IMPLEMENTATION PLAN

Addressing Community Health Needs

Daniels Memorial Healthcare Center ~ Scobey, Montana

Disclaimer: The Montana Office of Rural Health and the National Rural Health Resource Center strongly encourage 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 Daniels Memorial Healthcare Center's leadership team and members of the community steering committee – 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. 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 Fall of 2015 to determine the most important health needs and opportunities for Daniels 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 (http://www.danielsmemorialhealthcare.org/).

The implementation planning committee identified the most important health needs to be addressed by reviewing the community health needs assessment, 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 Daniels Memorial Healthcare Center'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. Behavioral Health
2. Senior Needs
3. Healthy Lifestyles
4. Access to Health Care

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Initials

In addressing the aforementioned issues, Daniels Memorial Healthcare Center 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

Daniels Memorial Healthcare Center's Mission:

- Daniels Memorial Healthcare Center is committed to providing excellence in rural community healthcare.

Daniels Memorial Healthcare Center's Vision:

- The purpose of our professional team is to pursue excellent patient and community care through collaborative teamwork that meets or exceeds our patient and resident expectations.

Daniels Memorial Healthcare Center's Values:

- Daniels Memorial Healthcare follows several core values, which include:
  - Customer Service
  - Communication
  - Teamwork
  - Confidentiality
  - Job Performance

Implementation Planning Committee Members:

- Missy Aldrich – Business Office Manager, DMHC
- Edith Huda – HR / Purchasing, DMHC
- Janelle Handran – Risk and Quality Manager, DMHC
- Don Rush – CEO, DMHC
- Wendy Dahl – HIM/CIS, DMHC
- Linda Wolford – Lab / Radiology, DMHC
- Barbara Ward – Marketing / Executive Assistant, DMHC

Initials

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

Daniels Memorial Healthcare Center's Existing Presence in the Community

- Daniels Memorial Healthcare Center offers access to Billings Clinic specialists (i.e. cardiology, neurology, diabetes education, ENT, mental/behavioral health follow-up, etc.) through telemedicine
- DMHC also offers various educational opportunities (i.e. women's heart disease, depression screening, osteoporosis, etc.) through its telemedicine programs
- DMS Health Technologies (based out of Fargo, North Dakota) provides mobile mammography services at the facility
- DMHC provides visiting nurse services to community members

Initials

List of Available Community Partnerships and Facility Resources to Address Needs

- Addictive & Mental Disorders Division (AMDD) provides support and services related to substance abuse and mental health issues
- Eastern Montana Telemedicine Network (EMTN) provides infrastructure and support for telehealth needs
- Eastern Service Area Authority (ESAA) provides support and services related to public mental health services in Montana communities
- Montana Health Network is a collaborative effort to provide services to all residents of Montana
- Scobey Public School is an active partner of the hospital in terms of youth outreach and also provides a space for community members to be active
- Eastern Montana Area Health Education Center (AHEC) organizes and runs Recruitment and Educational Assistance for Careers in Health (REACH) camps on behalf of rural communities interested in fostering local children's interest in pursuing healthcare careers
- Montana Connections/AHEC Recruitment Program assist in recruiting primary care physicians to rural areas
- Montana Office of Rural Health (MORH) provides technical assistance to rural health systems and organizations
- DC Transportation provides transportation services to needed health care services for Daniels County community members
- The Daniels County Food Bank provides food to community members and families in need.

Initials

Daniels County Indicators

Low Income Persons
- 18% of persons are below the federal poverty level

Uninsured Persons
- 32.7% 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
- Cancer
- Heart Disease
- Chronic Lower Respiratory Disease

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

Elderly Populations
- 24% of Daniels County's Population is 65 years and older

Size of County and Remoteness
- 1,751 people in Daniels County
- 1.2 people per square mile

Nearest Major Hospital
- Trinity Health in Minot, ND – 222 miles from Daniels Memorial Healthcare Center

Public Health and Underserved Populations Consultation Summaries

Public Health Consultation [Lois Leibrand, RN – Daniels County Public Health Nurse / August 17, 2015 and January 27, 2016]

- There is still an awareness issue about what the public health department does. I get a lot of calls from people asking about in-home care services.
- There is a need for more education for our seniors – they need education on things like diabetes and cardiac care. We also do not have exercise classes for that population.
- I think our community definitely needs an assisted living facility – we have people in our community going to Plentywood right now.

Underserved Population – Senior Citizens [Lois Leibrand, RN – Daniels County Public Health Nurse / August 17, 2015 and January 27, 2016]

- There is a need for more education for our seniors – they need education on things like diabetes and cardiac care. We also do not have exercise classes for that population.
- I think our community definitely needs an assisted living facility – we have people in our community going to Plentywood right now.

Needs Identified and Prioritized

Prioritized Needs to Address

- "Alcohol abuse/substance abuse" (43.3%) was selected as the second-highest concern in the community.
- "Access to health care and other services" (73.8%) and "Healthy behaviors and lifestyles" (37.8%) were indicated as two of the most important components required for a healthy community.
- Mental health and substance abuse were highlighted as major issues in the community during the focus group that was conducted in Scobey.
- "More specialists" (34.8%) and "More primary care providers" (34.1%) were selected as the top two things which would improve the community's access to health care.
- Significantly more respondents cited "Depression/anxiety" (25%) as a serious health concern in 2016 versus 2013.
- Approximately 13% of respondents indicated that they had felt depressed on most days for at least three consecutive months.
- "Assisted living" (28.3%) was the most selected option for respondents when asked about services they would utilize if available locally. Significantly more respondents indicated interest in 2016 versus the 2013 survey.
- "MRI" (21.7%) was selected as the second most popular choice for respondents when asked about services they would utilize if available locally.
- The focus group indicated a high level of concern regarding the availability of senior services in the community.
- "Fitness" (25.7%), "Women's health" (25.7%), and "Health and wellness" (22.4%) were the three most popular choices of respondents in terms of interest in educational classes/programs.

Needs Unable to Address

(See page 29 for additional information)

1. "Cancer" (67.8%) was chosen as the most serious health concern by survey respondents.
2. For those who indicated that they were unable to receive or had to delay receiving healthcare services, the reason most cited was "It costs too much" (41.2%).
3. Most of the respondents who did not use preventative services cited the reason, "It costs too much" (8.6%) as the barrier to receiving preventative health services.
4. "Mammography (on-site)" was the third most popular choice for services which respondents indicated they would use if the service was available locally.
5. Over a quarter of respondents (26.6%) indicated that they were unaware of programs that help people pay for healthcare bills.

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 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: Prioritize the top behavioral health need in the county and implement programs that will increase access to behavioral health services.

Strategy 1.1: Increase awareness of available behavioral health services in Daniels County.

Activities:

- Identify resources/programs that are currently available in Daniels County
- Create a resource map
- Distribute resource map to community members

Strategy 1.2: Prioritize behavioral health need(s) and develop community action plan.

Activities:

- Identify key stakeholders (i.e. schools, employers, providers, public health)
- Establish a community steering committee comprised of community stakeholders
- Identify possible resources and funding opportunities available
- Develop a community survey instrument to determine top behavioral health need
- Create community action plan based on survey results and community steering committee input

Strategy 1.3: Explore opportunities to increase availability of behavioral health services at DMHC.

Activities:

- Explore possible telemedicine options for behavioral health services
- Investigate the possibility of providing an employee wellness program in the facility

Goal 2: Increase access to needed senior services for Daniels County.

Strategy 2.1: Increase awareness of available senior services in Daniels County.

Activities:

- Identify resources/programs that are currently available in Daniels County
- Create a resource map
- Distribute resource map to community members

Strategy 2.2: Explore possibility of addressing senior needs in the community.

Activities:

- Determine feasibility of providing transportation assistance, palliative/end of life care, and personal care/in-home services in the community
- Identify key stakeholders and potential partners
- Identify available resources and funding opportunities

Goal 3: Promote healthy lifestyles and increase overall wellness in the community.

Strategy 3.1: Increase awareness of available wellness services/opportunities in Daniels County.

Activities:

- Identify resources/programs that are currently available in Daniels County
- Create a resource map
- Distribute resource map to community members
- Promote existing programs in the community in partnership with organizational partners

Strategy 3.2: Identify wellness program to develop in the community and create an action plan.

Activities:

- Identify key stakeholders (i.e. schools, employers, providers, public health)
- Identify possible resources and funding opportunities available
- Explore feasibility of partnering with other community resources to develop a wellness program
- Create action plan

Goal 4: Provide increased access to needed healthcare services for Daniels County.

Strategy 4.1: Bring mobile MRI services to the community.

Activities:

- Determine how often mobile MRI services will be utilized
- Reach out to mobile MRI vendor(s) to discuss feasibility
- Create contracts with vendor(s)
- Market the MRI services via newspaper advertisements, the DMHC website, etc.
- Identify ongoing outreach initiatives to advertise mobile MRI service availability

Strategy 4.2: Promote telemedicine services currently offered at DMHC.

Activities:

- Research outreach strategies utilized by similar facilities
- Create marketing strategy to increase awareness of services
- Explore option of holding an 'open house' to introduce community members to telemedicine

Strategy 4.3: Provide increased access to specialists through partnerships with other facilities/providers in the area.

Activities:

- Determine feasibility of offering visiting specialists (i.e. facility space/capacity, scheduling, etc.)
- Identify specialists interested in coming to Scobey and create schedule that can be published
- Create marketing strategy to increase awareness of visiting specialists' schedules

Strategy 4.4: Recruit an additional primary care provider.

Activities:

- Ensure that DMHC is an NHSC-approved site (as a critical access hospital)
- Publish provider opening online – NHSC, 3Rnet, etc.
- Attend primary care residency recruiting event(s) in Montana

Initials

Implementation Plan Grid

Goal 1: Prioritize the top behavioral health need in the county and implement programs that will increase access to behavioral health services.

Strategy 1.1: Increase awareness of available behavioral health services in Daniels County.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Identify resources/programs that are currently available in Daniels County	DMHC/Public Health	June 2016	CEO	Behavioral Health Committee	Resource limitations
Create a resource map	DMHC/Public Health	September 2016	CEO	Behavioral Health Committee	Resource limitations
Distribute resource map to community members	DMHC/Public Health	January 2017	CEO	Behavioral Health Committee	Resource limitations

Needs Being Addressed by this Strategy:

- #1: Alcohol abuse/substance abuse" (43.3%) was selected as the second-highest concern in the community.
- #2: "Access to health care and other services" (73.8%) and "Healthy behaviors and lifestyles" (37.8%) were indicated as two of the most important components required for a healthy community.
- #3: Mental health and substance abuse were highlighted as major issues in the community during the focus group that was conducted in Scobey.
- #5: Significantly more respondents cited "Depression/anxiety" (25%) as a serious health concern in 2016 versus 2013.
- #6: Approximately 13% of respondents indicated that they had felt depressed on most days for at least three consecutive months.

Anticipated Impact(s) of these Activities:

- Increased awareness of available programs/resource in the community.
- Increased access to needed behavioral health services.

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

- Develop survey questions to determine awareness of services before and after distribution of resource map.
- Track resource map-based referrals to behavioral health resources in the community.

Measure of Success: The Behavioral Health Committee will meet 2-4 times and distribute copies of the resource map by January 2017.

Goal 1: Prioritize the top behavioral health need in the county and implement programs that will increase access to behavioral health services.					
Strategy 1.2: Prioritize behavioral health need(s) and develop community action plan.					
Activities	**Responsibility**	**Timeline**	**Final Approval**	**Partners**	**Potential Barriers**
Identify key stakeholders (i.e. schools, employers, providers, public health)	DMHC	May 2016	CEO	Behavioral Health Committee	Resource limitations
Establish a community steering committee comprised of community stakeholders	DMHC	June 2016	CEO	Behavioral Health Committee	Scheduling conflicts, resource limitations
Identify possible resources and funding opportunities available	DMHC/Public Health	September 2016	CEO	Behavioral Health Committee, RHIhub	Resource limitations, financial limitations
Develop a community survey instrument to determine top behavioral health need	DMHC/Public Health	January 2017	CEO	Behavioral Health Committee RHIhub	Resource limitations, financial limitations
Create community action plan based on survey results and community steering committee input	Community Steering Committee	March 2017	Board	Behavioral Health Committee	Resource limitations, financial limitations

Needs Being Addressed by this Strategy:

- #1: Alcohol abuse/substance abuse" (43.3%) was selected as the second-highest concern in the community.
- #2: "Access to health care and other services" (73.8%) and "Healthy behaviors and lifestyles" (37.8%) were indicated as two of the most important components required for a healthy community.
- #3: Mental health and substance abuse were highlighted as major issues in the community during the focus group that was conducted in Scobey.
- #5: Significantly more respondents cited "Depression/anxiety" (25%) as a serious health concern in 2016 versus 2013.
- #6: Approximately 13% of respondents indicated that they had felt depressed on most days for at least three consecutive months.

Anticipated Impact(s) of these Activities:

- Increased awareness of available programs/resource in the community.
- Increased access to needed behavioral health services.

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Initials

Strategy 1.2 continued…

Plan to Evaluate Anticipated Impact(s) of these Activities: ▪ Track grant applications and determine total amount of funding provided by community stakeholders for this initiative. ▪ Track resource map-based referrals to behavioral health resources in the community.
Measure of Success: The Behavioral Health Committee prioritizes top behavioral health need and publishes community action plan by March 2017.

Initials

Goal 1: Prioritize the top behavioral health need in the county and implement programs that will increase access to behavioral health services.					
Strategy 1.3: Explore opportunities to increase availability of behavioral health services at DMHC.					
Activities	**Responsibility**	**Timeline**	**Final Approval**	**Partners**	**Potential Barriers**
Explore possible telemedicine options for behavioral health services	DMHC	February 2017	CEO	EMTN, MORH, RHIhub	Resource limitations, financial limitations, licensing restrictions
Investigate the possibility of providing an employee wellness program in the facility	CEO / DON	February 2017	CEO	Public Health	Resource limitations, financial limitations

Needs Being Addressed by this Strategy:

- #1: Alcohol abuse/substance abuse" (43.3%) was selected as the second-highest concern in the community.
- #2: "Access to health care and other services" (73.8%) and "Healthy behaviors and lifestyles" (37.8%) were indicated as two of the most important components required for a healthy community.
- #3: Mental health and substance abuse were highlighted as major issues in the community during the focus group that was conducted in Scobey.
- #5: Significantly more respondents cited "Depression/anxiety" (25%) as a serious health concern in 2016 versus 2013.
- #6: Approximately 13% of respondents indicated that they had felt depressed on most days for at least three consecutive months.

Anticipated Impact(s) of these Activities:

- Increased awareness of available programs/resource in the community.
- Increased access to needed behavioral health services.

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

- Determine community interest in receiving behavioral health services via telemedicine through a community survey.
- Hold hospital-wide meetings to determine interest in employee wellness program.

Measure of Success: DMHC will determine feasibility of providing behavioral health telemedicine services and an employee wellness program by March 2017.

Initials

Goal 2: Increase access to needed senior services for Daniels County.

Strategy 2.1: Increase awareness of available senior services in Daniels County.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Identify resource/programs that are currently available in Daniels County	DMHC/Public Health	June 2017	CEO	Council on Aging	Resource limitations
Create a resource map	DMHC/Public Health	September 2017	CEO	Senior Needs Committee	Resource limitations
Distribute resource map to community members	DMHC/Public Health	January 2018	CEO	Senior Needs Committee	Resource limitations

Needs Being Addressed by this Strategy:

- #2: "Access to health care and other services" (73.8%) and "Healthy behaviors and lifestyles" (37.8%) were indicated as two of the most important components required for a healthy community.
- #7: "Assisted living" (28.3%) was the most selected option for respondents when asked about services they would utilize if available locally. Significantly more respondents indicated interest in 2016 versus the 2013 survey.
- #9: The focus group indicated a high level of concern regarding the availability of senior services in the community.

Anticipated Impact(s) of these Activities:

- Increased awareness of available programs/resource in the community.
- Increased access to needed senior and healthcare services.

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

- Develop survey questions to determine awareness of services before and after distribution of resource map.
- Track resource map-based referrals to behavioral health resources in the community.

Measure of Success: The Senior Needs Committee will meet 2-4 times and distribute copies of the resource map by January 2018.

Goal 2: Increase access to needed senior services for Daniels County.

Strategy 2.2: Explore possibility of addressing senior needs in the community.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Determine feasibility of providing transportation assistance, palliative/end of life care, and personal care/in-home services in the community	CFO, COO	May 2017	CEO	Council on Aging, Public Health	Resource limitations, financial limitations, regulatory restrictions
Identify key stakeholders and potential partners	CEO / DON	September 2017	CEO	Council on Aging, Public Health	Resource limitations, financial limitations
Identify available resources and funding opportunities	CEO / DON	January 2018	CEO	Council on Aging, Public Health	Resource limitations, financial limitations

Needs Being Addressed by this Strategy:

- #2: "Access to health care and other services" (73.8%) and "Healthy behaviors and lifestyles" (37.8%) were indicated as two of the most important components required for a healthy community.
- #7: "Assisted living" (28.3%) was the most selected option for respondents when asked about services they would utilize if available locally. Significantly more respondents indicated interest in 2016 versus the 2013 survey.
- #9: The focus group indicated a high level of concern regarding the availability of senior services in the community.

Anticipated Impact(s) of these Activities:

- Increased awareness of available programs/resource in the community.
- Increased access to needed senior and healthcare services.
- Higher quality of life for seniors.

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

- Determine community interest in proposed senior services through outreach.
- Track grant applications and determine total amount of funding provided by community stakeholders for this initiative.

Measure of Success: DMHC will determine feasibility of offering proposed senior services by February 2018.

Initials

Goal 3: Promote healthy lifestyles and increase overall wellness in the community.

Strategy 3.1: Increase awareness of available wellness services/opportunities in Daniels County.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Identify resources/programs that are currently available in Daniels County	DMHC/Public Health	June 2018	CEO	Health and Wellness Committee	Resource limitations
Create a resource map	DMHC/Public Health	September 2018	CEO	Health and Wellness Committee	Resource limitations
Distribute resource map to community members	DMHC/Public Health	January 2019	CEO	Health and Wellness Committee	Resource limitations
Promote existing programs in the community in partnership with organizational partners	DMHC/Public Health	January 2019	CEO	Health and Wellness Committee	Resource limitations

Needs Being Addressed by this Strategy:

- #2: "Access to health care and other services" (73.8%) and "Healthy behaviors and lifestyles" (37.8%) were indicated as two of the most important components required for a healthy community.
- #3: Mental health and substance abuse were highlighted as major issues in the community during the focus group that was conducted in Scobey.
- #5: Significantly more respondents cited "Depression/anxiety" (25%) as a serious health concern in 2016 versus 2013.
- #6: Approximately 13% of respondents indicated that they had felt depressed on most days for at least three consecutive months.
- #10: "Fitness" (25.7%), "Women's health" (25.7%), and "Health and wellness" (22.4%) were the three most popular choices of respondents in terms of interest in educational classes/programs.

Anticipated Impact(s) of these Activities:

- Increased awareness of available programs/resource in the community.
- Increased access to health and wellness programs/resources.
- Improved chronic health indicators.

Initials

Strategy 3.1 continued…

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

- Develop survey questions to determine awareness of services before and after distribution of resource map.
- Track resource map-based referrals to health and wellness resources/programs in the community.

Measure of Success: The Health and Wellness Committee will meet 2-4 times and distribute copies of the resource map by January 2019.

Initials

Goal 3: Promote healthy lifestyles and increase overall wellness in the community.

Strategy 3.2: Identify wellness program to develop in the community and create an action plan.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Identify key stakeholders (i.e. schools, employers, providers, public health)	DMHC/Public Health/Schools	March 2019	CEO	Health and Wellness Committee	Resource limitations
Identify possible resources and funding opportunities available	DMHC/Public Health/Schools	March 2019	CEO	Health and Wellness Committee	Resource limitations, financial limitations
Explore feasibility of partnering with other community resources to develop a wellness program	DMHC/Public Health/Schools	April 2019	CEO	Health and Wellness Committee	Resource limitations, financial limitations
Create action plan	Health and Wellness Committee	May 2019	Board	Health and Wellness Committee	Resource limitations, financial limitations

Needs Being Addressed by this Strategy:

- #2: "Access to health care and other services" (73.8%) and "Healthy behaviors and lifestyles" (37.8%) were indicated as two of the most important components required for a healthy community.
- #3: Mental health and substance abuse were highlighted as major issues in the community during the focus group that was conducted in Scobey.
- #5: Significantly more respondents cited "Depression/anxiety" (25%) as a serious health concern in 2016 versus 2013.
- #6: Approximately 13% of respondents indicated that they had felt depressed on most days for at least three consecutive months.
- #10: "Fitness" (25.7%), "Women's health" (25.7%), and "Health and wellness" (22.4%) were the three most popular choices of respondents in terms of interest in educational classes/programs.

Anticipated Impact(s) of these Activities:

- Increased awareness of available programs/resource in the community.
- Increased access to health and wellness programs/resources.
- Improved chronic health indicators.

Initials

Strategy 3.2 continued…

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

- Determine community interest in proposed health and wellness services through outreach.
- Track grant applications and determine total amount of funding provided by community stakeholders for this initiative.

Measure of Success: DMHC will determine feasibility of offering proposed wellness services by March 2019.

Initials

Goal 4: Provide increased access to needed healthcare services for Daniels County.

Strategy 4.1: Bring mobile MRI services to the community.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Determine how often mobile MRI services will be utilized	CEO	Ongoing	Board	MHN	Resource limitations, financial limitations
Reach out to mobile MRI vendor(s) to discuss feasibility	CEO	Ongoing	Board	MHN	Resource limitations, financial limitations
Create contracts with vendor(s)	CEO	Ongoing	Board	MHN	Resource limitations, financial limitations
Market the MRI services via newspaper advertisements, the DMHC website, etc.	Marketing	Ongoing	CEO	MHN	Resource limitations, financial limitations
Identify ongoing outreach initiatives to advertise mobile MRI service availability	Marketing	Ongoing	CEO	MHN	Resource limitations, financial limitations

Needs Being Addressed by this Strategy:

- #2: "Access to health care and other services" (73.8%) and "Healthy behaviors and lifestyles" (37.8%) were indicated as two of the most important components required for a healthy community.
- #8: "MRI" (21.7%) was selected as the second most popular choice for respondents when asked about services they would utilize if available locally.

Anticipated Impact(s) of these Activities:

- Increased access to healthcare services.
- Increased awareness/utilization of services at DMHC.
- Improved health outcomes.

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

- Determine community interest in mobile MRI services through outreach.
- Track utilization of mobile MRI services.

Measure of Success: DMHC will provide information to the community regarding available mobile MRI services in the area by March 2018.

Goal 4: Provide increased access to needed healthcare services for Daniels County.

Strategy 4.2: Promote telemedicine services currently offered at DMHC.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Research outreach strategies utilized by similar facilities	DMHC	Ongoing	CEO	EMTN	Resource limitations, financial limitations
Create marketing strategy to increase awareness of services	DMHC	Ongoing	CEO	EMTN	Resource limitations, financial limitations
Explore option of holding an 'open house' to introduce community members to telemedicine	DMHC	June 2016	CEO	EMTN	Resource limitations, financial limitations

Needs Being Addressed by this Strategy:

- #2: "Access to health care and other services" (73.8%) and "Healthy behaviors and lifestyles" (37.8%) were indicated as two of the most important components required for a healthy community.
- #4: "More specialists" (34.8%) and "More primary care providers" (34.1%) were selected as the top two things which would improve the community's access to health care.

Anticipated Impact(s) of these Activities:

- Increased access to healthcare services.
- Increased awareness/utilization of services at DMHC.
- Improved health outcomes.

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

- Track inquiries related to telemedicine after outreach campaign has begun.
- Track number of telemedicine encounters before and after outreach strategies implemented.

Measure of Success: DMHC rolls out new outreach campaign regarding telemedicine by June 2016.

Initials

Goal 4: Provide increased access to needed healthcare services for Daniels County.

Strategy 4.3: Provide increased access to specialists through partnerships with other facilities/providers in the area.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Determine feasibility of offering visiting specialists (i.e. facility space/capacity, scheduling, etc.)	CEO	Ongoing	Board	Area hospitals	Resource limitations, financial limitations, capacity issues
Identify specialists interested in coming to Scobey and create schedule that can be published	CEO	September 2016	Board	Area hospitals	Resource limitations, financial limitations
Create marketing strategy to increase awareness of visiting specialists' schedules	Marketing	December 2016	CEO	Area hospitals	Resource limitations, financial limitations

Needs Being Addressed by this Strategy:

- #2: "Access to health care and other services" (73.8%) and "Healthy behaviors and lifestyles" (37.8%) were indicated as two of the most important components required for a healthy community.
- #4: "More specialists" (34.8%) and "More primary care providers" (34.1%) were selected as the top two things which would improve the community's access to health care.

Anticipated Impact(s) of these Activities:

- Increased access to healthcare services.
- Increased awareness/utilization of services at DMHC.
- Improved health outcomes.

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

- Determine community interest in specialty services.
- Track patient encounters before and after outreach strategies implemented.

Measure of Success: DMHC publishes calendar for visiting specialists by December 2016.

Initials

Goal 4: Provide increased access to needed healthcare services for Daniels County.

Strategy 4.4: Recruit an additional primary care provider.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Verify that DMHC is an NHSC-approved site (as a critical access hospital)	DMHC	May 2016	CEO	NHSC, MORH	Financial limitations, resource limitations
Publish provider opening online – NHSC, 3RNet, etc.	Marketing	June 2016	CEO	NHSC, MORH, 3RNet	Resource limitations
Attend primary care residency recruiting event(s) in Montana	Marketing	September 2016	CEO	MORH	Resource limitations, financial limitations

Needs Being Addressed by this Strategy:

- #2: "Access to health care and other services" (73.8%) and "Healthy behaviors and lifestyles" (37.8%) were indicated as two of the most important components required for a healthy community.
- #4: "More specialists" (34.8%) and "More primary care providers" (34.1%) were selected as the top two things which would improve the community's access to health care.

Anticipated Impact(s) of these Activities:

- Increased access to healthcare services.
- Increased awareness/utilization of services at DMHC.
- Improved health outcomes.
- Higher quality of care given.

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

- Track primary care appointments made before/after hiring of primary care provider.
- Survey community satisfaction with new provider.

Measure of Success: DMHC will hire an additional primary care provider by June 2017.

Needs Not Addressed and Justification

Identified health needs unable to address by Daniels Memorial Healthcare Center	Rationale
1. "Cancer" (67.8%) was chosen as the most serious health concern by survey respondents.	• DMHC already provides certain infusion services to community members. Offering additional cancer services would not be feasible from a staffing and financial standpoint.
2. For those who indicated that they were unable to receive or had to delay receiving healthcare services, the reason most cited was "It costs too much" (41.2%).	• DMHC offers programs to assist with paying for healthcare costs and prices its services based on current market conditions.
3. Most of the respondents who did not use preventative services cited the reason, "It costs too much" (8.6%) as the barrier to receiving preventative health services.	• DMHC has a close partnership with the public health department, which offers certain preventative health services for free.
4. "Mammography (on-site)" was the third most popular choice for services which respondents indicated they would use if the service was available locally.	• At this time, DMHC does not believe that there would be enough community interest to support the equipment and staffing necessary to provide full-time mammography services.
5. Over a quarter of respondents (26.6%) indicated that they were unaware of programs that help people pay for healthcare bills.	• DMHC continues to build community awareness of programs available to assist with healthcare costs through advertising on the website, newspaper, as well as through the Affordable Care Act Navigator in place at the facility.

Disclaimer: The Montana Office of Rural Health and the National Rural Health Resource Center strongly encourage 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.

Initials

Dissemination of Needs Assessment

Daniels Memorial Healthcare Center (DMHC) disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on their website (http://www.danielsmemorialhealthcare.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 DMHC is utilizing their input. The Steering Committee, as well as the Board of Directors, will be encouraged to act as advocates in Daniels County as the facility seeks to address the healthcare needs of their community.

Furthermore, the board members of DMHC will be directed to the hospital's website to view the complete assessment results and the implementation plan. DMHC board members approved and adopted the plan on **April 7, 2016**. Board members are encouraged to familiarize themselves with the needs assessment report and implementation plan so they can publically promote the facility's plan to influence the community in a beneficial manner.

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

Initials