

# IMPLEMENTATION PLAN

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## *Addressing Community Health Needs*



***Deer Lodge, Montana***

***2022-2025***

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

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## The Implementation Planning Process

The implementation planning committee – comprised of Deer Lodge Medical Center (DLMC) leadership team– participated in an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through their community health needs assessment (CHNA) process.

The Community Health Services Development (CHSD), community health needs assessment was performed in the winter of 2022 to determine the most important health needs and opportunities for Powell County, Montana. The CHSD project is administrated by the Montana Office of Rural Health (MORH) and funded in part through the Montana Health Research and Education Foundation (MHREF) Flex Grant. “Needs” were identified as the top issues or opportunities rated by respondents during the CHSD survey process or during focus groups (see page 10 for a list of “Needs Identified and Prioritized”). For more information regarding the needs identified, as well as the assessment process/approach/methodology, please refer to the facility’s assessment report, which is posted on the facility’s website ([dlmed.org](http://dlmed.org)).

The community steering and implementation planning committees identified the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives of the broad interest of the community, including those with public health expertise (see page 8 for additional information regarding input received from community representatives).

The implementation planning committee reviewed the priority recommendations provided by the community steering committee and determined which needs or opportunities could be addressed considering DLMC’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:

- **Health and wellness**
- **Access to healthcare services**

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In addressing the aforementioned issues, DLMC seeks to:

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

**Facility Mission:** To provide patient focused healthcare.

**Facility Vision:** To partner with our community to be the first-choice healthcare provider, creating a healing environment by personalizing, demystifying, and humanizing the healthcare experience for patients and their caregivers.

**Facility Values:** Our Values are our core principals and are fundamental to our purpose. Our values affirm the beliefs of our employees and reflect how we commit to treat our patients, our colleagues, and our community. We commit to:

- Treat each other and those we serve with compassion, respect and dignity
- Customize care according to patients’ personal choices through informed, engaged interviews
- Act with integrity and adhere to the highest ethical standards, valuing honesty, trust and professionalism
- Attract and retain high quality professionals
- Value teamwork, collaboration and cooperation
- Demonstrate accountability to our patients an each other for high standards of care
- Doing the right thing, at the right time, for the right reason

**Implementation Planning Committee Members:**

Tony Pfaff, CEO- Deer Lodge Medical Center (DLMC)

Jaena Richards, COO- DLMC

Andy Dreesen, CAO- DLMC

Andy Beck, CNO- DLMC

Kyle Kohn, QAPI Manager- DLMC

Laurie Duncan, Planetree Coordinator- DLMC

## Prioritizing the Community Health Needs

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

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

### 1. DLMC's Existing Presence in the Community

- Reduced-cost Lab Days
- High School Concussion Testing Program
- DLMC Health Walk
- Medical Support at Sporting Events
- City Recreation Sponsorships
- Public Access to meeting rooms and facility
- Health Awareness events and classes
- Community event participation

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

- Powell County Health Department
- Powell County Office of Public Assistance
- Powell County Senior Center
- Montana Hospital Association
- St. Patrick’s Hospital
- Providence Healthcare
- Community Hospital of Anaconda
- St. James Healthcare
- Kalispell Regional Medical Center
- Montana Office of Rural Health and Area Health Education Center (MORH/AHEC)
- Western Montana Mental Health
- Community Medical Center
- University of Utah
- Idaho State University
- University of Montana
- Montana State Prison
- Intermountain Healthcare
- Powell County Council on Aging
- Gonzaga University
- Highlands College
- Helena College
- Rocky Mountain College
- Riverstone Health
- University of North Dakota
- Powell County High School

### 3. Powell County Indicators

#### Population Demographics

- 93.0% of Powell County's population white, and 7.2% identifies as American Indian or Alaska Native.
- 15.0% of Powell County's population has disability status.
- 20.0% of Powell County's population is 65 years and older.
- 13.6% of Powell County's population has Veteran status.
- 37.8% of Powell County's population is a high school graduate (includes equivalency) as their highest degree attained; 23.7% have some college, no degree.

#### Size of County and Remoteness

- 6,854 people in Powell County
- 2.9 people per square mile

#### Socioeconomic Measures

- 14.5% of children live in poverty.
- 11.7% of persons are below the federal poverty level.
- 12.0% of adults (age<65) are uninsured; 7.0% of children less than age 18, are uninsured.
- 9.8% of the population is enrolled in Medicaid.

#### Select Health Measures

- 27.0% of adults are considered obese.
- 29.0% of the adult population report physical inactivity.
- Lung cancer incidence rate (per 100,000 population) among adults in Powell County is 78.5 compared to 52.2 for Montana.
- 41.0% of adults living in frontier Montana report two or more chronic conditions.
- Powell County's suicide rate (per 100,000 population) is 22.8 compared to 23.9 for Montana.

#### Nearest Major Hospital

- St. James Healthcare- Butte, MT – 39.5 miles from Deer Lodge Medical Center
- St Peter's Health- Helena, MT – 56.2 miles from Deer Lodge Medical Center

#### 4. Public Health and Underserved Populations Consultation Summaries

##### Name/Organization

Tony Pfaff – CEO, Deer Lodge Medical Center (DLMC)

October 5, 2021

Jaena Richards – COO DLMC

Andy Dreesen – CAO DLMC

Kyle Kohn – QAPI Manager, DLMC

Andy Beck – CNO, DLMC

Jesse Mullen – Silver State Post

Laura Simpson – Director, Renaissance Senior Care

Sean Herrick – Deer Lodge City Recreation

Melissa Scharf – DON, Montana State Prison

Rick Christman – Elementary Principal

Samantha Ray – Powell County Public Health Nurse

Michael Blakely – Chamber of Commerce/Local Business Owner

Donna McCarthy – Local Business Owner/Physical Therapist

Amanda Bohrer – Powell County Tobacco Prevention

Britni Evans – Powell County Emergency Planner

Jeff Pinkard – Local Volunteer

Brant Pierson– BNSF and DL Fire Chief

Clay Moose – PCHS Counselor

Kathryn Mcenery – Powell County Attorney

##### Public and Community Health

- Is sampling 10% of the population sufficient for this project? I just want to make sure we're getting enough feedback to make an informed decision.
- Our service area has a lot of cross over with Anaconda.
- Our high incidence of Hepatitis C virus must be because of the inclusion of the prison population in our county data.
- On the question about how they learn about services, I think we should break out social media into Facebook and Instagram. This could help us plan for future content.



- We have a lot of part time residents in our service area, so it would be nice to add an out of state option to where is your primary care located.
- Access to affordable housing is an issue here, like everywhere else, so I don't think we'd gain much new information by including that question in the survey. We're already engaged in the community discussions as they happen.
- Being a Planetree facility has been an asset for DLMC. It's a person-centered care model, which is important due to limited access to the DLMC building last year.

Population: Low-Income, Underinsured

- With the Medicaid and Welfare office moved to Anaconda and Butte, it's created a real obstacle for our communities.
- Along those lines, it would be nice to add an option for improving access to health and human services programs/resources to the question about what would improve our community's access to healthcare.
- Due to COVID, in addition to the typical health fairs, DLMC offered some low-cost lab fairs. It would be great to gauge how many of the respondents utilized these opportunities.

Population: Seniors

- There is a need for long term care for our community members. Assisted living access is limited.

## Needs Identified and Prioritized

### *Prioritized Needs to Address*

1. 26.4% of survey respondents indicated “Overweight/obesity” as a top health concern for the community.
2. Survey respondents indicated that “Good jobs and a healthy economy” (48.8%), “Healthy behaviors and lifestyles” (37.6%), and “Access to healthcare services” (33.6%) are components of a health community.
3. 35.0% of respondents rated their knowledge of health services available through Deer Lodge Medical Center as fair or poor.
4. Survey respondents indicated they learn about available health services through “Friends/family” and “Word of mouth/reputation” (57.6%, each), and “Clinic/hospital staff” (44.0%).
5. Focus group participants were interested in more health outreach and fitness opportunities.
6. Survey respondents reported that “More primary care providers” (43.2%), “More mental health providers” (36.8%), “More information about available services” and “Payment assistance programs (healthcare expenses)” (32.8%, each) would improve the community’s access to healthcare.
7. Survey respondents indicated an interest in the following classes or programs: “Fitness” (34.4%), “Health and wellness” (33.6%), and “Weight loss” (24.0%).
8. Secondary data scan indicates that 29.0% of Powell County adults are physically inactive.
9. Secondary data indicates that 27.0% of Powell County adults are obese.
10. 11.2% of survey respondents indicated a desire in “Cancer care” available locally.
11. 31.3% of survey respondents indicated they delayed or did not receive needed healthcare services; reasons for delay included “It cost too much” (33.3%), and “My insurance didn’t cover it” (30.6%), and “Too long to wait for an appointment” (19.4%).
12. 9.8% of survey respondents indicated that they had difficulty getting a prescription or taking their medication regularly in the last year.
13. Focus group participants shared a desire for expanded telehealth services locally.
14. 26.1% of survey respondents were not aware of programs that help people pay for healthcare expenses.

***Needs Unable to Address***

*(See page 25 for additional information)*

1. 59.2% of survey respondents noted “Alcohol/substance abuse” as a top health concern for the community.
2. Survey respondents indicated to what degree their life has been negatively affected a little by their own or someone else’s substance abuse issues, including alcohol, prescription, or other drugs: “A little” (16.3%), “Somewhat” (22.0%), and “A great deal” (16.3%).
3. Focus group participants were interested in an improvement to senior services locally – specifically additional senior housing options and home health services.
4. 44.8% of survey respondents indicated desire in “Urgent care” services available locally.

## Executive Summary

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

### Goal 1: Enhance Deer Lodge Medical Center’s health and wellness outreach in Powell County.

**Strategy 1.1:** Expand and enhance health and wellness programs and resources at Deer Lodge Medical Center.

- 1.1.1. Explore opportunities to expand Planetree mindfulness and wellness programs through DLMC to the community.
- 1.1.2. Sustain the nutritional outreach campaign (such as monthly healthy recipes to be featured in café and shared on the DLMC Facebook page) that promote prevention and healthy diets.
- 1.1.3. Continue to provide health education opportunities that promote health and wellness (i.e., Pre -diabetes support group, Trim the Town, Women’s Night Out, Stop the Bleed, Annual Health Fair, etc.).
- 1.1.4. Sustain the program that fits child car seats for local families.

**Strategy 1.2:** Continue to support and sponsor activities and programs that promote physical activity in Powell County.

- 1.2.1. DLMC will continue to provide staff to participate on the local trail committee and explore opportunities to raise awareness of local trails and promote trail utilization (i.e., Bike Walk Montana, Walking Rx Trails).
- 1.2.2. Sponsor local adult and youth recreational leagues.
- 1.2.3. Continue to host community events that promote physical activity (i.e., golf tournament, annual health walk, etc.).
- 1.2.4. Continue to provide youth sports physicals, concussion screening and helmet promotion program.

**Goal 2: Enhance access to healthcare services in Powell County.**

**Strategy 2.1:** Improve and sustain access to healthcare services in Powell County.

- 2.1.1.** Continue to implement Cardiac Pulmonary Rehabilitation phase two (i.e., monitor/track physical activity and nutrition among identified eligible patients through qualifying events). Continue to refer program “graduates” to phase three (i.e., complimentary passes to fitness center to reduce barriers to continuing physical activity).
- 2.1.2.** Develop and implement a Community Integrated Health Professional (CIH) program deploying paramedics to provide additional services to help community members access care in non-emergency situations (i.e., post discharge follow-up, preventive care, chronic disease management, referrals to community health services, medication management and set up, home safety checks, etc.).
- 2.1.3.** DLMC will continue to work with area partners sustain ambulance services in Powell County. DLMC will also sustain the Pediatric Preparedness Gold Standard and continue providing regular training and supplies to the local quick response units.
- 2.1.4.** Continue to support annual low-cost labs and monthly foot care clinics.
- 2.1.5.** Continue sponsoring monthly health outreach opportunities through the local senior center (i.e., blood pressure checks, medication management, etc.).
- 2.1.6.** Explore the feasibility of recruiting additional primary care providers locally.
- 2.1.7.** Sustain patient navigator services linking patients to community resources. Facilitate presumptive eligibility status for programs like Medicaid, Medicare, 340B program, etc. Implement methodology and protocols to share financial assistance resources with the community (i.e., clinic, emergency room, DLMC website, etc.).
- 2.1.8.** Continue to implement telehealth crisis protocols when patients in crisis present in the emergency room.
- 2.1.9.** Continue to offer telepsychiatry services locally, including medication assistance.
- 2.1.10.** Continue to offer Tele-oncology services through DLMC. DLMC will host an open house in June 2022 to raise the community’s awareness of this service.

**Strategy 2.2:** Improve knowledge of services available through Deer Lodge Medical Center and in the community.

- 2.2.1.** Continue to convene a DLMC workgroup/Administrative team to discuss current outreach efforts, gaps and new opportunities (i.e., ADA compliance, website development, etc.). Continue to support the community resources page on DLMC website that was built during the last implementation period.
- 2.2.2.** Continue to share outreach flyers, handouts, and messages on the screen in lobby detailing local resources (i.e., senior services, mental health resources, new services, financial assistance, etc.).
- 2.2.3.** Revisit outreach/information materials about DLMC providers and services (i.e., grief support groups, telehealth services, etc.) that were created during the last implementation period.
- 2.2.4.** Continue to provide education through presentations to local organizations (i.e., Rotary Club, Public Health, local schools, etc.).

### Implementation Plan Grid

**Goal 1:** Enhance Deer Lodge Medical Center’s health and wellness outreach in Powell County.

**Strategy 1.1:** Expand and enhance health and wellness programs and resources at Deer Lodge Medical Center.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
1.1.1. Explore opportunities to expand Planetree mindfulness and wellness programs through DLMC to the community.	Planetree Coordinator	Ongoing	Planetree Coordinator / Administrator	Planetree International, community partners	Restrictions on in-person gatherings Resource limitations
1.1.2. Sustain the nutritional outreach campaign (such as monthly healthy recipes to be featured in café and shared on the DLMC Facebook page) that promote prevention and healthy diets.	Dietary Manager	Ongoing	Dietary Manager	Thomas Cuisine	Resource limitations Workforce limitations
1.1.3. Continue to provide health education opportunities that promote health and wellness (i.e., Pre -diabetes support group, Trim the Town, Women’s Night Out, Stop the Bleed, Annual Health Fair, etc.).	Receptionist, Foundation Director, Materials Manager, Trauma Committee	Ongoing	Administrative Team	Chamber of Commerce, DLMC Auxiliary	Restrictions on in-person gatherings Resource limitations Workforce limitations
1.1.4. Sustain the program that fits child car seats for local families.	EMS Director	Ongoing	EMS Director	Local Public Health Dept.	Workforce limitations Resource limitations
<p><b>Needs Being Addressed by this Strategy:</b></p> <ul style="list-style-type: none"> <li>▪ 1. 26.4% of survey respondents indicated “Overweight/obesity” as a top health concern for the community.</li> <li>▪ 2. Survey respondents indicated that “Good jobs and a healthy economy” (48.8%), “Healthy behaviors and lifestyles” (37.6%), and “Access to healthcare services” (33.6%) are components of a health community.</li> <li>▪ 3. 35.0% of respondents rated their knowledge of health services available through Deer Lodge Medical Center as fair or poor.</li> </ul>					

- 4. Survey respondents indicated they learn about available health services through “Friends/family” and “Word of mouth/reputation” (57.6%, each), and “Clinic/hospital staff” (44.0%).
- 5. Focus group participants were interested in more health outreach and fitness opportunities.
- 6. Survey respondents reported that “More primary care providers” (43.2%), “More mental health providers” (36.8%), “More information about available services” and “Payment assistance programs (healthcare expenses)” (32.8%, each) would improve the community’s access to healthcare.
- 7. Survey respondents indicated an interest in the following classes or programs: “Fitness” (34.4%), “Health and wellness” (33.6%), and “Weight loss” (24.0%).

**Anticipated Impact(s) of these Activities:**

- Shift community attitudes and beliefs around healthy eating and physical activity.
- Reduce disease burden.
- Empower community to make healthful lifestyle choices.
- Enhanced community knowledge.
- Build community capacity.
- Service and resources development.
- Increase access to health and wellness services and resources.

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

- Maintain Planetree certification.
- Track participation in health education activities.
- Track number and modes of health and wellness opportunities.
- Track participation and engagement with the Planetree programming.
- Track engagement with nutritional outreach campaign.
- Track health and wellness indicators on subsequent CHNA.
- Track utilization of child car seat program.

**Measure of Success:** Powell County residents will observe an increase in wellness promotion and overall attainable healthy lifestyle resources.



**Goal 1: Enhance Deer Lodge Medical Center’s health and wellness outreach in Powell County****Strategy 1.2:** Continue to support and sponsor activities and programs that promote physical activity in Powell County.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
1.2.1. DLMC will continue to provide staff to participate on the local trail committee and explore opportunities to raise awareness of local trails and promote trail utilization (i.e., Bike Walk Montana, Walking Rx Trails).	Planetree Coordinator, Medical Staff, and County Trails Committee Member	Ongoing	Planetree Coordinator, Medical Staff, and County Trails Committee Member	Bike Walk Montana, Montana Walking Rx Trails, County Trails Committee	Workforce limitations Scheduling conflicts
1.2.2. Sponsor local adult and youth recreational leagues.	Chief Administrative Officer (CAO)	Ongoing	Chief Administrative Officer (CAO)	Deer Lodge City Rec, Little League, Little Guy Wrestling	Financial limitations Resource limitations
1.2.3. Continue to host community events that promote physical activity (i.e., golf tournament, annual health walk, etc.).	Foundation Director	Ongoing	Foundation Director	Rock Creek Cattle Company, Grant Kohrs Ranch	Restrictions on in-person gatherings Workforce limitations Scheduling conflicts Financial limitations Resource limitations
1.2.4. Continue to provide youth sports physicals, concussion screening and helmet promotion program.	Rehab Dept. and Clinic	Ongoing	Rehab Dept. and Clinic	Local school district (Districts 1 and 2)	Workforce limitations Resource limitations

**Needs Being Addressed by this Strategy:**

- 1. 26.4% of survey respondents indicated “Overweight/obesity” as a top health concern for the community.
- 2. Survey respondents indicated that “Good jobs and a healthy economy” (48.8%), “Healthy behaviors and lifestyles” (37.6%), and “Access to healthcare services” (33.6%) are components of a health community.
- 5. Focus group participants were interested in more health outreach and fitness opportunities.

- 7. Survey respondents indicated an interest in the following classes or programs: “Fitness” (34.4%), “Health and wellness” (33.6%), and “Weight loss” (24.0%).
- 8. Secondary data scan indicates that 29.0% of Powell County adults are physically inactive.
- 9. Secondary data indicates that 27.0% of Powell County adults are obese.

**Anticipated Impact(s) of these Activities:**

- Shift community attitudes and beliefs around physical activity.
- Reduce disease burden.
- Empower community to make healthful lifestyle choices.
- Enhanced community knowledge.
- Service and resources development.
- Strengthen community partnerships.
- Build community capacity.

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

- Track utilization of sports physicals, helmets, and concussion screenings.
- Track number and modes of community events promoting physical activity.
- Track participation in community events promoting physical activity.
- Track physical activity indicators on subsequent CHNA.

**Measure of Success:** DLMC will observe an increased community utilization of services offered and an increase in the overall health/wellness of Powell County.

**Goal 2:** Enhance access to healthcare services in Powell County.

**Strategy 2.1:** Improve and sustain access to healthcare services in Powell County.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
2.1.1. Continue to implement Cardiac Pulmonary Rehabilitation phase two (i.e., monitor/track physical activity and nutrition among identified eligible patients through qualifying events). Continue to refer program “graduates” to phase three (i.e., complimentary passes to fitness center to reduce barriers to continuing physical activity).	Cardiac Rehab Dept.	Ongoing	Cardiac Rehab Dept.	Private dietician	Workforce limitations Financial limitations Resource limitations
2.1.2. Develop and implement a Community Integrated Health Professional (CIH) program deploying paramedics to provide additional services to help community members access care in non-emergency situations (i.e., post discharge follow-up, preventive care, chronic disease management, referrals to community health services, medication management and set up, home safety checks, etc.).	EMS Director	Ongoing	EMS Director	Montana Office of Rural Health and Area Health Education Center (MORH/AHEC)	Workforce limitations Resource limitations
2.1.3. DLMC will continue to work with area partners sustain ambulance services in Powell County. DLMC will also sustain the Pediatric Preparedness Gold Standard and continue providing regular training and supplies to the local quick response units.	EMS Director	Ongoing	EMS Director	Local Quick Response Units	Workforce limitations Resource limitations

2.1.4. Continue to support annual low-cost labs and monthly foot care clinics.	Lab Director and Transitional Care Unit (TCU) Director	Ongoing	Admin Team, Lab Director and TCU Director		Workforce limitations Resource limitations
2.1.5. Continue sponsoring monthly health outreach opportunities through the local senior center (i.e., blood pressure checks, medication management, etc.).	TCU Director	Ongoing	TCU Director	Local Senior Center	Workforce limitations Resource limitations Scheduling conflicts
2.1.6. Explore the feasibility of recruiting additional primary care providers locally.	Chief Executive Officer (CEO) and CAO	Ongoing	Chief Executive Officer (CEO) and CAO		Provider availability Facility Volumes
2.1.7. Sustain patient navigator services linking patients to community resources. Facilitate presumptive eligibility status for programs like Medicaid, Medicare, 340B program, etc. Implement methodology and protocols to share financial assistance resources with the community (i.e., clinic, emergency room, DLMC website, etc.).	Patient Access Manager	Ongoing	Patient Access Manager		Workforce limitations Resource limitations
2.1.8. Continue to implement telehealth crisis protocols when patients in crisis present in the emergency room.	Chief Nursing Officer (CNO)	Ongoing	CNO	Intermountain Healthcare	Workforce limitations Resource limitations
2.1.9. Continue to offer telepsychiatry services locally, including medication assistance.	CAO	Ongoing	CAO	St. Patrick's Hospital	Workforce limitations Resource limitations

2.1.10. Continue to offer Tele-oncology services through DLMC. DLMC will host an open house in June 2022 to raise the community’s awareness of this service.	CNO	Ongoing; Open house 6/10/22	Administrative Team	Intermountain Healthcare	Workforce limitations Resource limitations Financial limitations
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**Needs Being Addressed by this Strategy:**

- 2. Survey respondents indicated that “Good jobs and a healthy economy” (48.8%), “Healthy behaviors and lifestyles” (37.6%), and “Access to healthcare services” (33.6%) are components of a health community.
- 3. 35.0% of respondents rated their knowledge of health services available through Deer Lodge Medical Center as fair or poor.
- 4. Survey respondents indicated they learn about available health services through “Friends/family” and “Word of mouth/reputation” (57.6%, each), and “Clinic/hospital staff” (44.0%).
- 5. Focus group participants were interested in more health outreach and fitness opportunities.
- 6. Survey respondents reported that “More primary care providers” (43.2%), “More mental health providers” (36.8%), “More information about available services” and “Payment assistance programs (healthcare expenses)” (32.8%, each) would improve the community’s access to healthcare.
- 7. Survey respondents indicated an interest in the following classes or programs: “Fitness” (34.4%), “Health and wellness” (33.6%), and “Weight loss” (24.0%).
- 10. 11.2% of survey respondents indicated a desire in “Cancer care” available locally.
- 11. 31.3% of survey respondents indicated they delayed or did not receive needed healthcare services; reasons for delay included “It cost too much” (33.3%), and “My insurance didn’t cover it” (30.6%), and “Too long to wait for an appointment” (19.4%).
- 12. 9.8% of survey respondents indicated that they had difficulty getting a prescription or taking their medication regularly in the last year.
- 13. Focus group participants shared a desire for expanded telehealth services locally.
- 14. 26.1% of survey respondents were not aware of programs that help people pay for healthcare expenses.

**Anticipated Impact(s) of these Activities:**

- Increase access to health care services.
- Build community capacity.
- Increased community knowledge of services.
- Reduced burden of cost/insurance/transportation as a barrier to care.
- Service, policy, and resources development.

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

- Track progress of recruiting new providers and implementing services available through DLMC.
- Track utilization of the Cardiac Pulmonary Rehabilitation program phase 2.
- Track referrals made to phase 3 of the Cardiac Pulmonary Rehabilitation program.
- Track utilization of the Community Integrated Health Professionals (CIH).
- Maintain the Pediatric Preparedness Gold Standard certification.
- Track number of training opportunities among local quick response units.
- Track participation among local quick response units.
- Track utilization of annual low-cost labs and monthly foot care clinics.
- Track progress towards determining feasibility of recruiting a new primary care provider.
- Track utilization of patient navigator services connecting patients to community resources.
- Monitor implementation of telehealth crisis protocols.
- Track utilization of telepsychiatry and tele-oncology services.
- Monitor access to care indicators on subsequent CHNA.

**Measure of Success:** DLMC will observe an increase in the percentage of healthcare services that residents are receiving within Powell County.

**Goal 2:** Enhance access to healthcare services in Powell County.

**Strategy 2.2:** Improve knowledge of services available through Deer Lodge Medical Center and in the community.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
2.2.1. Continue to convene a DLMC workgroup/Administrative team to discuss current outreach efforts, gaps and new opportunities (i.e., ADA compliance, website development, etc.). Continue to support the community resources page on DLMC website that was built during the last implementation period.	Administrative team	Weekly	Administrative team		Workforce limitations Resource limitations Scheduling conflicts
2.2.2. Continue to share outreach flyers, handouts, and messages on the screen in lobby detailing local resources (i.e., senior services, mental health resources, new services, financial assistance, etc.).	Foundation Director and Administrative Assistant	Ongoing	Foundation Director and Administrative Assistant		Workforce limitations Financial limitations Resource limitations
2.2.3. Revisit outreach/information materials about DLMC providers and services (i.e., grief support groups, telehealth services, etc.) that were created during the last implementation period.	Administrative team	Ongoing	Administrative team		Workforce limitations Financial limitations Resource limitations
2.2.4. Continue to provide education through presentations to local organizations (i.e., Rotary Club, Public Health, local schools, etc.).	TCU Coordinator and Administrative team	Ongoing	TCU Coordinator and Administrative team	Local school districts (#1 and 2), Local Health Dept., Rotary Club	Workforce limitations Resource limitations Scheduling conflicts

**Needs Being Addressed by this Strategy:**

- 3. 35.0% of respondents rated their knowledge of health services available through Deer Lodge Medical Center as fair or poor.
- 4. Survey respondents indicated they learn about available health services through “Friends/family” and “Word of mouth/reputation” (57.6%, each), and “Clinic/hospital staff” (44.0%).
- 5. Focus group participants were interested in more health outreach and fitness opportunities.
- 6. Survey respondents reported that “More primary care providers” (43.2%), “More mental health providers” (36.8%), “More information about available services” and “Payment assistance programs (healthcare expenses)” (32.8%, each) would improve the community’s access to healthcare.
- 14. 26.1% of survey respondents were not aware of programs that help people pay for healthcare expenses.

**Anticipated Impact(s) of these Activities:**

- Increase access to health care services.
- Build community capacity.
- Increased community knowledge of services.
- Reduced burden of cost/insurance/transportation as a barrier to care.
- Service, policy, and resources development.

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

- Track progress of outreach efforts, gaps and new opportunities.
- Track engagement and utilization of the community resources webpage.
- Track number of outreach flyers created and disseminated.
- Track number of local resources utilized as a result of outreach flyers.
- Track number of educational presentations made to local organizations.
- Track attendance for educational presentations.
- Monitor awareness of services indicators on subsequent CHNA.

**Measure of Success:** Powell County residents will observe and improvement in their knowledge of healthcare services available locally.



**Needs Not Addressed and Justification**

Identified health needs unable to address by DLMC	Rationale
<p>1. 59.2% of survey respondents noted “Alcohol/substance abuse” as a top health concern for the community.</p>	<p>Deer Lodge Medical Center (DLMC) primary care providers council patients on substance abuse as needed based on the individual as part of the general care. As necessary, patients are referred to specialists for further help/treatment.</p>
<p>2. Survey respondents indicated to what degree their life has been negatively affected a little by their own or someone else’s substance abuse issues, including alcohol, prescription, or other drugs: “A little” (16.3%), “Somewhat” (22.0%), and “A great deal” (16.3%).</p>	
<p>3. Focus group participants were interested in an improvement to senior services locally – specifically additional senior housing options and home health services.</p>	<p>Community housing is beyond the scope of the services being focused on by DLMC. Community groups (i.e., Council on Aging, Renaissance, etc.) are active members on DLMC’s patient family advisory council. DLMC supports these services and initiatives as possible.</p>
<p>4. 44.8% of survey respondents indicated desire in “Urgent care” services available locally.</p>	<p>All services provided through an urgent care model are available through the existing DLMC clinic. The resource and staffing of an urgent care were not identified as a priority at this time. Based on volumes, walk in patients are typically able to be seen same day through the DLMC clinic.</p>

## Dissemination of Needs Assessment

Deer Lodge Medical Center “DLMC” disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on their website ([dlmed.org](http://dlmed.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 DLMC is utilizing their input. The Steering Committee, as well as the Board of Directors, will be encouraged to act as advocates in Powell County as the facility seeks to address the healthcare needs of their community.

Furthermore, the board members of DLMC will be directed to the hospital’s website to view the complete assessment results and the implementation plan. DLMC board members approved and adopted the plan on **May 24<sup>th</sup>, 2022**. Board members are encouraged to familiarize themselves with the needs assessment report and implementation plan, so they can publicly promote the facility’s plan to influence the community in a beneficial manner.

Written comments on this 2022-2025 Deer Lodge Medical Center Community Benefit Strategic Plan can be submitted to:

Quality Assurance at Deer Lodge Medical Center  
1100 Hollenback Lane  
Deer Lodge, MT 59722

Please reach out to Deer Lodge Medical Center’s Quality Assurance at 406-415-1035 or [kkohn@dlmed.org](mailto:kkohn@dlmed.org) with and questions.