health Needs



Dillon, Montana

2026-2029

¹ *Disclaimer: The Montana Office of Rural Health strongly encourages an accounting professional's review of this document before submission to the IRS. As of this publishing, this document should be reviewed by a qualified tax professional. Recommendations on its adequacy in fulfillment of IRS reporting requirements are forthcoming.*

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The Implementation Planning Process

The implementation planning committee – comprised of Barrett Hospital and HealthCare’s (BHH) leadership team and leadership from Beaverhead County Public Health (BCPH) – participated in an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through their community health needs assessment (CHNA) process.

The Community Health Services Development (CHSD) community health needs assessment was performed in the spring of 2026 to determine the most important health needs and opportunities for Beaverhead County, Montana. The CHSD project is administered by the Montana Office of Rural Health (MORH). “Needs” were identified as the top issues or opportunities rated by respondents during the CHSD survey process or during focus groups (see page 13 for a list of “Needs Identified and Prioritized”). For more information regarding the needs identified, as well as the assessment process/approach/methodology, please refer to the facility’s assessment report, which is posted on the facility’s website (<https://www.barrethospital.org>) and BCPH’s website (<https://beaverheadcountymt.gov/public-health-2/>).

The community steering and implementation planning committees identified the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives of the broad interest of the community, including those with public health expertise (see page 11 for additional information regarding input received from community representatives).

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

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

- **Mental/Behavioral Health Services**
- **Improving Vaccination Rates**
- **Alcohol/Substance Use Disorder**

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- **Community Outreach & Education**

In addressing the aforementioned issues, BHH & BCPH seek to:

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

Barrett Hospital and HealthCare (BHH) is dedicated to improving lives by providing local healthcare.

Barrett Hospital and HealthCare (BHH) strives to be the trusted choice of patients, providers and employers.

Beaverhead County Public Health Department (BCPH) is committed to strengthening our community by assessing community needs, promoting physical and mental health, preventing disease, and preparedness planning through community collaboration.

Beaverhead County Public Health Department (BCPH) fosters healthy generations: healthy you, healthy me, healthy us.

Implementation Planning Committee Members:

- Maria Koslosky, Chief Quality and Compliance Officer- Barrett Hospital and HealthCare (BHH)
- Lilia Guillen-Sanchez, Director- Beaverhead County Public Health (BCPH)
- Tina Giem, Chief Financial Officer and Information Security Officer- BHH
- Kayla Hatfield, Director of Operations- BHH
- Carolyn Hansen, Chief Clinical Officer- BHH
- Sandra McIntyre, Chief Medical Officer- BHH
- Elaine Spicer, Behavioral Health Coordinator- BCPH

Prioritizing the Community Health Needs

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

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

1. BHH's & BCPH's Existing Presence in the Community

The complete Beaverhead County resource guide can be found in CHNA Report

- BHH is a critical access hospital with an extensive offering of inpatient and outpatient services including primary and specialty care to residents of Beaverhead County and western Madison County
- BHH partners with the YMCA as a provider of therapy services and Beaverhead County high school to provide Athletic Training Services
- BHH provides health screening services for local employers and offers discounted laboratory test screening to the public annually

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- BHH hosts the local cancer support community and offers wellness services through prenatal classes, nutritional counseling, community health worker-initiated walking program and general conditioning program at the YMCA, and smoking cessation counseling
- BHH maintains an outdoor walking trail year-round and provides volunteer opportunities in the hospital auxiliary gift shop
- BHH has representatives on the local Alzheimer's Support Group, ACES Task Force, and Mental Health Local Advisory Council
- BHH sponsors numerous organizations/ events in the community such as the Labor Day Rodeo, Beaverhead County Fair, Beaverhead Marathon, University of Montana Western Athletics, Beaverhead County High School Booster Club, and numerous others
- Barrett Hospital Foundation supports the Southwestern Montana Mammography program providing funds for screening and treatment of breast cancer to local residents
- Barrett Hospital Foundation also provides educational scholarships to local high school students pursuing careers in healthcare, to students attending medical school, and to hospital employees furthering their education
- BHH offers the REACH (Research and Explore Awesome Careers in Healthcare) program to local high school students annually
- BCPH offers WIC (Women Infant Child Supplemental Nutrition Program), Family Planning, and Immunization Clinics.
- BCPH provides the following other services: public health emergency preparedness, communicable disease investigation, public health education, influenza vaccination clinics, school/sexual health education, Maternal Child Health projects, Car Seat Technician services, and Fetal Infant Child Maternal Mortality Review (FICMMR).

2. List of Available Community Partnerships and Facility Resources to Address Needs

The complete Beaverhead County resource guide can be found in CHNA Report

- Barrett Hospital & HealthCare

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- Clinic (including Walk-in)
 - Hospital inpatient (including transitional care) and outpatient services
- Beaverhead County Public Health
 - Beaverhead Family Planning, WIC & Immunization Clinics
- Other healthcare providers:
 - Beaverhead Emergency Medical Services
 - Dillon Medical Supply
 - Local optometrists, dentists, and chiropractors
 - Local pharmacies
 - Montana Migrant & Seasonal Farmworkers Council
 - Community physical & occupational therapy providers
 - Outlying ambulance and QRU services
 - Blacktail Medical Clinic (formerly known as Southwest Montana Community Health Center)
 - AG Workers Health & Services
 - Honeybee Hospice
- Long Term Care Facilities
 - Pioneer Care & Rehabilitation Center
 - Tobacco Root Mountain Care Center
- Assisted Living facilities
 - BeeHive Homes of Dillon
 - Renaissance
- Mental Health/ Disability Services
 - Beaverhead County Local Advisory Committee for Mental Health
 - BSW, Inc. Dillon Division
 - Dillon Alano Club
 - Local LCPC and LCSW providers
 - Southwest Chemical Dependency Program
 - Yellowstone Boys and Girls Ranch
 - Youth Dynamics
- Affiliations for training future healthcare providers

- Medical, physician assistant, and nursing schools, schools of pharmacy and physical therapy, schools that train radiology and lab techs, and residency programs.
- Schools:
 - Beaverhead County High School
 - District 10 (Parkview Elementary and Dillon Middle School)
 - Lima, Twin Bridges, and Sheridan Schools
 - Montana Youth Challenge Academy
 - Rural schools
 - University of Montana Western
- Community Resources:
 - Beaverhead ACES Task Force
 - Beaverhead Community Food Bank
 - Beaverhead County Early Childhood Coalition
 - Beaverhead Crisis Diversion
 - Beaverhead DUI Task Force
 - Beaverhead Project Aware
 - Beaverhead Resource Assistance Center
 - Beaverhead Senior Citizens
 - Beaverhead Wood Bank
 - Dillon Volunteer Fire Department
 - Low income/ disabled/ senior housing
 - Beaverhead County Be the Change Coalition
 - New Hope Pregnancy Support Center of Dillon
 - St. Rose Community Basement
 - Veteran Services including Beaverhead American Legion, Beaverhead White Hat Coalition, Joining Community Forces, Patriot Guard Riders of Montana, Veterans & Military Exchange, and VFW Post 9040.
 - Women's Resource Center
- Service Organizations:
 - Jaycees
 - Kiwanis
 - Lions

- Rotary
- Soroptimists
- United Way
- Government Resources:
 - Adult Protective Services
 - Beaverhead County Disaster & Emergency Services/ Local Emergency Planning Committee (LEPC)
 - Beaverhead County government including Beaverhead County Sheriff's Dept
 - Child Protective Services
 - Dillon city government including Dillon Police Department and City Bus
 - Montana Department of Public Health & Human Services (MT DPHHS)
 - Montana Office of Rural Health/Area Health Education Center (MORH/AHEC)
- Fitness Resources:
 - American Legion Baseball
 - Bair Foot Gym
 - Beaverhead Amateur Hockey Association
 - Beaverhead Golf Course
 - Beaverhead Sno-Riders
 - Beaverhead Trails Coalition
 - Bike/Walk Southwest Montana
 - Boy Scouts
 - Topo Fitness & 24/7 Gym
 - Dillon Little Guy Wrestling
 - Dillon Youth Flag Football League
 - Girl Scouts
 - Jaycee's Little Skier Program
 - Little League Baseball
 - Maverick Mountain Ski Area
 - Montana Running Co.
 - Safe Routes to School Program/ Walking School Bus Program
 - Shine Dance Studio
 - Southwestern Montana Family YMCA

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- Youth 4-H Programs
- Regional & National Affiliations
 - Association of Montana Public Health Officers (AMPHO)
 - Wellvana Accountable Care Organization
 - HealthTech
 - Montana Environmental Health Association (MEHA)
 - Montana Public Health Association (MPHA)
 - Montana Public Health Institute (MPHI)
 - Midwest QIN/QIO
 - Providence Health & Services Community Connect EMR
 - The Montana Hospital Association (MHA)
 - The Montana Rural Healthcare Performance Improvement Network

3. Beaverhead County Indicators

Population Demographics

- 90% of Beaverhead County's population is white, and 2.0% identifies as American Indian or Alaska Native
- 31.5% of Beaverhead County's population has disability status
- 24% of Beaverhead County's population is 65 years and older
- 8.9% of Beaverhead County's population has Veteran status

Size of County and Remoteness

- 9,590 people in Beaverhead County
- 1.7 people per square mile

Socioeconomic Measures

- 12.5% of children live in poverty

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- 14% of people are below the federal poverty level
- 6% of adults (age<65) are uninsured

Select Health Measures

- 30.2% of adults are considered obese
- 24.3% of the adult population report physical inactivity
- Gestational diabetes percentage is 8.8% (compared to 6.6% for Montana)
- ED encounter rate for all drug overdose is 206.9 (compared to 179.2 for Montana)
- Chlamydia rate is 417.5 (compared to 375.0 for Montana)
- Campylobacteriosis rate is 97.6 (compared to 31.6 for Montana)
- Melanoma diagnosis rate is 32.9 (compared to 27.1 for Montana)
- Roughly 82% to 86% of young children receive standard childhood shots, though local coverage is below the Healthy People 2030 (HP2030) target of 90%. This is continuing to decrease in vaccination rates.

Nearest Major Hospital

- St. James Hospital in Butte, MT – 64.4 miles from Barrett Hospital & HealthCare

4. Public Health and Underserved Populations Consultation Summaries

Name/Organization

January 7, 2026

Lilia Guillen-Sanchez- Beaverhead County Public Health Department (BCPH)
Damian Guillen- Barrett Hospital and HealthCare (BHH)
Kayla Hatfield, BHH
Katie Hawkins, MD- BHH
Sandra McIntyre, MD- BHH
Sue Priebe- Retired Psychologist
Taylor Rose, CEO- BHH
Rachel Heuer, MD- BHH
Elaine Spicer, BCPH
Megan Evans, BCPH

Public and Community Health

- Doctors and the hospital have to solve problems about kids, poverty, food insecurity, houselessness, access to care, etc. – these issues do show up and matter
- Food insecurity vs healthy food insecurity
- You have Coordinated Care Management? You should advertise that more
- CMS is expanding what they're willing to cover around SDOH, but it's really hard to identify what qualifies someone for help
- There's a lot of pride here, and we see that in melanoma rates, mental health care, firearm deaths, etc.
- The Spanish-speaking community in Dillon/Beaverhead is often overlooked
- LGBTQ community is also often overlooked
- There have been so many surveys in this community recently; people are surveyed out

Population: Low income, underinsured

- There are unhoused people here using pockets of help and neighbors, but who are slipping through institutional cracks; they're not being accounted for in many ways
- There is lots of unacknowledged houselessness here
- WRC is the only shelter in Beaverhead & Madison Counties – and can only assist people experiencing domestic or sexual violence
- I'm curious about unhoused children, how many there are
- How many people slip through the cracks

Population: Seniors

- Nursing home & assisted living beds always have wait lists
- If everyone who should be in the nursing home or assisted living was there would definitely be bed shortages
- There are lots of elderly people here without resources, without family
- There is probably a large population of vulnerable and lonely elderly folks
- There is Meals on Wheels, but going to the grocery store and getting food when you're old is really hard – we could probably do more there as a community
- There are psychiatric outpatient services for the elderly – this program provides lunch and often it's the only real or healthy meal the patients eat all week

Population: Youth

- I'm curious about unhoused children, how many there are
- In school 38% is on free & reduced lunch – actual need is probably around 50%, but people don't sign up because of pride – but that's free *and* reduced, not sure how it's broken up within that
- This is a really generous community – beef and pork were just donated to the school
- We do breakfast, lunch, and backpack programs to feed kids
- We recently redefined homelessness for kids – there is a network of care for kids and adults without stable housing – there is a big grey area
- College kids come to the hospital sometimes, especially about communicable diseases/STIs – we should do a focus group with them

Population: Veterans

- We have a lot of veterans here
- I think we should prioritize veteran care

Needs Identified and Prioritized

Prioritized Needs to Address

1. Access to healthcare services was the top component of a health community.
2. 25% of respondents rated their knowledge of health services in the community as Fair or Poor.
3. 56.2% of respondents rated their knowledge of health services at BCPH as Fair or Poor.
4. 31.6% of respondents rated their knowledge of health services at BHH as Fair or Poor.
5. Access to healthcare would be improved with more specialists, more information about available services and more mental health providers.
6. 32.6% of Beaverhead County reported frequent mental distress.
7. ED encounters for all drug overdose rate per 100,000 was 206.9 in Beaverhead County, higher than the state rate (179.2).
8. ED encounters for alcohol use rate per 100,000 was 783.4 in Beaverhead County.

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9. Alcohol/substance use and mental health issues were the top two health concerns by survey respondents.
10. 60% of adult respondents indicated they had had immunizations as a preventative service while only 7.4% reported childhood immunizations.
11. Roughly 82% to 86% of young children receive standard childhood shots, though local coverage is below the Healthy People 2030 (HP2030) target of 90%. This is continuing to decrease in vaccination rates.
12. Most common method respondents learned about health services was through their healthcare provider, friends and family, word of mouth/reputation.
13. Behavioral and mental health concerns emerged as the most consistent urgent theme in focus groups and key informant interviews.
14. Transportation assistance was a high concern for focus group/key informant interview participants.

Needs Unable to Address

(See page 24 for additional information)

1. Affordable housing was a component of a healthy community for 35.1% of respondents. 63% of respondents did not think there are adequate and affordable housing options in the community.
2. Dermatology was the most desired local healthcare service (59.0%).

Executive Summary

The following summary briefly represents the goals and corresponding strategies and activities which the facility will execute to address the prioritized health needs (from page 13). For more details regarding the approach and performance measures for each goal, please refer to the Implementation Plan Grid section, which begins on page 16.

Goal 1: Improve vaccination rates in Beaverhead County to meet national standard of 90%

Strategy 1.1: Improve vaccination rates in Beaverhead County by increasing awareness, reducing barriers to access, and building confidence in recommended vaccines.

- 1.1.1.** Increase awareness, vaccination utilization, and availability through outreach to Beaverhead County communities via visits at least 1x/year. Communities to be included: Wisdom, Wise River, Jackson, Polaris, Glen, Melrose, Dewey, Lima.
- 1.1.2.** Coordinate and implement pediatric vaccination clinics to increase access to recommended childhood immunizations, reduce barriers to care, and improve vaccination rates.
- 1.1.3.** Develop educational materials tailored to rural and frontier communities, including social media, radio, and community newsletters, to share accurate vaccine information.

Goal 2: Improve access to comprehensive behavioral health services in Beaverhead County.

Strategy 2.1: Expand timely access to high-quality behavioral health services by strengthening care delivery and increasing collaboration among community partners.

- 2.1.1.** Implement an outpatient telepsych service using innovative care delivery models to reduce geographic and logistical barriers.
- 2.1.2.** Evaluate and build relationships with educational entities (local schools and MYC) to improve communication between systems and thereby continuity of care for students.

- 2.1.3. Implement BCPH Behavioral Health Coordinator workplan, which will improve collaboration among healthcare providers, public health agencies, schools, social service organizations, and community partners to create a coordinated behavioral health system.

Strategy 3.1: Strengthen community assessment, care coordination, and resource awareness to address alcohol and substance use disorders.

- 3.1.1. Conduct a community survey to assess knowledge, attitudes, barriers, and needs related to alcohol and substance use disorders to inform future prevention and intervention efforts.
- 3.1.2. Collect and analyze emergency department data on alcohol-and substance-related presentations to identify trends, improve care coordination, and strengthen connections to community treatment and resources.
- 3.1.3. Develop and maintain a comprehensive, up-to-date community resource guide that includes prevention, treatment, recovery, and support services for individuals and families affected by alcohol and substance use disorders.

Goal 4: Improve community knowledge of health services available in Beaverhead County.

Strategy 4.1: Strengthen Community Outreach, Education, and Communication to Increase Awareness, Health Literacy, and Access to Local Health Services.

- 4.1.1. Continue to offer educational opportunities and events on timely and relevant topics to improve health literacy and health outcomes.
- 4.1.2. Develop and implement a coordinated outreach campaign utilizing radio, social media, print, and other communication channels to increase awareness of public health programs and services available through Beaverhead County Public Health.

- 4.1.3.** Expand Beaverhead Hospital and HealthCare’s social media presence by providing consistent, engaging content that promotes available services, community resources, wellness initiatives, and upcoming events.

Implementation Plan Grid

Goal 1: Improve vaccination rates in Beaverhead County to meet national standard of 90%.					
Strategy 1.1: Improve vaccination rates in Beaverhead County by increasing awareness, reducing barriers to access, and building confidence in recommended vaccines.					
Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Increase awareness, vaccination utilization, and availability through outreach to Beaverhead County communities via visits at least 1x/ year. Communities to be included: Wisdom, Wise River, Jackson, Polaris, Glen, Melrose, Dewey,	BCPH	11/30/27	Lilia Guillen-Sanchez	BHH, community partners	Cost/personnel, Community participation
Coordinate and implement pediatric vaccination clinics to increase access to recommended childhood immunizations, reduce barriers to care, and improve	BHH	6/30/27	Kayla Hatfield	Clinic providers	Cost and personnel, community vaccine hesitancy

Develop educational materials tailored to rural and frontier communities, including social media, radio, and community newsletters, to share accurate	BHH	6/30/27	Kayla Hatfield	BCPH Clinic providers Kelly Graham Kinetic Marketing	Cost and personnel
Needs Being Addressed by this Strategy: 1. Access to healthcare services was the top component of a health community. 2. 25% of respondents rated their knowledge of health services in the community as Fair or Poor. 3. 56.2% of respondents rated their knowledge of health services at BCPH as Fair or Poor. 4. 31.6% of respondents rated their knowledge of health services at BHH as Fair or Poor. 5. Access to healthcare would be improved with more specialists, more information about available services, and more mental health providers. 10. 60% of adult respondents indicated they had had immunizations as a preventative service, while only 7.4% reported childhood immunizations. 11. Roughly 82% to 86% of young children receive standard childhood shots, though local coverage is below the Healthy People 2030 (HP2030) target of 90%. This is continuing to decrease in vaccination rates. 12. Most common method respondents learned about health services was through their healthcare provider, friends and family, word of mouth/reputation. 14. Transportation assistance was a high concern for focus group/key informant interview participants.					
Anticipated Impact(s) of these Activities: - Increase vaccination awareness and health literacy - Improved health outcomes - Increased access to healthcare services - Increase utilization of recommended childhood vaccines - Reduce barriers to preventative healthcare services - Strengthen trust in local healthcare and public health organizations					

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

- Number of outreach visits/communities reached
- Number of residents engaged through outreach events
- Number of clinics conducted
- Number of children vaccinated
- Social media reach, impressions, and engagement

Measure of Success: Increase childhood immunization coverage rates in Beaverhead County, with progress toward the Healthy People 2030 target of 90%.

Goal 2: Improve access to comprehensive behavioral health services in Beaverhead County.

Strategy 2.1: Expand timely access to high-quality behavioral health services by strengthening care delivery and increasing collaboration among community partners.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Implement an outpatient telepsych service using innovative care delivery models to reduce geographic and logistical barriers.	BHH	6/30/27	Kayla Hatfield Taylor Rose	Outpatient Telepsych provider	Workforce, limited broadband internet or technology
Evaluate and build relationships with educational entities (local schools and MYC) to improve communication between systems and thereby continuity of care for students.	BHH/BCHP	6/30/28	Kayla Hatfield Carolyn Hansen	Schools, MYC	Turnover among staff or community partners, limited time and competing priorities for school personnel

Implement BCPH Behavioral Health Coordinator workplan, which will improve collaboration among healthcare providers, public health agencies, schools, social service organizations, and community partners to create a coordinated behavioral health system.	BCPH	6/30/27	Lilia Guillen-Sanchez Elaine Spicer	Healthcare providers, public health agencies, schools, social service organizations, community partners	Community and/or stakeholder engagement
Needs Being Addressed by this Strategy: 1. Access to healthcare services was the top component of a health community. 5. Access to healthcare would be improved with more specialists, more information about available services and more mental health providers. 6. 32.6% of Beaverhead County reported frequent mental distress. 9. Alcohol/substance use and mental health issues were the top two health concerns by survey respondents. 12. Most common method respondents learned about health services was through their healthcare provider, friends and family, word of mouth/reputation. 13. Behavioral and mental health concerns emerged as the most consistent urgent theme in focus groups and key informant interviews. 14. Transportation assistance was a high concern for focus group/key informant interview participants.					
Anticipated Impact(s) of these Activities: - Strengthened community partnerships - Increased access to care - Reduced travel time, transportation barriers, and wait times for behavioral health appointments - Reduced reliance on ED for non-emergency behavioral health needs - More coordinated behavioral health referral pathways and resource navigation - Improved health outcomes					

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

- Percentage of patients using tele-psych services
- Number of referrals between schools, MYC, healthcare providers and community partners and follow-up completion rates
- Track development of community resources
- Monitor trend in behavioral health-related ED visits and crisis interventions over time

Measure of Success: Improvement in community behavioral health indicators, such as reduced frequent mental distress and increased access to care, as measured through future Community Health Needs Assessments or local public health data.

Goal 3: Reduce the impact of alcohol and substance use disorders in Beaverhead County.

Strategy 3.1: Strengthen community assessment, care coordination, and resource awareness to address alcohol and substance use disorders

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Conduct a community survey to assess knowledge, attitudes, barriers, and needs related to alcohol and substance use disorders to inform future prevention and intervention efforts.	BCHD	6/30/27	Lilia Guillen-Sanchez Elaine Spicer	Healthcare providers, public health agencies, schools, social service organizations, community partners	Stigma associated with substance use disorders, community concerns about confidentiality and privacy may limit participation
Collect and analyze emergency department data on alcohol-and substance-related presentations to identify trends, improve care coordination, and strengthen connections	BHH	6/30/27	Carolyn Hansen Maria Koslosky	Damian Guillen	Limited staff capacity for data collection, analysis and reporting, limited availability of

Develop and maintain a comprehensive, up-to-date community resource guide that includes prevention, treatment, recovery, and support services for individuals and families affected by alcohol and substance use disorders.	BHH/BCPH	6/30/28	Kayla Hatfield	Amy Wellborn	Frequent changes in available resources, limited BH providers or treatment resources
Needs Being Addressed by this Strategy: 1. Access to healthcare services was the top component of a health community. 5. Access to healthcare would be improved with more specialists, more information about available services and more mental health providers. 6. 32.6% of Beaverhead County reported frequent mental distress. 7. ED encounter for all drug overdose rate per 100,000 was 206.9 in Beaverhead County, higher than the state rate (179.2). 8. ED encounters for alcohol use rate per 100,000 was 783.4 in Beaverhead County. 9. Alcohol/substance use and mental health issues were the top two health concerns by survey respondents. 12. Most common method respondents learned about health services was through their healthcare provider, friends and family, word of mouth/reputation. 13. Behavioral and mental health concerns emerged as the most consistent urgent theme in focus groups and key informant					
Anticipated Impact(s) of these Activities: - Increased understanding of community perceptions, needs and barriers related to alcohol and substance use - Improved ability to identify gaps in prevention, treatment and recovery services - Improved understanding of local trends in alcohol and substance-related health impacts - Increased use of data to guide community planning, resource allocation, and prevention efforts - Increased access to appropriate support services - Increased awareness of available resources					

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

- Assess community knowledge and needs
- Monitor emergency department trends
- Evaluate resource accessibility and utilization
- Measure improvements in collaboration and referral pathways

Measure of Success: Increased community awareness of alcohol and substance use disorder resources and support services.

Goal 4: Improve community knowledge of health services available in Beaverhead County.

Strategy 4.1: Strengthen community outreach, education, and communication to increase awareness, health literacy, and access to local health services.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Continue to offer educational opportunities and events on timely and relevant topics to improve health literacy and health outcomes.	BHH	Ongoing	Leadership	Providers	Workforce, low attendance due to competing priorities
Develop and implement a coordinated outreach campaign utilizing radio, social media, print, and other communication channels to increase awareness of public health programs and services available through Beaverhead County Public	BCHD	12/31/27	Lilia Guillen-Sanchez	Public Health Staff, KDBM/ KBEV Radio Station, Dillonite Daily	Differences in technology access, internet connectivity, and communication preferences

Expand Beaverhead Hospital and HealthCare’s social media presence by providing consistent, engaging content that promotes available services, community resources, wellness initiatives, and upcoming events.	BHH	Ongoing	Taylor Rose	Kelly Graham Kinetic Marketing	Workforce capacity, broadband connectivity and technology utilization
Needs Being Addressed by this Strategy: 1. Access to healthcare services was the top component of a health community. 2. 25% of respondents rated their knowledge of health services in the community as Fair or Poor. 3. 56.2% of respondents rated their knowledge of health services at BCPH as Fair or Poor. 4. 31.6% of respondents rated their knowledge of health services at BHH as Fair or Poor. 5. Access to healthcare would be improved with more specialists, more information about available services and more mental health providers. 12. Most common method respondents learned about health services was through their healthcare provider, friends and family, word of mouth/reputation.					
Anticipated Impact(s) of these Activities: - Improved community health literacy and awareness - Enhanced community engagement and connection - Reduced barriers to accessing health resources - Strengthened collaboration between public health and healthcare partners - Improved trust and visibility of local health organizations					
Plan to Evaluate Anticipated Impact(s) of these Activities: - Track participation and engagement - Measure communication effectiveness - Assess service awareness and utilization					
Measure of Success: Increased community awareness of available healthcare and public health programs and services.					

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Needs Not Addressed and Justification

Identified health needs unable to address by CHA	Rationale
1. Affordable housing was a component of a healthy community for 35.1% of respondents. 63% of respondents did not think there are adequate and affordable housing options in the community.	• Other entities in the community are better equipped to handle affordable housing efforts.
2. Dermatology was the most desired local healthcare service (59.0%).	• Exploring feasibility of offering service locally but not specifically addressed in this plan.

Dissemination of Needs Assessment

Barrett Hospital & HealthCare (BHH) and Beaverhead County Public Health Department (BCPH) disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on the hospital's website (<https://www.barrethospital.org>) and the public health department's website (<https://beaverheadcountymt.gov/public-health-2/>) as well as having copies available at each facility should community members request to view the community health needs assessment or the implementation planning documents.

The Steering Committee, which was formed specifically as a result of the CHSD [Community Health Services Development] process to introduce the community to the assessment process, will be informed of the implementation plan to see the value of their input and time in the CHSD process, as well as how BHH and BCPH are utilizing their input. The Steering Committee, as well as the Board of Directors, will be encouraged to act as advocates in Beaverhead County as BHH and BCPH seek to address the health needs of their community.

Furthermore, the board members of BHH will be directed to the hospital's website to view the complete assessment results and the implementation plan. BHH board members approved and adopted the plan on **August 24, 2026**. Board members are encouraged to familiarize themselves with the needs assessment report and implementation plan, so they can publicly promote the facility's plan to influence the community in a beneficial manner.

Written comments on this 2026-2029 Strategic Plan can be submitted to:

Barrett Hospital & HealthCare

Compliance Department
600 MT Hwy 91 S
Dillon, MT 59725

Contact Barrett Hospital & Healthcare's Chief Quality & Compliance Officer at 406-683-3190 or compliance@barrethospital.org with questions.

Beaverhead County Public Health Department

327 East Helena Street
Dillon, MT 59725

Contact Beaverhead County Public Health Department's Director at 406-683-4771 or lguillen@beaverheadcountymt.org with questions.