

IMPLEMENTATION PLAN

Addressing Community Health Needs

Wheatland Memorial Healthcare ~ Harlowton, Montana

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

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The Implementation Planning Process

The implementation planning committee – comprised of Wheatland Memorial Healthcare’s (WMH) leadership team– participated in an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through the Community Health Services Development (CHSD) needs assessment process. The facility conducted the CHSD process in conjunction with the Montana Office of Rural Health (MORH).

The CHSD community health needs assessment was performed in the summer of 2016 to determine the most important health needs and opportunities for Wheatland County, Montana. “Needs” were identified as the top issues or opportunities rated by respondents during the CHSD survey process or during focus groups (see page 9 for a list of “Needs Identified and Prioritized”). For more information regarding the needs identified, as well as the assessment process/approach/methodology, please refer to the facility’s assessment report, which is posted on the facility’s website (http://www.wheatlandmemorial.org/wp-content/uploads/Wheatland-Memorial-Healthcare-CHSD_CHNA-Report_2016.pdf).

Wheatland Memorial Healthcare’s Community Steering Committee identified the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives representing the broad interest of the community, including those with public health expertise (see page 8 for additional information regarding input received from community representatives).

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

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

1. Access to Specialty Services
2. Health Education and Outreach
3. Awareness of Services
4. Community Care Coordination

In addressing the aforementioned issues, Wheatland Memorial Healthcare seeks to:

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

Wheatland Memorial Healthcare's Mission:

Responsive to the healthcare needs of the communities we serve, Wheatland Memorial Healthcare is dedicated to providing sustainable quality care with respect, compassion and teamwork.

Implementation Planning Committee Members:

- Brad Howell – Administrator, Wheatland Memorial Healthcare (WMH)
- Peggy Hiner- HR Director, WMH
- Gia Holiway- RHC Director, WMH
- Allison Fenley- Director of Nursing, WMH
- Patsy Elings- QI/Compliance Director, WMH
- Jane Moe- Foundation Director, WMH

Prioritizing the Community Health Needs

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

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

Wheatland Memorial Healthcare's Existing Presence in the Community

- Wheatland Memorial employs a Montana Health Insurance Navigator, a public advisor who helps individuals and small employers compare the health insurance options in the Marketplace website.
- Wheatland Memorial Healthcare providers speak at schools annual sports meeting to discuss and educate students, parents, and coaches about concussions. Wheatland also provides baseline testing free of charge for all students that participate in sports.
- Monthly articles on wellness submitted to local paper and social media.
- Employee Scholarships available to students interested in pursuing healthcare careers.
- Human Resource Director working with high school students with interview skills.
- Wheatland Memorial Healthcare sponsors community events such as Chamber Of Commerce, 4th of July Rodeo, Kiwanis and School Sporting Events.

List of Available Community Partnerships and Facility Resources to Address Needs

- Area II Agency on Aging- serves the needs and concerns of seniors and the disabled in central Montana.
- Avera eCARE- provides services and educational offerings related to telemedicine.
- Billings Clinic- provides resources and technical assistance for network hospitals.
- Cardinal/St. Johns- provides pharmacy services.
- Eastern Montana AHEC- provides pipeline programing to encourage youth to explore health careers.
- Harlowton Schools- is available to provide learning opportunities for students regarding healthy living.
- Kalispell Regional Medical Center (KRMC)- Regional medical center which provides mental and behavioral health resources.
- Lance Eller LAC/LCPC- provides counseling services in Harlowton.
- Montana Department of Health and Human Services (DPHHS) - has various departments and services to support the health and wellbeing of all Montana Citizens.
- Montana Hospital Association (MHA) - is the principle advocate for the interests of healthcare organizations in Montana in their efforts to improve the health and the communities they serve.
- Montana Rural Health Initiative- a web-based network linking prevention and community-based wellness programs throughout Montana to stimulate a higher level of wellness across the state.
- Montana State University (MSU) Extension- provides educational outreach to Wheatland County residents.
- Mountain-Pacific Quality Health (QIO) - is the “go-to” resource for driving innovation in health care systems.
- National Alliance on Mental Illness (NAMI)- the nation’s largest grassroots mental health organization.
- Regional CAH partners and clinic providers- networking and regional approaches to address common needs.
- Rural Accountable Care Consortium- supports rural practice transformation to improve care, reduce unnecessary healthcare costs and improve patient satisfaction, while also improving the financial performance and sustainability of rural health systems.
- Shodair Children’s Hospital- could provide support/education related to mental health crisis and management with youth.
- St. Vincent Healthcare- Provides telehealth and dietician resources.
- Visiting providers- regionally located practitioners offer visiting or consulting services.

Wheatland County Indicators

Low Income Persons

- 19% of persons are below the federal poverty level

Uninsured Persons

- 26% of adults less than age 65 are uninsured
- Data is not available by county for uninsured children less than age 18

Leading Causes of Death: Primary and Chronic Diseases

- Heart Disease
- Cancer
- Unintentional injuries

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

Elderly Populations

- 18% of Wheatland County's Population is 65 years and older

Size of County and Remoteness

- 2,010 people in Deer Lodge County
- 1.4 people per square mile

Nearest Major Hospital

- St. Vincent Healthcare in Billings, MT – 91.2 miles from Wheatland Memorial Healthcare

Public Health and Underserved Populations Consultation Summaries

Public Health Consultation [Sue Woods, RN – Director, Central Montana Health District;
Heather Thom, RN- Central Montana Health District;
Gia Holiway, Clinic Director, Bair Memorial Clinic- June 23, 2016]

- Unintentional injury is quite high here because we are a ranching community.
- In the clinic we are seeing patients with prescription abuse problems.
- Housing is a huge issue in our community, there just isn't anything available.

Population – Low-Income, Underinsured [Sue Woods, RN – Director, Central Montana Health District;
Leslie Aiton- Accounting, Wheatland Memorial Healthcare- June 23, 2016]

- Our medium income is about half of what it is for the rest of the state.
- However our unemployment rate is lower than the state average. People are working but they just aren't making money.
- We should include WIC and HRDC utilization in the survey.
- A lot of moms here utilize Healthy MT Kids Plus so we should add it as an option in addition to Medicaid.

Population – Senior Citizens [Elizabeth Ruark – President of Board, Harlowton Senior Center – August 3, 2016]

- We have absolutely no home health care. If any seniors just have temporary health problems, there are services to help them bath or just fix meals for them. You have to get somebody from out of town.
- There is only an assisted living facility but many seniors don't need that level of care yet.
- There is a lack of healthcare services in general because we are such a small community.

Needs Identified and Prioritized

Prioritized Needs to Address

1. Drug/prescription abuse (54.7%), alcohol abuse (42.2%) and overweight/obesity (31.7%) were identified by survey respondents as their top health concerns in their community.
2. 'Mental health issues' as a serious health concern has significantly increased over the last three CHNA assessments.
3. 'Lack of access to healthcare' had a significant increase as a serious health concern than in the previous assessment.
4. Access to healthcare services was identified as the top component of a healthy community by 54.7% of survey respondents.
5. 30.4% of survey respondents rated availability of mental health services in Wheatland County as "Fair" and 18.6% "Poor."
6. 15% of survey respondents reported experiencing periods of depression of at least three consecutive months over the past three years.
7. Key informant interview participants indicated having more healthcare services would improve their overall health.
8. Key informant interview participants expressed concern over the absence of mental health services in their community.
9. 64.1% of respondents rated their general health of the community as "Somewhat Healthy." There has been a significant decline in the rating of the community's general health since the first assessment in 2010.
10. Top three ways to improve the community's access to healthcare: More primary care providers (36%), Greater Health Education services (23%) and Improved Quality of Care (23%).
11. Survey respondents indicated they were most interested in educational classes/programs related to: Fitness (34.2%), Weight loss (27.3%), Health and wellness (21.7%) and Women's health (21.7%).
12. Survey respondents indicated a desire for better access to exercise facilities or fitness center, customized exercise programs with assistance from PT, weight control, dietician, and well clinics.
13. 37.3% of respondents indicated 'Healthy behaviors and lifestyles' was an important component of a healthy community.
14. 30.4% of respondents rated their knowledge of healthcare services as 'Fair' or 'Poor.'
15. Key Informant interview participants felt there was a lack of knowledge of services available in the community.
16. 35.4% of respondents reported they or a household member did not get or delayed receiving needed healthcare services in the last three years.
17. There was a significant decrease in the number of respondents reporting receiving primary care services in the last three years.

Needs Unable to Address

(See page 29 for additional information)

1. More Primary Providers was identified as the top way to improve access to healthcare in the community (36.6%).
2. Number one reason why survey respondents indicated they did not get, or delayed receiving needed medical services (35.4%) was due to cost of care (43.1%).
3. Specialty services identified as needed in the community: Vision/Optician, dermatology, expanded dental, Obstetrics.

Executive Summary

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

Goal 1: Improve access to specialty care services in Wheatland County.

Strategy 1.1: Expand mental/behavioral health services at Wheatland Memorial Healthcare (WMH).

Activities:

- Explore opportunities to expand mental and behavioral health services via telemedicine.
- Convene regional hospital and clinic partners to discuss barriers and possible solutions to expand outpatient telemedicine programs.
- Research educational offering related to mental and behavioral health for WMH providers.
- Research best practices and develop protocol to better manage patients with acute mental health needs.

Strategy 1.2: Explore expansion of other specialty services via telehealth.

Activities:

- Research educational offerings for clinic nurses to better facilitate telemedicine provider needs.
- Explore other potential specialty providers and services for WMH.
- Conduct feasibility study for expansion of specialty offerings.
- Determine equipment, space, and staffing needs for specialty service expansion.

Goal 2: Improve health education and outreach offerings to WMH's service area.

Strategy 2.1: Expand pipeline programs to enhance education offered to students related to health and health careers.

Activities:

- Meet with Montana AHEC program to learn about pipeline programs for Wheatland County.
- Meet with local schools to discuss potential partnership for pipeline programs for ongoing health education programs and scholarship programs.
- Promote and facilitate expanding student shadowing and clinical rotation offering at WMH.

Strategy 2.2: Continue health education classes and program efforts at WMH.

Activities:

- Continue offering and co-sponsoring programs related to community health (ex. drinking and driving, texting and driving, helmet safety, impact testing, etc.).
- Explore opportunities to partner with institutional programs aging, MSU Extension, or others on new classes and programs.
- Determine feasibility of expanding immunization and education outreach to local schools.
- Promote community newspaper editorials and social media posts related to chronic disease, health and wellness.
- Host community health and wellness event (health fair or new updated event) to promote health, wellness, prevention, and local health resources.

Strategy 2.3: Improve community dialogue and awareness of health and wellness needs in Harlowton and Wheatland County.

Activities:

- Determine community stakeholders working on, or with an interest in, building health and wellness in WMH service area.
- Convene community stakeholder group to discuss health and wellness efforts and needs in WMH service area.
- Identify champions and set schedule for community workgroup meetings.
- Develop workgroup strategy to continue work on health and wellness efforts in Harlowton and Wheatland County.

Goal 3: Improve awareness of available healthcare services at WMH.

Strategy 3.1: Create community directory resource to map out available health services.

Activities:

- Convene/consult with community partners to assess currently available community health services.
- Create community resource directory.
- Create community resource tab/page on WMH website to host directory.
- Develop media campaign to share new resource with community and WMH staff.

Strategy 3.2: Create new marketing campaign to increase awareness of WMH services.

Activities:

- Create a quarterly newsletter highlighting available specialty services (including information related to their bios, service offerings and schedule).
- Increase promotion of WMH services with mixed media approaches (ex. Social media, magnet campaigns, Walk with a Doc).
- Continue to present to various community groups about services available and discuss any needs identified.

Goal 4: Expand Community Care Coordination efforts to enhance coordinated, comprehensive and personalized care for all WMH patients.

Strategy 4.1: Assess care coordination workforce at WMH.

Activities:

- Determine staffing needs (FTE).
- Expand community care coordination staff (Community Care Coordinator; Community Health Worker).
- Determine WMH provider and clinical services champion for program implementation.

Strategy 4.2: Increase knowledge of Community Care Coordination program and benefits.

Activities:

- Educate staff and providers on new Community Care Coordination program.
- Create education and outreach information to educate community on new program.
- Determine marketing campaign and modalities to share Community Care Coordination information.
- Develop protocol and process to identify and manage various chronic disease patients.
- Educate clinic staff on new case management protocol.
- Create information specific to post-acute services available at WMH to reduce community burden/need for travel for both WMH providers and patients.
- Discuss and coordinate referral information for post-acute patients with hospital and specialty partners.
- Develop protocol for a WMH designated staff to offer information related care coordination and post-acute services for patients in the clinic.
- Determine WMH staff responsible for providing education to patients.

Implementation Plan Grid

Goal 1: Improve access to specialty care services in Wheatland County.

Strategy 1.1: Expand mental/behavioral health services at Wheatland Memorial Healthcare (WMH).

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Explore opportunities to expand mental and behavioral health services via telemedicine.	CEO	March 2017	Leadership Team	Billings Clinic, St. Vincent Healthcare, VA, CMMC	Resource limitations, Financial limitations
Convene regional hospital and clinic partners to discuss barriers and possible solutions to expand outpatient telemedicine programs.	CEO	June 2017	Leadership Team	Regional CAHs, Clinics, KRMC	Resource limitations, Financial limitations, Scheduling conflicts
Research educational offerings related to mental and behavioral health for WMH providers.	WMH Provider	January 2017	Medical Staff	Billings Clinic, St. Vincent Healthcare, Avera eCARE	Resource limitations, Financial limitations, Scheduling conflicts
Research best practices and develop protocol to better manage patients with acute mental health needs.	WMH Provider	January 2017	Medical Staff	DPHHS, Shodair, MSU, NAMI	Resource limitations

Needs Being Addressed by this Strategy:

- #1: Drug/prescription abuse (54.7%), alcohol abuse (42.2%) and overweight/obesity (31.7%) were identified by survey respondents as their top health concerns in their community.
- #2: ‘Mental health issues’ as a serious health concern has significantly increased over the last three CHNA assessments.
- #3: ‘Lack of access to healthcare’ had a significant increase as a serious health concern than in the previous assessment.
- #4: Access to healthcare services was identified as the top component of a healthy community by 54.7% of survey respondents.
- #5: 30.4% of survey respondents rated availability of mental health services in Wheatland County as “Fair” and 18.6% “Poor.”
- #6: 15% of survey respondents reported experiencing periods of depression of at least three consecutive months over the past three years.
- #7: Key informant interview participants indicated having more healthcare services would improve their overall health.
- #8: Key informant interview participants expressed concern over the absence of mental health services in their community.

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Anticipated Impact(s) of these Activities:

- Increased access to behavioral and mental health services at WMH.
- Increase in provider and staff knowledge in assisting those in mental health crisis.
- Increased collaboration with regional CAH partners related to behavior and mental health needs.
- Improved community health.

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

- Track number people utilizing behavioral or mental health services.
- Track number of WMH staff trained in new protocol.

Measure of Success: WMH expands mental and behavioral health services.

Goal 1: Improve access to specialty care services in Wheatland County.

Strategy 1.2: Explore expansion of other specialty services via telehealth.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Research educational offerings for clinic nurses to better facilitate telemedicine provider needs.	RHC Director	January 2018	Leadership Team	Billings Clinic, St. Vincent Healthcare, KRMC	Resource limitations, Financial limitations, Scheduling conflicts
Explore other potential specialty providers and services for WMH.	CEO	June 2017	Leadership Team		Resource limitations, Financial limitations, Scheduling conflicts
Conduct feasibility study for expansion of specialty offerings.	CEO	December 2017	Leadership Team		Resource limitations, Financial limitations
Determine equipment, space, and staffing needs for specialty service expansion.	RHC Director	June 2017	Leadership Team		Resource limitations, Financial limitations

Needs Being Addressed by this Strategy:

- #3: ‘Lack of access to healthcare’ had a significant increase as a serious health concern than in the previous assessment.
- #4: Access to healthcare services was identified as the top component of a healthy community by 54.7% of survey respondents.
- #7: Key informant interview participants indicated having more healthcare services would improve their overall health.

Anticipated Impact(s) of these Activities:

- Increase access to specialty services.
- Improved health outcomes.

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

- Track new specialty service(s) offered at WMH.
- Track number of patients utilizing new specialty service(s).

Measure of Success: WMH expands specialty services available.

Goal 2: Improve health education and outreach offerings to WMH’s service area.

Strategy 2.1: Expand pipeline programs to enhance education offered to students related to health and health careers.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Meet with Montana AHEC program to learn about pipeline programs for Wheatland County.	HR Director	On going	Leadership Team	Montana AHEC, Career Fairs, Local Schools	Resource limitations, Financial limitations, Scheduling conflicts
Meet with local schools to discuss potential partnership for pipeline programs for ongoing health education programs and scholarship programs.	HR Director	Fall 2017	Leadership Team	Local schools	Resource limitations, Financial limitations, Scheduling conflicts
Promote and facilitate expanding student shadowing and clinical rotation offering at WMH.	HR Director, DON	August 2017	Leadership Team	Montana AHEC, WWAMI, MSU Nursing, PA Schools	Resource limitations, Financial limitations, Scheduling conflicts

Needs Being Addressed by this Strategy:

- #3: ‘Lack of access to healthcare’ had a significant increase as a serious health concern than in the previous assessment.
- #4: Access to healthcare services was identified as the top component of a healthy community by 54.7% of survey respondents.
- #7: Key informant interview participants indicated having more healthcare services would improve their overall health.
- #9: 64.1% of respondents rated their general health of the community as “Somewhat Healthy.” There has been a significant decline in the rating of the community’s general health since the first assessment in 2010.
- #10: Top three ways to improve the community’s access to healthcare: More primary care providers (36%), Greater Health Education services (23%) and Improved Quality of Care (23%).
- #14: 30.4% of respondents rated their knowledge of healthcare services as ‘Fair’ or ‘Poor.’
- #15: Key Informant interview participants felt there was a lack of knowledge of services available in the community.

Anticipated Impact(s) of these Activities:

- Increase knowledge of healthcare and healthcare delivery.
- Increase interest in working in a rural/frontier setting.
- Increased community involvement with Wheatland Memorial Healthcare.
- Developing the workforce pipeline for future healthcare providers serving Wheatland County.

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

- Track number of student contacts made.
- Track number of student participants in camp.
- Track number of job shadowing participants.

Measure of Success: WMH has an active job shadowing program.

Goal 2: Improve health education and outreach offerings to WMH’s service area.

Strategy 2.2: Continue health education classes and program efforts at WMH.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Continue offering and co-sponsoring programs related to community health (ex. drinking and driving, texting and driving, helmet safety, impact testing, etc.)	DON	October 2017	Medical Staff	County and community partners	Resource limitations, Financial limitations, Scheduling conflicts
Explore opportunities to partner with institutional programs aging, MSU Extension, or others on new classes and programs.	WMH Provider	March 2017	Leadership Team, Medical Staff	Area II on Aging, MSU Extension	Resource limitations, Financial limitations, Scheduling conflicts
Determine feasibility of expanding immunization and education outreach to local schools.	RHC Director	June 2017	Medical Staff	Local schools	Resource limitations, Scheduling conflicts
Promote community newspaper editorials and social medial posts related to chronic disease, health and wellness.	Foundation Director	June 2017	Medical Staff	Taylor Lies	Resource limitations
Host community health and wellness event (health fair or new updated event) to promote health, wellness, prevention, and local health resources.	CEO	August 2017	Leadership Team	County and community partners	Resource limitations, Financial limitations

Needs Being Addressed by this Strategy:

- #1: Drug/prescription abuse (54.7%), alcohol abuse (42.2%) and overweight/obesity (31.7%) were identified by survey respondents as their top health concerns in their community.
- #3: ‘Lack of access to healthcare’ had a significant increase as a serious health concern than in the previous assessment.
- #4: Access to healthcare services was identified as the top component of a healthy community by 54.7% of survey respondents.
- #7: Key informant interview participants indicated having more healthcare services would improve their overall health.
- #9: 64.1% of respondents rated their general health of the community as “Somewhat Healthy.” There has been a significant decline in the rating of the community’s general health since the first assessment in 2010.
- #10: Top three ways to improve the community’s access to healthcare: More primary care providers (36%), Greater Health Education services (23%) and Improved Quality of Care (23%).

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- #11: Survey respondents indicated they were most interested in educational classes/programs related to: Fitness (34.2%), Weight loss (27.3%), Health and wellness (21.7%) and Women's health (21.7%).
- #12: Survey respondents indicated a desire for better access to exercise facilities or fitness center, customized exercise programs with assistance from PT, weight control, dietician, and well clinics.
- #13: 37.3% of respondents indicated 'Healthy behaviors and lifestyles' was an important component of a healthy community.

Anticipated Impact(s) of these Activities:

- Increased communication and collaboration between all of the community partners.
- Increase in knowledge of available programs/resources promoting health and wellness in the community.
- Increased access to information about health and wellness programs/resources.
- Increased participation in health and wellness educational programs and events.

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

- Track website hits.
- Monitor Facebook postings.
- Track number of participants at education programs and events.
- Track number of editorials published.

Measure of Success: WMH debuts a new/revamped community health event highlighting health and wellness in Wheatland County.

Goal 2: Improve health education and outreach offerings to WMH’s service area.

Strategy 2.3: Improve community dialogue and awareness of health and wellness needs in Harlowton and Wheatland County.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Determine community stakeholders working on, or with an interest in, building health and wellness in WMH service area.	Leadership Team	December 2017	Leadership Team	Central MT Health District, Chamber, MSU Extension	Resource limitations
Convene community stakeholder group to discuss health and wellness efforts and needs in WHM service area.	Leadership Team	December 2017	Leadership Team	Central MT Health District, Chamber, MSU Extension	Resource limitations, Scheduling conflicts
Identify champions and set schedule for community workgroup meetings.	Leadership Team	December 2017	Leadership Team	Central MT Health District, Chamber, MSU Extension	Resource limitations, Scheduling conflicts
Develop workgroup strategy to continue work on health and wellness efforts in Harlowton and Wheatland County.	Leadership Team	December 2017	Leadership Team	Central MT Health District, Chamber, MSU Extension	Resource limitations

Needs Being Addressed by this Strategy:

- #1: Drug/prescription abuse (54.7%), alcohol abuse (42.2%) and overweight/obesity (31.7%) were identified by survey respondents as their top health concerns in their community.
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- #12: Survey respondents indicated a desire for better access to exercise facilities or fitness center, customized exercise programs with assistance from PT, weight control, dietician, and well clinics.
- #13: 37.3% of respondents indicated ‘Healthy behaviors and lifestyles’ was an important component of a healthy community.
- #14: 30.4% of respondents rated their knowledge of healthcare services as ‘Fair’ or ‘Poor.’
- #15: Key Informant interview participants felt there was a lack of knowledge of services available in the community.

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Anticipated Impact(s) of these Activities:

- Increase knowledge of health and wellness resources.
- Increased access to health and wellness opportunities.
- Increased community involvement with Wheatland Memorial Healthcare.
- Improve community health.

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

- Track number of workgroup participants.
- Track number of workgroup meetings.

Measure of Success: WMH and their community partners create a community strategy to enhance community health and wellness.

Goal 3: Improve awareness of available healthcare services at WMH.

Strategy 3.1: Create community directory resource to map out available health services.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Convene/consult with community partners to assess currently available community health resources.	RHC Director, DON	December 2017	Leadership Team	Central MT Health District	Resource limitations, Scheduling conflicts
Create community resource directory.	RHC Director, DON	December 2017	Leadership Team		Resource limitations
Create community resource tab/page on WMH website to host directory.	Foundation Director	January 2018	Leadership Team		Resource limitations
Develop media campaign to share new resource with community and WMH staff.	Foundation Director	January 2018	Leadership Team		Resource limitations

Needs Being Addressed by this Strategy:

- #3: 'Lack of access to healthcare' had a significant increase as a serious health concern than in the previous assessment.
- #4: Access to healthcare services was identified as the top component of a healthy community by 54.7% of survey respondents.
- #7: Key informant interview participants indicated having more healthcare services would improve their overall health.
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- #14: 30.4% of respondents rated their knowledge of healthcare services as 'Fair' or 'Poor.'
- #15: Key Informant interview participants felt there was a lack of knowledge of services available in the community.

Anticipated Impact(s) of these Activities:

- Increased awareness of healthcare services available at WMH.
- Improved access to services.
- Increased communication and collaboration with community partners.
- Improve community health.

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

- Track webpage hits to new resource on WMH website.
- Track new referral or community references to new resource.

Measure of Success: WMH will publish a community health resource document by January 2018.

Goal 3: Improve awareness of available healthcare services at WMH.

Strategy 3.2: Create new marketing campaign to increase awareness of WMH services.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Create a quarterly newsletter highlighting available specialty services (including information related to their bios, service offerings and schedule).	Foundation Director	March 2018	Leadership Team	Specialty providers	Resource limitations, Financial limitations
Increase promotion of WMH services with mixed media approaches (ex. Social media, magnet campaigns, Walk with a Doc).	Foundation Director	March 2018	Leadership Team		Resource limitations, Financial limitations, Scheduling conflicts
Continue to present to various community groups about services available and discuss any needs identified.	Foundation Director	March 2018	Leadership Team		Resource limitations, Scheduling conflicts

Needs Being Addressed by this Strategy:

- #3: ‘Lack of access to healthcare’ had a significant increase as a serious health concern than in the previous assessment.
- #4: Access to healthcare services was identified as the top component of a healthy community by 54.7% of survey respondents.
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- #14: 30.4% of respondents rated their knowledge of healthcare services as ‘Fair’ or ‘Poor.’
- #15: Key Informant interview participants felt there was a lack of knowledge of services available in the community.

Anticipated Impact(s) of these Activities:

- Increased awareness of specialty services available at WMH.
- Improved access to specialty services.
- Improved health outcomes.

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

- Track specialty service utilization.

Measure of Success: WMH publishes quarterly specialty services newsletters beginning March 2018.

Goal 4: Expand Community Care Coordination efforts to enhance coordinated, comprehensive and personalized care for all WMH patients.

Strategy 4.1: Assess care coordination workforce at WMH.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Determine staffing needs (FTE).	CEO, RHC Director	December 2016	Leadership Team	Billings Clinic	Resource limitations
Expand community care coordination staff (Community Care Coordinator; Community Health Worker).	CEO, RHC Director	July 2017	Leadership Team	Billings Clinic	Resource limitations, Financial limitations
Determine WHM provider and clinical services champion for program implementation.	CEO, RHC Director	September 2017	Leadership Team	Billings Clinic	Resource limitations

Needs Being Addressed by this Strategy:

- #3: ‘Lack of access to healthcare’ had a significant increase as a serious health concern than in the previous assessment.
- #4: Access to healthcare services was identified as the top component of a healthy community by 54.7% of survey respondents.
- #7: Key informant interview participants indicated having more healthcare services would improve their overall health.
- #10: Top three ways to improve the community’s access to healthcare: More primary care providers (36%), Greater Health Education services (23%) and Improved Quality of Care (23%).
- #14: 30.4% of respondents rated their knowledge of healthcare services as ‘Fair’ or ‘Poor.’
- #15: Key Informant interview participants felt there was a lack of knowledge of services available in the community.
- #16: 35.4% of respondents reported they or a household member did not get or delayed receiving needed healthcare services in the last three years.
- #17: There was a significant decrease in the number of respondents reporting receiving primary care services in the last three years

Anticipated Impact(s) of these Activities:

- Increased access to healthcare services.
- Enhanced coordination of patients.
- Improved health outcomes.

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

- Track new Community Care Coordination staff hires.
- Determine WMH Care Coordination Champions.

Measure of Success: WHM hires and expands Care Coordination capacity by July 2017.

Goal 4: Expand Community Care Coordination efforts to enhance coordinated, comprehensive and personalized care for all WMH patients.

Strategy 4.2: Increase knowledge of Community Care Coordination program and benefits.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Educate staff and providers on new Community Care Coordination program.	RHC Director	March 2018	Leadership Team	Medical staff, Billings Clinic, Nursing staff	Resource limitations
Create education and outreach information to educate community on new program.	RHC Director	March 2018	Leadership Team	Medical staff, Billings Clinic, Nursing staff	Resource limitations, Financial limitations
Determine marketing campaign and modalities to share Community Care Coordination information.	RHC Director	May 2018	Leadership Team	Medical staff, Billings Clinic, Nursing staff	Resource limitations
Develop protocol and process to identify and manage various chronic disease patients.	RHC Director	June 2018	Leadership Team	Medical staff	Resource limitations
Educate clinic staff on new case management protocol.	RHC Director	June 2018	Leadership Team		Resource limitations
Create information specific to post-acute services available at WMH to reduce community burden/need for travel for both WMH providers and patients.	RHC Director	June 2018	Leadership Team		Resource limitations
Discuss and coordinate referral information for post-acute patients with hospital and specialty partners.	RHC Director	July 2018	Leadership Team	Medical staff	Resource limitations
Develop protocol for a WMH designated staff to offer information related to care coordination and post-acute services for patients in the clinic.	RHC Director	September 2018	Leadership Team		Resource limitations
Determine WMH staff responsible for providing education to patients.	RHC Director	September 2018	Leadership Team		Resource limitations

Needs Being Addressed by this Strategy:

- #3: 'Lack of access to healthcare' had a significant increase as a serious health concern than in the previous assessment.

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- #4: Access to healthcare services was identified as the top component of a healthy community by 54.7% of survey respondents.
- #7: Key informant interview participants indicated having more healthcare services would improve their overall health.
- #10: Top three ways to improve the community's access to healthcare: More primary care providers (36%), Greater Health Education services (23%) and Improved Quality of Care (23%).
- #14: 30.4% of respondents rated their knowledge of healthcare services as 'Fair' or 'Poor.'
- #15: Key Informant interview participants felt there was a lack of knowledge of services available in the community.
- #16: 35.4% of respondents reported they or a household member did not get or delayed receiving needed healthcare services in the last three years.
- #17: There was a significant decrease in the number of respondents reporting receiving primary care services in the last three years

Anticipated Impact(s) of these Activities:

- Increased access to healthcare services.
- Enhanced coordination of patients.
- Improved health outcomes.
- Increase in community and staff knowledge of Care Coordination program.
- Increase utilization of Care Coordination services.

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

- Track number of (pre) post-acute patients who meet with WMH staff.
- Track number of post-acute patients who return for post-acute services at WMH.
- Track number of community presentations provided related to new care coordination outreach.
- Track service utilization.

Measure of Success: WMH successfully implements a Community Care Coordination model.

Needs Not Addressed and Justification

Identified health needs unable to address by Wheatland Memorial Healthcare (WMH)	Rationale
1. More Primary Providers was identified as the top way to improve access to healthcare in the community (36.6%).	<ul style="list-style-type: none"> In efforts to address access to primary care services, WMH is pursuing the Community Care Coordination model. WMH continually assesses the feasibility of expanding the provider workforce.
2. Number one reason why survey respondents indicated they did not get, or delayed receiving needed medical services (35.4%) was due to cost of care (43.1%).	<ul style="list-style-type: none"> WMH does provide free/discounted services; however, it also must ensure that it remains financially viable in order to continue providing health care services to the community. WHM has a patient navigator to assist in enrollment in various programs such as Healthy Montana Kids, Medicaid, Charity Care and the Health Insurance Marketplace.
3. Specialty services identified as needed in the community: Vision/Optician, dermatology, expanded dental, Obstetrics.	<ul style="list-style-type: none"> WMH has written into this plan to explore the feasibility of specialty service expansion utilizing telemedicine. However, at this time, additional the specialty services listed are not financially feasible given the costs, provider availability, staff, equipment, etc.

Dissemination of Needs Assessment

Wheatland Memorial Healthcare “WMH” disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on their website (http://www.wheatlandmemorial.org/wp-content/uploads/Wheatland-Memorial-Healthcare-CHSD_CHNA-Report_2016.pdf) as well as having copies available at the facility should community members request to view the community health needs assessment or the implementation planning documents.

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

Furthermore, the board members of WMH will be directed to the hospital’s website to view the complete assessment results and the implementation plan. WMH board members approved and adopted the plan on **December 13, 2016**. Board members are encouraged to familiarize themselves with the needs assessment report and implementation plan so they can publically promote the facility’s plan to influence the community in a beneficial manner.

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