

IMPLEMENTATION PLAN

Addressing Community Health Needs

Barrett Hospital & HealthCare ~ Dillon, Montana

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The Implementation Planning Process

The implementation planning committee – comprised of Barrett Hospital & HealthCare’s leadership team and two board members – participated in an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through the Community Health Services Development (CHSD) needs assessment process, a part of the Frontier Better Medicine Better Health Partnership (FMBHP) project. The facility conducted the CHSD process in conjunction with the Montana Office of Rural Health (MORH).

The CHSD community health needs assessment was performed in the winter of 2013-2014 to determine the most important health needs and opportunities for Beaverhead County, Montana. “Needs” were identified as the top issues or opportunities rated by respondents during the CHSD survey process or during focus groups (see page 9 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 (www.barrethospital.org).

The implementation planning committee identified 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 page 8 for additional information regarding input received from community representatives).

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

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

1. Enhancing surgical services
2. Improving access to healthcare
3. Increasing awareness of existing services
4. Improving access to primary care
5. Mental health

In addressing the aforementioned issues, Barrett Hospital & HealthCare seeks to:

- a) Improve access to healthcare services;
- b) Enhance the health of the community;
- c) Advance medical or health knowledge;
- d) Relieve or reduce the burden of government or other community efforts

Barrett Hospital & HealthCare's Mission:

- Barrett Hospital & HealthCare provides compassionate care, healing, and health-improving service to all community members throughout life's journey.

Barrett Hospital & HealthCare's Vision:

- To be the model in rural healthcare delivery for the United States in all facets of primary health services.

Barrett Hospital & HealthCare's Values:

- *I CARE*: Integrity, Compassion, Adaptability, Respect, Excellence

Implementation Planning Committee Members:

- Ken Westman – CEO, Barrett Hospital & HealthCare
- Ben Power – Better Health Improvement Specialist, Barrett Hospital & HealthCare
- Carol Kennedy – Chief Clinical Officer, Barrett Hospital & HealthCare
- Cynthia White – Director of Provider Services, Barrett Hospital & HealthCare
- Dick Achter – CFO, Barrett Hospital & HealthCare
- Geoffrey Roach – Human Resources Director, Barrett Hospital & HealthCare
- Heather Larson – Medical Assistant, Barrett Hospital & HealthCare
- Maria Koslosky – Quality Director/Compliance Officer, Barrett Hospital & HealthCare
- Nate Finch – Board member, Barrett Hospital & HealthCare
- Shane Puyear – Board member, Barrett Hospital & HealthCare

Prioritizing the Community Health Needs

The implementation planning committee completed the following to prioritize the community health needs:

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

Barrett Hospital & HealthCare's Existing Presence in the Community

- Supports the new "Trails Rx Program" that includes distance markers on paths so physicians can write prescriptions for walking.
- Partners with the annual health fair held in the spring and provide lab screenings once a year in Dillon and surrounding communities.
- Supports the annual American Cancer Society's "Relay for Life" event in Dillon.
- Supports the American Cancer Society's "Bark for Life" 5k run with their dogs on June 1, 2014.
- Provides physical therapy presence at the YMCA.
- Performs health screenings for Barrett Minerals, a large local employer.
- Hosts booth at annual Expo in Dillon and Mayfair in Butte.
- Sponsors local cancer support community, hospice volunteer training, and provides several medical/nursing scholarships. Partners with local high school to provide athletic training services
- Provides nursing services to the MT Youth Challenge program

List of Available Community Partnerships and Facility Resources to Address Needs

- Assisted Living facilities and the Nursing Home are available to senior citizens in Dillon
- Barrett Hospital & HealthCare (BHH) has several contracts with medical, physician assistant, and nursing schools, schools of pharmacy and physical therapy, schools that train radiology and lab techs, and residency programs.
- Beaverhead County Public Health works toward the promotion and maintenance of individual, group, and community health

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Community Partnerships & Facility Resources continued...

- BHH provides residency slots for medical students in the Billings Family Practice program
- Butte Community Health Center provides medical, dental, behavioral health and pharmacy services in Butte, Dillon, and Sheridan, Montana
- BHH is participating in a PCORI Grant aimed at improving transitions for community members ready to receive care in referral centers back to BVHD County
- Beaverhead County Commissioners formed a local advisory council that matches mental health services to people in need of those services
- Crisis Response helps place patients in mental health facilities
- Dillon Cancer Support Group, part of Cancer Support Community Montana, is a support group for anyone who has been diagnosed with cancer as well as their family, friends, and caregivers
- Emergency Medical Services (EMS) provides clinical opportunities and collaborates at quarterly EMS meetings held at BHH, maintains an Memorandum of Understanding (MOU) with BHH to support transfer of patients to different level of care
- The Frontier Medicine Better Health Partnership (FMBHP) project is a collaboration formed to address the unique healthcare challenges in frontier/rural communities
- A “Lean” Intern from Montana State University (MSU) gives the hospital recommendations for process improvement
- Local Emergency Planning Committee (LEPC) provides a forum for all potential participants in emergency situations: Law enforcement, Fire, EMS, and BHH
- Montana Department of Public Health & Human Services (MT DPHHS) works to protect the health of Montanans
- Montana Office of Rural Health/Area Health Education Center (MORH/AHEC) provides technical assistance to rural health systems and organizations
- Montana Tech business students help Barrett Hospital & HealthCare with health informatics
- National Alliance on Mental Illness (NAMI) provides mental health education, advocacy, and support
- Providence Health & Services provides a community connection for using Epic EHR [electronic health records] software including hospitals in Dillon, Anaconda, Polson, Deer Lodge, and Clark Fork, as well as hospitals in Oregon, Washington, and Alaska
- Southwestern Montana Family YMCA provides programs and services focused on the development of children and youth, family strengthening, and health and well-being for all
- BHH provides various trainings for staff and students at University of Montana – Western in Dillon.
- Western Montana Mental Health offers behavioral health services
- WWAMI [Washington Wyoming Alaska Montana Idaho] medical student placements

Beaverhead County Indicators

Low Income Persons

- 16% of persons are below the federal poverty level

Uninsured Persons

- 21.5% of adults less than age 65 are uninsured
- Data is not available by county (data is available for some counties) for uninsured children less than age 18

Leading Causes of Death: Primary and Chronic Diseases

- Heart Disease
- Cancer
- Unintentional Injuries

* Note: Other primary and chronic disease data is by region and thus difficult to decipher community need.

Elderly Populations

- 16% of Beaverhead County's Population is 65 years and older

Size of County and Remoteness

- 8,903 people in Beaverhead County
- 1.6 people per square mile

Nearest Major Hospital

- St. James Hospital in Butte, MT is 64.5 miles from Barrett Hospital & HealthCare

Public Health and Underserved Populations Consultation Summaries

Public Health Consultation [Sue Hansen, Director of Beaverhead County Public Health Department – March 10, 2014]

- Increasing walking and biking trails to increase physical activity would make our community a healthier place to live.
- Ensure that people have access to immunizations.
- Mental health is a priority – there is a lack of mental health [support].
- Chronic illness such as diabetes, heart disease, and obesity are some of the most important local healthcare issues.
- Mental health/crisis intervention services are needed in the community.

Underserved Population – Youth [Christina Power, mother & Marie Smith, mother & BHH Employee – November 13, 2013]

- Immunizations are very low in Beaverhead County. I feel some people think they can't afford the Well Baby Checkups or there is just a lack of awareness.
- Young families tend to utilize the Emergency Room the most.

Underserved Population – Senior Citizens [Mary Bearden & Joan Grogan, Community Members – November 13, 2013]

- Offering specialized local services is helpful to people to not have to travel for services they need on a regular basis (e.g. chemotherapy).

Needs Identified and Prioritized

Prioritized Needs to Address

1. 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community
2. Focus group participants indicated a desire for an additional general surgeon
3. 22.6% of survey respondents reported utilizing orthopedic surgery and focus group participants also indicated a need for additional availability for orthopedic surgery
4. 40.2% of survey respondents believe that more specialists would improve the community's access to healthcare
5. Nearly half (47.5%) of survey respondents reported having a 'good' knowledge of health services while only 19.6% reported feeling they have an 'excellent' awareness of services
6. 29.4% of respondents indicated that great health education services would improve the community's access to healthcare
7. 27.4% of survey respondents chose their primary care provider based on appointment availability
8. Focus group participants reported a lack of availability of services on the weekend, including MRI/CT scans and the walk-in clinic
9. 32.3% of survey participants indicated they were not aware of or were unsure of cost assistance programs
10. Of the respondents who reported they delayed receiving healthcare services (31.4%), reasons indicated were: it costs too much (65.6%), no insurance (31.3%), or insurance did not cover it (25%)
11. A desire for senior well checks was indicated by 16.7% of survey respondents
12. 44.1% of respondents indicated that more primary care providers would improve the community's access to healthcare
13. 8.6% of respondents reported it took 15 or more days to see their primary care provider after scheduling an appointment
14. 18.6% of respondents reported they experienced periods of feeling depressed on most days for at least three consecutive months
15. 22.1% of respondents reported that depression/anxiety is a top health concern in the community
16. According to data from MT DPHHS, Beaverhead County has a suicide rate of 18.1 per 100,000 people compared to Montana's rate (20.3 per 100,000) and the nation's rate (12 per 100,000)

Needs Unable to Address

(See page 31 for additional information)

1. 24.7% of respondents indicated they utilized dermatology services in the past three years and 32.4% of respondents indicated a need for local dermatology services as they are not currently available
2. 45.1% of respondents indicated cancer is a top health concern in the community and 12.3% of respondents indicated a need for local chemotherapy services
3. Respondents indicated interest in first aid/CPR classes (29.4%), fitness classes (28.4%), and health & wellness programs (26%)
4. The majority (54.4%) of respondents indicated alcohol/substance abuse is a top health concern in the community
5. 29.9% of respondents indicated that overweight/obesity is a top health concern in the community
6. Heart disease and unintentional injuries are leading causes of death in Beaverhead County

Executive Summary

The following represents a summary of the goals and corresponding strategies and activities which the facility will execute to address the prioritized health needs (from page 9). For more details regarding the approach and performance measures for each goal, please refer to the Implementation Plan Grid section, which begins on page 15.

Goal 1: Increase the availability of select surgical services for members in Barrett Hospital & HealthCare's service area.

Strategy 1.1: Provide additional surgical services.

Activities:

- Hire an additional part-time general surgeon to complement existing general surgery services.
- Continue working on building a relationship with Bridger Orthopedics to provide more subspecialty orthopedic services and back-up orthopedic surgery coverage.

Strategy 1.2: Improve efficiency of the surgical department.

Activities:

- Establish a plan to create comprehensive scheduling and competitive pricing to maintain loyalty of patients and earn local business for visiting surgeons.
- Prepare staff for changes in the surgical department. Provide Customer Service Training, TEAM STEPPS training.
- Improve staff's proficiency with "Epic" the electronic health record (EHR) software.

Goal 2: Improve the accessibility of services at Barrett Hospital & HealthCare.

Strategy 2.1: Improve the convenience of ancillary services for patients.

Activities:

- Perform an in-depth analysis to determine the feasibility of changing hours for imaging services (CT, MRI, etc.) to accommodate the schedules of patients who work.
- Perform an in-depth analysis using existing data to determine the feasibility of expanding hours for rehabilitative services to accommodate the schedules of patients who work.
- Perform an in-depth analysis to determine the feasibility of changing hours for the walk-in clinic to be available during the lunch hour for patients.
- Perform an in-depth analysis to determine the feasibility of changing hours for the billing department (financial counseling and bill-pay) and the feasibility of providing convenient, alternative methods of payment.

Strategy 2.2: Bring healthcare services directly to the patient.

Activities:

- Providers will continue to provide house calls when necessary.
- Examine potential for providing “senior well checks” where healthcare providers perform care for senior citizens at senior centers and assisted living facilities.

Goal 3: Increase awareness of the services available at Barrett Hospital & HealthCare.

Strategy 3.1: Develop a comprehensive, long-term marketing strategy that is cohesive, consistent, targeted, strategic, and cost-effective.

Activities:

- Work with members of the hospital foundation who are currently responsible for managing marketing to determine the effectiveness of current marketing strategies.
- Create a committee of key staff members to make decisions regarding the marketing strategy.
- Consider outsourcing a marketing specialist for marketing expertise to find the best value to fit BHH’s needs.
- Determine the most-effective channels to promote the message.
- Review BHH tagline.
- Create a message that educates about services that are available and demonstrates the value of services that patients receive.
- Implement the marketing plan.
- Re-examine the marketing plan quarterly to include additional key messages.

Strategy 3.2: Inform staff and community members of available services.

Activities:

- Educate the public about services that are currently available at BHH.
- Educate the public of services that are “coming soon.”
- Hold meetings with internal staff to educate them of what services are available and help them understand when and to whom to refer.

Strategy 3.3: Promote the assistance programs that are available.

Activities:

- Promote BHH staff’s ability to navigate people through the Insurance Marketplace.

- Encourage employees to promote assistance programs to patients who may qualify.
- Explain eligibility requirements for assistance programs.
- Encourage patients to ask necessary questions to help them navigate through the healthcare system.

Goal 4: Improve access to primary care services to the community.

Strategy 4.1: Provide additional primary care providers.

Activities:

- Hire two new family practice providers with experience in obstetrics.
- Inform patients Dr. Hansen will be returning from sabbatical.

Strategy 4.2: Link patients with primary care providers.

Activities:

- Improve scheduling to increase availability of primary care services.
- Create flyers to help patients identify providers for follow-up appointments.

Strategy 4.3: Increase providers' involvement in the community.

Activities:

- Hire an Athletic Trainer for high school sports.
- Host the "Kindergarten Roundup" event to better-involve providers in the community.
- Provide EKG Clinics for student athletes.
- Have providers attend parent meetings prior to sports seasons.

Goal 5: Improve awareness of mental health in Beaverhead County.

Strategy 5.1: Continue providing services for mental health and suicide prevention.

Activities:

- Provide mental health first aid training at University of Montana-Western (UM-W).
- Provide "Question Persuade Refer (QPR)" suicide prevention training at BHH, UM-W, and other locations throughout the county.
- Healthcare providers will continue to perform medication maintenance for patients who are on medication plans from a psychiatrist.

Strategy 5.2: Examine providing additional mental health services.

Activities:

- Continue researching the use of telepsychiatry and train staff to manage the work processes.

Strategy 5.3: Partner with organizations that specialize in mental health services.

Activities:

- Continue partnering with the local advisory council formed by the County Commissioners that matches services to people in need of those services.
- Continue partnership with the Human Services Network (HSN) chaired by the Women Resource Center that examines gaps in service needs and utilizes a community approach.
- Pursue a counseling partnership with a social worker at the Dillon Community Health Center who is currently working toward their LCSW [Licensed Clinical Social Worker].
- Examine providing suicide risk assessments for middle schools and high schools in Beaverhead County Schools modeled after the program in Miles City, MT
- Identify resources to build a Crisis Intervention Team since there is currently no active group.

Implementation Plan Grid

Goal 1: Increase the availability of select surgical services for members in Barrett Hospital & HealthCare’s service area.					
Strategy 1.1: Provide additional surgical services.					
Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Hire an additional part-time general surgeon to complement existing general surgery services.	CEO & Director of Provider Services	September 2014	Board	N/A	General Surgery: John Pickens, MD joined BHH Aug 2014 Urologist availability: increase of 50%
Continue working on building a relationship with Bridger Orthopedics to provide more subspecialty orthopedic services and back-up orthopedic surgery coverage.	CEO & Director of Provider Services	In Progress; Complete by October 2014 and ongoing	Board	Bridger Orthopedics	Increased presence of visiting orthopedic subspecialists from Bozeman and Missoula in FY 2015. Drs. Blake, Channer, Jarrett, LeGrande and Vinglas of Bridger Orthopedics) joined Dr. Downey to perform cases and expand scope (e.g. shoulders)
Needs Being Addressed by this Strategy:					
<ul style="list-style-type: none"> ▪ #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community ▪ #2: Focus group participants indicated a desire for an additional general surgeon ▪ #3: 22.6% of survey respondents reported utilizing orthopedic surgery and focus group participants also indicated a need for additional availability for orthopedic surgery ▪ #4: 40.2% of survey respondents believe that more specialists would improve the community’s access to healthcare 					
Anticipated Impact(s) of these Activities:					
<ul style="list-style-type: none"> ▪ Availability of surgical services will increase ▪ Fewer community members will need to leave their local area for healthcare services 					
Plan to Evaluate Anticipated Impact(s) of these Activities:					

- Monitor utilization rates of additional surgeons

Measure of Success: Additional general and orthopedic surgical services are offered at Barrett Hospital & HealthCare by October 2014.

Goal 1: Increase the availability of select surgical services for members in Barrett Hospital & HealthCare’s service area.

Strategy 1.2: Improve efficiency of the surgical department.

Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Establish a plan to create comprehensive scheduling and competitive pricing to maintain loyalty of patients and earn local business for visiting surgeons.	CCO & CFO	November 2014	Surgery Committee	N/A	Actively working with hip & knee implant vendor to reduce costs. Periop Mgr. periodically compares procedure cost with competitors. Multiple data points suggest our pricing is very competitive for our region and nationally.
Prepare staff for changes in the surgical department. Provide Customer Service Training, TEAM STEPPS training.	CCO	March 2015	Surgery Committee	N/A	Monthly discussion and role play topic at Periop Staff mtgs. Productivity, cost report, and pt. satisfaction data shared and discussed regularly; customer service has been an organization wide goal in FY 2015 and 2016; Periop Services have worked with Press Ganey re: patient satisfaction survey, scores and strategies. TEAMSTEPPS determined to be too time consuming a program.

<p>Improve staff's proficiency with "Epic" the electronic health record (EHR) software.</p>	<p>CCO</p>	<p>October 2014</p>	<p>Surgery Committee</p>	<p>N/A</p>	<p>Multiple A-3s (problem solving) to address gaps in patient information sharing via Epic and improving Epic use; ongoing optimization efforts.</p>
<p>Needs Being Addressed by this Strategy:</p> <ul style="list-style-type: none"> ▪ #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community ▪ #4: 40.2% of survey respondents believe that more specialists would improve the community's access to healthcare ▪ #5: Nearly half (47.5%) of survey respondents reported having a 'good' knowledge of health services while only 19.6% reported feeling they have an 'excellent' awareness of services ▪ #7: 27.4% of survey respondents chose their primary care provider based on appointment availability 					
<p>Anticipated Impact(s) of these Activities:</p> <ul style="list-style-type: none"> ▪ Availability of surgical services will increase ▪ More surgeries can be scheduled at Barrett Hospital & HealthCare ▪ Higher patient satisfaction and lower levels of frustrations due to electronic health records ▪ Fewer community members will need to leave their local area for healthcare services 					
<p>Plan to Evaluate Anticipated Impact(s) of these Activities:</p> <ul style="list-style-type: none"> ▪ Track the number of surgeries scheduled per month ▪ Gather perceptions from staff and patients about proficiency with Epic 					
<p>Measure of Success: Barrett Hospital & HealthCare staff is proficient in using Epic by March 2015.</p>					

Goal 2: Improve the accessibility of services at Barrett Hospital & HealthCare.

Strategy 2.1: Improve the convenience of ancillary services for patients.

Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Perform an in-depth analysis to determine the feasibility of changing hours for imaging services (CT, MRI, etc.) to accommodate the schedules of patients who work.	CCO	November 2014	PIC	PAC	Additional staff proficient in MR has allowed additional hours of availability. Central scheduling encouraging "after work" appointments in Imaging.
Perform an in-depth analysis using existing data to determine the feasibility of expanding hours for rehabilitative services to accommodate the schedules of patients who work.	CEO	November 2014	PIC	PAC	Rehabilitation Services hours are 8am-5pm. On an as needed basis, they have expanded into the evening until 6 or 7. We tried earlier hours at 7:30am, but this time was not utilized very much. 7:30am as needed.
Perform an in-depth analysis to determine the feasibility of changing hours for the walk-in clinic to be available during the lunch hour for patients.	Director of Provider Services	September 2014	Primary Care Group → PAC	PAC	M-F 7:30AM-4:00PM (open during the lunch hour)
Perform an in-depth analysis to determine the feasibility of changing hours for the billing department (financial counseling and bill-pay) and the feasibility of providing convenient, alternative methods of payment.	CFO	November 2014	PIC	PAC/ Community Connect / Third Party	Working with Community Connect on on-line bill pay, also looking at outside vendors for same service and alternative payment methods. Patient Financial Experience Committee is meeting to work on making the

					experience more agreeable for our patients.
<p>Needs Being Addressed by this Strategy:</p> <ul style="list-style-type: none"> ▪ #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community ▪ #8: Focus group participants reported a lack of availability of services on the weekend, including MRI/CT scans and the walk-in clinic ▪ #9: 32.3% of survey participants indicated they were not aware of or were unsure of cost assistance programs ▪ #10: Of the respondents who reported they delayed receiving healthcare services (31.4%), reasons indicated were: it costs too much (65.6%), no insurance (31.3%), or insurance did not cover it (25%) 					
<p>Anticipated Impact(s) of these Activities:</p> <ul style="list-style-type: none"> ▪ Higher patient satisfaction ▪ Increased availability of services and providers ▪ Better understanding of financial assistance <p><i>Strategy 2.1 continued on following page...</i></p>					
<p><i>Strategy 2.1 continued...</i></p> <p>Plan to Evaluate Anticipated Impact(s) of these Activities:</p> <ul style="list-style-type: none"> ▪ Collect feedback about the expanded services from patients ▪ Provide opportunities for patients to offer suggestions ▪ Track the number of patients who utilize the financial assistance programs available 					
<p>Measure of Success: Barrett Hospital & HealthCare determines a plan for expanding hours of select services by November 2014.</p>					

Goal 2: Improve the accessibility of services at Barrett Hospital & HealthCare.					
Strategy 2.2: Bring healthcare services directly to the patient.					
Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Providers will continue to provide house calls when necessary.	BHH Providers	Ongoing	N/A	N/A	Ongoing
Examine potential for providing “senior well checks” where healthcare providers perform care for senior citizens at senior centers and assisted living facilities.	Leadership Council	January 2015	PIC	Dillon Senior Center, Bicentennial Apts	To be determined.
Needs Being Addressed by this Strategy:					
<ul style="list-style-type: none"> ▪ #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community ▪ #11: A desire for senior well checks was indicated by 16.7% of survey respondents 					
Anticipated Impact(s) of these Activities:					
<ul style="list-style-type: none"> ▪ Improved access to services for seniors and others who have limited mobility 					
Plan to Evaluate Anticipated Impact(s) of these Activities:					
<ul style="list-style-type: none"> ▪ Collect feedback from patients utilizing home visit services 					
Measure of Success: Barrett Hospital & HealthCare determines whether they will provide “senior well checks” by January 2015.					

Goal 3: Increase awareness of the services available at Barrett Hospital & HealthCare.					
Strategy 3.1: Develop a comprehensive, long-term marketing strategy that is cohesive, consistent, targeted, strategic, and cost-effective.					
Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Work with members of the hospital foundation who are currently responsible for managing marketing to determine the effectiveness of current marketing strategies.	CEO	December 2014	Leadership Council	Marketing	Marketing was split from Foundation and a Marketing Manager was put in place Fall 2014.
Create a committee of key staff members to make decisions regarding the marketing strategy.	CEO	Fall 2014	Leadership Council	N/A	Marketing Committee with staff, board member, marketing manager was formed and first meeting held in January 2015.
Consider outsourcing a marketing specialist for marketing expertise to find the best value to fit BHH's needs.	Appointed Marketing Committee	January 2015	Leadership Council	HealthTech, MHA	In Fall 2015, BHH engaged Legato, a healthcare marketing firm specializing in rural healthcare. Onsite meeting occurred in December 2015 with community members, staff and individual board members.
Determine the most-effective channels to promote the message.	Appointed Marketing Committee	January 2015	Leadership Council	Dillon Tribune, MT Standard, Dillonite Daily, Today in Dillon, KDBM/ KBEV, KXLF	We eliminated contract TV advertising during FY 2015 and focused more on digital, social media, and online channels along with local print and radio. Also, completed our first annual Community

					Benefits Report in CY 2015.
Review our tagline.	Appointed Marketing Committee	January 2015	Leadership Council	N/A	"Quality Healthcare, Close to Home"
Create a message that educates about services that are available and demonstrates the value of services that patients receive.	Appointed Marketing Committee	January 2015	Leadership Council	N/A	Community Benefit Report covers all of our services, pricing of services (compare website). All services are listed on website. Multiple brochures have been created. Ads and billboards have been utilized.
Implement the marketing plan.	Appointed Marketing Committee	January 2015	Leadership Council	N/A	Marketing plan is completed annually and updated as need/regular basis. A new, comprehensive marketing plan will be developed with the help of Legato Healthcare Marketing. Current plans have been implemented.
Re-examine the marketing plan quarterly to include additional key messages.	Appointed Marketing Committee	Quarterly	Leadership Council	N/A	Marketing plan is reviewed at least monthly with the leadership team and reviewed with key department heads and staff on a topical basis. The marketing

					committee reviews plan at their meetings as well.
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Strategy 3.1 continued on following page...

Strategy 3.1 continued...

Needs Being Addressed by this Strategy:

- #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community
- #5: Nearly half (47.5%) of survey respondents reported having a 'good' knowledge of health services while only 19.6% reported feeling they have an 'excellent' awareness of services
- #6: 29.4% of respondents indicated that great health education services would improve the community's access to healthcare

Anticipated Impact(s) of these Activities:

- Improved awareness of services
- Community members utilize local services more often

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

- Collect utilization data of services
- Determine effectiveness of marketing messages

Measure of Success: Barrett Hospital & HealthCare implements a marketing strategy by January 2015.

Goal 3: Increase awareness of the services available at Barrett Hospital & HealthCare.

Strategy 3.2: Inform staff and community members of available services.

Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Educate the public about services that are currently available at BHH.	Appointed Marketing Committee	Ongoing	Leadership Council	N/A	Being completed through our marketing plan, Community Benefit Report, and website. Further development of plan to occur with Legato.
Educate the public of services that are “coming soon.”	Appointed Marketing Committee	Ongoing	Leadership Council	N/A	Community education occurs when we are certain about the date/timeframe a new service will be available.
Hold meetings with internal staff to educate them of what services are available and help them understand when and to whom to refer.	Appointed Marketing Committee	Ongoing	Leadership Council	N/A	Staff education occurs mainly with Department Managers at regularly scheduled meetings. New services are also discussed at employee forums and Weekly Wire. More opportunities to do more with this and will continue.

Needs Being Addressed by this Strategy:

- #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community
- #5: Nearly half (47.5%) of survey respondents reported having a ‘good’ knowledge of health services while only 19.6% reported feeling they have an ‘excellent’ awareness of services
- #6: 29.4% of respondents indicated that great health education services would improve the community’s access to healthcare

Anticipated Impact(s) of these Activities:

- Improved awareness of services

- Community members utilize local services more often

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

- Collect utilization data of services
- Determine effectiveness of marketing messages

Measure of Success: Barrett Hospital & HealthCare utilizes their marketing strategy to educate the public about available services by January 2015.

Goal 3: Increase awareness of the services available at Barrett Hospital & HealthCare.

Strategy 3.3: Promote the assistance programs that are available.

Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Promote BHH staff's ability to navigate people through the Insurance Marketplace.	Business Office Staff	Ongoing	CFO	CMS	We continue to have Certified Application Counselors available to help our patients with the various applications for the exchange. We continue to hold sessions throughout the year to help our community members who need assistance.
Encourage employees to promote assistance programs to patients who may qualify.	Business Office, Case Management, Discharge Planning, Social Services, Clinic	Ongoing	CFO	N/A	Front line staff working with patients in the reception areas is trained in our financial assistance programs and offer these programs to patients that may need assistance.
Explain eligibility requirements for assistance programs.	Business Office Staff	Ongoing	CFO	N/A	Financial Counselors are available to work with patients when they are on-site or thorough phone calls and face to face meetings.
Encourage patients to ask necessary questions to help them navigate through the healthcare system.	Marketing, Leadership Council	Ongoing	Leadership Council	N/A	Signage has been posted at both campuses to let patients know of our programs. Financial Counselors work with

					patients as needed and meet with them when they are in the facility.
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Needs Being Addressed by this Strategy:

- #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community
- #5: Nearly half (47.5%) of survey respondents reported having a ‘good’ knowledge of health services while only 19.6% reported feeling they have an ‘excellent’ awareness of services
- #6: 29.4% of respondents indicated that great health education services would improve the community’s access to healthcare
- #9: 32.3% of survey participants indicated they were not aware of or were unsure of cost assistance programs
- #10: Of the respondents who reported they delayed receiving healthcare services (31.4%), reasons indicated were: it costs too much (65.6%), no insurance (31.3%), or insurance did not cover it (25%)

Anticipated Impact(s) of these Activities:

- Patients have a better ability to pay for their healthcare services
- Better understanding of financial assistance
- Hospital’s financial standing improves with fewer “bad debt” claims

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

- Track the number of patients who utilize the financial assistance programs available

Measure of Success: Barrett Hospital & HealthCare sees a decrease in bad debt by June 2015.

Goal 4: Improve access to primary care services to the community.

Strategy 4.1: Provide additional primary care providers.

Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Hire two new family practice providers with experience in obstetrics.	CEO, Human Resources, & Director of Provider Services	September 5, 2014	Board	AHEC	Fall 2014: Addition of Family Medicine providers Hallie Tipton, MD and Casey Rasch, MD
Inform patients Dr. Hansen will be returning from sabbatical.	Director of Provider Services	August 17, 2014	N/A	N/A	Completed

Needs Being Addressed by this Strategy:

- #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community

- #5: Nearly half (47.5%) of survey respondents reported having a 'good' knowledge of health services while only 19.6% reported feeling they have an 'excellent' awareness of services
- #7: 27.4% of survey respondents chose their primary care provider based on appointment availability
- #12: 44.1% of respondents indicated that more primary care providers would improve the community's access to healthcare
- #13: 8.6% of respondents reported it took 15 or more days to see their primary care provider after scheduling an appointment

Anticipated Impact(s) of these Activities:

- Increased availability of services and providers
- Fewer community members will need to leave their local area for healthcare services
- Community members utilize local services more often

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

- Track the number of scheduled appointments per month

Measure of Success: Barrett Hospital & HealthCare provides a full primary care staff by September 2014.

Goal 4: Improve access to primary care services to the community.

Strategy 4.2: Link patients with primary care providers.

Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Improve scheduling to increase availability of primary care services.	Director of Provider Services	December 2014	CEO	N/A	Addition of primary care providers as well as walk-in clinic. Access to care increased. Current wait time for new pts to be seen is 2 business days or if urgent same day.
Create flyers to help patients identify providers for follow-up appointments.	Director of Provider Services	September 2014	CEO	N/A	Walk In Clinic (WI) is doing well. Average daily volumes are 14 per day.

Needs Being Addressed by this Strategy:

- #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community
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Anticipated Impact(s) of these Activities:

- Increased availability of services and providers
- Improved awareness of services
- Fewer community members will need to leave their local area for healthcare services
- Community members utilize local services more often

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

- Track the number of scheduled appointments per month

Measure of Success: Barrett Hospital & HealthCare maximizes efficiency of appointment slots by March 2015.

Goal 4: Improve access to primary care services to the community.					
Strategy 4.3: Increase providers' involvement in the community.					
Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Hire an Athletic Trainer (ATC) for high school sports.	Human Resources	June 23, 2014	CEO	ATC website	Completed. ATC working in schools and for hospital in wellness program.
Host the "Kindergarten Roundup" event to better-involve providers in the community.	Director of Provider Services	May 2015	N/A	District 10	Occurs in April every year. May 2015: Danielle Maxfield, NP and Jana Barnes, PA-C participated; 21 new students were screened.
Provide EKG Clinics for student athletes.	Director of Provider Services	End of July/ Early August 2014	N/A	BCHS, Lima, District 10	Completed 31 EKGs during the months of August and September.
Have providers attend parent meetings prior to sports seasons.	Director of Provider Services	Ongoing	N/A	BCHS, Lima, District 10	Missed opportunity this year. Will plan for next season.
Needs Being Addressed by this Strategy:					
<ul style="list-style-type: none"> ▪ #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community ▪ #5: Nearly half (47.5%) of survey respondents reported having a 'good' knowledge of health services while only 19.6% reported feeling they have an 'excellent' awareness of services ▪ #6: 29.4% of respondents indicated that great health education services would improve the community's access to healthcare ▪ #12: 44.1% of respondents indicated that more primary care providers would improve the community's access to healthcare 					
Anticipated Impact(s) of these Activities:					
<ul style="list-style-type: none"> ▪ Improved awareness and utilization of services ▪ Community members utilize local services more often 					
Plan to Evaluate Anticipated Impact(s) of these Activities:					
<ul style="list-style-type: none"> ▪ Track how often providers are involved in community events per year 					
Measure of Success: Barrett Hospital & HealthCare providers participate in community events three times a year.					

Goal 5: Improve awareness of mental health in Beaverhead County.					
Strategy 5.1: Continue providing services for mental health and suicide prevention.					
Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Provide mental health first aid training at University of Montana-Western (UM-W).	Human Resources	May 30, 2014	Board	UM-W	Completed- Increasing awareness/ decreasing stigma of mental health; supporting integrated healthcare.
Provide “Question Persuade Refer (QPR)” suicide prevention training at BHH, UM-W, and other locations throughout the county.	Human Resources	Ongoing; three times per year	Board	UM-W, service clubs, churches	Completed. Currently holding QPR at BHH 3x annually. Also presented to BVHD County Employees; MYC staff; UMW education major classes; LIMA school students, parents. Presence at 2015 BHH Health Fair
Healthcare providers will continue to perform medication maintenance for patients who are on medication plans from a psychiatrist.	Director of Provider Services	Ongoing	CEO	Dr. John Rogers, Telepsychiatry, SWMT Mental Health, Beaverhead County Local Advisory Council	Completed meetings with all the Beaverhead County Behavioral Health provider/resources. One more group meeting in January 2016 to determine any options for shared recruiting of needed resources. Ongoing
Needs Being Addressed by this Strategy:					
<ul style="list-style-type: none"> ▪ #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community ▪ #6: 29.4% of respondents indicated that great health education services would improve the community’s access to healthcare 					

- #14: 18.6% of respondents reported they experienced periods of feeling depressed on most days for at least three consecutive months
- #15: 22.1% of respondents reported that depression/anxiety is a top health concern in the community
- #16: According to data from MT DPHHS, Beaverhead County has a suicide rate of 18.1 per 100,000 people compared to Montana’s rate (20.3 per 100,000) and the nation’s rate (12 per 100,000)

Anticipated Impact(s) of these Activities:

- Better utilization of mental health services
- Fewer suicides
- Better management of depression
- Decreased stigma of mental health issues

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

- Track participation in each program
- Monitor numbers of suicides that occur in Beaverhead County each year

Measure of Success: Barrett Hospital & HealthCare provides three mental health/suicide prevention trainings each year.

Goal 5: Improve awareness of mental health in Beaverhead County.

Strategy 5.2: Examine providing additional mental health services.

Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Continue researching the use of telepsychiatry and train staff to manage the work processes.	Director of Provider Services	October 2014	Board	Health Link Now or University of Utah	Contract for tele-psych services with St Pat is underway.

Needs Being Addressed by this Strategy:

- #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community
- #6: 29.4% of respondents indicated that great health education services would improve the community’s access to healthcare
- #14: 18.6% of respondents reported they experienced periods of feeling depressed on most days for at least three consecutive months
- #15: 22.1% of respondents reported that depression/anxiety is a top health concern in the community
- #16: According to data from MT DPHHS, Beaverhead County has a suicide rate of 18.1 per 100,000 people compared to Montana’s rate (20.3 per 100,000) and the nation’s rate (12 per 100,000)

Anticipated Impact(s) of these Activities:

- Better utilization of mental health services
- Fewer suicides
- Better management of depression

- Decreased stigma of mental health issues

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

- If implemented, track utilization of telepsychiatry services

Measure of Success: Barrett Hospital & HealthCare determines if they will provide telepsychiatry services by October 2014.

Goal 5: Improve awareness of mental health in Beaverhead County.

Strategy 5.3: Partner with organizations that specialize in mental health services.

Activities	Responsibility	Timeline	Final Approval	Partners	Accomplishments
Continue partnering with the local advisory council formed by the County Commissioners that matches services to people in need of those services.	Human Resources	Ongoing	N/A	County Commissioners' local advisory council	Active participation in monthly meetings and initiatives. Presence at 2015 BHH Health Fair.
Continue partnership with the Human Services Network (HSN) chaired by the Women Resource Center that examines gaps in service needs and utilizes a community approach.	Human Resources	Ongoing	N/A	Human Services Network; Women Resource Center	Active participation in monthly meetings and initiatives.
Pursue a counseling partnership with a social worker at the Dillon Community Health Center who is currently working toward their LCSW [Licensed Clinical Social Worker].	Director of Provider Services & QRD/CO	October 2014	Leadership Council	Dillon Community Health Center	Addition of full time licensed clinical social worker Jenny Given, LCSW
Examine providing suicide risk assessments for middle schools and high schools in Beaverhead County Schools modeled after the program in Miles City, MT	Director of Provider Services & Human Resources	January 2015	Leadership Council	Beaverhead County Schools, Miles City Public Schools, DPHHS, Suicide Prevention, SWMT Mental Health	Established behavioral health practice with LCSW formerly of the CHC; Statewide adolescent risk factor study released in Sept 2015.
Identify resources to build a Crisis Intervention Team since there is currently no active group.	Human Resources	October 2014	Leadership Council	EMS, Law Enforcement, Local Advisory Council	CISM team established under the auspices of the LAC. Meets monthly. Actively educating community of capabilities.

Needs Being Addressed by this Strategy:

- #1: 60.3% of survey respondents indicated that access to healthcare and other services was the most important component of a healthy community
- #6: 29.4% of respondents indicated that great health education services would improve the community's access to healthcare
- #14: 18.6% of respondents reported they experienced periods of feeling depressed on most days for at least three consecutive months
- #15: 22.1% of respondents reported that depression/anxiety is a top health concern in the community

- #16: According to data from MT DPHHS, Beaverhead County has a suicide rate of 18.1 per 100,000 people compared to Montana's rate (20.3 per 100,000) and the nation's rate (12 per 100,000)

Strategy 5.3 continued on following page...

Strategy 5.3 continued...

Anticipated Impact(s) of these Activities:

- Better utilization of mental health services
- Fewer suicides
- Better management of depression
- Decreased stigma of mental health issues

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

- Monitor numbers of suicides that occur in Beaverhead County each year

Measure of Success: Barrett Hospital & HealthCare provides support to local organizations that help with mental health/suicide prevention.

Needs Not Addressed and Justification

Identified health needs unable to address by Barrett Hospital & HealthCare	Rationale
1. 24.7% of respondents indicated they utilized dermatology services in the past three years and 32.4% of respondents indicated a need for local dermatology services as they are not currently available	<ul style="list-style-type: none"> Barrett Hospital & HealthCare (BHH) is currently researching the possibility of providing teledermatology services that would meet this need if it is implemented.
2. 45.1% of respondents indicated cancer is a top health concern in the community and 12.3% of respondents indicated a need for local chemotherapy services	<ul style="list-style-type: none"> BHH is currently assessing the feasibility of providing chemotherapy services as part of their service offerings.
3. Respondents indicated interest in first aid/CPR classes (29.4%), fitness classes (28.4%), and health & wellness programs (26%)	<ul style="list-style-type: none"> BHH provides first aid/CPR classes to its staff and at University of Montana–Western. BHH will consider providing these services to the general public as well.
4. The majority (54.4%) of respondents indicated alcohol/substance abuse is a top health concern in the community	<ul style="list-style-type: none"> BHH does not have the financial resources or staff resources to address alcohol or substance abuse issues at this time. Other organizations exist in the community that are better-suited to address this need.
5. 29.9% of respondents indicated that overweight/obesity is a top health concern in the community	<ul style="list-style-type: none"> BHH currently supports the new “Trails RX” program where providers can prescribe walking to their patients which will encourage community members to utilize paths and trails for exercise. In addition, organizations such as the local YMCA have more resources to address this need.
6. Heart disease and unintentional injuries are leading causes of death in Beaverhead County	<ul style="list-style-type: none"> BHH offers the following programs in an effort to decrease heart disease and prevent injuries. <ul style="list-style-type: none"> Heart Disease: <ul style="list-style-type: none"> Diabetic Prevention Cardio Rehabilitation Employee Wellness Partnership with YMCA Injury Prevention: <ul style="list-style-type: none"> Trauma Committee activities Community Health Fairs Infant Seat Program

Dissemination of Needs Assessment

Barrett Hospital & HealthCare (BHH) disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on their website (www.barrethospital.org) as well as having copies available at the facility should community members request to view the community health needs assessment or the implementation planning documents.

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

Board Members reviewed the needs assessment report and plan and approved the implementation plan on **August 27, 2014**. As trustees for the Public Hospital District they will publicly promote the plan to the community.

BHH will establish an ongoing feedback mechanism to take into account any written comments it may receive on the adopted implementation plan document.



Office of Rural Health
Area Health
Education Center

**Community Health Services Development (CHSD)
Implementation Plan Report**
Draft Approval Form

Please Review Your Facility's Plan Carefully

Your facility is expected to perform the activities included in the Implementation Plan. Your facility is also responsible for:

- a) Posting your community health needs assessment (CHNA) and your facility's Implementation Plan publicly – both “conspicuously” on your website as well as having a hard copy available at your facility should someone request to view either/both documents.
- b) Documenting approval of your facility's Implementation Plan by your facility's governing board. You must document the date upon which the plan was approved/adopted on the final page of the Implementation Plan in the “Dissemination” section.
- c) Monitoring progress of the activities/strategies performed.

Healthcare Facility: Barrett Hospital & HealthCare
Date Draft was Received: Friday August 1, 2014

*Do not assume everything is correct without proofing thoroughly.
Be sure to complete and sign the Draft Approval Form.
Please return this form to the contact listed at the Montana Office of Rural Health.*

CEO Name (please print): Ken Westman Date: 8/28/14

CEO Signature: 

By signing this form and approving the Implementation Plan, I acknowledge my responsibilities as outlined above and have thoroughly reviewed and hereby approve the Implementation Plan as drafted by the Montana Office of Rural Health.

The report is now the property of your healthcare facility. The Montana Office of Rural Health is not responsible for any changes found after the Draft Approval Form has been signed. If there are additional changes, you are responsible for making necessary corrections, alterations, or additions before publicly disseminating the Needs Assessment in some form and the Implementation Plan in its entirety.

Please return this form and the initialed Implementation Plan to the Montana Office of Rural Health either by email to amanda.judisch@montana.edu or fax to Amanda Judisch at [406-994-5653](tel:406-994-5653). Thank you.