

# 2023

## COMMUNITY HEALTH NEEDS ASSESSMENT

**Forsyth, Montana**

*Assessment conducted by **Rosebud Health Care Center** and  
**Rosebud County Public Health Department** in cooperation with  
the Montana Office of Rural Health*



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# INTRODUCTION

# Introduction

Rosebud Health Care Center (RHCC) is a 24-bed Critical Access Hospital (CAH), Rural Health Clinic and Long-Term Care Facility based in Forsyth, Montana. Rosebud Health Care Center offers inpatient, outpatient, emergency, respite and extended care for the entire family. The 4th largest county in Montana by land area, Rosebud County consists of just over 5,000 square miles of land area and is home to approximately 9,383 people.



Rosebud Health Care Center’s primary service area includes the communities of Forsyth, Colstrip, Hysham, Ashland, Birney, Lame Deer and Rosebud; with most of the County’s populated communities located along I-94, US 12 and US 212. Rosebud County has a low population density and is considered frontier (six or less people per square mile) by the US Department of Health and Human Services. For further demographic, socioeconomic and other related county and state data, please see Appendix C to review the Secondary Data Analysis.

**Vision:** Rosebud Health Care Center provides a safe, caring environment for patients, residents and staff. We are conscientious, exemplary stewards of all resources. Our compassionate and professional staff, through strong partnerships, will provide quality, affordable healthcare for the whole family. Our ongoing commitment to serving the needs of our community is in keeping with the spirit of our organization.

**Mission:** Employees of RHCC are committed to high quality, efficient and patient-centered care for our family, friends and community.

**Values:**

*Accountability:* We will always be accountable for our patients.

*Attitude:* Our staff will always provide patient-centered service with a pleasant, positive attitude.

*Confidentiality:* We will always protect each patient’s privacy and record confidentiality.

*Integrity:* We will always be honest and truthful in our communications with patients and community members.

*Quality:* We will provide quality care close to home.

*Unity:* We are unified in one purpose.

*Commitment:* We demonstrate a dedication to our work and improve the services we provide by staying current with modern treatments, moving forward with technology and dedication to prevention and wellness.

The Hospital and Health Department participated in the Community Health Services Development (CHSD) project administrated by the Montana Office of Rural Health (MORH) and funded in part through the Montana Health Research and Education Foundation (MHREF) Flex Grant and the State of Montana’s Department of Health and Human Services (DPHHS), Public Health and Safety Division

(PHSD) in partnership with the Montana Healthcare Foundation. Community involvement in steering committee meetings, focus groups, and key informant interviews enhance community engagement in the assessment process.



In March 2023, Rosebud County was surveyed about its healthcare system. This report shows the results of the survey in both narrative and chart formats. A copy of the survey instrument is included as the end of this report (Appendix E). Readers are invited to familiarize themselves with the survey instrument and the subsequent findings. The narrative report touches on the highlights while the charts present data for every question asked. Please note we are able to compare some of the 2023 survey data with data from previous surveys conducted in partnership with the Montana Office of Rural Health in 2017 and 2020. If any statistical significance exists, it will be reported. The significance level was set at 0.05.

## Health Assessment Process

A steering committee was convened to assist Rosebud Health Care Center and Rosebud County Public Health Department in conducting CHSD. A diverse group of community members representing various organizations and populations within the community (ex. public health, elderly, young families, uninsured) came together in February 2023. For a list of all steering committee members and their affiliations, see Appendix A. The Steering Committee met twice during the CHSD process; first to discuss health concerns in the community and offer their perspective in designing the survey instrument, and again to review results of the CHNA and to assist in the prioritization of health needs.

## Survey Methodology

### Survey Instrument

In March 2023, surveys were mailed out to the residents in Rosebud County. Survey respondents had the ability to complete the survey mailed to them, or via an online survey hosted at Montana State University's HELPS Lab web portal. The survey was based on a design that has been used extensively in the states of Washington, Wyoming, Alaska, Montana, and Idaho. The survey was designed to provide each facility with information from local residents regarding:

- Demographics of respondents
- Hospitals, primary care providers, and specialists used, plus reasons for selection
- Local healthcare provider usage
- Services preferred locally
- Perception and satisfaction of local healthcare

### Sampling

Rosebud Health Care Center and Rosebud County Public Health Department provided aggregated lists of outpatient and inpatient admissions and information regarding service area zip codes. Those zip

codes with the greatest number of admissions were selected to be included in the survey. A random list of 800 residents was then selected with the assistance of the MSU HELPS lab. Residence was stratified in the initial sample selection so that each area would be represented in proportion to the overall served population and the proportion of past admissions. Note: although the survey samples were proportionately selected, actual surveys returned from each population area varied, which may result in slightly less proportional results. See table below for the survey distribution.

Zip Code	Population <sup>1</sup>	Community Name	Total Distribution	# Male	# Female
59327	1562	Forsyth	446	223	223
59323	2094	Colstrip	240	120	120
59038	227	Hysham	70	35	35
59347	55	Rosebud	32	16	16
59039	28	Ingomar	6	3	3
59043	2231	Lame Deer	4	2	2
59003	758	Ashland	2	1	1
<b>Total</b>	<b>6,955</b>		<b>800</b>	<b>400</b>	<b>400</b>

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

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

### Information Gaps- Data

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

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

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

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

## Limitations in Survey and Key Informant Interview Methodology

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

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

While key informant interview data can offer invaluable insight into the perception of a community or group of individuals, qualitative data can be difficult to analyze. For this reason, key informant interview data are grouped into common themes based on our interpretation of the transcript. To better understand these themes, please review the full transcripts in Appendix I. MORH staff facilitated the key informant interviews for Rosebud Health Care Center and Rosebud County Public Health Department to ensure impartiality. However, given the small size of the community, key informant interview participants may still be hesitant to express their opinions freely. Personal identifiers are not included in the transcripts.

## Survey Implementation

In March 2023, a survey, cover letter with representative's signatures for the Hospital and Public Health Department, and a postage paid envelope were mailed to 800 randomly selected residents in the hospital's service area. A news release was sent to the local newspaper as well as social media postings prior to the survey distribution announcing that Rosebud Health Care Center and Rosebud County Public Health Department would be conducting a community health needs assessment survey throughout the region in cooperation with the Montana Office of Rural Health.

One-hundred fifty-two surveys were returned out of 800. Of those 800 surveys, 56 surveys were returned undeliverable for a 20.4% response rate. From this point on, the total number of surveys will be out of 744. Based upon the sample size, we can be 95% confident that the responses to the survey questions are representative of the service area population, plus or minus 7.86%.

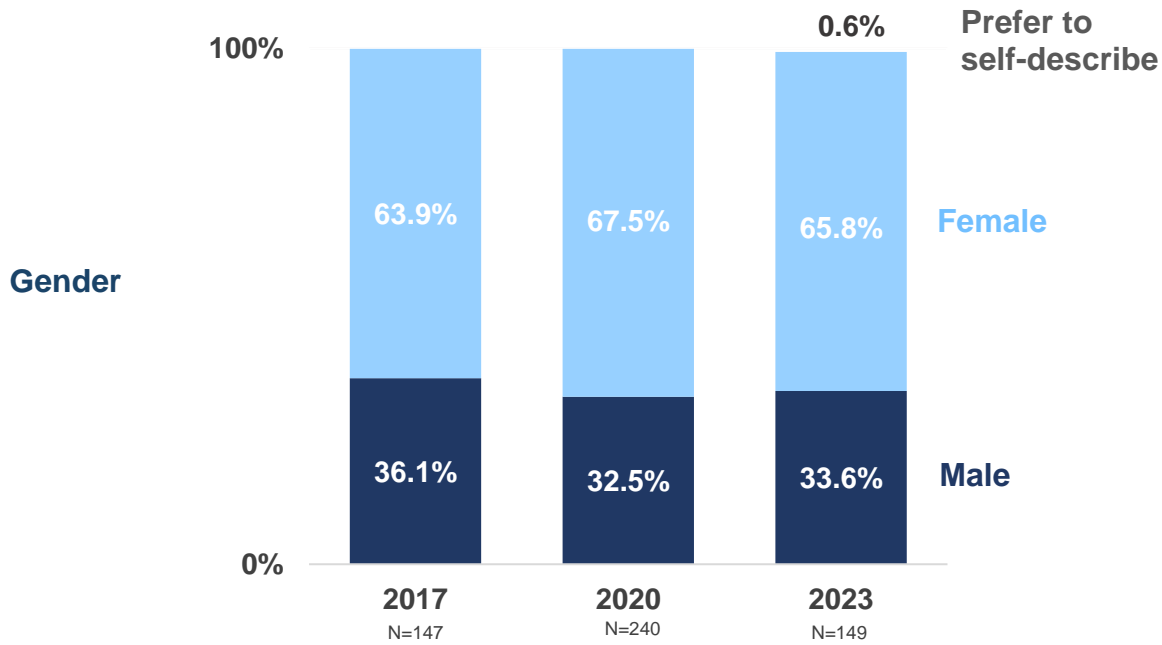
## Survey Respondent Demographics

A total of 744 surveys were distributed throughout Rosebud County. One-hundred fifty-two surveys were completed for a 20.4% response rate. The following table and graphs indicate the demographic characteristics of the survey respondents. Information on location, gender, age, and employment is included. Percentages indicated on the tables and graphs are based upon the total number of responses for each individual question, as some respondents did not answer all questions.

<b>Place of Residence</b>	<b>2017 % (n)</b>	<b>2020 % (n)</b>	<b>2023 % (n)</b>
<b>Number of respondents</b>	151	242	151
59327 Forsyth	84.8% (128)	82.6% (200)	54.3% (82)
59323 Colstrip	4.0% (6)	3.3% (8)	31.1% (47)
59038 Hysham	7.9% (12)	5.8% (14)	10.6% (16)
59347 Rosebud		6.6% (16)	4.0% (6)
59003 Ashland	1.3% (2)	0.0% (0)	0.0% (0)
59039 Ingomar	2.0% (3)	0.4% (1)	0.0% (0)
59043 Lame Deer		0.0% (0)	0.0% (0)
Other		1.2% (3)	0.0% (0)
<b>TOTAL</b>	<b>100.0% (151)</b>	<b>100.0% (242)</b>	<b>100.0% (151)</b>

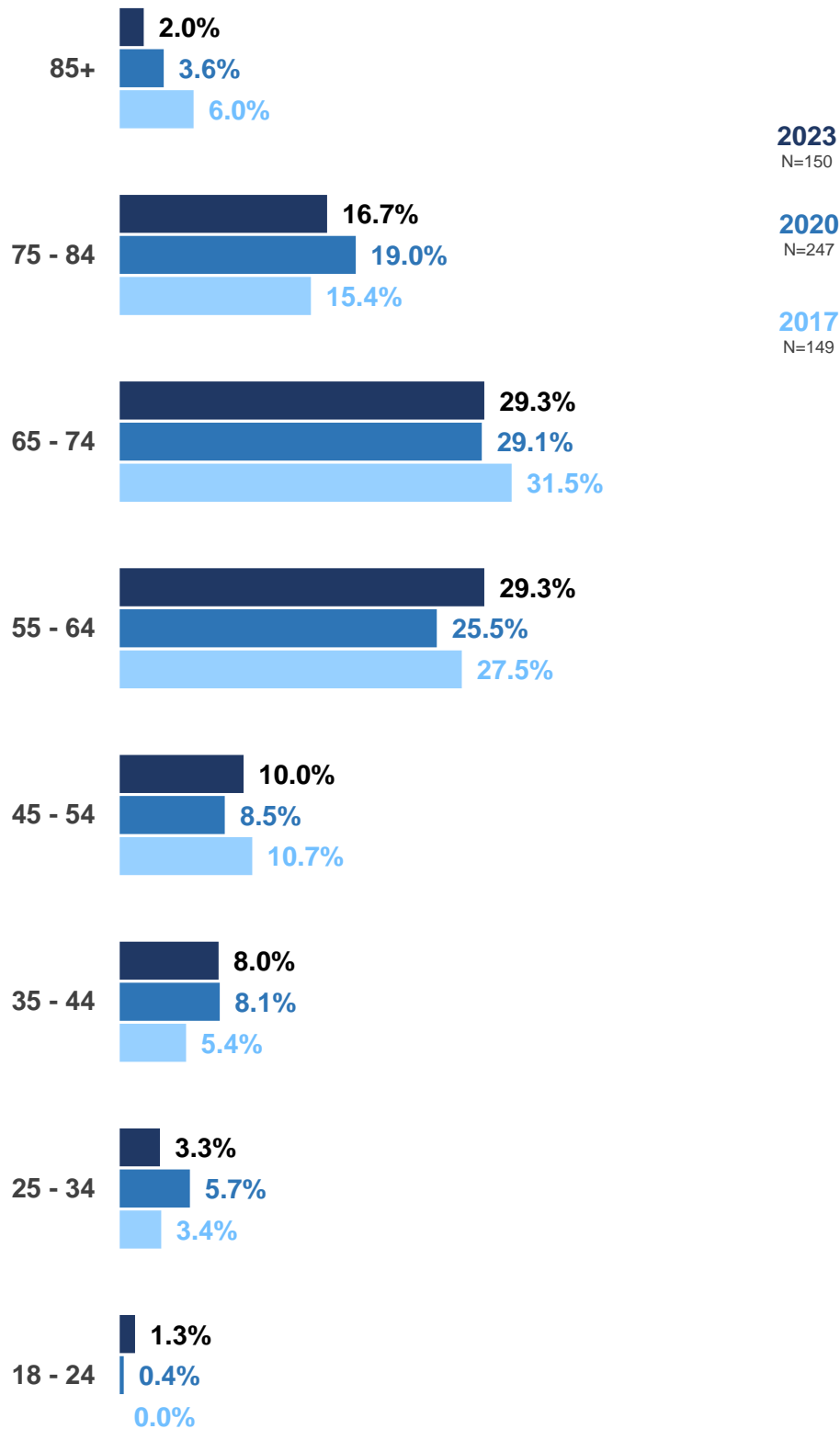
Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year.





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

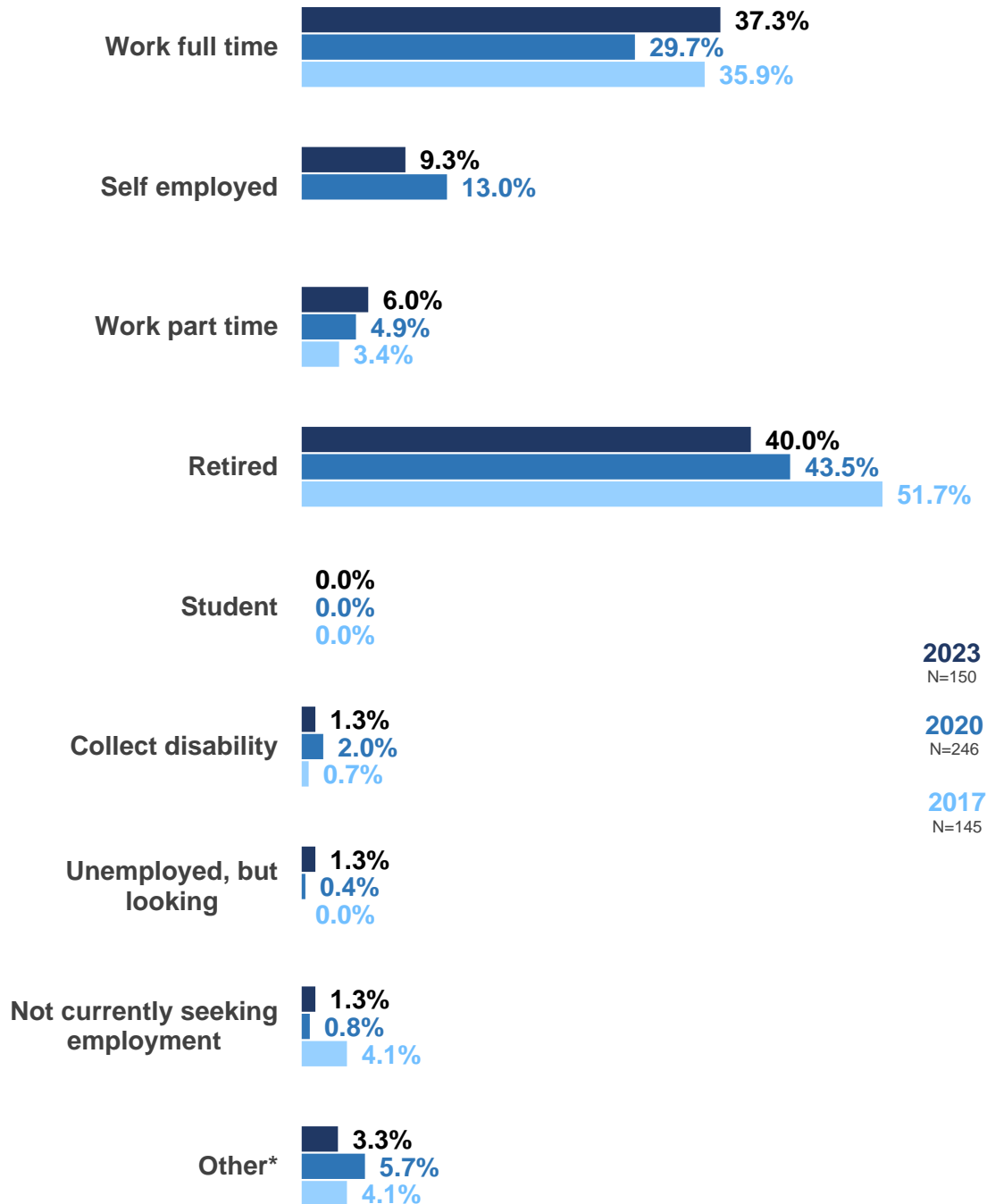
## Age of respondents for all years of the survey



The increasing percentage of aging rural residents is a statewide trend and will likely have a significant impact on demand for future healthcare services.

## Employment status

The majority of 2023 respondents are retired or work full time.



\*Respondents (N=4) who selected over the allotted amount were moved to "Other."

"Other" comments included: "Rancher" and "Stay at home mom"



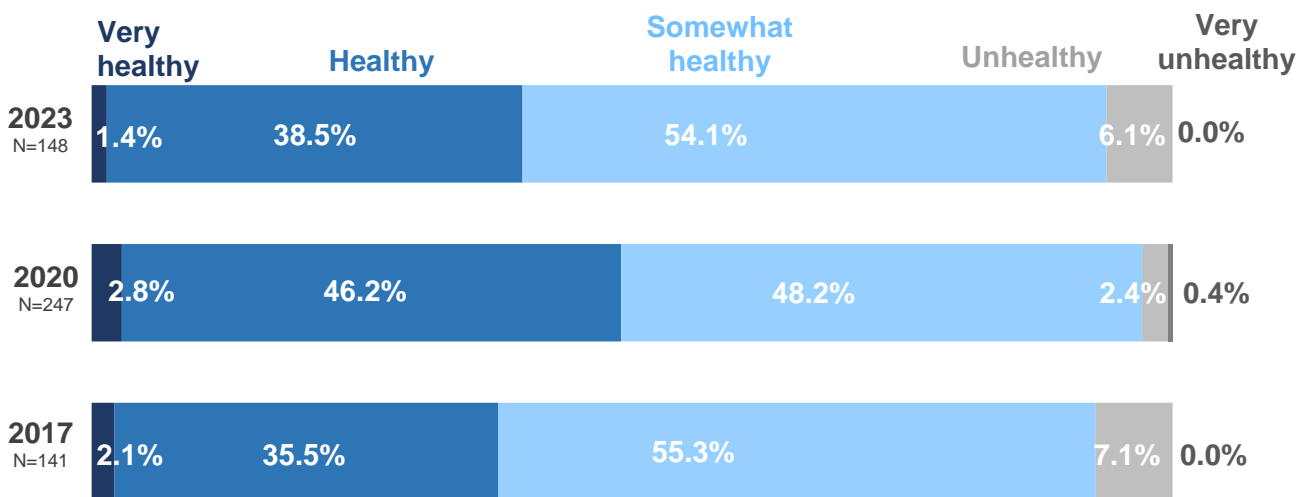
# **SURVEY RESULTS**

# Survey Results

## Rating of Healthy Community (Question 1)

Respondents were asked to indicate how they would rate the general health of their community. Fifty-four point one percent of respondents (n=80) rated their community as “Somewhat healthy,” and 38.5% of respondents (n=57) felt their community was “Healthy.” Six point one percent of respondents (n=9) indicated they felt their community was “Unhealthy,” 1.4% of respondents (n=2) rated their community as “Very healthy,” and no respondents rated their community “Very unhealthy.”

Fewer 2023 respondents rate their community as **healthy** compared to 2020.



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

## Health Concerns for Community (Question 2)

Respondents were asked what they felt the three most serious health concerns were in their community. The top identified health concern was “Drug use” at 43.2% (n=64). “Alcohol use” was also a high priority at 37.2% (n=55), followed by “Cancer” at 29.1% (n=43), which experienced a significant change since 2020.

Health Concern	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	152	249	148	
Drug use		35.7% (89)	43.2% (64)	<input type="checkbox"/>
Alcohol use		36.9% (92)	37.2% (55)	<input type="checkbox"/>
Cancer	44.1% (67)	36.9% (92)	29.1% (43)	<input checked="" type="checkbox"/>
Overweight/obesity	37.5% (57)	22.1% (55)	21.6% (32)	<input checked="" type="checkbox"/>
Tobacco use (cigarettes/cigars, vaping, smokeless)	13.2% (20)	20.5% (51)	19.6% (29)	<input type="checkbox"/>
Mental health issues	14.5% (22)	15.7% (39)	18.9% (28)	<input type="checkbox"/>
Depression/anxiety	9.9% (15)	9.2% (23)	16.9% (25)	<input type="checkbox"/>
Work/economic stress		14.5% (36)	16.2% (24)	<input type="checkbox"/>
Diabetes	24.3% (37)	14.1% (35)	11.5% (17)	<input checked="" type="checkbox"/>
Lack of access to healthcare	11.2% (17)	8.4% (21)	11.5% (17)	<input type="checkbox"/>
Heart disease	30.3% (46)	10.8% (27)	8.8% (13)	<input checked="" type="checkbox"/>
Alzheimer’s/dementia		11.2% (28)	8.1% (12)	<input type="checkbox"/>
Lack of exercise	14.5% (22)	10.4% (26)	7.4% (11)	<input type="checkbox"/>
Respiratory issues/illness		4.0% (10)	6.8% (10)	<input type="checkbox"/>
Social isolation/loneliness		6.4% (16)	4.7% (7)	<input type="checkbox"/>
Lack of dental care	5.9% (9)	2.8% (7)	3.4% (5)	<input type="checkbox"/>
Motor vehicle accidents	5.3% (8)	2.4% (6)	3.4% (5)	<input type="checkbox"/>
Child abuse/neglect	5.3% (8)	2.8% (7)	2.0% (3)	<input type="checkbox"/>
Domestic violence	1.3% (2)	2.0% (5)	2.0% (3)	<input type="checkbox"/>
Hunger		1.2% (3)	2.0% (3)	<input type="checkbox"/>
Stroke	9.2% (14)	3.2% (8)	2.0% (3)	<input checked="" type="checkbox"/>
Suicide		1.6% (4)	2.0% (3)	<input type="checkbox"/>
Recreation related accidents/injuries	0.0% (0)	0.4% (1)	1.4% (2)	<input type="checkbox"/>
Work related accidents/injuries	3.3% (5)	2.0% (5)	0.7% (1)	<input type="checkbox"/>
Other*	3.9% (6)	8.8% (22)	6.8% (10)	<input type="checkbox"/>

*Table footer and “Other” comments on next page*

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

“Other” comments included: Lack of at home care services for the elderly  
 (View all comments in Appendix G)

### Components of a Healthy Community (Question 3)

Respondents were asked to identify the three most important things for a healthy community. Forty-nine point three percent of respondents (n=75) indicated that “Access to healthcare and services” is important for a healthy community, followed by “Good jobs and a healthy economy” at 44.1% (n=67), and “Strong family life” at 25.0% (n=38).

Components of a Healthy Community	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	152	249	152	
Access to healthcare and services	68.4% (104)	51.4% (128)	49.3% (75)	■
Good jobs and a healthy economy	53.3% (81)	50.2% (125)	44.1% (67)	□
Strong family life	28.3% (43)	23.7% (59)	25.0% (38)	□
Low crime/safe neighborhoods	20.4% (31)	15.3% (38)	23.7% (36)	□
Healthy behaviors and lifestyles	34.9% (53)	26.9% (67)	23.0% (35)	□
Affordable housing	11.8% (18)	13.3% (33)	19.1% (29)	□
Good schools	23.0% (35)	23.3% (58)	17.8% (27)	□
Religious or spiritual values	25.7% (39)	22.1% (55)	17.1% (26)	□
Access to healthy foods		13.7% (34)	15.8% (24)	□
Access to childcare/after school programs		10.0% (25)	14.5% (22)	□
Clean environment	12.5% (19)	7.6% (19)	9.9% (15)	□
Community involvement	7.2% (11)	12.9% (32)	8.6% (13)	□
Tolerance for diversity	1.3% (2)	5.2% (13)	8.6% (13)	■
Parks and recreation	3.3% (5)	4.0% (10)	6.6% (10)	□
Transportation services		6.4% (16)	5.9% (9)	□
Low death and disease rates	3.9% (6)	2.0% (5)	2.0% (3)	□
Low level of domestic violence	2.6% (4)	1.2% (3)	2.0% (3)	□

Table continued on the next page.

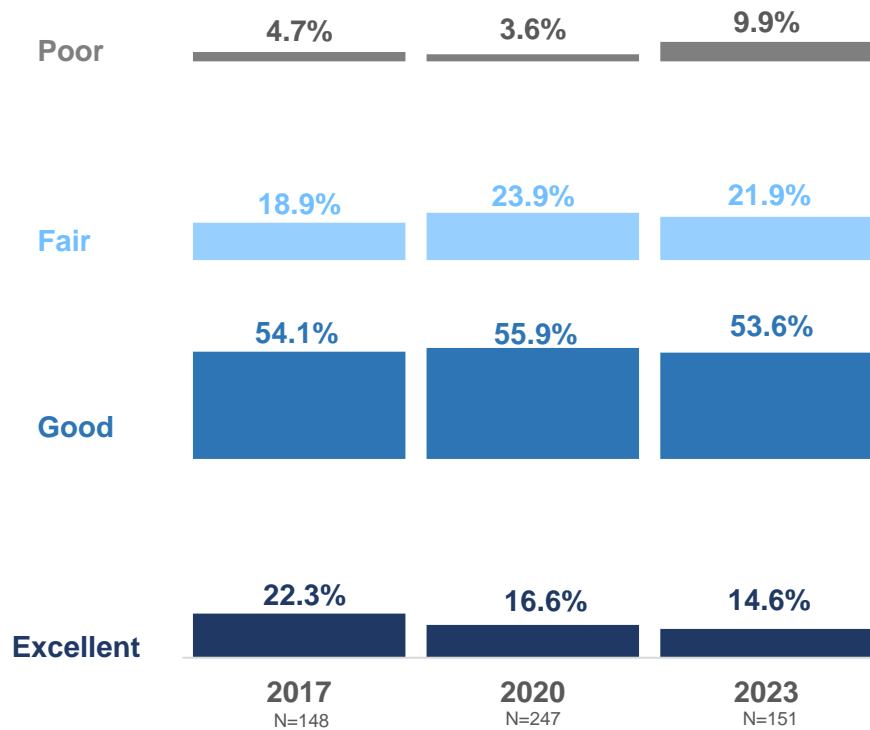
Arts and cultural events	1.3% (2)	1.2% (3)	0.7% (1)	<input type="checkbox"/>
Other	0.7% (1)	2.8% (7)	0.7% (1)	<input type="checkbox"/>

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

## Knowledge of Health Services (Question 4)

Respondents were asked to rate their knowledge of the health services available through Rosebud Health Care Center. Fifty-three point six percent of respondents (n=81) rated their knowledge of health services as "Good." "Fair" was selected by 21.9% percent (n=33), "Excellent" was chosen by 14.6% of respondents (n=22), and "Poor" was selected by 9.9% (n=15).

Over half of 2023 respondents rated their knowledge of services as **Good**.

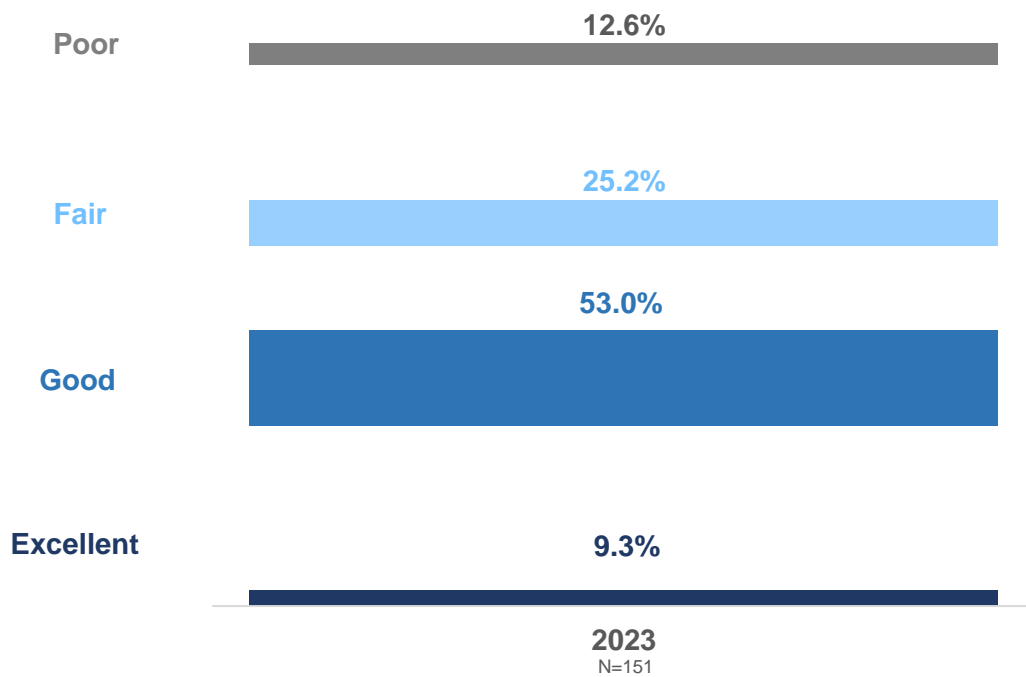




## Knowledge of Health Services through Rosebud County Public Health Department (Question 5)

Respondents were asked to rate their knowledge of the health services available through the Rosebud County Public Health Department (RCPHD). Fifty-three percent of respondents (n=80) rated their knowledge of health services as “Good.” “Fair” was selected by 25.2% percent (n=38), “Poor” was chosen by 12.6% of respondents (n=19), and “Excellent” was selected by 9.3% (n=14).

**62.3% of 2023 respondents rated their knowledge of services available through RCPHD as Excellent or Good.**



## How Respondents Learn of Health Services through Rosebud Health Care Center (Question 6)

When asked how survey respondents learn about health services available through Rosebud Health Care Center, the most frequently indicated method of learning was “Friends/family” at 58.9% (n=89), followed by “Word of mouth/reputation” at 51.0% (n=77). “Healthcare provider” was selected by 37.7% of respondents (n=57).

How Respondents Learn about Rosebud Health Care Center	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	152	249	151	
Friends/family	56.6% (86)	55.8% (139)	58.9% (89)	<input type="checkbox"/>
Word of mouth/reputation	61.2% (93)	59.0% (147)	51.0% (77)	<input type="checkbox"/>
Healthcare provider	48.0% (73)	42.6% (106)	37.7% (57)	<input type="checkbox"/>
Mailings/newsletter	34.2% (52)	33.7% (84)	25.8% (39)	<input type="checkbox"/>
Public health nurse	15.1% (23)	24.1% (60)	20.5% (31)	<input type="checkbox"/>
Social media	5.9% (9)	20.9% (52)	19.2% (29)	<input checked="" type="checkbox"/>
Community bulletin board	11.8% (18)	17.7% (44)	18.5% (28)	<input type="checkbox"/>
Newspaper	40.1% (61)	31.3% (78)	16.6% (25)	<input checked="" type="checkbox"/>
Website/internet	2.6% (4)	16.9% (42)	15.9% (24)	<input checked="" type="checkbox"/>
Senior center		19.7% (49)	13.9% (21)	<input type="checkbox"/>
Radio	18.4% (28)	17.3% (43)	11.3% (17)	<input type="checkbox"/>
Presentations	7.2% (11)	1.6% (4)	1.3% (2)	<input checked="" type="checkbox"/>
Other	5.9% (9)	4.4% (11)	6.6% (10)	<input type="checkbox"/>

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

“Other” comments included: “Had to go to hospital to find out” and “During an appointment (2)”

**View a cross tabulation of how respondents learn with how they rate their knowledge on p. 86**

## How Respondents Learn of Health Services through Rosebud County Public Health Dept. (Question 7)

When asked how survey respondents learn about health services available through Rosebud County Public Health Department, the most frequently indicated method of learning was “Friends/family” at 55.8% (n=82), followed by “Word of mouth/reputation” at 46.9% (n=69). “Healthcare provider” was selected by 31.3% of respondents (n=46).

How Respondents Learn about Rosebud County Health Department	2023 % (n)
Number of respondents	147
Friends/family	55.8% (82)
Word of mouth/reputation	46.9% (69)
Healthcare provider	31.3% (46)
Mailings/newsletter	24.5% (36)
Public health nurse	22.4% (33)
Community bulletin board	21.1% (31)
Newspaper	16.3% (24)
Social media	16.3% (24)
Senior center	14.3% (21)
Website/internet	14.3% (21)
Radio	10.9% (16)
Presentations	4.1% (6)
Other	5.4% (8)

Respondents were asked to indicate all methods of receiving information, so percentages do not equal 100%.

“Other” comments included: “Have to call” and “Reader board in front of cop shop”

**View a cross tabulation of how respondents learn with how they rate their knowledge on p. 87**

## Utilized Community Health Resources (Question 8)

Respondents were asked which community health resources, other than the hospital or hospital clinic, they had used in the last three years. “Pharmacy/tele-pharmacy” was the most frequently utilized community health resource cited by respondents at 71.5% (n=98). The “Dentist” was utilized by 59.9% (n=82) of respondents followed by “Public Health” at 46.0% (n=63).

Use of Community Health Resources	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	152	249	137	
Pharmacy/tele-pharmacy	80.9% (123)	72.3% (180)	71.5% (98)	<input type="checkbox"/>
Dentist	61.2% (93)	61.0% (152)	59.9% (82)	<input type="checkbox"/>
Public Health	27.0% (41)	34.5% (86)	46.0% (63)	<input checked="" type="checkbox"/>
Senior center	20.4% (31)	22.1% (55)	20.4% (28)	<input type="checkbox"/>
Mental health	4.6% (7)	2.0% (5)	3.6% (5)	<input type="checkbox"/>
Nursing home	2.6% (4)	4.4% (11)	2.9% (4)	<input type="checkbox"/>
Assisted living	1.3% (2)	1.6% (4)	0.7% (1)	<input type="checkbox"/>
Other	3.3% (5)	7.2% (18)	6.6% (9)	<input type="checkbox"/>

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

“Other” comments included: “None (3),” “Chiropractor (2),” and “physical therapy”

## Improve Community’s Access to Healthcare (Question 9)

Respondents were asked to indicate what they felt would improve their community’s access to healthcare. The majority of respondents (49.3%, n=70) reported that “More primary care providers” would make the greatest improvement. Forty-six point five percent of respondents (n=66) indicated “Affordability of services” followed by “More information about available services” at 44.4% (n=63) would improve access.

**More primary care providers would make the greatest improvement to healthcare access.**

What Would Improve Community Access to Healthcare	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	152	249	142	
More primary care providers	34.2% (52)	62.7% (156)	49.3% (70)	■
Affordability of services	52.6% (80)	45.4% (113)	46.5% (66)	□
More information about available services		26.9% (67)	44.4% (63)	■
More specialists	29.6% (45)	32.5% (81)	35.2% (50)	□
Improved quality of care	22.4% (34)	21.3% (53)	24.6% (35)	□
Payment assistance programs (healthcare expenses)		22.9% (57)	21.1% (30)	□
Greater health education services	13.2% (20)	12.9% (32)	18.3% (26)	□
Transportation assistance	12.5% (19)	11.6% (29)	17.6% (25)	□
Telemedicine	7.9% (12)	14.9% (37)	15.5% (22)	□
Online scheduling		6.0% (15)	14.8% (21)	■
Assistance making appointment and finding services		10.8% (27)	14.1% (20)	□
Outpatient services expanded hours	13.8% (21)	10.0% (25)	9.9% (14)	□
Cultural sensitivity	1.3% (2)	2.0% (5)	2.8% (4)	□
Interpreter services	0.0% (0)	0.8% (2)	0.7% (1)	□
Other	4.6% (7)	4.0% (10)	3.5% (5)	□

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

“Other” comments included: “Bring back public health center in Colstrip (2)”

## Interest in Educational Classes/Programs (Question 10)

Respondents were asked which topics they would be most interested in learning about. The most frequently selected topic was “Health and wellness” at 40.3% (n=52). Interest in “Fitness” followed with 38.0% (n=49), while 35.7% of respondents (n=46) were interested in “Women’s health.”

Interest in Classes or Programs	2017 % (n)	2020 % (n)	2023 % (n)
Number of respondents	152	249	129
Health and wellness	28.9% (44)	34.5% (86)	40.3% (52)
Fitness	25.7% (39)	27.3% (68)	38.0% (49)
Women’s health	21.7% (33)	23.3% (58)	35.7% (46)
First aid/CPR	17.1% (26)	18.9% (47)	34.1% (44)
Nutrition	23.0% (35)	15.7% (39)	33.3% (43)
Senior wellness		28.5% (71)	32.6% (42)
Weight loss	19.7% (30)	22.1% (55)	29.5% (38)
Living will	15.1% (23)	20.5% (51)	27.1% (35)
Heart disease	11.2% (17)	8.4% (21)	15.5% (20)
Men’s health	9.9% (15)	12.0% (30)	15.5% (20)
Mental health	7.9% (12)	11.6% (29)	15.5% (20)
Diabetes	16.4% (25)	12.9% (32)	14.7% (19)
Cancer	13.2% (20)	15.3% (38)	13.2% (17)
Alzheimer’s	15.8% (24)	16.1% (40)	12.4% (16)
Support groups	5.9% (9)	6.4% (16)	9.3% (12)
Alcohol/substance abuse	3.3% (5)	2.8% (7)	7.8% (10)
Grief counseling	5.9% (9)	6.4% (16)	7.8% (10)
Parenting	3.9% (6)	5.6% (14)	7.8% (10)
Smoking/tobacco cessation	4.6% (7)	4.8% (12)	4.7% (6)
Lactation/breastfeeding support		1.2% (3)	2.3% (3)
Prenatal	2.0% (3)	0.8% (2)	2.3% (3)
Other	2.6% (4)	3.2% (8)	0.8% (1)

Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful

change when one may not exist. Respondents were asked to pick all classes or programs that are of interest, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

## Desired Local Health Services (Question 11)

Respondents were asked to indicate which additional services they would utilize if available locally. Respondents indicated the most interest in “Ask a nurse” at 51.1% (n=69). Twenty-six point seven percent (n=36) of respondents were interested in “Hearing clinic/test,” while 25.9% (n=35) desire a “Foot care clinic” locally.

Desired Local Services	2017 % (n)	2020 % (n)	2023 % (n)
Number of respondents	152	249	135
Ask a nurse			51.1% (69)
Hearing clinic/test		30.5% (76)	26.7% (36)
Foot care clinic	18.4% (28)	21.7% (54)	25.9% (35)
Sleep studies	7.9% (12)	13.7% (34)	23.7% (32)
Home health	8.6% (13)	18.5% (46)	18.5% (25)
In person counseling services			14.8% (20)
Mental health (tele-psych)			14.8% (20)
Diabetes education	8.6% (13)	13.3% (33)	13.3% (18)
Cardiac rehabilitation	6.6% (10)	9.2% (23)	12.6% (17)
Hospice	10.5% (16)	13.3% (33)	8.1% (11)
Crisis services	2.6% (4)	7.2% (18)	5.9% (8)
Other	6.6% (10)	6.4% (16)	3.0% (4)

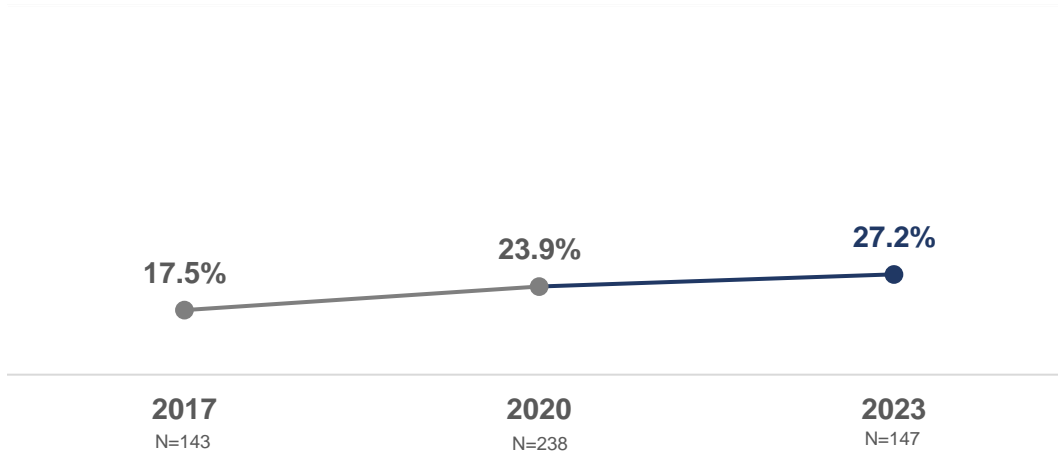
Respondents were asked to pick all desired local healthcare services that are of interest, so percentages do not equal 100%. Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist.

“Other” comments included: “Telemedicine” and “Vision services”

## Delay of Services (Question 12)

Twenty-seven point two percent of respondents (n=40) reported that they or a member of their household thought they needed healthcare services but did not get them or had to delay getting them. Seventy-two point eight percent of respondents (n=107 ) felt they were able to get the healthcare services they needed without delay.

**More 2023 respondents delayed or did not receive needed services compared to the previous assessments.**



**View a cross tabulation of where respondents live and 'delay of healthcare services' on p. 88**



## Reason for Not Receiving/Delaying Needed Services (Question 13)

Thirty-eight of the 40 survey respondents who indicated they were unable to receive or had to delay services, shared their top three reasons for not receiving or delaying needed services. The reason most cited was that “It cost too much” (34.2%, n=13). “Qualified provider not available” was the next most cited reason at 31.6% (n=12).

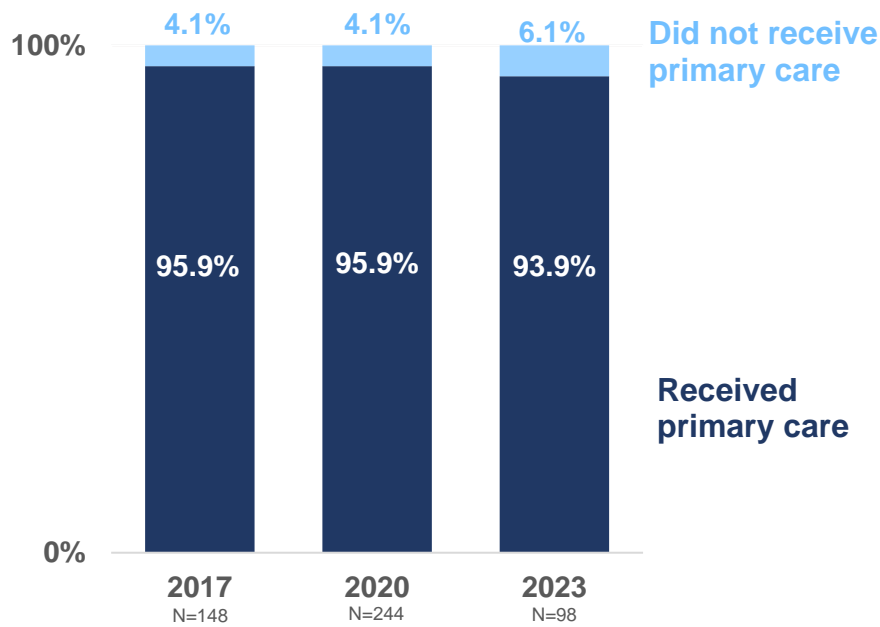
Reasons for Delay in Receiving Needed Healthcare	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	25	57	38	
It cost too much	40.0% (10)	36.8% (21)	34.2% (13)	<input type="checkbox"/>
Qualified provider not available		38.6% (22)	31.6% (12)	<input type="checkbox"/>
Could not get an appointment	16.0% (4)	8.8% (5)	18.4% (7)	<input type="checkbox"/>
Too long to wait for an appointment	20.0% (5)	7.0% (4)	18.4% (7)	<input type="checkbox"/>
Office wasn't open when I could go	4.0% (1)	0.0% (0)	15.8% (6)	<input checked="" type="checkbox"/>
It was too far to go	4.0% (1)	14.0% (8)	13.2% (5)	<input type="checkbox"/>
No insurance	0.0% (0)	5.3% (3)	13.2% (5)	<input type="checkbox"/>
Unsure if services were available	8.0% (2)	0.0% (0)	13.2% (5)	<input checked="" type="checkbox"/>
Don't like doctors/providers	36.0% (9)	17.5% (10)	10.5% (4)	<input checked="" type="checkbox"/>
Too nervous or afraid	4.0% (1)	8.8% (5)	10.5% (4)	<input type="checkbox"/>
Didn't know where to go	12.0% (3)	1.8% (1)	7.9% (3)	<input type="checkbox"/>
My insurance didn't cover it	32.0% (8)	28.1% (16)	7.9% (3)	<input checked="" type="checkbox"/>
Could not get off work	8.0% (2)	5.3% (3)	5.3% (2)	<input type="checkbox"/>
Not treated with respect	24.0% (6)	5.3% (3)	2.6% (1)	<input checked="" type="checkbox"/>
Transportation problems	0.0% (0)	3.5% (2)	2.6% (1)	<input type="checkbox"/>
Don't understand healthcare system		0.0% (0)	0.0% (0)	<input type="checkbox"/>
Had no one to care for the children	0.0% (0)	1.8% (1)	0.0% (0)	<input type="checkbox"/>
Language barrier	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other*	24.0% (6)	21.1% (12)	10.5% (4)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to indicate the top three reasons for a delay in seeking or receiving healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. \*Respondents (N=1) who selected over the allotted amount were moved to “Other.”

## Primary Care Services (Question 14)

Ninety-three point nine percent of respondents (n=92) indicated they or someone in their household had been seen by a primary care provider (such as a family physician, physician assistant, or nurse practitioner) for healthcare services in the past three years. Six point one percent of respondents (n=6) indicated they had not received primary care.

**Primary care utilization has remained consistent over the last three assessments**



## Location of Primary Care Services (Question 15)

All respondents who indicated receiving primary care services in the previous three years shared the location where they received services. The majority of respondents (25.0%, n=23) reported receiving care in Forsyth and 19.9% of respondents (n=18, each) received care in Billings and Colstrip. Thirteen respondents were moved to “other” due to selecting more than one primary care provider location.

Location of Primary Care Provider	2017 % (n)	2020 % (n)	2023 % (n)
Number of respondents	129	232	92
Forsyth	62.8% (81)	44.0% (102)	25.0% (23)
Billings	17.8% (23)	17.2% (40)	19.6% (18)
Colstrip	5.4% (7)	5.2% (12)	19.6% (18)
Miles City	12.4% (16)	13.4% (31)	16.3% (15)
Hysham			2.2% (2)
VA Hospital		1.3% (3)	1.1% (1)
Ashland	0.8% (1)	0.0% (0)	0.0% (0)
Hardin	0.0% (0)	0.4% (1)	0.0% (0)
Indian Health Services (IHS)		0.4% (1)	0.0% (0)
Other	0.8% (1)	18.1% (42)	16.3% (15)
<b>TOTAL</b>	<b>100.0% (129)</b>	<b>100.0% (232)</b>	<b>100.0% (92)</b>

Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. \*Respondents (N=13) who selected over the allotted amount were moved to “Other.”

“Other” comments included: Red Lodge (2) and Casper, WY

**View a cross tabulation of where respondents live with where they utilize primary care services on p. 89**

## Reasons for Primary Care Provider Selection (Question 16)

Ninety of the 92 respondents who indicated they or someone in their household had been seen by a primary care provider within the past three years, shared why they chose that primary care provider. “Closest to home” was the most frequently selected reason at 45.6% (n=41), followed by “Clinic/provider’s reputation for quality” and “Prior experience with clinic at 32.2% (n=29, each).

Reasons for Selecting Primary Care Provider	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	142	232	90	
Closest to home	57.0% (81)	48.3% (113)	45.6% (41)	<input type="checkbox"/>
Clinic/provider’s reputation for quality	26.1% (37)	33.8% (79)	32.2% (29)	<input type="checkbox"/>
Prior experience with clinic	59.2% (84)	44.0% (103)	32.2% (29)	<input checked="" type="checkbox"/>
Appointment availability	30.3% (43)	26.9% (63)	21.1% (19)	<input type="checkbox"/>
Recommended by family or friends	16.2% (23)	10.7% (25)	16.7% (15)	<input type="checkbox"/>
Referred by physician or other provider	7.0% (10)	9.0% (21)	12.2% (11)	<input type="checkbox"/>
Privacy/confidentiality		10.3% (24)	10.0% (9)	<input type="checkbox"/>
Length of waiting room time	3.5% (5)	6.8% (16)	8.9% (8)	<input type="checkbox"/>
Cost of care	4.2% (6)	5.6% (13)	5.6% (5)	<input type="checkbox"/>
Required by insurance plan	4.2% (6)	4.7% (11)	3.3% (3)	<input type="checkbox"/>
VA/Military requirement	2.1% (3)	3.8% (9)	3.3% (3)	<input type="checkbox"/>
Indian Health Services	0.0% (0)	1.3% (3)	0.0% (0)	<input type="checkbox"/>
Other	9.9% (14)	7.7% (18)	13.3% (12)	<input type="checkbox"/>

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

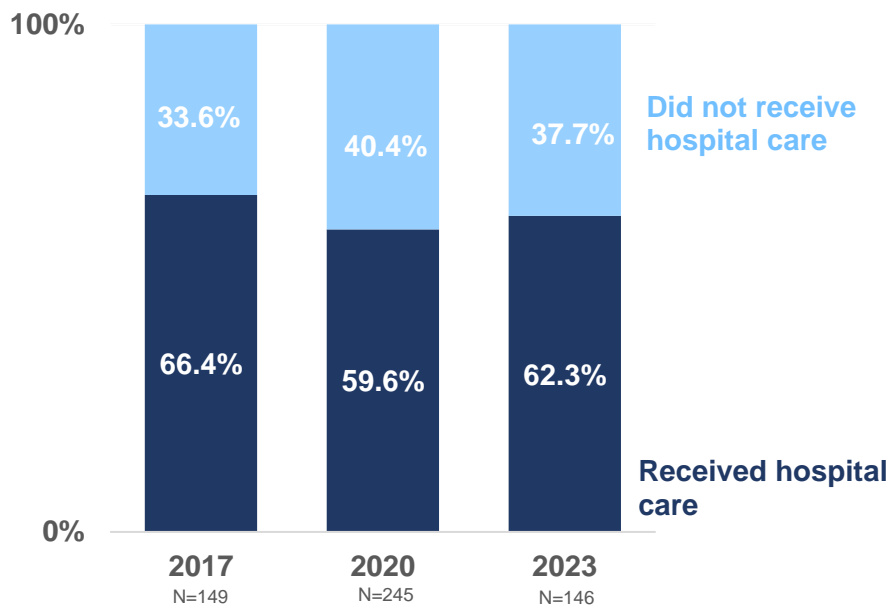
“Other” comments included: “Previous history with physician (2)”

**View a cross tabulation of where respondents utilize primary care services with their reasons for selecting their provider on p. 90**

## Hospital Care Services (Question 17)

Respondents were asked if they or someone in their household had received hospital care in the last three years. Hospitalization was quantified as hospitalized overnight, day surgery, obstetrical care, rehabilitation, radiology, or emergency care. Sixty-two point three percent of respondents (n=91) reported that they or a member of their family had received hospital care during the previous three years, and 37.7% (n=55) had not received hospital services.

**Hospital utilization increased by 2.7% since the 2020 assessment**



## Location of Hospital Services (Question 18)

Of the survey respondents who indicated receiving hospital care in the last three years (n=91), the majority (37.4%, n=34) report utilizing “Billings Clinic” most often. Twenty-eight point six percent of respondents (n=26) received services at “St. Vincent Healthcare.”

Hospital Used Most Often	2017 % (n)	2020 % (n)	2023 % (n)
Number of respondents	82	146	91
Billings Clinic	35.4% (29)	32.2% (47)	37.4% (34)
St. Vincent Healthcare	18.3% (15)	23.3% (34)	28.6% (26)
Rosebud Health Care Center	31.7% (26)	22.6% (33)	16.5% (15)
Holy Rosary Healthcare	8.5% (7)	6.8% (10)	3.3% (3)
IHS - Crow Agency	0.0% (0)	0.0% (0)	0.0% (0)
VA Hospital	2.4% (2)	0.0% (0)	0.0% (0)
Other	3.7% (3)	15.1% (22)	14.3% (13)
<b>TOTAL</b>	<b>100.0% (82)</b>	<b>100.0% (146)</b>	<b>100.0% (91)</b>

Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. \*Respondents (N=12) who selected over the allotted amount were moved to “Other.”

“Other” comments included: “Ortho MT (2)”

**View a cross tabulation of where respondents live with where they utilize hospital services on p. 91**

## Reasons for Hospital Selection (Question 19)

Of the survey respondents who indicated receiving hospital care in the last three years (n=91), the majority of respondents (51.1%, n=46) stated that “Doctor/provider preference” was their top reason for selecting the facility they used most often. “Prior experience with hospital” was selected by 40.0% of the respondents (n=36), followed closely by “Referred by physician/provider” at 34.4% (n=31).

Reasons for Selecting Hospital	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	99	146	90	
Doctor/provider preference	57.6% (57)	52.1% (76)	51.1% (46)	<input type="checkbox"/>
Prior experience with hospital	49.5% (49)	36.3% (53)	40.0% (36)	<input type="checkbox"/>
Referred by physician or other provider	32.3% (32)	35.6% (52)	34.4% (31)	<input type="checkbox"/>
Hospital’s reputation for quality	31.3% (31)	30.1% (44)	31.1% (28)	<input type="checkbox"/>
Closest to home	38.4% (38)	25.3% (37)	25.6% (23)	<input type="checkbox"/>
Emergency, no choice	18.2% (18)	24.0% (35)	22.2% (20)	<input type="checkbox"/>
Required by insurance plan	2.0% (2)	2.7% (4)	5.6% (5)	<input type="checkbox"/>
Recommended by family or friends	4.0% (4)	1.4% (2)	4.4% (4)	<input type="checkbox"/>
VA/Military requirement	3.0% (3)	4.8% (7)	3.3% (3)	<input type="checkbox"/>
Closest to work	5.1% (5)	2.7% (4)	2.2% (2)	<input type="checkbox"/>
Financial assistance programs		1.4% (2)	2.2% (2)	<input type="checkbox"/>
Cost of care	2.0% (2)	2.1% (3)	0.0% (0)	<input type="checkbox"/>
Privacy/confidentiality		0.7% (1)	0.0% (0)	<input type="checkbox"/>
Other	6.1% (6)	11.0% (16)	10.0% (9)	<input type="checkbox"/>

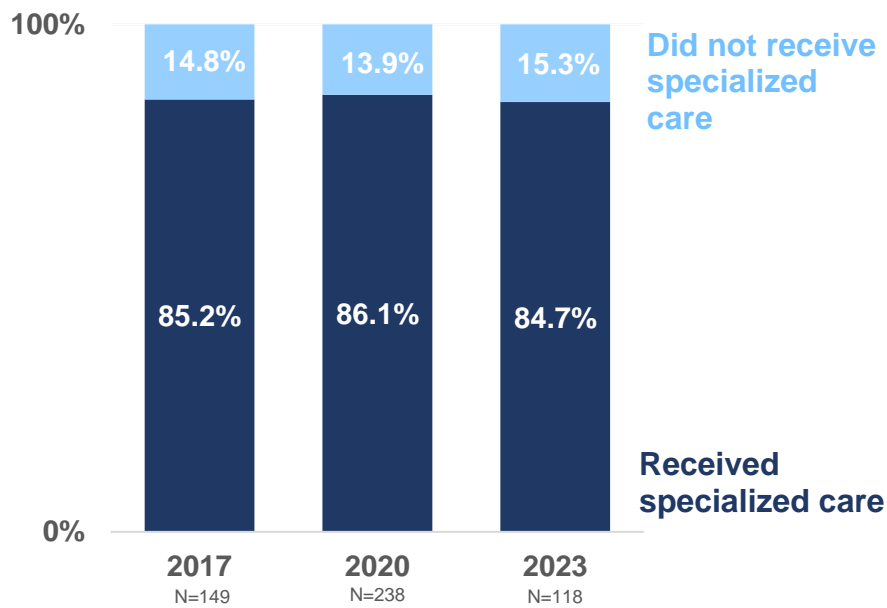
A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to pick their top three reasons for selecting a hospital, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. \*Respondents (N=8) who selected over the allotted amount were moved to “Other.”

**View a cross tabulation of where respondents utilize hospital services with their reasons for selecting that facility p. 92**

## Specialty Care Services (Question 20)

Eighty-four point seven percent of the respondents (n=100) indicated they or a household member had seen a healthcare specialist during the past three years, while 15.3% (n=18) indicated they had not. Thirty-four respondents chose not to answer this question.

**Majority of the 2023 respondents saw a specialist in the past 3 years**





## Location of Healthcare Specialist(s) (Question 21)

Of the 100 respondents who indicated they saw a healthcare specialist in the past three years, 89.8% (n=88) went to Billings. Miles City specialty services were utilized by 30.6% of respondents (n=30), and 21.4% went to Forsyth. Respondents could select more than one location, so percentages do not equal 100%.

Location of Specialist	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	127	205	98	
Billings	89.0% (113)	89.3% (183)	89.8% (88)	<input type="checkbox"/>
Miles City	29.9% (38)	26.8% (55)	30.6% (30)	<input type="checkbox"/>
Forsyth	15.7% (20)	18.5% (38)	21.4% (21)	<input type="checkbox"/>
Colstrip		3.9% (8)	6.1% (6)	<input type="checkbox"/>
VA Hospital		6.8% (14)	2.0% (2)	<input type="checkbox"/>
Ashland	0.8% (1)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Hardin	0.0% (0)	0.5% (1)	0.0% (0)	<input type="checkbox"/>
Indian Health Services (HIS)	0.0% (0)	1.0% (2)	0.0% (0)	<input type="checkbox"/>
Other	4.7% (6)	3.9% (8)	6.1% (6)	<input type="checkbox"/>

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

## Type of Healthcare Specialist Seen (Question 22)

The respondents (n=98) saw a wide array of healthcare specialists in the past three years. The most frequently indicated specialist was a “Dentist” with 38.8% of respondents (n=38) having utilized their services. “Dermatologist (skin)” was the second most utilized specialist at 31.6% (n=31), followed by “Cardiologist (heart),” “(Optometrist (eye doctor),” and “Radiologist (x-ray)” all at 30.6% (n=30, each). Respondents were asked to choose all that apply, so percentages do not equal 100%.

Type of Specialists Seen	2017 % (n)	2020 % (n)	2023 % (n)	SIGNIFICANT CHANGE
Number of respondents	127	205	98	
Dentist	29.1% (37)	33.2% (68)	38.8% (38)	<input type="checkbox"/>
Dermatologist (skin)	31.5% (40)	22.4% (46)	31.6% (31)	<input type="checkbox"/>
Cardiologist (heart)	17.3% (22)	19.0% (39)	30.6% (30)	<input checked="" type="checkbox"/>
Optometrist (eye doctor)		34.1% (70)	30.6% (30)	<input type="checkbox"/>
Radiologist (x-ray)	10.2% (13)	21.0% (43)	30.6% (30)	<input type="checkbox"/>
Ophthalmologist (eye specialist)	27.6% (35)	24.9% (51)	25.5% (25)	<input type="checkbox"/>
Orthopedic surgeon	22.0% (28)	30.2% (62)	24.5% (24)	<input type="checkbox"/>
Physical therapist	15.0% (19)	19.0% (39)	19.4% (19)	<input type="checkbox"/>
Chiropractor	15.7% (20)	19.5% (40)	18.4% (18)	<input type="checkbox"/>
Gastroenterologist (stomach)	13.4% (17)	10.7% (22)	17.3% (17)	<input type="checkbox"/>
OB/GYN (birth/women’s health)	13.4% (17)	11.2% (23)	17.3% (17)	<input type="checkbox"/>
Oncologist (cancer)	7.1% (9)	11.7% (24)	15.3% (15)	<input type="checkbox"/>
General surgeon	11.0% (14)	10.7% (22)	13.3% (13)	<input type="checkbox"/>
Neurologist	7.9% (10)	11.2% (23)	13.3% (13)	<input type="checkbox"/>
Audiologist (ear)		10.2% (21)	10.2% (10)	<input type="checkbox"/>
Endocrinologist (hormones)	10.2% (13)	4.9% (10)	10.2% (10)	<input type="checkbox"/>
Urologist	15.0% (19)	12.2% (25)	9.2% (9)	<input type="checkbox"/>
ENT (ear/nose/throat)	15.0% (19)	10.7% (22)	8.2% (8)	<input type="checkbox"/>
Pulmonologist (lungs)	3.9% (5)	5.4% (11)	7.1% (7)	<input type="checkbox"/>
Pediatrician (child specialist)	3.1% (4)	2.9% (6)	6.1% (6)	<input type="checkbox"/>
Podiatrist (feet)	4.7% (6)	6.3% (13)	6.1% (6)	<input type="checkbox"/>

Table continued on next page

Allergist	6.3% (8)	2.9% (6)	5.1% (5)	<input type="checkbox"/>
Rheumatologist (autoimmune/arthritis)	4.7% (6)	7.8% (16)	5.1% (5)	<input type="checkbox"/>
Mental health counselor	3.9% (5)	2.4% (5)	4.1% (4)	<input type="checkbox"/>
Dietician	1.6% (2)	1.5% (3)	3.1% (3)	<input type="checkbox"/>
Neurosurgeon	2.4% (3)	4.9% (10)	3.1% (3)	<input type="checkbox"/>
Psychiatrist (M.D.)	3.9% (5)	1.0% (2)	2.0% (2)	<input type="checkbox"/>
Psychologist	1.6% (2)	1.0% (2)	2.0% (2)	<input type="checkbox"/>
Geriatrician (aging)	0.8% (1)	0.5% (1)	0.0% (0)	<input type="checkbox"/>
Occupational therapist	1.6% (2)	2.0% (4)	0.0% (0)	<input type="checkbox"/>
Social worker	0.0% (0)	0.5% (1)	0.0% (0)	<input type="checkbox"/>
Speech therapist	2.4% (3)	1.5% (3)	0.0% (0)	<input type="checkbox"/>
Substance abuse counselor	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other	11.0% (14)	10.2% (21)	6.1% (6)	<input type="checkbox"/>

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

### Utilization of Preventive Services (Question 23)

Respondents were asked if they or someone in their household had utilized any of the preventive services listed in the past year. “Blood pressure check” was selected by 69.4% of respondents (n=86), followed by “Dental check” at 62.9% (n=78). Fifty-seven point three percent of respondents (n=71) indicated they had a “Health checkup.” Survey respondents could select all services that applied.

Use of Preventive Services	2017 % (n)	2020 % (n)	2023 % (n)
Number of respondents	152	249	124
Blood pressure check	48.0% (73)	67.9% (169)	69.4% (86)
Dental check		64.3% (160)	62.9% (78)
Health checkup	50.7% (77)	59.8% (149)	57.3% (71)
Vision check		46.6% (116)	53.2% (66)
Flu shot/immunizations	59.2% (90)	65.1% (162)	47.6% (59)
Cholesterol check	40.1% (61)	53.0% (132)	44.4% (55)
Mammography	33.6% (51)	36.1% (90)	37.9% (47)

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Diabetic/glucose screening	23.7% (36)	28.1% (70)	23.4% (29)
Colonoscopy	15.8% (24)	16.1% (40)	17.7% (22)
Prostate (PSA)	10.5% (16)	20.5% (51)	15.3% (19)
Hearing check		17.7% (44)	13.7% (17)
Pap test	7.2% (11)	13.3% (33)	13.7% (17)
Children’s checkup/Well baby	3.3% (5)	6.0% (15)	10.5% (13)
None	10.5% (16)	2.4% (6)	1.6% (2)
Other	2.6% (4)	1.6% (4)	1.6% (2)

Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents could select any of the preventive services listed, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

## Overall Quality of Care of Services through Rosebud Health Care Center (Question 24)

Respondents were asked to rate various services available through Rosebud Health Care Center using the scale of 4= Excellent, 3= Good, 2= Fair, 1=Poor, and Don’t know/Haven’t used. The services that received the highest scores were “Laboratory” and “Physical therapy” (3.3 out of 4.0). Overall, the average rating on quality and availability of the health services listed was 3.2 out of 4.0.

Quality of Care Rating for Rosebud Health Care Center	2017 Average (n)	2020 Average (n)	2023 Average (n)	SIGNIFICANT CHANGE
Total number of respondents	129	220	118	
Laboratory	3.4 (101)	3.4 (178)	3.3 (90)	<input type="checkbox"/>
Physical therapy	3.4 (59)	3.4 (116)	3.3 (48)	<input type="checkbox"/>
Clinic services	3.3 (116)	3.4 (196)	3.2 (99)	<input type="checkbox"/>
Diagnostic imaging (CT/x-ray/ultrasound/MRI)	3.3 (90)	3.4 (145)	3.2 (72)	<input type="checkbox"/>
Emergency room	3.3 (90)	3.3 (141)	3.1 (76)	<input type="checkbox"/>
Occupational Therapy	3.3 (23)		3.1 (18)	<input type="checkbox"/>
Hospital/inpatient services	3.3 (60)	3.4 (109)	2.9 (48)	<input checked="" type="checkbox"/>
Nursing home		3.2 (49)	2.9 (21)	<input type="checkbox"/>
Personal Assisted Living Services (PALS)	3.2 (15)	3.2 (26)	2.8 (10)	<input type="checkbox"/>

Table continued on next page

Telemedicine	3.3 (11)	3.3 (19)	2.8 (10)	<input type="checkbox"/>
<b>Overall average</b>	<b>3.3 (129)</b>	<b>3.3 (220)</b>	<b>3.2 (118)</b>	<input type="checkbox"/>

Respondents were asked to rate the quality of hospital services on a 4-point Likert Scale, with 1 corresponding with poor, 2 corresponding with Fair, 3 corresponding with Good, and 4 corresponding with Excellent. A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Grayed out cells indicate the question was not asked that year.

## Overall Quality of Care of Services through Rosebud County Public Health Department (Question 25)

Respondents were asked to rate various services available through the Rosebud County Public Health Department using the scale of 4= Excellent, 3= Good, 2= Fair, 1=Poor, and Don't know/Haven't used. The service that received the highest score was "Immunization Clinics" (3.6 out of 4.0). Overall, the average rating on quality and availability of the health services listed was 3.4 out of 4.0.

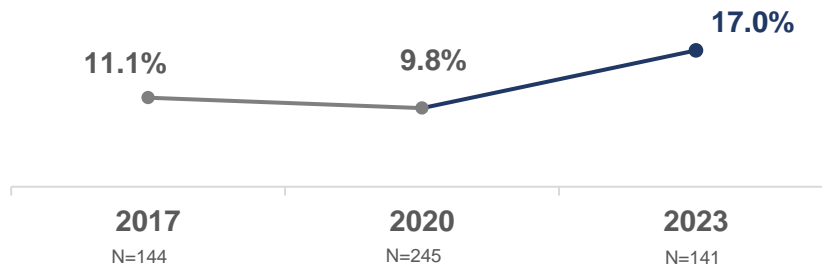
<b>Quality of Care Rating for Rosebud County Health Department</b>	<b>2023 Average (n)</b>
Total number of respondents	94
Immunization Clinics	3.6 (73)
Nurse Consultations	3.4 (20)
Foot Clinics - Senior Citizens	3.1 (14)
Title X Program - Family Planning	3.0 (6)
Home Visits - Senior Citizens	3.0 (6)
Miscellaneous Medical Services	3.0 (45)
<b>Overall average</b>	<b>3.4 (94)</b>

Respondents were asked to rate the quality of hospital services on a 4-point Likert Scale, with 1 corresponding with poor, 2 corresponding with Fair, 3 corresponding with Good, and 4 corresponding with Excellent.

## Prevalence of Depression (Question 26)

Respondents were asked to indicate if there were periods of at least three consecutive months in the past three years where they felt depressed on most days. Seventeen percent of respondents (n=24) indicated they had experienced periods of depression, and 83.0% of respondents (n=117) indicated they had not.

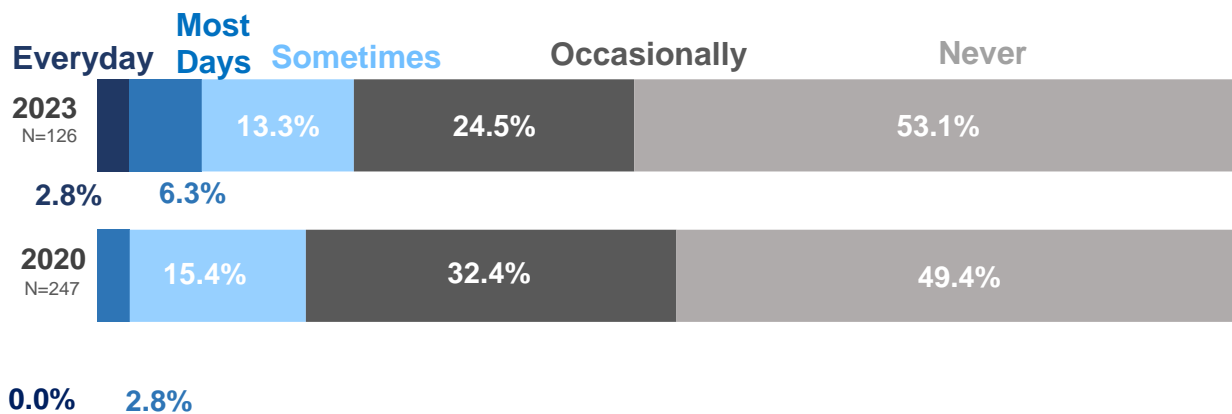
### More respondents report experiencing periods of depression since the last assessment



## Social Isolation (Question 27)

Respondents were asked to indicate how often they felt lonely or isolated in the past year. Fifty-three point one percent of respondents (n=76) indicated they never felt lonely or isolated, and 24.5% of respondents (n=35) indicated they “Occasionally (1-2 days per month)” felt lonely or isolated. Thirteen point three percent (n=19) reported they felt lonely or isolated “Sometimes (3-5 days per month),” 6.3% (n=9) indicated they felt lonely or isolated on “Most days (3-5 days per week),” and 2.8% (n=4) reported they felt lonely or isolated “Everyday.”

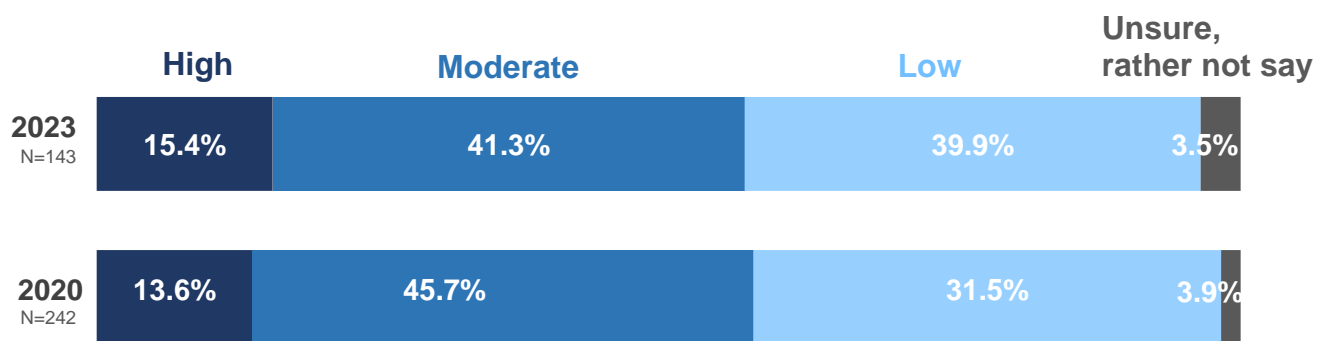
**77.6% of respondents either never felt lonely or occasionally felt lonely (1-2 days per month) in the past year**



## Perception of Stress (Question 28)

Respondents were asked to indicate how they would describe their stress level over the past year. Forty-one point three percent of respondents (n=59) indicated they experienced a “moderate” level of stress, 39.9% (n=57) had a “low” level of stress, 15.4% of respondents (n=22) indicated they had experienced a “high” level of stress. Three point five percent of respondents (n=5) indicated they were “Unsure/rather not say.”

**56.7% of respondents describe their stress level in the past year as moderate or high.**

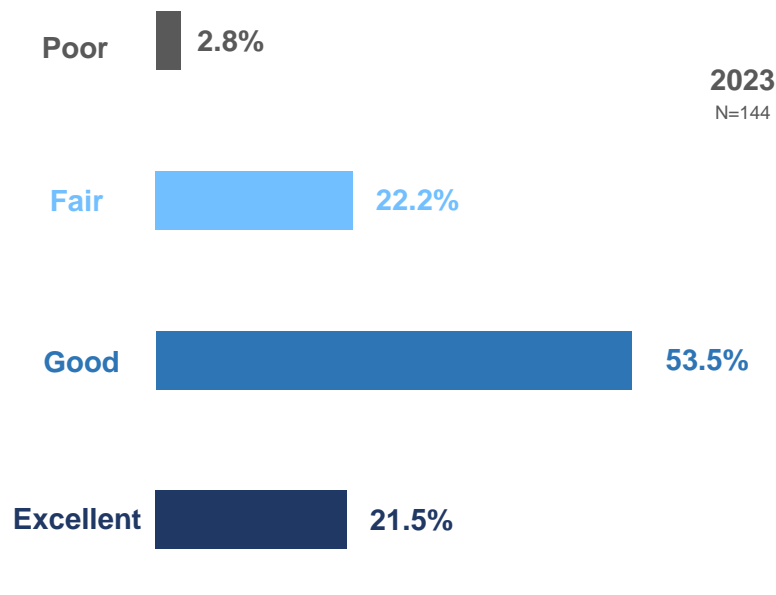




## Rating of Mental Health (Question 29)

Respondents were asked to indicate how they would describe their mental health in general when considering stress, anxiety, depression, and emotional problems. Fifty-three point five percent of respondents (n=77) felt their mental health was “Good,” 22.2% (n=32) rated their mental health as “Fair,” 21.5% of respondents (n=31) felt their mental health was “Excellent,” and 2.8% of respondents (n=4) rated their mental health as “Poor.”

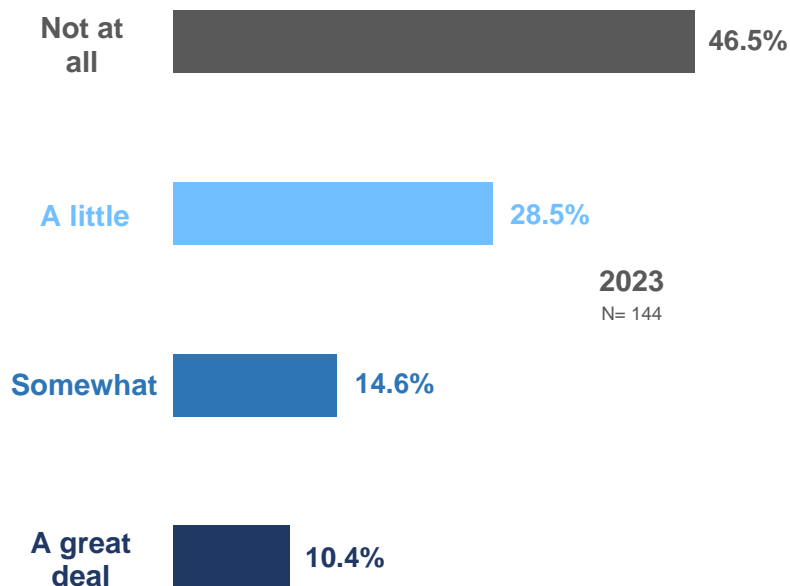
Over 50% of respondents rated their mental health as **good**



## Impact of Substance Abuse (Question 30)

Respondents were asked to indicate to what degree their life has been negatively affected by their own or someone else’s substance abuse issues including alcohol, prescription, or other drugs. Forty-six point five percent of respondents (n=67) indicated their life was “Not at all” affected. Twenty-eight point five percent (n=41) were “A little” affected, 14.6% (n=21) were “Somewhat” affected, and 10.4% (n=15) were a “A great deal” negatively affected.

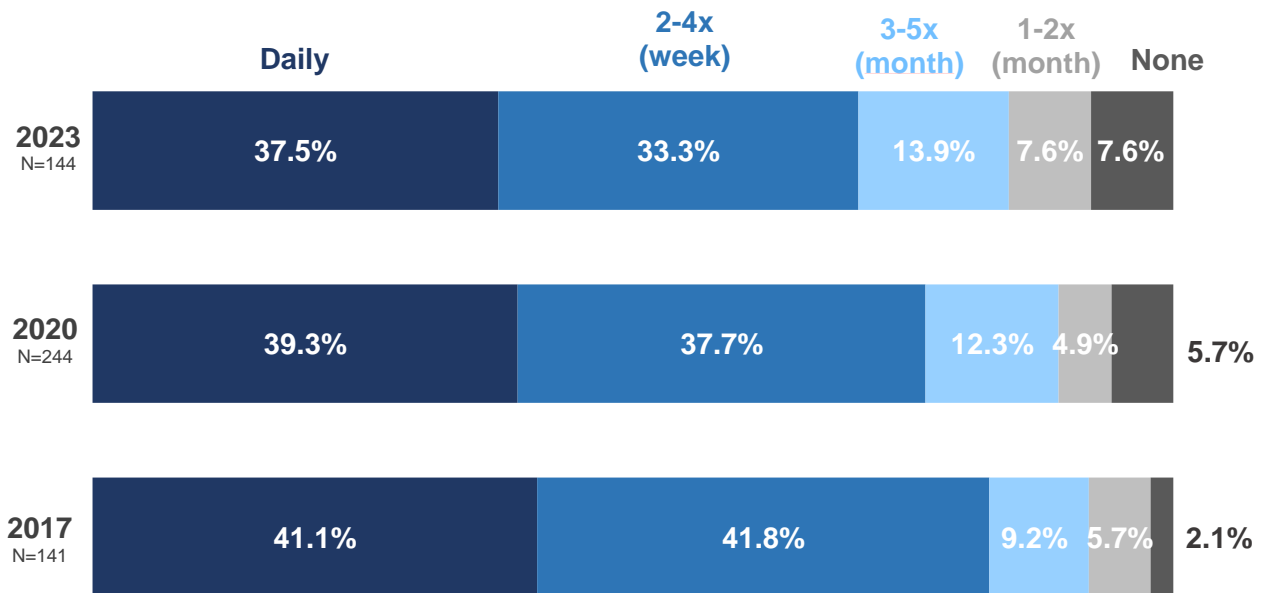
One in four respondents were **somewhat** or a **great deal** affected by their own or someone else's substance use issues



## Physical Activity (Question 31)

Respondents were asked to indicate how frequently they had physical activity for at least twenty minutes over the past month. Thirty-seven point five percent of respondents (n=54) indicated they had physical activity “Daily,” and 33.3% (n=48) indicated they had physical activity “2-4 times per week.” Thirteen point nine percent of respondents (n=20) indicated they had physical activity “3-5 times per month,” 7.6% (n=11, each) indicated they had physical activity “1-2 times per month,” or “No physical activity.”

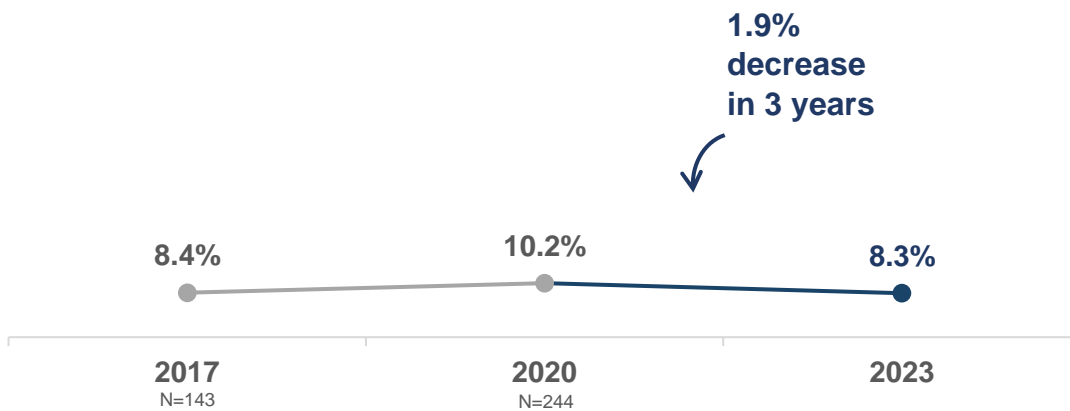
**Respondents report being less physically active in 2023 compared to 2020 and 2017.**



## Difficulty Getting Prescriptions (Question 32)

Respondents were asked to indicate if, during the last year, medication costs had prohibited them from getting a prescription or taking their medication regularly. Eight point three percent of respondents (n=12) indicated that they had difficulty getting a prescription or taking their medication regularly in the last year. Eighty point six percent of respondents (n=116) indicated that they did not have trouble getting or taking prescriptions, while 11.1% of respondents (n=16) stated it was not a pertinent question for them.

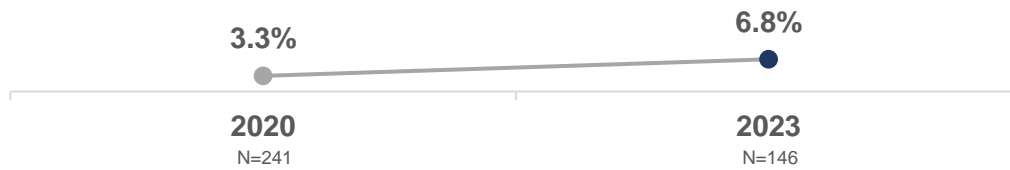
**Cost as a barrier to taking medications has slightly decreased since the 2020 assessment**



## Food Insecurity (Question 33)

Respondents were asked to indicate if, during the last year, they had worried that they would not have enough food to eat. The majority, 93.2% (n=136), were not worried, but 6.8% (n=10) were concerned about not having enough to eat.

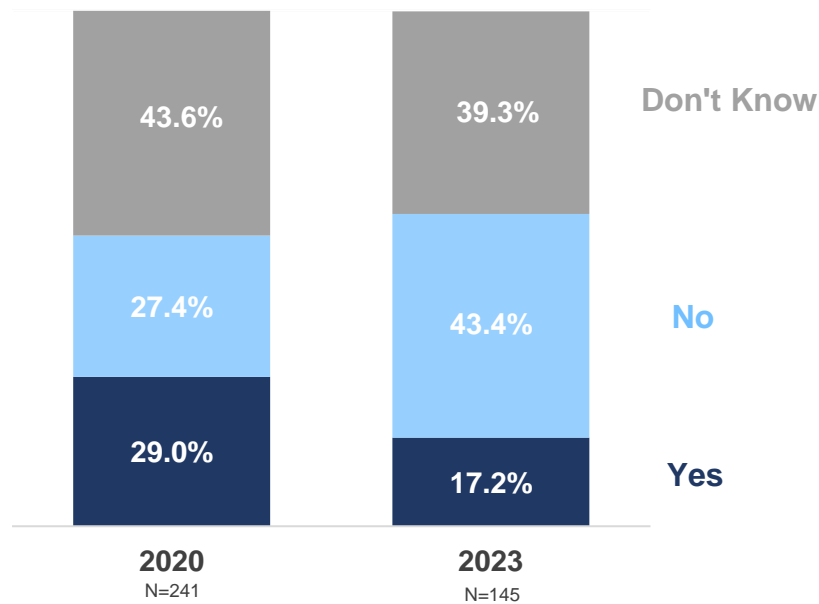
**The majority of respondents did not worry about having enough food**



## Housing (Question 34)

Respondents were asked to indicate if they felt the community has adequate and affordable housing options available. Forty-three point four percent of respondents (n=63) indicated that they feel there are not adequate and affordable housing options available in the community, 17.2% (n=25) felt there are adequate and affordable options available, and 39.3% (n=57) didn't know.

**43.4% of respondents do not feel that the community has adequate or affordable housing options**



## Health Insurance Type (Question 35)

Respondents were asked to indicate what type of health insurance covers the majority of their medical expenses. Twenty-seven point eight percent (n=42, each) indicated they have “Medicare” or “Employer Sponsored” coverage. Five point three percent (n=8) indicated they have “Medicaid” coverage. Twenty-seven respondents were moved to “Other” for selecting over the allotted one health insurance type.

Type of Health Insurance	2017 % (n)	2020 % (n)	2023 % (n)
Number of respondents	116	242	151
Employer sponsored	34.5% (40)	28.1% (68)	27.8% (42)
Medicare	44.0% (51)	33.5% (81)	27.8% (42)
Medicaid	0.9% (1)	3.7% (9)	5.3% (8)
Private insurance/private plan	10.3% (12)	5.4% (13)	4.6% (7)
Health Savings Account	0.0% (0)	2.1% (5)	3.3% (5)
HMO/Advantage plan (i.e. Humana)			2.6% (4)
VA/military	3.4% (4)	3.7% (9)	2.6% (4)
Health Insurance Marketplace	1.7% (2)	3.7% (9)	2.0% (3)
None/pay out of pocket	0.9% (1)	2.1% (5)	2.0% (3)
Healthy MT Kids	0.9% (1)	0.4% (1)	1.3% (2)
State/Other	1.7% (2)		
Indian Health	0.0% (0)	0.0% (0)	0.0% (0)
Other	1.7% (2)	17.4% (42)	20.5% (31)
<b>TOTAL</b>	<b>100.0% (116)</b>	<b>100.0% (242)</b>	<b>100.0% (151)</b>

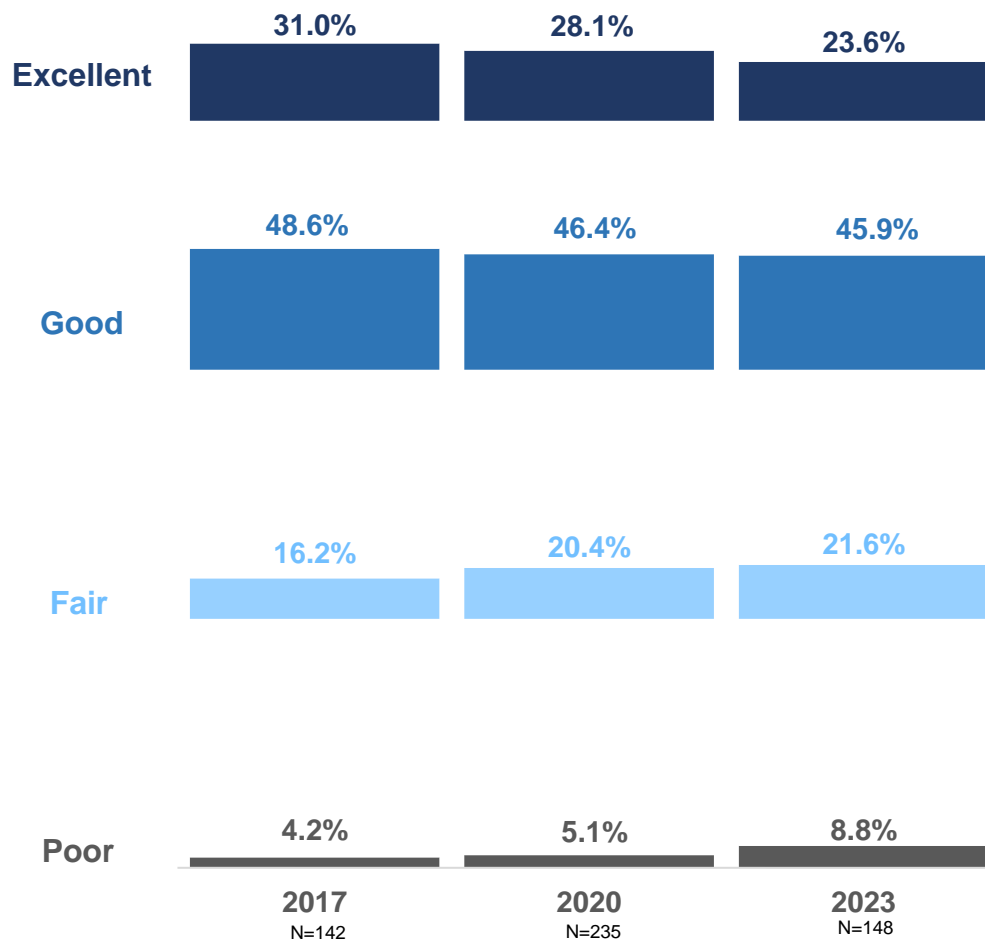
Statistical significance was not measured as reporting differed between 2023 and the two previous years. A larger number of missing values in 2023 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. \*Respondents (N=27) who selected over the allotted amount were moved to “Other.”

“Other” comments included: “Health Share Plan” and “Medicare + Supplement (2)”

## Insurance and Healthcare Costs (Question 36)

Respondents were asked to indicate how well they feel their health insurance covers their healthcare costs. Forty-five point nine percent of respondents (n=68) indicated they felt their insurance covers a “Good” amount of their healthcare costs. Twenty-three point six percent of respondents (n=35) indicated they feel their insurance was “Excellent”, and 21.6% of respondents (n=32) indicated they felt their insurance was “Fair.”

**Nearly 70% of respondents feel that their health insurance offers excellent or good coverage**

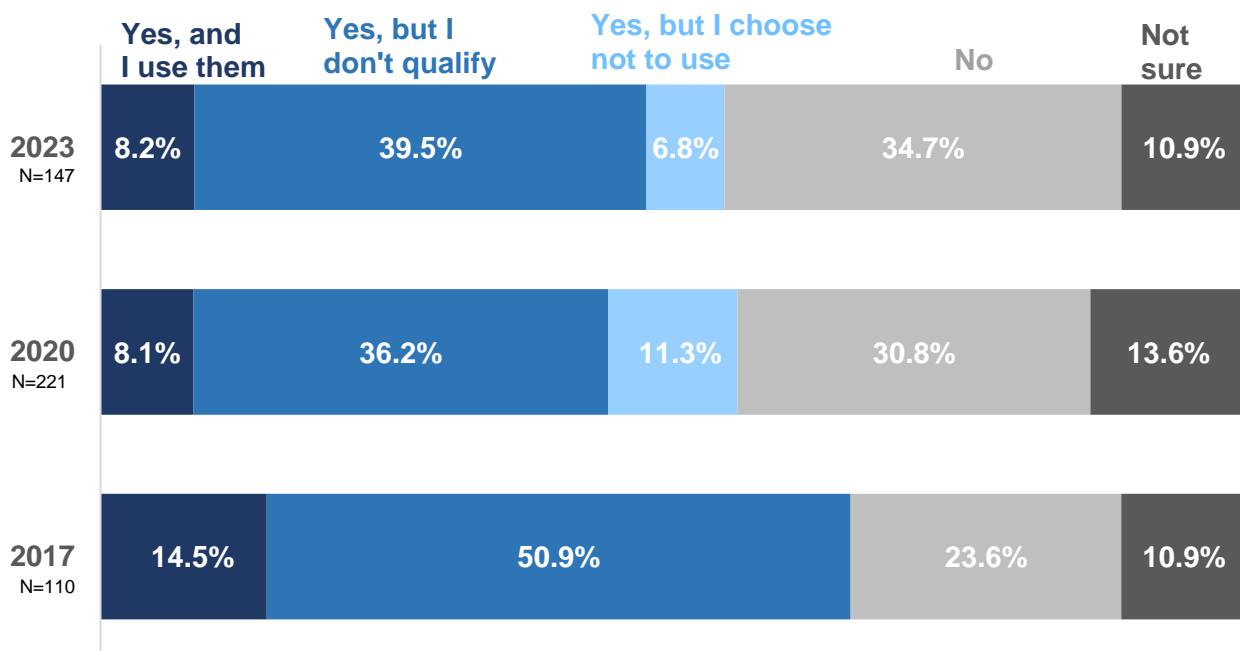




## Awareness of Health Cost Assistance Programs (Question 37)

Respondents were asked to indicate their awareness of programs that help people pay for healthcare expenses. The majority of respondents (39.5%, n=58) shared that they are aware of these programs but do not qualify. Thirty-four point seven percent of respondents (n=51) indicated they were not aware of these programs, 10.9% (n=16) were not sure if they were aware of health cost assistance programs, 8.2% (n=12) were aware of these programs and use them, and 6.8% (n=10) were aware of the programs, but choose not to utilize them.

**34.7% of 2023 respondents are not aware of programs that help people pay for healthcare expenses**





# **KEY INFORMANT INTERVIEW RESULTS**

# Key Informant Interview Methodology

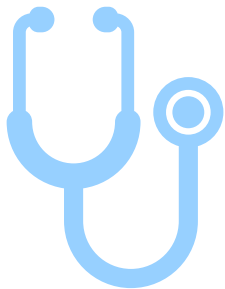
Five key informant interviews were conducted between March and April 2023. Participants were identified as people living in Rosebud Health Care Center’s service area.

The key informant interviews were conducted over the telephone and lasted up to 15 minutes in length. The key informant interviews followed the same line of questioning and were facilitated by Montana Office of Rural Health staff. Key informant interview transcripts can be found in Appendix I.



## Key Informant Interview Themes

The following key findings, themes, and health needs emerged from the responses which participants gave to the line of questioning found in Appendix H.



### CHRONIC DISEASE

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Several key informants indicated that prevention and management of chronic diseases is an issue in Rosebud County. It was mentioned several times that diabetes is one of the chronic diseases, especially prevalent in the community. To prevent chronic disease, a key informant suggested helping community members to increase physical activity and to choose nutritious foods.

It was also mentioned that the Rosebud Health Care Center does have programs available on certain health issues, including diabetes; however, more people need the service than are seeking it out.

Chronic disease may be prevalent in Rosebud County, due to the aging population. It was noted by several community members that much of the population is elderly, with few young families. The senior center provides resources and meals to improve the well-being of this population. The nursing homes take care of their patients well; however, there was concern around the struggles with staffing.



## MENTAL HEALTH

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The most common theme in the key informant interviews was the need for increased mental health care in Rosebud County. Key informants identified the difficulty retaining mental health providers, and the increasing need for mental health as the main challenges. Possible reasons for the increased need for mental health as identified by community members were shift work, politics, and long winters.

Substance use (smoking, alcohol, tobacco) was mentioned several times as an issue. It was mentioned that there is a program that assists people in creating smoking cessation plans; however, there is still a need for similar programs for other substances.

## RETENTION OF HEALTHCARE PROVIDERS

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A common theme in the key informant interviews was the need for physicians in the community. Individuals liked the providers available; however, they expressed frustration around having to go to “Miles City or Billings, where the specialists are.” It was mentioned that nurse practitioners and physician’s assistants fill in for the role of a physician in the community.

An individual stated that Forsyth “[struggles] to get a general practitioner to come to Forsyth and stay here for a while. There’s quite a bit of turnover in that position.”

A community member also indicated that retaining nurses and other professionals in nursing homes was a struggle for Forsyth. Traveling nurses are able to work in nursing homes; however, they cost more than a permanent nurse, leading to financial strain for the facilities.

It was noted that, although the community experiences difficulty in retaining providers, the providers available communicate and share well to ensure patients’ needs are met.

## SERVICES NEEDED IN THE COMMUNITY

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- Women’s health (specifically prenatal care)
- Orthopedics
- Outreach and awareness of services



# **EXECUTIVE SUMMARY**

# Executive Summary

The table below shows a summary of results from the Rosebud Health Care Center and Rosebud County Public Health Department Community Health Needs Assessment. Areas of opportunity were determined after consideration of various criteria, including a comparison to data from local, state, and federal sources (Secondary data); survey results; those issues of greatest concern identified by the community partners through key informant interviews; and the potential impact of a given issue.

Areas of Opportunity	Secondary Data	Survey	Interviews
<b>Access to Healthcare Services</b>			
<b>Barriers to access</b>			
<i>Increased number of primary care providers</i>		✓	☑
<i>Affordability of services</i>		✓	☑
<i>Awareness of health services and resources</i>		✓	☑
<b>Senior Services</b>			
<i>High percentage of population 65+</i>	⊗	✓	☑
<i>Enhanced aging in place services (i.e., exercise opportunities, affordable housing, more workforce, etc.)</i>		✓	☑
<b>Chronic Disease Management &amp; Prevention</b>			
<i>Cancer</i>		✓	☑
<i>Tobacco use</i>		✓	☑
<i>Healthy behaviors and lifestyles- weight loss, fitness, health &amp; wellness, nutrition</i>	⊗	✓	☑
<b>Mental and Behavioral Health</b>			
<i>More mental and behavioral health services/resources</i>	⊗	✓	☑
<i>Alcohol/substance use</i>	⊗	✓	☑

Summary continued on the next page.

**Socioeconomic & Health Measures**

*Housing accessibility and affordability*



*Percentage of uninsured children and adults*







# **NEXT STEPS & RESOURCES**

## Prioritization of Health Needs

The community steering committee, comprised of staff leaders from Rosebud Health Care Center and Rosebud County Public Health Department and community members from Rosebud County, convened to begin an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through the Community Health Services Development (CHSD) Process.

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

- Mental and behavioral health
- Health, wellness, and prevention
- Access to healthcare services and resources

Rosebud Health Care Center and Rosebud County Public Health Department will determine which needs or opportunities could be addressed considering their organization's parameters of resources and limitations. The committee will prioritize the needs/opportunities using the additional parameters of the organizational vision, mission, and/or values, as well as existing and potential community partners.

The participants will create goals to achieve through strategies and activities, as well as the general approach to meeting the stated goal (i.e., staff member responsibilities, timeline, potential community partners, anticipated impact(s), and performance/evaluation measures). This plan will be documented and posted along with the CHSD assessment report.

## Available Community Resources

In prioritizing the health needs of the community, the following list of potential community partners and resources in which to assist in addressing the needs identified in this report were identified. As the steering committee continues to meet, more resources will continue to be identified, therefore, this list is not exhaustive.

- Healthy Lifestyles is a program available at Holy Rosary Healthcare in Miles City that utilizes a registered dietician and a certified athletic trainer to offer coaching support for individuals interested in losing weight, increasing physical activity, and decreasing risk factors for diabetes and cardiovascular disease.
- Rosebud Co. Public Health Dept. helps promote and maintain individual, group, and community health.
  - Increasing awareness by hosting and attending health fairs, provide updates on social media, safety fairs, school education and period dietary classes
  - Provide free nurse consults
  - Do drug testing and promotes healthy parenting and partnerships as well as make referrals of substance abuse support to mental health
  - Provide the signs of suicide (SOS) program towards helping students learn skills to identify and get help for themselves or a friend
- Senior Citizen Center and Rosebud County Public Health Department provide free or low-cost services for our seniors such as foot clinics and nurse consults and medication set up. The Senior Citizen Center also hosts meals on wheels and aerobics.
- Montana Health Network (MHN) aids with health insurance patient navigators.
- The Rosebud County MSU Extension Office participates in the community's health fair, Strong Woman Program, and they have a piece of equipment that measures the amount of body fat in an individual which has been useful during the Strong Woman Program so participants can track their progress.
- Rosebud Health Care Center and Rosebud Co. Public Health Dept. are sharing resources to provide primary care to all people within the community.
  - Title X Services: is for men and women of reproductive age that provides no or low-cost services for contraceptive information and services, gynecological exams and basic lab tests, screening and treatment for STDs, HIV and high blood pressure, pregnancy testing and planning and community outreach and education and adolescent counseling.
- We also have the additional services available in and around Forsyth:
  - Action for Eastern Montana
  - AWARE
  - DEAP
  - Eastern Montana Mental Health
  - Well-Home Health – Miles City
  - TLC Assisted Living – Forsyth
  - Hospice – Billings

- VA – Miles City
- Dementia Support Group
- AA Meetings
- Gym/Pool: School weight room, the Circuit, Forsyth Pool
- Christian Women’s Weight Loss Program/Weight Watchers/TOPs
- Local LCSW practicing within the community

# Evaluation of Activity Impacts from Previous CHNA

Rosebud Health Care Center (RHCC) provided the Montana Office of Rural Health with an update on their Implementation Plan activities from their previous CHNA process. The BHH Board of Directors approved its previous implementation plan on Oct. 28, 2020. The plan prioritized the following health issues:

- Mental and behavioral health
- Health, wellness and prevention
- Access to healthcare services and resources

The following tables include completed activities, accomplishments and impacts/outcomes within the facility’s proposed goals. To view the full Implementation Plan visit: [rosebudhcc.org](http://rosebudhcc.org).

## ***Goal 1: Improve access to mental & behavioral health services in Rosebud County***

	Activities	Accomplishments	Community Impact/Outcomes
<b>Strategy 1.1:</b> Continue to expand capacity and availability of mental health services at RHCC.	Continue tele-psych in partnership with Avicenna.	Continues to be utilized	Has served as a collaborative service to better serve community
	Offer on-site counseling services 2x/week.	Not utilized currently, but we work very close with a local LCSW who offers counseling during the week	Working with local and LCSW and our own provider finishing Psych NP has greatly benefited continuity of communal care
	Work to continue implementing an Integrated Behavioral Health (Care Management program) at RHCC. Specifically working on billing processes and outreach.	Program was implemented and showed slow, but very gradual growth	IBH growth has been steady indicating a great community need

	Create a new outreach campaign to educate community on available tele-psych and counseling services available locally.	Facebook/Instagram campaign to promote services was developed and utilized	Helped to contribute to growth of mental health services. LCSW cliental has grown drastically
<b>Strategy 1.2:</b> Coordinate with community programs that address mental and behavioral health.	Explore opportunities for RHCC staff to engage in local Mental /Behavioral Health councils or committees.	Our grant with MHN for IBH has helped to constantly communicate with regional health care facilities regarding best practices/compliance with IBH program	Has helped to bring and improve various mental health resources within the community
	Partner with local schools to create and implement a school-based prevention program.	Has not been developed, but continues to be on the list of things to do	It has been hard to work with local schools, but relationships have developed, and collaboration continues to grow
	Review state resources/trainings related to Mental and Behavioral Health (MT AHEC). <a href="http://healthinfo.montana.edu/bhwet/trainings">healthinfo.montana.edu/bhwet/trainings</a>	Provider Rickett’s continuation of Psych NP has greatly benefited facility mental health education	We are looking forward to promotion of resources and trainings
	Support Eastern Montana Mental Health Peer Support Mental Health program in Forsyth and Rosebud County. Gain greater knowledge of program to better promote within community.	Eastern Montana Mental Health left Forsyth for an extended period of time, but has recently returned	We are looking forward to promoting and educating staff on Peer Support program

**Goal 2: Engage Rosebud County in health, wellness & prevention**

	Activities	Accomplishments	Community Impact/Outcomes
<b>Strategy 2.1:</b> Promote health and wellness through programmatic activities at RHCC.	Promote hospital-based programs that promote disease prevention (Healthy Lifestyles Program which offers weekly classes addressing nutrition, healthy lifestyles, screenings, diabetes management, etc.).	Developed dietary classes that are offered for free to promote healthy lifestyles Utilized a diabetic grant to promote preventative measures	Have seen gradual improvement in community utilization and an internal shift toward quality care preventative measures as a benefit toward the community

	Continue to provide sponsorship opportunities for hospital-based programs for community members who cannot afford to pay participation fees.	Payment plans continue to persist	Offers an alternative for those who need more affordable health care
	Engage with community (at least once a quarter) through various media channels (newsletters, social media, etc.) promoting healthy lifestyles and healthy living.	Social media campaigns, events and education opportunities have increased drastically	This has helped to educate public on the variety of services that are offered at RHCC
	Work with health system partners to enhance screening offerings at RHCC (mammography bus, Cologuard, low dose CT scans).	We have partnered with local services to provider more preventative services	This has created various convenient opportunities to further improve preventative health care within the community
<b>Strategy 2.2:</b> Support community events and programs that promote health, wellness and prevention.	Partner with community resources (Public Health, MSU Extension) to catalogue and create outreach materials to educate community on available prevention programs and screening opportunities.	Partnered with multiple agencies to create promotional opportunities within the community	Has helped to be a more well-rounded community in being more continual with our care
	Continue to sponsor local food drive and donate to local food pantry to enhance food access for community members in need.	Have held multiple food drives to provide for those who struggle with a lack of food	Has been a great opportunity to benefit those that deal with a lack of food within the community
	Develop and implement various community activities such as a youth steps challenge and fun run to promote healthy activities and enhance community engagement.	Have held various community activities to promote health behaviors	Have noticed gradual improvement of community buy-in to activities provided by RHCC

**Goal 3: Ensure access to healthcare services & resources**

	<b>Activities</b>	<b>Accomplishments</b>	<b>Community Impact/Outcomes</b>
<p><b>Strategy 3.1:</b> Enhance knowledge of services available at RHCC and in Rosebud County.</p>	<p>Create health services and resource page for providers to support with patient referrals (including mental health).</p>	<p>Have continually developed list of community services and have sought to fill community healthcare holes with other resources like telehealth</p>	<p>Has given community opportunities to have a more holistic healthcare experience locally</p>
	<p>Create outreach to educate community on primary care services and provider types (scope of practice). Integrate with newsletter or other ongoing outreach materials.</p>	<p>Social media campaigns have grown and continually promote the community services that are offered</p>	<p>Has driven interest and use of these promoted services</p>
	<p>Continue to provide transportation services assisting community members in accessing out of town appointments, food/groceries, prescription drop off, etc. for a nominal fee.</p>	<p>Have continued service</p>	<p>Has continued to be a benefit for the community and is heavily utilized</p>
<p><b>Strategy 3.2:</b> Advance programs that assist seniors to access care and services needed to age in place.</p>	<p>Create education and outreach to describe what programs or services are available (Home Health, PALS, other).</p>	<p>Social media campaigns have grown and continually promote the community services that are offered Have collaborated heavily with local Senior Center to provide education</p>	<p>Has driven interest and use of these promoted services</p>
	<p>Reach out to licensed home health provider in Miles City to work on feasibility of expansion of home health services in Rosebud County.</p>	<p>Home health is offered within the community by company in Miles City</p>	<p>It is an offered benefit from the community and something that we are consistently looking to promote for that communal benefit</p>
	<p>Explore feasibility of working with Palliative Primary Care Project at the state to assess and learn more about palliative care best practices for CAHs. Contact Dale Mayer, program coordinator.</p>	<p>Palliative care has not advanced to the point that we would like, but Hospice care has been introduced to the community</p>	<p>A local Hospice nurse has been in the community, and this has been a benefit in obtaining resources for those who need it, especially our elderly community</p>



	<p>Explore age friendly resources to improve patient experiences and outcomes (Resource: IHI, Age-Friendly Health Systems).</p>	<p>Collaboration with the senior center on education and services</p>	<p>This has been great in all aspects of geriatric related health care. Occupational therapy, dietary and family practice services for the elderly have drastically improved and have been utilized</p>
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# APPENDICES

# Appendix A- Steering Committee

<i>Steering Committee Member</i>	<i>Organization Affiliation</i>
<i>Ana Thompson</i>	Director, Forsyth Senior Center
<i>Jayk Brooks</i>	Clinic Manager, Rosebud Health Care Center (RHCC)
<i>Shelley Rickett</i>	Clinic Provider, RHCC
<i>Jerrae Kuntz</i>	RHCC
<i>Kelsey Fulton</i>	Head of Human Resources, RHCC
<i>Shelley Schnitzmeyer</i>	Public Health Director, Rosebud County
<i>Maya Howell</i>	Community LCSW Behavioral Health
<i>Mindy Price</i>	CEO, RHCC
<i>Leanna Schwend</i>	Pharmacist, Yellowstone Pharmacy



# Appendix B- Public Health & Populations Consultation

**Public Health & Populations Consultation** - a leader or representative of populations such as medically underserved, low-income, minority and/or populations with chronic disease.

## Name/Organization

Ana Thompson, Forsyth Senior Center Director  
Jayk Brooks, Clinic Manager – Rosebud Health Care Center (RHCC)  
Shelley Rickett, Clinic Provider – RHCC  
Jerrae Kuntz  
Kelsey Fulton, Head of HR – RHCC  
Shelley Schnitzmeyer, Public Health Director, Rosebud County  
Maya Howell, Community LCSW Behavior Health  
Mindy Price, CEO – RHCC  
Leanna Schwend, Pharmacist – Yellowstone Pharmacy

## Type of Consultation (Steering Committee Meetings, Key Informant Interviews, etc.)

First Steering Committee Meeting	February 21, 2023
Key Informant Interviews	April, 2023
Second Steering Committee Meeting	June, 2023

## Public and Community Health

- I like that we're adding additional surveys Colstrip since that is where the health department is located. We're really doing the best we can to get a good representation of the areas needs!
- It might be helpful to be able to see an additional analysis on how zip codes are responding.
- It sure would be nice to know how community members rate their knowledge of health services available through the public health department.
- And if we're doing that, can we separate out the question about how people learn about our services – so one for public health and one for the hospital. On the public health's question however, we should remove "public health" from the options
- We don't have "Ask a nurse" anymore, but we could add it to the desired local services
- We should add Hysham to the list of primary care locations – there's a clinic in the town every Wednesday. If they're in town they're either going to the clinic or the hardware store!
- Let's have survey respondents rate public health programs and services as well.

- We should add dietician, occupational therapy, and MRI to the rating of health services at Rosebud Health Care Center.
- We'd like to adopt the questions about general mental health and substance use impact.
- We do have limited in person mental health services, so if we could break them out from the telepsych option on question #9 would be great!

### Population: Seniors

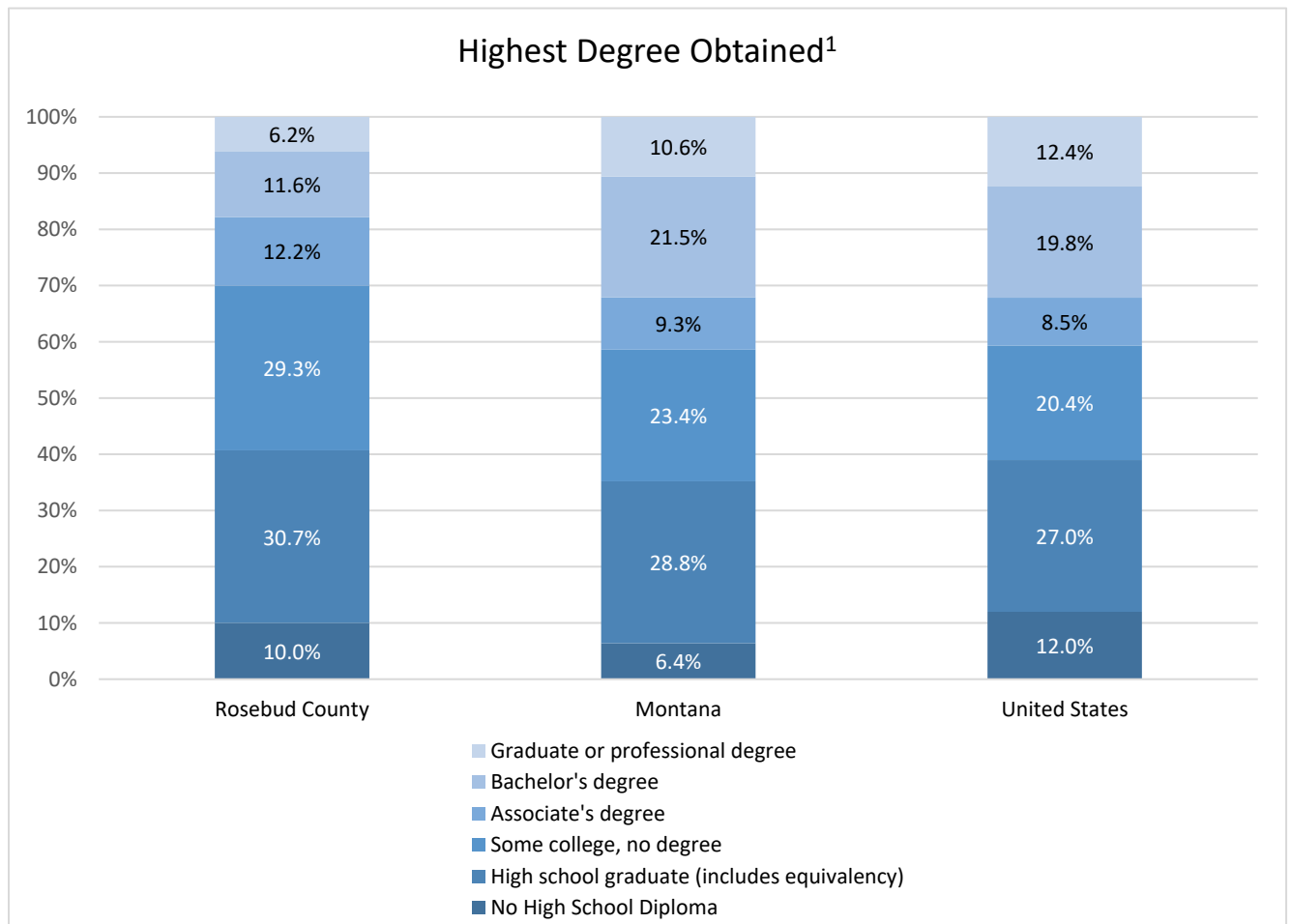
- We have a foot care clinic so it'll be interesting to know how many people don't know about it!
- We might want to include Advantage plan in the list of insurance options.

# Appendix C- Rosebud Co. Secondary Data

Demographic Measure (%)		County			Montana			Nation		
Population <sup>1</sup>		9,152			1,050,649			324,697,795		
Population Density <sup>1</sup>		1.8			7.1			85.5		
Veteran Status <sup>1</sup>		9.5%			10.4%			7.3%		
Disability Status <sup>1</sup>		19.6%			13.6%			12.6%		
Age <sup>1</sup>		<5	18-64	65+	<5	18-64	65+	<5	18-64	65+
		7.3%	56.6%	14.8%	5.8%	60.1%	18.2%	6.1%	61.7%	15.6%
Gender <sup>1</sup>		Male		Female	Male		Female	Male		Female
		49.9%		50.1%	50.3%		49.7%	49.2%		50.8%
Race/Ethnic Distribution <sup>1</sup>		White			91.4%			75.3%		
		American Indian or Alaska Native			8.3%			1.7%		
		Other <sup>†</sup>			3.7%			26.5%		

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

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



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

Socioeconomic Measures (%)	County	Montana	Nation
Median Income <sup>1</sup>	\$57,992	\$54,970	\$62,843
Unemployment Rate <sup>1</sup>	6.6%	4.0%	5.3%
Persons Below Poverty Level <sup>1</sup>	17.0%	13.1%	13.4%
Children in Poverty <sup>1</sup>	17.7%	15.8%	18.5%
Internet at Home <sup>2</sup>	72.0%	81.5%	-
Households with Population Age 65+ Living Alone <sup>2</sup>	342	52,166	-
Households Without a Vehicle <sup>2</sup>	173	21,284	-
Households Receiving SNAP <sup>2</sup>	292	56,724	-
Eligible Recipients of Free or Reduced Price Lunch <sup>3</sup> <i>2019/2020 school year</i>	61.8%	42.9%	-
Enrolled in Medicaid <sup>4, 1</sup>	12.3%	9.7%	19.8%
Uninsured Adults <sup>5, 6</sup> <i>Age &lt;65</i>	15.0%	12.0%	12.1%
Uninsured Children <sup>5, 6</sup> <i>Age &lt;18</i>	9.0%	6.0%	5.1%

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

Maternal Child Health	County	Montana	Nation
General Fertility Rate* <sup>7</sup> <i>Per 1,000 Women 15-44 years of age (2017-2019)</i>	87.5	59.3	-
Preterm Births <sup>7</sup> <i>Born less than 37 weeks (2017-2019)</i>	13.5%	9.4%	-
Adolescent Birth Rate <sup>7</sup> <i>Per 1,000 years females 15-19 years of age (2017-2019)</i>	35.0	18.3	-
Smoking during pregnancy <sup>3, 8</sup>	19.8%	16.5%	7.2%
Kotelchuck Prenatal Care** <sup>7</sup> <i>Adequate or Adequate-Plus (2017-2019)</i>	42.3%	75.7%	-
Low and very low birth weight infants <sup>7</sup> <i>Less than 2500 grams (2017-2019)</i>	8.2%	7.6%	-
Childhood Immunization Up-To-Date (UTD) <sup>§ 9</sup>	57.9%	64.8%	-

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

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

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

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

Behavioral Health	County	Montana	Nation
Adult Smoking <sup>5</sup>	25.0%	19.0%	16.0%
Excessive Drinking <sup>5</sup>	23.0%	22.0%	15.0%
Adult Obesity <sup>5</sup>	34.0%	27.0%	26.0%
Poor Mental Health Days <sup>5</sup> (Past 30 days)	4.9	3.9	3.8
Physical Inactivity <sup>5</sup>	25.0%	22.0%	19.0%
Do NOT wear seatbelts <sup>10</sup> State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	10.3%	6.3%
Drink and Drive <sup>10</sup> State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	3.7%	3.1%

<sup>5</sup> County Health Ranking, Robert Wood Johnson Foundation (2020), <sup>10</sup> Behavioral Risk Factor Surveillance System, CDC (2019)

Cancer prevention & screening	County	Montana	Nation
Human Papillomavirus (HPV) vaccination UTD <sup>++ 11, 12</sup> Adolescents 13-17 years of age (2020)	30.9%	54.4%	58.6%
Cervical cancer screening in past 3 years <sup>13, 10</sup> Age adjusted (county/state) and crude (nation) prevalence among adult women aged 21–65 years (2018)	82.9%	76.8%	80.1%
Mammography in past 2 years <sup>13, 10</sup> Age adjusted (county/state) and crude (nation) prevalence among women 50-74 years (2018)	62.0%	73.4%	78.3%
Colorectal Cancer Screening <sup>13, 10</sup> Age adjusted (county) and crude (state/nation) prevalence among adults age 50-75 years (2018)	55.3%	64.5%	69.7%

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

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

Infectious Disease Incidence Rates <sup>14</sup> Per 100,000 people (2015-2017)	County	Montana
Enteric Diseases *	114.4	80.1
Hepatitis C virus	228.9	93.4
Sexually Transmitted Diseases (STD) †	2062.8	551.6
Vaccine Preventable Diseases (VPD) §	114.4	91.5

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

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

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



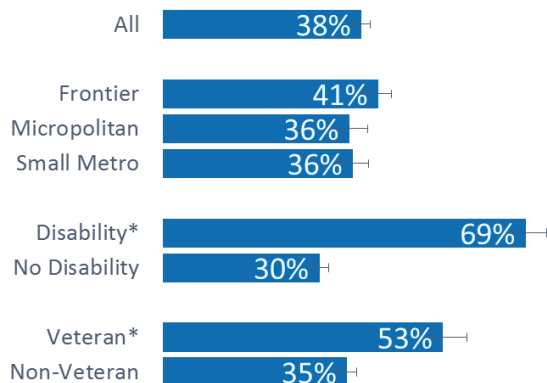
Chronic Conditions <sup>10</sup>	County	Montana	Nation
<b>Cardiovascular Disease (CVD) prevalence</b> <i>Adults aged 18 years and older (2014-2016)</i>	**	7.9	8.6
<b>Chronic Obstructive Pulmonary Disease (COPD) prevalence</b> <i>Adults aged 18 years and older (2014-2016)</i>	**	6.6	6.4
<b>Diabetes Prevalence</b> <i>Adults aged 18 years and older (2014-2016)</i>	**	8.3	10.6
<b>Breast Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	188.6	125.0	124.1
<b>Cervical Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	7.9	7.4
<b>Colon and Rectum Cancer (CRC) Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	37.1	38.9
<b>Lung Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	52.2	60.0
<b>Melanoma Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	26.3	21.0
<b>Prostate Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	124.4	109.6	103.0

<sup>14</sup> IBIS Community Snapshot, MT-DPPHS  
 \*\* Data were suppressed to protect privacy.

Montana Adults with Self-Reported Chronic Condition <sup>10</sup>	
1. Arthritis	29.0%
2. Depression	24.1%
3. Asthma	10.0%
4. Diabetes	7.6%
5. COPD	6.8%
6. Cardiovascular disease	3.9%
7. Kidney disease	2.4%

<sup>10</sup> Behavioral Risk Factor Surveillance System, CDC (2019)

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



Mortality	County	Montana	Nation
<b>Suicide Rate<sup>15</sup></b> <i>Per 100,000 population (2009-2018)</i>	36.1	23.9	-
<b>Veteran Suicide Rate<sup>15</sup></b> <i>Per 100,000 population (2009-2018)</i>	-	65.7	38.4
<b>Alzheimer's Disease Mortality Rate<sup>16</sup></b> <i>Age-Adjusted per 100,000 population (2017- 2019)</i>	-	21.7	-
<b>Pneumonia/Influenza Mortality Rate<sup>17</sup></b> <i>Age-Adjusted per 100,000</i>	-	10.5	12.3
<b>Leading Causes of Death<sup>16, 18</sup></b>	-	1. Heart Disease 2. Cancer 3. Chronic Lower Respiratory Disease (CLRD)	1. Heart Disease 2. Cancer 3. Unintentional injuries

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

\*\* Data were suppressed to protect privacy.

Montana Health Disparities <sup>10</sup>	White, non-Hispanic	American Indian/Alaska Native	Low Income*
<b>14+ Days when physical health status was NOT good</b> <i>Crude prevalence (2019)</i>	13.0%	17.9%	28.9%
<b>14+ Days when mental health status was NOT good</b> <i>Crude prevalence (2019)</i>	13.2%	19.2%	30.0%
<b>Current smoker</b> <i>Crude prevalence (2019)</i>	14.5%	41.5%	32.9%
<b>Routine checkup in the past year</b> <i>Crude prevalence (2019)</i>	72.8%	74.1%	81.1%
<b>No personal doctor or health care provider</b> <i>Crude prevalence (2019)</i>	26.5%	28.8%	23.8%
<b>No dental visit in the last year for any reason</b> <i>Crude prevalence (2020)</i>	34.9%	41.6%	48.1%
<b>Consumed fruit less than one time per day</b> <i>Crude prevalence (2019)</i>	40.5%	46.8%	49.5%
<b>Consumed vegetables less than one time per day</b> <i>Crude prevalence (2019)</i>	16.7%	18.0%	22.0%
<b>Does not always wear a seat belt</b> <i>Crude prevalence (2020)</i>	10.8%	15.9%	16.0%

<sup>10</sup> Behavioral Risk Factor Surveillance System, CDC (2019)

\*Annual household income < \$15,000

Youth Risk Behavior <sup>19</sup>	Montana		Nation
	White, non-Hispanic	American Indian/Alaska Native	
<b>Felt Sad or Hopeless</b> <i>Almost every day for two weeks or more in a row, during the past 12 months</i>	35.3%	39.6%	36.7%
<b>Attempted Suicide</b> <i>During the past 12 months</i>	8.7%	15.4%	8.9%
<b>Lifetime Cigarette Use</b> <i>Students that have ever tried smoking</i>	28.3%	48.9%	24.1%
<b>Currently Drink Alcohol</b> <i>Students that have had at least one drink of alcohol on at least one day during the past 30 days</i>	34.3%	25.3%	29.2%
<b>Lifetime Marijuana Use</b> <i>Students that have used marijuana one or more times during their life</i>	36.9%	58.9%	36.8%
<b>Texting and Driving</b> <i>Among students who drove a car in the past 30 days</i>	55.2%	39.6%	39.0%
<b>Carried a Weapon on School Property</b> <i>In the last 30 days</i>	7.2%	3.2%	2.8%

<sup>19</sup> Montana Youth Risk Behavior Survey (2019)

## Secondary Data – Healthcare Workforce Data 2021

### Health Professional Shortage Area & Medically Underserved Areas/Populations

The uneven geographic distribution of health system resources has long been a problem in the United States. As a result, many individuals do not have adequate access to health services in their community. State and Federal programs have been put in place to attempt to ameliorate this problem and reduce the barriers to access healthcare. The Health Professional Shortage Area (HPSA) program and the Medically Underserved Areas/Populations (MUA/P) are among the tools used to increase the supply, capacity, and distribution of health professionals to areas of greatest need. HPSA designations indicate shortages of healthcare professionals who provide primary care, dental, and mental health services. Designation may help communities attract new healthcare workforce and it may increase Medicare and Medicaid reimbursement to already existing healthcare providers.

Health Professional Shortage Area Designation <sup>1</sup> – Rosebud County, Montana		
Discipline	HPSA Score	HPSA
Primary Care	15	✓ Low income population
Dental Health	17	✓ Low income population
Mental Health	18*	✓ High needs geographic population
HPSA Scores range from 0 to 25 (primary care and mental health) and 0 to 26 (dental health) where the higher the score, the greater the priority		

<sup>1</sup> Health Resources and Services Administration (2021)

\* HPSA score for Eastern Montana (Carter, Custer, Daniels, Dawson, Fallon, Garfield, McCone, Phillips, Powder River, Prairie, Richland, Roosevelt, Rosebud, Sheridan, Treasure, Valley and Wibaux counties)

Provider Supply and Access to Care <sup>2</sup>				
Measure	Description	Rosebud Co. (N = 1) **	Montana (N = 49) **	National (N = 1347) **
Primary care physicians	Ratio of population to primary care physicians	1548:1	1349:1	1050:1
Other primary care providers	Ratio of population to other primary care providers including nurse practitioners, physician assistants, and clinical nurse specialists	711:1	878:1	726:1
Dentists	Ratio of population to dentists	1850:1	1388:1	1260:1
Mental health providers	Ratio of population to mental health providers	420:1	356:1	310:1

<sup>2</sup> Critical Access Hospital Measurement and Performance Assessment System (CAHMPAS) - FLEX Monitoring (2019)

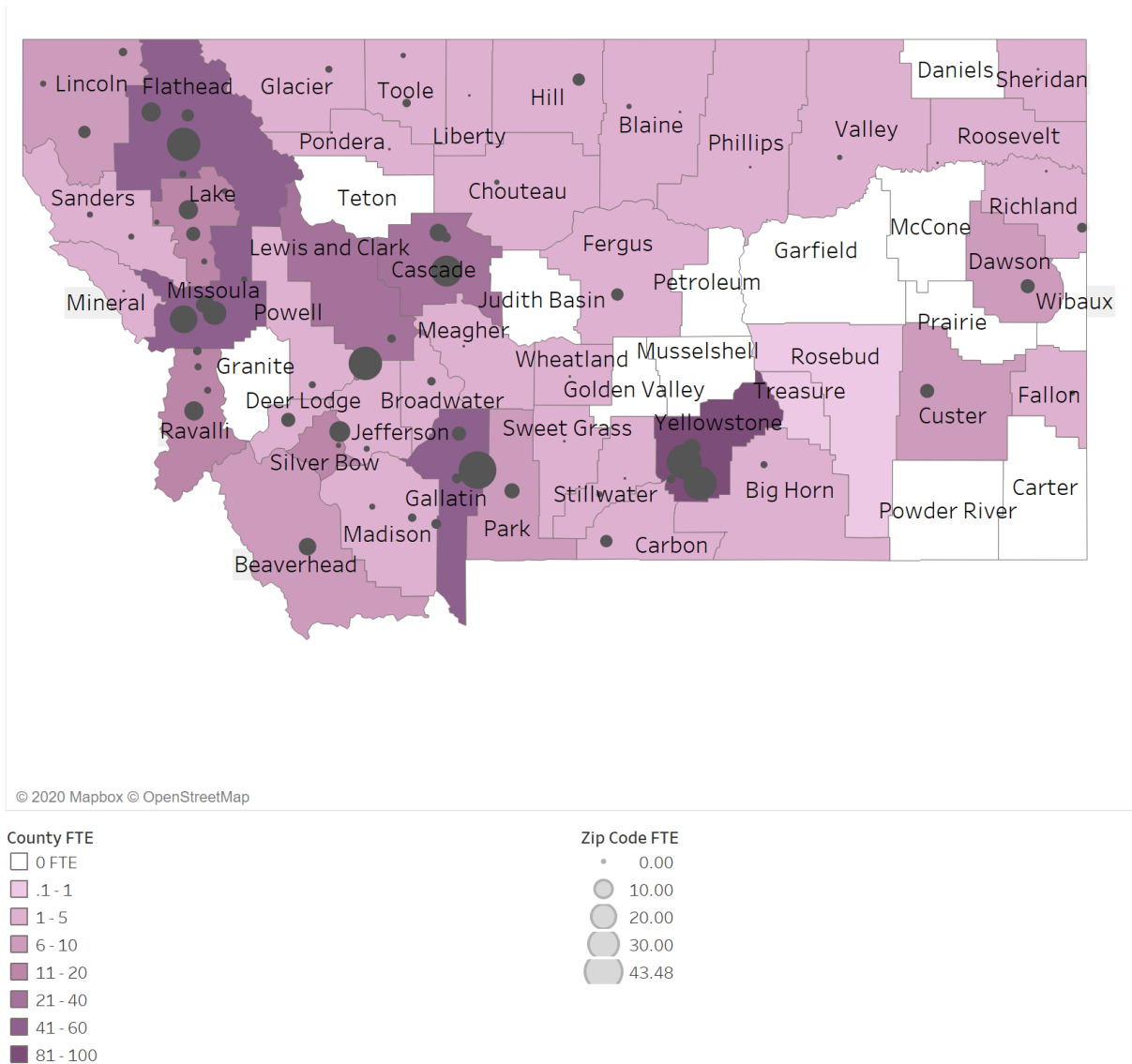
\*\* Total number of CAHs in region

### Healthcare workforce Distribution Maps

WIM Tracking is a Montana-based health workforce research company. WIM Tracking proactively monitors the movement of healthcare professionals in Wyoming, Idaho and Montana and maintains the data within a relational database.

- Counts only include actively practicing providers.
- Counts do not include providers at limited access facilities (VA, Malmstrom AFB, Indian Health Services, Montana State Prison, Montana State Hospital, therapeutic boarding schools)
- Counts only include primary practice locations. Locum Tenens providers are not included.
- Primary Care specialties include Family Medicine, Internal Medicine and Pediatrics.

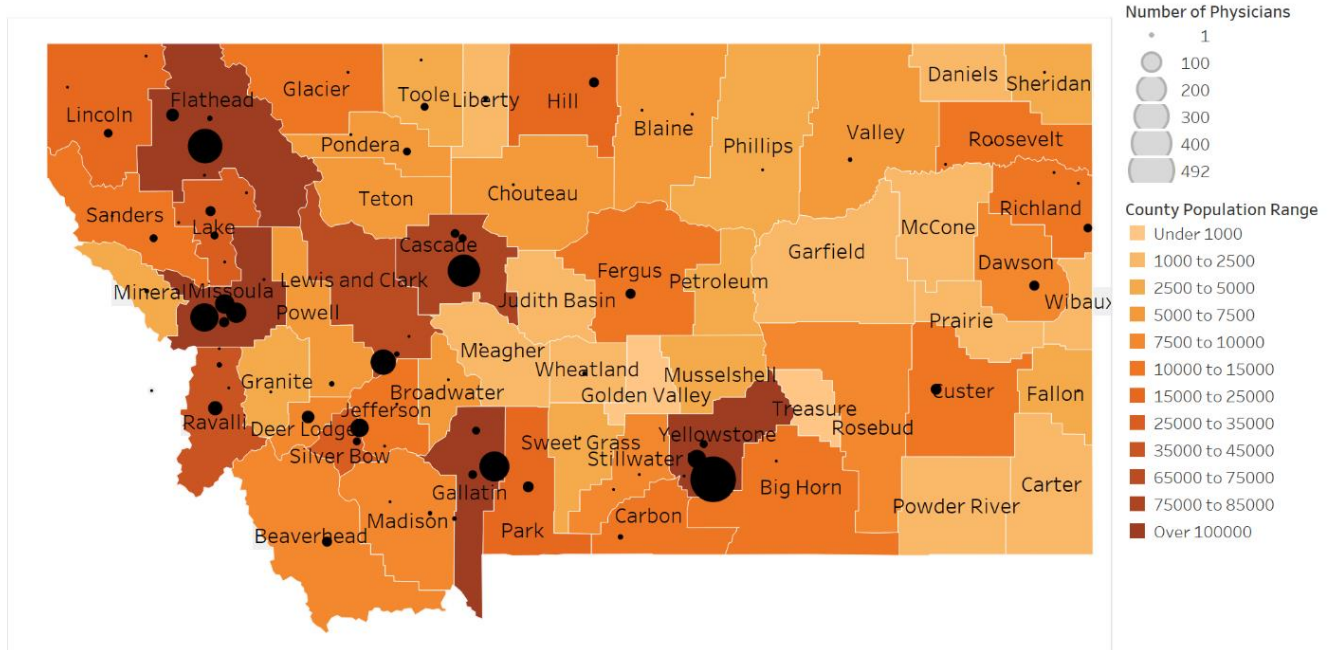
### Primary Care Physician FTE: Practice Locations Plotted by Zip Code



Data Source: Montana Primary Care Office data (2020) compiled and analyzed by WIM Tracking (Sept. 2020)

\*Note: Does not include IHS or Tribal Health physicians.

### Physicians (All Specialties) by County Population Range



Data Source: Montana Primary Care Office data (2020) and WIM Tracking (Sept. 2020)

\*Note: Does not include IHS or Tribal Health physicians.

# Appendix D- Survey Cover Letter

March 24, 2023



Dear [LASTNAME] household:

Participate in our Community Health Needs Assessment survey for a chance to **WIN one (1) \$100 Visa Gift Card, one of two (2) \$50 Visa Gift Cards, or one of two (2) \$25 Visa Gift Cards!**

Rosebud Health Care Center and Rosebud County Health Department are partnering with the Montana Office of Rural Health (MORH) to administer a joint community health needs assessment survey. The purpose of the survey is to obtain information from a wide range of participants to assist in planning our programs, services, and facilities to best serve our community. Your help is critical in determining health priorities and planning for future needs.

Your name has been randomly selected as a resident who lives in the county. The survey covers topics such as: use of health care services, awareness of services, community health, health insurance and demographics. We know your time is valuable, so we have made an effort to keep the survey to about 15 minutes. Participating in this survey is completely voluntary and your identity and answers will remain confidential.

1. Due date to complete survey: April 28, 2023
2. Complete the enclosed survey and return it in the envelope provided - no stamp needed.
3. You can also access the survey at <http://helpslab.montana.edu/survey.html>. Select "Rosebud County Survey." Your access code is [CODED]
4. The winners of the \$100 visa card, \$50 visa cards, and \$25 visa cards will be contacted the week of May 8<sup>th</sup>.

All survey responses will go to the Human Ecology Learning and Problem Solving (HELPS) Lab at Montana State University in Bozeman, Montana, the organization that is assisting MORH with this project. If you have any questions about the survey, please call MORH at 406-994-6986. We believe, with your help, we can continue to improve health care services in our region.

Thank you for your assistance. We appreciate your time.

Sincerely,

Handwritten signature of Mindy Price in cursive.

Mindy Price, CEO  
Rosebud Health Care Center

Handwritten signature of Shelly Schnitzmeier in cursive.  
The logo for Rosebud County, featuring a stylized rose and wavy lines.

Shelly Schnitzmeier, Director  
Rosebud County Public Health

# Appendix E- Survey Instrument

## Community Health Needs Assessment Survey Forsyth, Montana

**INSTRUCTIONS:** Please complete this survey by marking the appropriate boxes and then return it in the enclosed postage-paid envelope. If you need assistance, please contact the Montana Office of Rural Health at 406-994-6986. Participation is voluntary, and your responses will remain confidential. You can choose not to answer any question and can stop at any time.

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

- Very healthy       Healthy       Somewhat healthy       Unhealthy       Very unhealthy

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

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

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

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

4. How do you rate your knowledge of the health services that are available through Rosebud Health Care Center?

- Excellent       Good       Fair       Poor

5. How do you rate your knowledge of the health services that are available through Rosebud County Health Department?

- Excellent       Good       Fair       Poor

6. How do you learn about the health services available through Rosebud Health Care Center?

(**Select ALL that apply**)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Community bulletin board | <input type="checkbox"/> Presentations | <input type="checkbox"/> Website/internet         |
| <input type="checkbox"/> Friends/family           | <input type="checkbox"/> Public health | <input type="checkbox"/> Word of mouth/reputation |
| <input type="checkbox"/> Healthcare provider      | <input type="checkbox"/> Radio         | <input type="checkbox"/> Other: _____             |
| <input type="checkbox"/> Mailings/newsletter      | <input type="checkbox"/> Senior center |   |
| <input type="checkbox"/> Newspaper                | <input type="checkbox"/> Social media  |   |



7. How do you learn about the health services available through Rosebud County Health Department?

**(Select ALL that apply)**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Community bulletin board | <input type="checkbox"/> Presentations | <input type="checkbox"/> Website/internet         |
| <input type="checkbox"/> Friends/family           | <input type="checkbox"/> Public health | <input type="checkbox"/> Word of mouth/reputation |
| <input type="checkbox"/> Healthcare provider      | <input type="checkbox"/> Radio         | <input type="checkbox"/> Other: _____             |
| <input type="checkbox"/> Mailings/newsletter      | <input type="checkbox"/> Senior center |   |
| <input type="checkbox"/> Newspaper                | <input type="checkbox"/> Social media  |   |

8. Which community health resources, other than the hospital or clinic, have you used in the last three years?

**(Select ALL that apply)**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Assisted living | <input type="checkbox"/> Nursing home           | <input type="checkbox"/> Senior center |
| <input type="checkbox"/> Dentist         | <input type="checkbox"/> Pharmacy/tele-pharmacy | <input type="checkbox"/> Other: _____  |
| <input type="checkbox"/> Mental health   | <input type="checkbox"/> Public health          |  |

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

- |  |  |
|--|--|
| <input type="checkbox"/> Affordability of services                           | <input type="checkbox"/> More specialists                                  |
| <input type="checkbox"/> Assistance making appointments and finding services | <input type="checkbox"/> Online scheduling                                 |
| <input type="checkbox"/> Cultural sensitivity                                | <input type="checkbox"/> Outpatient services expanded hours                |
| <input type="checkbox"/> Greater health education services                   | <input type="checkbox"/> Payment assistance programs (healthcare expenses) |
| <input type="checkbox"/> Improved quality of care                            | <input type="checkbox"/> Telemedicine                                      |
| <input type="checkbox"/> Interpreter services                                | <input type="checkbox"/> Transportation assistance                         |
| <input type="checkbox"/> More information about available services           | <input type="checkbox"/> Other: _____                                      |
| <input type="checkbox"/> More primary care providers                         |  |

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

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Alcohol/substance abuse | <input type="checkbox"/> Health and wellness             | <input type="checkbox"/> Parenting                 |
| <input type="checkbox"/> Alzheimer's             | <input type="checkbox"/> Heart disease                   | <input type="checkbox"/> Prenatal                  |
| <input type="checkbox"/> Cancer                  | <input type="checkbox"/> Lactation/breastfeeding support | <input type="checkbox"/> Senior wellness           |
| <input type="checkbox"/> Diabetes                | <input type="checkbox"/> Living will                     | <input type="checkbox"/> Smoking/tobacco cessation |
| <input type="checkbox"/> First aid/CPR           | <input type="checkbox"/> Men's health                    | <input type="checkbox"/> Support groups            |
| <input type="checkbox"/> Fitness                 | <input type="checkbox"/> Mental health                   | <input type="checkbox"/> Weight loss               |
| <input type="checkbox"/> Grief counseling        | <input type="checkbox"/> Nutrition                       | <input type="checkbox"/> Women's health            |
|  |  | <input type="checkbox"/> Other: _____              |

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

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Ask a nurse            | <input type="checkbox"/> Hearing clinic/test           | <input type="checkbox"/> Mental health (tele-psych) |
| <input type="checkbox"/> Cardiac rehabilitation | <input type="checkbox"/> Home health                   | <input type="checkbox"/> MRI                        |
| <input type="checkbox"/> Crisis services        | <input type="checkbox"/> Hospice                       | <input type="checkbox"/> Sleep studies              |
| <input type="checkbox"/> Diabetes education     | <input type="checkbox"/> In person counseling services | <input type="checkbox"/> Other: _____               |
| <input type="checkbox"/> Foot care clinic       |  |   |

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

- Yes       No **(If no, skip to question 15)**

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

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

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

- Yes                       No (**If no, skip to question 18**)

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

- |                                   |   |                                       |
|-----------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Ashland  | <input type="checkbox"/> Hardin                       | <input type="checkbox"/> VA Hospital  |
| <input type="checkbox"/> Billings | <input type="checkbox"/> Hysham                       | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Colstrip | <input type="checkbox"/> Indian Health Services (IHS) |                                       |
| <input type="checkbox"/> Forsyth  | <input type="checkbox"/> Miles City                   |                                       |

16. Why did you select the primary care provider you are currently seeing? (**Select ALL that apply**)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Appointment availability                 | <input type="checkbox"/> Indian Health Services           | <input type="checkbox"/> Referred by physician or other provider |
| <input type="checkbox"/> Clinic/provider's reputation for quality | <input type="checkbox"/> Length of waiting room time      | <input type="checkbox"/> Required by insurance plan              |
| <input type="checkbox"/> Closest to home                          | <input type="checkbox"/> Prior experience with clinic     | <input type="checkbox"/> VA/Military requirement                 |
| <input type="checkbox"/> Cost of care                             | <input type="checkbox"/> Privacy/confidentiality          | <input type="checkbox"/> Other: _____                            |
|   | <input type="checkbox"/> Recommended by family or friends |  |

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

- Yes                       No (**If no, skip to question 21**)

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

- |   |   |                                       |
|---|---|---------------------------------------|
| <input type="checkbox"/> Billings Clinic        | <input type="checkbox"/> Rosebud Health Care Center | <input type="checkbox"/> VA Hospital  |
| <input type="checkbox"/> Holy Rosary Healthcare |   | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> IHS – Crow Agency      | <input type="checkbox"/> St. Vincent Healthcare     |                                       |

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

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

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

- Yes                       No (**If no, skip to question 24**)

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

- |                                   |   |                                       |
|-----------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Ashland  | <input type="checkbox"/> Forsyth                      | <input type="checkbox"/> Miles City   |
| <input type="checkbox"/> Billings | <input type="checkbox"/> Hardin                       | <input type="checkbox"/> VA Hospital  |
| <input type="checkbox"/> Colstrip | <input type="checkbox"/> Indian Health Services (IHS) | <input type="checkbox"/> Other: _____ |

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

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Allergist                    | <input type="checkbox"/> Mental health counselor          | <input type="checkbox"/> Psychiatrist (M.D.)                    |
| <input type="checkbox"/> Audiologist (ear)            | <input type="checkbox"/> Neurologist                      | <input type="checkbox"/> Psychologist                           |
| <input type="checkbox"/> Cardiologist (heart)         | <input type="checkbox"/> Neurosurgeon                     | <input type="checkbox"/> Pulmonologist (lungs)                  |
| <input type="checkbox"/> Chiropractor                 | <input type="checkbox"/> OB/GYN (birth/women's health)    | <input type="checkbox"/> Radiologist (x-ray)                    |
| <input type="checkbox"/> Dentist                      | <input type="checkbox"/> Occupational therapist           | <input type="checkbox"/> Rheumatologist (autoimmune/ arthritis) |
| <input type="checkbox"/> Dermatologist (skin)         | <input type="checkbox"/> Oncologist (cancer)              | <input type="checkbox"/> Social worker                          |
| <input type="checkbox"/> Dietician                    | <input type="checkbox"/> Ophthalmologist (eye specialist) | <input type="checkbox"/> Speech therapist                       |
| <input type="checkbox"/> Endocrinologist (hormones)   | <input type="checkbox"/> Optometrist (eye doctor)         | <input type="checkbox"/> Substance abuse counselor              |
| <input type="checkbox"/> ENT (ear/nose/throat)        | <input type="checkbox"/> Orthopedic surgeon               | <input type="checkbox"/> Urologist                              |
| <input type="checkbox"/> Gastroenterologist (stomach) | <input type="checkbox"/> Pediatrician (child specialist)  | <input type="checkbox"/> Other: _____                           |
| <input type="checkbox"/> General surgeon              | <input type="checkbox"/> Physical therapist               |   |
| <input type="checkbox"/> Geriatrician (aging)         | <input type="checkbox"/> Podiatrist (feet)                |   |

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

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Blood pressure check         | <input type="checkbox"/> Diabetic/glucose screening | <input type="checkbox"/> Pap test       |
| <input type="checkbox"/> Children's checkup/Well baby | <input type="checkbox"/> Flu shot/immunizations     | <input type="checkbox"/> Prostate (PSA) |
| <input type="checkbox"/> Cholesterol check            | <input type="checkbox"/> Health checkup             | <input type="checkbox"/> Vision check   |
| <input type="checkbox"/> Colonoscopy                  | <input type="checkbox"/> Hearing check              | <input type="checkbox"/> None           |
| <input type="checkbox"/> Dental check                 | <input type="checkbox"/> Mammography                | <input type="checkbox"/> Other: _____   |

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

	Excellent	Good	Fair	Poor	Haven't used/ Don't know
Clinic services	4	3	2	1	N/A
Diagnostic imaging (CT/x-ray/ultrasound/MRI)	4	3	2	1	N/A
Dietician services	4	3	2	1	N/A
Emergency room	4	3	2	1	N/A
Hospital/inpatient services	4	3	2	1	N/A
Laboratory	4	3	2	1	N/A
Nursing home	4	3	2	1	N/A
Occupational therapy	4	3	2	1	N/A
Personal Assisted Living Services (PALS)	4	3	2	1	N/A
Physical therapy	4	3	2	1	N/A
Telemedicine	4	3	2	1	N/A

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

	Excellent	Good	Fair	Poor	Haven't used/ Don't know
Immunization services	4	3	2	1	N/A
Title X Program – Family Planning	4	3	2	1	N/A
Foot Clinics – Senior Citizens	4	3	2	1	N/A
Home Visits – Senior Citizens	4	3	2	1	N/A
Nurse consultations	4	3	2	1	N/A
Miscellaneous medical services	4	3	2	1	N/A

26. In the past three years, have there been periods of at least three consecutive months where you felt depressed on most days?

- Yes       No

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

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

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

- High                       Moderate                       Low                       Unsure/rather not say

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

- Excellent                       Good                       Fair                       Poor

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

- A great deal                       Somewhat                       A little                       Not at all

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

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

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

- Yes                       No                       Not applicable

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

- Yes                       No

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

- Yes                       No                       Don't know

- 35. What type of health insurance covers the **majority** of your household's medical expenses? (**Select ONLY 1**)**
- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Employer sponsored           | <input type="checkbox"/> HMO/Advantage plan (i.e. Humana) | <input type="checkbox"/> Private insurance/private plan |
| <input type="checkbox"/> Health Insurance Marketplace | <input type="checkbox"/> Indian Health                    | <input type="checkbox"/> VA/Military                    |
| <input type="checkbox"/> Health Savings Account       | <input type="checkbox"/> Medicaid                         | <input type="checkbox"/> None/pay out of pocket         |
| <input type="checkbox"/> Healthy MT Kids              | <input type="checkbox"/> Medicare                         | <input type="checkbox"/> Other: _____                   |

- 36. How well do you feel your health insurance covers your healthcare costs?**
- Excellent                       Good                       Fair                       Poor

- 37. Are you aware of programs that help people pay for healthcare expenses?**
- Yes, and I use them       Yes, but I do not qualify       Yes, but choose not to use       No       Not sure

**Demographics**

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

- 38. Where do you currently live, by zip code?**
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> 59003 Ashland  | <input type="checkbox"/> 59038 Hysham    | <input type="checkbox"/> 59347 Rosebud |
| <input type="checkbox"/> 59323 Colstrip | <input type="checkbox"/> 59039 Ingomar   | <input type="checkbox"/> Other: _____  |
| <input type="checkbox"/> 59327 Forsyth  | <input type="checkbox"/> 59043 Lame Deer |  |

- 39. What is your gender?**
- Male                       Female                       Prefer to self-describe: \_\_\_\_\_

- 40. What age range represents you?**
- |                                |                                |                                |
|--------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 45-54 | <input type="checkbox"/> 75-84 |
| <input type="checkbox"/> 25-34 | <input type="checkbox"/> 55-64 | <input type="checkbox"/> 85+   |
| <input type="checkbox"/> 35-44 | <input type="checkbox"/> 65-74 |                                |

- 41. What is your employment status?**
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Work full time | <input type="checkbox"/> Student                 | <input type="checkbox"/> Not currently seeking employment |
| <input type="checkbox"/> Self employed  | <input type="checkbox"/> Collect disability      | <input type="checkbox"/> Other: _____                     |
| <input type="checkbox"/> Work part time | <input type="checkbox"/> Unemployed, but looking |   |
| <input type="checkbox"/> Retired        |  |   |

**[CODED]**  
**Please return in the postage-paid envelope enclosed with this survey or mail to:**  
 HELPS Lab  
 Montana State University  
 PO Box 172245  
 Bozeman, MT 59717

**THANK YOU VERY MUCH FOR YOUR TIME**  
**Please note that all information will remain confidential**

## Appendix F- Cross Tabulation Analysis

### Knowledge Rating of Rosebud Health Care Center by How Respondents Learn About Healthcare Services

	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>Total</b>
<b>Friends/family</b>	18.0% (16)	53.9% (48)	20.2% (18)	7.9% (7)	<b>89</b>
<b>Word of mouth/reputation</b>	11.7% (9)	57.1% (44)	22.1% (17)	9.1% (7)	<b>77</b>
<b>Healthcare provider</b>	22.8% (13)	57.9% (33)	12.3% (7)	7.0% (4)	<b>57</b>
<b>Mailings/newsletter</b>	23.1% (9)	48.7% (19)	23.1% (9)	5.1% (2)	<b>39</b>
<b>Public Health</b>	22.6% (7)	54.8% (17)	19.4% (6)	3.2% (1)	<b>31</b>
<b>Social media</b>	27.6% (8)	48.3% (14)	17.2% (5)	6.9% (2)	<b>29</b>
<b>Community bulletin board</b>	14.3% (4)	46.4% (13)	35.7% (10)	3.6% (1)	<b>28</b>
<b>Newspaper</b>	20.0% (5)	60.0% (15)	16.0% (4)	4.0% (1)	<b>25</b>
<b>Website/internet</b>	12.5% (3)	54.2% (13)	12.5% (3)	20.8% (5)	<b>24</b>
<b>Senior center</b>	28.6% (6)	33.3% (7)	19.0% (4)	19.0% (4)	<b>21</b>
<b>Radio</b>	29.4% (5)	47.1% (8)	17.6% (3)	5.9% (1)	<b>17</b>
<b>Presentations</b>	-	100.0% (2)	-	-	<b>2</b>
<b>Other</b>	11.1% (1)	44.4% (4)	22.2% (2)	22.2% (2)	<b>9</b>

## Knowledge Rating of Rosebud County Health Department by How Respondents Learn About Healthcare Services

	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>Total</b>
<b>Friends/family</b>	14.6% (12)	54.9% (45)	22.0% (18)	8.5% (7)	<b>82</b>
<b>Word of mouth/reputation</b>	14.5% (10)	56.5% (39)	18.8% (13)	10.1% (7)	<b>69</b>
<b>Healthcare provider</b>	21.7% (10)	63.0% (29)	4.3% (2)	10.9% (5)	<b>46</b>
<b>Mailings/newsletter</b>	13.9% (5)	52.8% (19)	27.8% (10)	5.6% (2)	<b>36</b>
<b>Public Health</b>	30.3% (10)	54.5% (18)	12.1% (4)	3.0% (1)	<b>33</b>
<b>Community bulletin board</b>	16.1% (5)	48.4% (15)	32.3% (10)	3.2% (1)	<b>31</b>
<b>Newspaper</b>	25.0% (6)	54.2% (13)	16.7% (4)	4.2% (1)	<b>24</b>
<b>Social media</b>	12.5% (3)	54.2% (13)	16.7% (4)	16.7% (4)	<b>24</b>
<b>Senior center</b>	23.8% (5)	38.1% (8)	19.0% (4)	19.0% (4)	<b>21</b>
<b>Website/internet</b>	14.3% (3)	52.4% (11)	14.3% (3)	19.0% (4)	<b>21</b>
<b>Radio</b>	37.5% (6)	43.8% (7)	18.8% (3)	-	<b>16</b>
<b>Presentations</b>	33.3% (2)	50.0% (3)	-	16.7% (1)	<b>6</b>
<b>Other</b>	12.5% (1)	25.0% (2)	50.0% (4)	12.5% (1)	<b>8</b>

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

	<b>Yes</b>	<b>No</b>	<b>Total</b>
<b>50323 Colstrip</b>	36.2% (17)	63.8% (30)	<b>47</b>
<b>59327 Forsyth</b>	20.8% (16)	79.2% (61)	<b>77</b>
<b>59038 Hysham</b>	18.8% (3)	81.3% (13)	<b>16</b>
<b>59347 Rosebud</b>	66.7% (4)	33.3% (2)	<b>6</b>
<b>TOTAL</b>	<b>27.4%</b> <b>(40)</b>	<b>72.6%</b> <b>(106)</b>	<b>146</b>

59003 Ashland, 59039 Ingomar, 59043 Lame Deer, and Other removed from residence (first column) due to non-response.



### Location of primary care clinic most utilized by residence

	<b>Billings</b>	<b>Colstrip</b>	<b>Forsyth</b>	<b>Hysham</b>	<b>Miles City</b>	<b>VA Hospital</b>	<b>Other</b>	<b>TOTAL</b>
<b>50323 Colstrip</b>	20.7% (6)	58.6% (17)	3.4% (1)	-	3.4% (1)	-	13.8% (4)	<b>29</b>
<b>59327 Forsyth</b>	17.0% (8)	2.1% (1)	36.2% (17)	2.1% (1)	21.3% (10)	2.1% (1)	19.1% (9)	<b>47</b>
<b>59038 Hysham</b>	33.3% (3)	-	22.2% (2)	11.1% (1)	22.2% (2)	-	11.1% (1)	<b>9</b>
<b>59347 Rosebud</b>	16.7% (1)	-	33.3% (2)	-	33.3% (2)	-	16.7% (1)	<b>6</b>
<b>TOTAL</b>	<b>19.8% (18)</b>	<b>19.8% (18)</b>	<b>24.2% (22)</b>	<b>2.2% (2)</b>	<b>16.5% (15)</b>	<b>1.1% (1)</b>	<b>16.5% (15)</b>	<b>91</b>

59003 Ashland, 59039 Ingomar, 59043 Lame Deer, and Other removed from residence (first column) due to non-response.

Ashland, Hardin, and Indian Health Services (IHS) removed from primary care clinic location (first row) due to non-response.

## Location of primary care provider most utilized by reasons for clinic/provider selection

	<b>Billings</b>	<b>Colstrip</b>	<b>Forsyth</b>	<b>Hysham</b>	<b>Miles City</b>	<b>VA Hospital</b>	<b>Other</b>	<b>TOTAL</b>
<b>Appointment availability</b>	5.3% (1)	26.3% (5)	26.3% (5)	5.3% (1)	10.5% (2)	-	26.3% (5)	<b>19</b>
<b>Clinic/provider's reputation for quality</b>	20.7% (6)	6.9% (2)	31.0% (9)	3.4% (1)	20.7% (6)	3.4% (1)	13.8% (4)	<b>29</b>
<b>Closest to home</b>	2.4% (1)	31.7% (13)	36.6% (15)	2.4% (1)	4.9% (2)	-	22.0% (9)	<b>41</b>
<b>Cost of care</b>	20.0% (1)	-	20.0% (1)	20.0% (1)	-	20.0% (1)	20.0% (1)	<b>5</b>
<b>Length of waiting room time</b>	-	25.0% (2)	25.0% (2)	-	25.0% (2)	-	25.0% (2)	<b>8</b>
<b>Prior experience with clinic</b>	17.2% (5)	20.7% (6)	20.7% (6)	6.9% (2)	17.2% (5)	-	17.2% (5)	<b>29</b>
<b>Privacy/confidentiality</b>	22.2% (2)	-	33.3% (3)	-	22.2% (2)	11.1% (1)	11.1% (1)	<b>9</b>
<b>Recommended by family or friends</b>	40.0% (6)	-	20.0% (3)	-	26.7% (4)	-	13.3% (2)	<b>15</b>
<b>Referred by physician or other provider</b>	36.4% (4)	-	9.1% (1)	-	9.1% (1)	-	45.5% (5)	<b>11</b>
<b>Required by insurance plan</b>	33.3% (1)	33.3% (1)	-	-	33.3% (1)	-	-	<b>3</b>
<b>VA/Military requirement</b>	33.3% (1)	-	-	-	-	-	66.7% (2)	<b>3</b>
<b>Other</b>	-	16.7% (2)	41.7% (5)	-	16.7% (2)	8.3% (1)	16.7% (2)	<b>12</b>

Indian Health Services removed from reason clinic selected (first column) due to non-response. Ashland, Hardin, and Indian Health Services (IHS) removed from primary care clinic location (first row) due to non-response.

### Location of most utilized hospital by residence

	Billings Clinic	Holy Rosary Healthcare	Rosebud Health Care Center	St. Vincent Healthcare	Other	Total
<b>50323 Colstrip</b>	46.7% (14)	6.7% (2)	10.0% (3)	26.7% (8)	10.0% (3)	<b>30</b>
<b>59327 Forsyth</b>	29.8% (14)	2.1% (1)	19.1% (9)	31.9% (15)	17.0% (8)	<b>47</b>
<b>59038 Hysham</b>	50.0% (4)	-	25.0% (2)	12.5% (1)	12.5% (1)	<b>8</b>
<b>59347 Rosebud</b>	40.0% (2)	-	20.0% (1)	40.0% (2)	-	<b>5</b>
<b>TOTAL</b>	<b>37.8% (34)</b>	<b>3.3% (3)</b>	<b>16.7% (15)</b>	<b>28.9% (26)</b>	<b>13.3% (12)</b>	<b>90</b>

59003 Ashland, 59039 Ingomar, 59043 Lame Deer, and Other removed from residence (first column) due to non-response. IHS – Crow Agency and VA Hospital removed from hospital location (first row) due to non-response.

## Location of most recent hospitalization by reasons for hospital selection

	Billings Clinic	Holy Rosary Healthcare	Rosebud Health Care Center	St. Vincent Healthcare	Other	Total
<b>Closest to home</b>	26.1% (6)	-	52.2% (12)	4.3% (1)	17.4% (4)	<b>23</b>
<b>Closest to work</b>	-	-	100.0% (2)	-	-	<b>2</b>
<b>Doctor/provider preference</b>	43.5% (20)	-	13.0% (6)	30.4% (14)	13.0% (6)	<b>46</b>
<b>Emergency, no choice</b>	25.0% (5)	-	25.0% (5)	35.0% (7)	15.0% (3)	<b>20</b>
<b>Financial assistance programs</b>	-	50.0% (1)	-	50.0% (1)	-	<b>2</b>
<b>Hospital's reputation for quality</b>	50.0% (14)	3.6% (1)	3.6% (1)	42.9% (12)	-	<b>28</b>
<b>Prior experience with hospital</b>	38.9% (14)	2.8% (1)	25.0% (9)	27.8% (10)	5.6% (2)	<b>36</b>
<b>Recommended by family or friends</b>	50.0% (2)	-	-	25.0% (1)	25.0% (1)	<b>4</b>
<b>Referred by physician or other provider</b>	51.6% (16)	3.2% (1)	6.5% (2)	25.8% (8)	12.9% (4)	<b>31</b>
<b>Required by insurance plan</b>	80.0% (4)	-	-	20.0% (1)	-	<b>5</b>
<b>VA/Military requirement</b>	-	-	-	-	100.0% (3)	<b>3</b>
<b>Other</b>	22.2% (2)	11.1% (1)	11.1% (1)	33.3% (3)	22.2% (2)	<b>9</b>

Cost of care and Privacy/confidentiality removed from reason hospital selected (first column) due to non-response. IHS – Crow Agency and VA Hospital removed from hospital location (first row) due to non-response.

## Appendix G- Responses to Other & Comments

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

- Have no idea
- they took away the rosebud public health center in Colstrip
- Lack of at home care services for the elderly
- Child hunger

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

- Alcohol use (3)
- Alzheimer's/dementia (1)
- Cancer (4)
- Depression/anxiety (1)
- Diabetes (2)
- Domestic violence (1)
- Drug use (4)
- Heart disease (2)
- Lack of dental care (1)
- Overweight/obesity (1)
- Social isolation/loneliness (1)

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

- No local doctor

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

- Arts and cultural events (1)
- Parks and recreation (1)
- Transportation services (1)

6. How do you learn about the health services available through Rosebud Health Care Center? (Select ALL that apply)

- don't hear anything
- utilization
- Clinic/CMC
- We went to the center to ask questions so we would know. Very poor communication
- medical appointment; then learn when there
- work
- employee
- Facebook

- Never needed/used. Don't know about
- I just know there's a clinic/hospital there

**7. How do you learn about the health services available through Rosebud County Health Department? (Select ALL that apply)**

- got to call
- clinic
- Went to Colstrip Health and asked. Poor communication otherwise
- I don't know
- Former employee
- Working in the medical field
- none
- reader board in from of cop shop

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

- None (3)
- VA
- Chiropractor
- chiropractor
- swimming pool
- physical therapy
- Covid vaccines from treasure county public health dept

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

- Reopen public health and make it available to Colstrip residents 5 days per week.
- help with Medicare
- we have a wonderful transportation service
- bring back the public health center to Colstrip
- Access to good healthcare

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

- None

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

- geriatrician
- Dental
- Telemedicine
- Vision

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

- Was told to go contact specialist, needed after hour care
- Told I was not sick enough to be in hospital
- Didn't think it was a problem until it started hurting.

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

- Could not get an appointment (1)
- Didn't know where to go (1)
- Don't like doctors/providers (1)
- Don't understand healthcare system (1)
- My insurance didn't cover it (1)
- Not treated with respect (1)
- Office wasn't open when I could go (1)
- Qualified provider not available (1)
- Too long to wait for an appointment (1)
- Unsure if services were available (1)

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

- Red Lodge (2)
- Casper, WY

\*Responses when more than 1 was selected (13 participants):

- Billings (11)
- Colstrip (2)
- Forsyth (8)
- Hardin (1)
- Hysham (1)
- Miles City (9)
- VA Hospital (2)

**16.** Why did you select the primary care provider you are currently seeing? (Select ALL that apply)

- Always have used provider since moving to Colstrip
- The only one that can perform DOT physicals
- Veteran
- I won't go back
- The same clinic system where I had my surgery
- ER experience
- very thorough
- Sunday appointments
- covered by insurance
- Have known her for years
- PA in Colstrip did not want to be a "general practitioner"
- She appeared nice and she is

- Previous history with physician

**18. Which hospital does your household use MOST for hospital care? (Select ONLY 1)**

- Ortho MT (2)
- Colstrip Clinic

**\*Responses when more than 1 was selected (12 participants):**

- Billings Clinic (9)
- Holy Rosary Healthcare (4)
- Rosebud Health Care Center (5)
- St. Vincent Healthcare (7)
- VA Hospital (1)

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

- High availability of care
- Appointment availability
- very thorough

**\*Responses when more than 3 were selected (8 participants):**

- Closest to home (2)
- Cost of care (1)
- Doctor/provider preference (6)
- Emergency, no choice (2)
- Financial assistance programs (1)
- Hospital's reputation for quality (7)
- Prior experience with hospital (7)
- Privacy/confidentiality (3)
- Recommended by family or friends (2)
- Referred by physician or other provider (5)
- Required by insurance plan (1)

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

- St. Vincent
- Advanced Care Billings
- Ortho MT
- Billings
- Hysham Treasure Co Public health



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

- Clinic/CMC/PA
- Neck Doctor
- Public Health Nurse
- Infectious disease
- vascular
- primary care
- family practice

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

- Cologuard

**35. What type of health insurance cover the majority of your household's medical expenses? (Select ONLY 1)**

- Out of state employee insurance
- Health Share Plan
- healthcare.gov
- Medicare + Supplement (2)
- Cigna
- MMIA
- Union Sponsored
- BEBS
- BCBS

**\*Responses when more than 1 was selected (27 participants):**

- Employer sponsored (6)
- Health Insurance Marketplace (2)
- Health Savings Account (1)
- Indian Health (1)
- Medicaid (8)
- Medicare (21)
- Private insurance/private plan (11)
- VA/Military (3)

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

- (No “other” responses)

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

- Both “Male” and “Female” selected for one response

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

- farm/ranch partner
- stay at home mom
- Disabled but denied disability

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

- Work full time (1)
- Work part time (1)
- Retired (2)
- Unemployed, but looking (2)

**General comments**

- (Q1)
  - Selected “Somewhat healthy” and wrote “\* Answers for Treasure County” next to the question.
- (Q2)
  - Below the choices wrote “Lukewarm explanations as to the drug of social life.”
- (Q3)
  - Below the choices wrote “clear communication so as to avoid deceit and evil consequences”
- (Q6)
  - Selected “Senior center” and wrote “ – good!” next to it.
- (Q8)
  - Selected “Nursing home” and wrote “Family member” next to it.
  - Selected “Public health” and wrote “- vaccine only” next to it.
- (Q10)
  - Selected “Fitness” and wrote “we have CPRD” next to it.
- (Q24)
  - For “Physical therapy” selected “4” and wrote “Excellent!” next to the item.
  - For “Physical therapy” selected “2” and wrote “Long time ago” next to it.
- (Q26)
  - Selected “No” and wrote “Jesus lifts my soul.”
- (Q27)
  - Underlined “felt lonely or isolated”, selected “Occasionally” and wrote “intent of question is in question.”
- (Q30)
  - Selected “A little” and wrote “a cousin’s husband is dying of liver disease due to alcohol.”
- (Q32)
  - Did not make a selection, but wrote “Sometimes” below the question.
- (Q35)
  - Selected “Employer sponsored” and wrote “Retiree” next to it.

- General:
  - In response to the “Thank you very much for your time” message at the end of the survey, wrote “You’re welcome. Good Luck! Shelly + Mindy – I hope this survey helps.”
  - “God bless you for attempting to give the people an honest questionnaire.
  - “We have been residents of Colstrip for 42 years. Being extremely active in the community, we communicate with a variety of people. Public Health has been a part of our lives and our kids’ lives for 4 decades. But no more. Now we have a couple of women travel from Forsyth one day a week. We only know because we went to ask. Communication is key! Apparently, the county is trying one day a week to increase to 2 days if necessary or if utilized. However, people don’t know and so another day will never happen! Get the word out to everyone!”
  - “Bring back the health center to Colstrip. One day a week is ridiculous. The 1 person that comes here has to have an assistant to do shots. That is a waste of money.”

# Appendix H –Key Informant Interview - Questions

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

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

# Appendix I – Key Informant Interviews - Transcripts

## Key Informant Interview #1

Wednesday, March 22<sup>nd</sup>, 2023- Anonymous –Via phone interview

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

- I think we have a healthy community. If you include the whole community, I think we have some health issues. Diabetes is prevalent in the Northern Cheyenne. I think there's some poverty that hinders people from taking care of themselves. I think northern Rosebud County has an older community, so there may be some challenges

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

Hospital/clinic:

- They do a great job. I work a bit with them, and I know they hired some nurse practitioners and I've heard good things. They have a nursing home and a CT scanner. They're able to take any patients we send for observation, we work well together

EMS Services (ER/Ambulance)

- The Colstrip ambulance service is amazing, we get to work firsthand with them. They're an extra set of hands. They're always willing to help but aren't paid enough.

Public/County Health Department

- There's been issues with the public health department, in Colstrip. We work with Shelly and provide services in Colstrip. People don't like change and they were worried services were going to be reduced. We're helping them to keep providing their services. They hired a nurse, and I haven't heard any complaints.

Senior Services (Nursing homes, assisted living, home health, senior center, etc.)

- I think the same thing, in our county, I know the seniors get services from public health. A coordinator from the county provides education and meals. The seniors are direct in their questioning and use the services. Great food, great way to get together

Services for Low-Income Individuals/Families

- In Colstrip I don't know too many people--- we identified one person without insurance. In Colstrip, everyone has a good-paying job and benefits. I think services are provided for the Northern Cheyenne in Ashland. I know there's availability for a lot of different things. The county provides services in northern Rosebud County

3. What do you think are the most important local healthcare issues?
  - We're coming off of the pandemic. The number one issue for us is getting staffing, especially nursing. We have traveling nurses, but they're very expensive, they bankrupt hospitals, and nursing homes in the state have to shut down.
4. What other healthcare services are needed in the community?
  - I don't know. I think Forsyth and all the communities offer a lot of different services to meet the needs of the community. If one hospital doesn't have it, we can share. Maybe some outreach or a specialist. Maybe orthopedics
5. What would make your community a healthier place to live?
  - If we could get everybody exercising and not smoking or drinking. I think for the most part, we're pretty healthy. I think shift work is tough on people. We try to do a good job of helping smokers with cessation plans. A huge need is mental health services. We are having issues with a lot more crises situations. Possibly due to politics or winter.

### **Key Informant Interview #2**

Wednesday, March 22<sup>nd</sup>, 2023- Anonymous –Via phone interview

1. How do you feel about the general health of your community?
  - I think it's good. In general. I think people are interested in their health, and they take advantage of the Rosebud healthcare center and take advantage of their public, we're in good general health.
2. What are your views/opinions about these local services:
  - Hospital/clinic:
    - Very good facility. They have the hospital, they have a nursing home, and they have a clinic. New facilities. They've done a good job of keeping up with modern technology and have made improvements to the facility if needed. They do a good job of trying to hire very good employees from GPs to NPs. The other people, the administrators, do a very good job of providing services to rosebud county.
  - EMS Services (ER/Ambulance)
    - Another excellent facility, they have a full-time EMS director. They educate the people that do EMS services. Works well with the community. Has. A local emergency planning committee. Highly active and accepts recommendations

from community members, provides updated equipment. Very good ambulances and provide well trained. people

**Public/County Health Department**

- Another excellent facility. A well-managed. During the covid crisis, they were providing information and making it available to community members, to make sure that people could make arrangements to get the vaccine and the additional doses of the vaccine. They are involved in the local emergency planning committee and keep other organizations up to date on what's happening in rural health. They are good with anything – the flu, vaccinations, ailments. They are in touch with what needs to be done in our community

**Senior Services (Nursing homes, assisted living, home health, senior center, etc.)**

- We have those programs available in our community. I've been involved with several of those. I think we have excellent facilities; the senior center is managed. They do a good job of taking care of their clients.

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

- I'm less familiar with that. We try to help through county health, through social services (we're the county seat) the county offers a variety of services.

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

- There's a variety. Obviously, when something like covid happens we need to make sure we can provide services. I think getting information out to community members is an issue. County health does an excellent job at getting information out on issues that individuals in our area deal with. The Rosebud Health Care Center does an excellent job, they have a variety of programs, such as one for diabetes. They make sure people know that resources are available. They go to the senior center to provide education.

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

- I think we always struggle with general practitioners. We are a small community. We had the physician's assistants and nurse practitioners, but it's a struggle to get a GP to come to Forsyth and stay here for a while. There's quite a bit of turnover in that position. If things can't be handled here, they can refer people to Miles City or Billings, where the specialists are.

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

- I think if everyone took the advice of our medical centers. Such as using drugs, alcohol, and tobacco. If each individual exercised and ate better, that would make our community more healthful. Hard to get people to do that though.

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

Thursday, March 23rd, 2023- Anonymous –Via phone interview

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

I feel that it's fair.

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

Hospital/clinic:

- They maintain good services.

EMS Services (ER/Ambulance)

- I know that they are going through some upgrades with their ER department which will increase their ability to provide quality service. EMS has been shown to be sufficient.

Public/County Health Department

- They provide great services for the manpower that they have, and they are a great resource for the community.

Senior Services (Nursing homes, assisted living, home health, senior center, etc.)

- They all work together, and they meet the standards that our community needs. The nursing home undergoes inconsistency in staffing, since they have travelers, so messages don't get passed on.

Services for Low-Income Individuals/Families

- I guess I'm not aware of what services are available.

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

- Affordability would be one of them. I think access, which more has to do with barriers of law. Other health issues, I see a lot of diabetes, lack of patient investment (wanting to invest in their health), lack of education

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

- More women's health. They're working on some things with OB/GYN, but we need prenatal care.

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

- More collaboration between all healthcare personnel in the community, and better referral base.



#### **Key Informant Interview #4**

Thursday, March 23rd, 2023- Anonymous –Via phone interview

1. How do you feel about the general health of your community?  
It's lots of chronic disease. There's lots of chronic disease in the community
2. What are your views/opinions about these local services:  
Hospital/clinic:
  - I don't use that facility.EMS Services (ER/Ambulance)
  - No. I'm not familiar with them.Public/County Health Department
  - I'm a member of the board, so I have a good perception.Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - I have patients in the nursing home. It seems like an average facility.Services for Low-Income Individuals/Families
  - I'm not familiar with those.
3. What do you think are the most important local healthcare issues?
  - Diabetes and hypertension
4. What other healthcare services are needed in the community?
  - Mental health, behavioral health
5. What would make your community a healthier place to live?
  - I don't have any feedback

#### **Key Informant Interview #5**

Wednesday, April 5, 2023- Anonymous –Via phone interview

1. How do you feel about the general health of your community?  
Overall good
2. What are your views/opinions about these local services:  
Hospital/clinic:  
I think they're doing an excellent job  
EMS Services (ER/Ambulance)
  - I'm the director
  - Public/County Health Department
  - I also think they're doing an excellent job
  - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)

- Weve got a good senior citizens program, they have a building they can get meals at.
  - Services for Low-Income Individuals/Families
  - I guess. I don't know a lot about that. I know there's a couple of low-income apartments in town.
3. What do you think are the most important local healthcare issues?
- Senior citizens are a big deal because our population is aging. We don't have a lot of young families.
4. What other healthcare services are needed in the community?
- I know they struggle with mental health, keeping mental health professionals in the area. We don't have a physician anymore; everything is nurse practitioners.
5. What would make your community a healthier place to live?
- I don't really know I have an answer

## Appendix J – Request for Comments

Written comments on this 2023 Community Health Needs Assessment (CHNA) Report can be submitted to Rosebud Health Care Center at:

Rosebud Health Care Center  
PO Box 268  
Forsyth, MT 59327

Contact Rosebud Health Care Center's Jayk Brooks at 406-346-4259 or [jbrooks@rosebudhealthcare.com](mailto:jbrooks@rosebudhealthcare.com) with questions.