IMPLEMENTATION PLAN

Addressing Community Health Needs



"Friends Healing Friends"

1

Baker, Montana 2019-2022

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The Implementation Planning Process

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

The CHSD community health needs assessment was performed in the spring of 2019 to determine the most important health needs and opportunities for Fallon County, Montana and FMC service area. "Needs" were identified as the top issues or opportunities rated by respondents during the CHSD survey process or during focus groups (see page 10 for a list of "Needs Identified and Prioritized"). For more information regarding the needs identified, as well as the assessment process/approach/methodology, please refer to the facility's assessment report, which is posted on the facility's website (www.fallonmedical.org).

The community steering and implementation planning committees identified the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives representing the broad interest of the community, including those with public health expertise (see page 9 for additional information regarding input received from community representatives).

The implementation planning committee reviewed the priority recommendations provided by the community steering committee and determined which needs or opportunities could be addressed considering FMC'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. Chronic care management
- 2. Population and behavioral health
- 3. Access to healthcare services

In addressing the aforementioned issues, FMC seeks to:

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



Fallon Medical Complex's Mission:

Fallon Medical Complex, in its innovative pursuit of "Friends Healing Friends" provides comfort, compassion, and excellence in the promotion of quality of life to all individuals.

Implementation Planning Committee Members:

- David Espeland, CEO- Fallon Medical Complex (FMC)
- Marjorie Losing, CFO- FMC
- Sue Lunde, DON- FMC
- Judy McWilliams, QI Coordinator- FMC
- April Bruha, Administrative Assistant- FMC

Prioritizing the Community Health Needs

The steering and implementation planning committees 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

FMC's Existing Presence in the Community

- Our Foundation Coordinator has been a member of the local housing board, searching for ways to address our community's chronic housing shortage, by facilitating the construction of new housing and the renovation of existing houses. She has also acted as a board member for the local SE Montana Area Revitalization Team (SMART), dedicated to revitalizing the economic climate in our area, as well as being actively involved with the local Chamber of Commerce.
- To further support the community, a number of FMC employees frequently participate in disaster preparedness meetings and events through the Fallon County Local Emergency Preparedness Committee (LEPC). This group meets regularly to discuss disaster preparedness and determine ways of enhancing the effectiveness of disaster response.
- Our telemedicine system is periodically used by participants in an Eastern MT Chemical Dependency (CD) class, allowing them to interact with other participants and counselors in neighboring communities without having to drive out of town (no less than 2 hours round trip) multiple times each month.
- In an effort to assist with leadership development, two staff members routinely provide assistance with youth leadership programs. For instance, one of our Physical Therapists has acted as a 4H leader for a number of years, participating in youth developmental programs that provide hands-on learning activities for youth. In addition, our CEO provides coaching and judging for our local Business Professionals of America (BPA) chapter, which teaches basic and advanced business skills to high school students. Our CEO also judges Speech and Drama events, which helps high school students gain valuable skills in public speaking and performing.
- During the winter months, we offer Lunch and Learn programs to the community on healthcare related topics. These programs are held both live with guest speakers and via telecast in collaboration with other hospitals.
- One of our larger efforts to assist with community health improvement is to take an active role in offering, serving, and significantly subsidizing noon meals to seniors. FMC collaborates with our local Council on Aging to serve over 4,500 meals each year to seniors in our facility dining room, as well as an additional 1,300 meals through Meals on Wheels. This program promotes the health and well-being of our seniors by providing nutritious meals to those who might otherwise not receive them, especially those who are homebound.
- Although we are not a formal teaching facility, we periodically host college students who are seeking careers in healthcarerelated disciplines. We have a number of cooperative agreements with colleges and universities across the nation that allow students a variety of clinical experiences, from observation of care by a trained professional to providing limited patient services under the direct supervision of a licensed physician, mid-level, nurse, therapist, laboratory tech or radiology tech.

- FMC's workforce development support is largely focused on healthcare careers. We annually work with the local school system to offer "Medical Explorers", which allows students to ask medical professionals questions about their job and learn about the myriad of healthcare careers. Some years we are able to secure a patient simulator to give the students a real-life experience. Additionally, we allow students of all levels to request an opportunity to job shadow a healthcare professional. In the past, students have observed lab techs, radiology techs, physical therapists, nurses, doctors and mid-levels in their daily activities of providing care for patients. Our CEO and Foundation Coordinator serve on two Montana healthcare-related scholarship committees. Their participation on these committees promotes healthcare-related careers by helping to fund college educations.
- Annually, we sponsor and participate in the SE Montana Health Fair that showcases all healthcare services and resources available to the community. During this event, we offer various lab tests at greatly reduced rates to patients so that they can monitor their body and blood chemistry for an affordable price.
- We also offer free sports physical examinations annually to junior high and high school students in preparation for the upcoming school year, which have an estimated value of \$5,000.
- We collaborate with Holy Rosary Healthcare in Miles City, MT to offer an extensive medically guided wellness program called "Health Lifestyles" which focuses on nutrition, exercise, and mental wellbeing. The purpose of the program is to help participants make long-term, sustainable changes to live a more healthful life. Participants receive 1:1 personal coaching as well as regular group education sessions via telemedicine.
- We offer a 340B discount drug program in collaboration with Baker Rexall Drug. This government program requires drug manufacturers to provide outpatient drugs to eligible patients at significantly reduced prices. We act as a gatekeeper for access to the program which is based on a patient's financial ability to pay for healthcare services. Rexall Drug has the exclusive right to provide the drugs to the patients.

List of Available Community Partnerships and Facility Resources to Address Needs

- Baker Chamber of Commerce
- Eastern Montana Economic Development Authority (EMEDA)
- Southeastern Montana Area Revitalization Team (SMART)
- South Eastern Montana Health Fair
- Local Emergency Preparedness Committee (LEPC)
- Montana Health Network (MHN)
- Montana Hospital Association (MHA)
- Eastern Montana Telemedicine Network (EMTN)
- Regional CAH partners
- Holy Rosary Healthcare- SCL Health (HRH)
- Billings Clinic
- Mountain-Pacific Quality Health Foundation
- Montana Area Health Education Center (AHEC)-Regional Centers
- Montana Office of Rural Health
- Fallon County Public Health

- Fallon County Council on Aging
- Fallon County Health Board
- Baker Rexall Drug
- Alcoholics Anonymous
- Eastern Montana Community Mental Health Center (EMCMHC)
- Avera eCARE
- Eastern MT Chronic Care Consortium (EM3C)
- Hospital Innovation Improvement Network (HIIN)
- MT Performance Improvement Network (PIN)
- Medicare Beneficiary Quality Improvement Program (MBQIP)
- Montana State University Fallon County Extension
 Office
- Baker High School
- Northeast MT STAT Air Ambulance
- Fallon County Recreation Department

Fallon County Indicators

Population Demographics

- 15.8% of Fallon County's population is 65 years and older
- 11.9% of Fallon County's population has disability status
- 5.9% of Fallon County's population has Veteran status

Size of County and Remoteness

- 2,890 people in Fallon County
- 1.8 people per square mile

Socioeconomic Measures

- 7% of adults (age<65) are uninsured; 5% of children less than age 18, are uninsured
- 5.9% of children live in poverty
- 5.8% of persons are below the federal poverty level
- 4.8% of the population is enrolled in Medicaid

Select Health Measures

- 30% of adults are considered obese
- 22% of the adult population report physical inactivity
- 14% of the adult population report smoking
- Unintentional injury death rate (per 100,000 population) is 65.6 compared to 41.3 for Montana
- Montana's suicide rate (per 100,000 pop.) is 22.5 compared to 13.9 for the U.S.

Nearest Major Hospital

- Billings Clinic- Billings, MT- 225 miles from Fallon Medical Complex
- CHI St. Alexis Health- Bismarck, ND- 215 miles from Fallon Medical Complex
- Rapid City Regional Hospital- Rapid City, SD is 210 miles from Fallon Medical Complex

Public Health and Underserved Populations Consultation Summaries

Public Health Consultation

Mindi Murnion – Fallon County Public Health Emergency Preparedness and WIC; Kim Cuppy RN, CLC- Fallon County Public Health Advisor; Sandra Kinsey RN, Retired Fallon County Public Health Nurse 01/25/2019

- I don't think people are honest with their drinking and driving. The number seems low for our county.
- Wouldn't it be great if there was transportation assistance from the bar?
- There are only 8 percent of people below the poverty level in our county. I feel the poverty level here is actually double those rates.
- The number for free and reduced lunch seems very high. That's (113 students) over half of the school.
- What does the hospital do with the information learned in the Community Health Needs Assessment? Is the community aware of the progress they make?

Underserved Population – Low-Income, Underinsured

Jenna Sullivan BSW- FMC Social Services; Mindi Murnion – Fallon County Public Health Emergency Preparedness and WIC

01/25/2019

• There is a Food Bank the Community Cupboard

Underserved Population – Seniors

Carla Brown, Coordinator – Fallon County Council on Aging; Karol Zachmann- FMC Lifeline Manager/Home Health Services

01/25/2019

• Everyone wants hospice, but it is something that would be extremely difficult to offer in this community

Needs Identified and Prioritized

Prioritized Needs to Address

- 1. 58.3% of survey respondents rated their community's health as "Somewhat healthy", 7.5% rated the community's health as "Unhealthy" or "Very Unhealthy".
- 2. Top component identified as most important for a healthy community was "Access to healthcare and other services".
- 3. Top 5 identified health concerns for the community were: cancer, alcohol abuse/substance abuse, heart disease, diabetes, and overweight/obesity.
- 4. Survey respondents indicated most interest in classes/programs related to a health fair, weight loss, health and wellness, women's health, and fitness.
- 5. Secondary data shows 30% of Fallon County adults are considered obese and 22% report physical inactivity.
- 6. Frontier communities have the highest percent of Montana adults with 2+ chronic conditions (41%). Those with a disability or have Veteran status also have higher rates.
- 7. 8.2% of survey respondents indicated they exercise (of at least 20 min) "1-2 times per month" or "no physical activity".
- 8. Focus group participants indicated they felt having healthy food access and more opportunities to be fit would be beneficial for the community.
- 9. 10.1% of survey respondents indicated there were periods of at least three consecutive months in the past three years in which they felt depressed on most days.
- 10. Focus group participants noted access to mental health services was a high community health priority.
- 11. Survey respondents indicated the top ways to improve the community's access to healthcare were consistent primary care providers, more specialists, and more information about available services.
- 12. Focus group participants noted a desire for additional specialty care services such as: pediatrics, eye care, cardiology, urology, OB (visiting).
- 13. 32.5% of survey respondents indicated they or someone in their household delayed or did not receive needed services within the last three years for all medical provider that they frequent.
- 14. Top reasons identified for not getting or delay of needed services were could not get an appointment, too long to wait for an appointment, and office wasn't open when I could go.
- 15. Survey respondents' top two desired services (not currently available locally) were a walk-in clinic and optometry services.
- 16. Focus group participants felt the quality of care was good, but there were concerns regarding continuity of care (due to provider rotation) and communication (between providers and provider/patients).
- 17. Focus group participants suggested exploring expanded clinic hours or staggered hours to include evenings and weekends.

Needs Unable to Address

(See pages 25-26 for additional information)

- 1. Focus group participants felt that healthcare costs seemed higher at FMC for services than at other regional hospitals.
- 2. 37.2% of survey respondents indicated they did not know or were unsure of public assistance programs that help people pay their healthcare bills.
- 3. 6.5% of survey respondents indicated they were unable to get or to take their medications regularly due to cost.
- 4. Housing was discussed as a concern at all focus groups. Community members felt there was adequate housing, but at a higher cost than many can afford.
- 5. Focus group participants expressed concern regarding environmental issues such as better water quality and road/sidewalk conditions.
- 6. Unintentional injury death rate (per 100,000 population) for Fallon County is 65.6 compared to 41.3 for Montana.

Executive Summary

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

Goal 1: Improve population health in the Fallon Medical Complex service area.

Strategy 1.1: Enhance chronic care services and prevention outreach at FMC

Activities:

- Participate in Chronic Care Management HRSA grant with regional partners to develop and implement chronic care program
- Continue and expand regular Lunch and Learns to enhance chronic disease and population health education
- Create outreach materials (newsletters, videos, patient testimonials) highlighting importance of prevention and chronic care management
- Explore development of community wellness program promoting healthy behaviors in FMC service area (Walk with a Doc, Trails Rx, etc.)

Goal 2: Enhance behavioral health services (mental/behavioral/SUD) in the Fallon Medical Complex service area.

Strategy 2.1: Foster development and coordination of behavioral health resources

Activities:

- Convene community stakeholder group to assess available local, state, and regional behavioral/mental/SUD resources, gaps, and opportunities
- Create a resource list for FMC staff, partners and community (website, Lunch & Learn, other)
- Explore opportunities to expand behavioral health services via telemedicine
- Explore feasibility of developing detox (DT) services at FMC
- Continue to provide and promote community medication disposal and needle disposal/exchange programs

• Explore enhancing staff training through opportunities offered by various state partners (Mental Health 1st Aid, MOAB, PTSD debriefing, etc.)

Goal 3: Improve access to health care services and enhance continuity of care at Fallon Medical Complex.

Strategy 3.1: Enhance access to specialty services

Activities:

- Expand therapy services and outreach by developing occupational therapy (OT) program at FMC
- Explore opportunities to expand specialty and diagnostic services either on-site or via telemedicine
- Explore feasibility to add optometry tech-like services (glasses adjustments/repairs) to enhance access and reduce travel burden
- Create community education related to use of and applications of telemedicine services for consults and follow-up locally to enhance access and reduce travel burden

Strategy 3.2: Enhance access to primary care services Activities:

- Explore feasibility of implementing a staggered staffing model to expand available clinic appointments
- Explore alternative models in clinic to enhance outpatient service hours (weekend hours or urgent care/walk-in clinic like models)
- Develop FMC protocol for patient appointment reminders and follow-up post clinic appointments and discharge in ED to enhance care coordination
- Develop community education related to available clinic services and provider scope of work (i.e. pediatric, well baby services)
- Explore expansion of primary care workforce

Strategy 3.3: Enhance education and outreach related to available community services **Activities:**

- Redesign FMC website to better inform community of available services and resources in a more user-friendly, patient focused manner
- Design a new FMC services and programs calendar for website
- Partner with community stakeholders to update and disseminate community resources manual
- Explore opportunities to provide community educational presentations for various community groups

Implementation Plan Grid

Goal 1: Improve population health in the Fallon Medical Complex service area.

Strategy 1.1: Enhance chronic care services and prevention outreach at FMC

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Participate in Chronic Care Management HRSA grant with regional partners to develop and implement chronic care program	EM3C Project Coordinator	Q1 2020	CEO	EM3C (Eastern MT Chronic Care Consortium)	Resource limitations Grant expiration
Continue and expand regular Lunch and Learns to enhance chronic disease and population health education	Outreach Coordinator	Q1 2020	PR Committee	Various presenters	Resource limitations Scheduling conflicts
Create outreach materials (newsletters, videos, patient testimonials) highlighting importance of prevention and chronic care management	Outreach Coordinator	Q4 2019	PR Committee	EM3C, MSU- Fallon County Extension Office	Resource limitations
Explore development of community wellness program promoting healthy behaviors in FMC service area (Walk with a Doc, Trails Rx, etc.)	Outreach Coordinator	Q1 2020	CEO	HRH, Fallon County Rec. Department	Resource limitations Financial limitations

Needs Being Addressed by this Strategy (refer to page 10- Needs Identified and Prioritized):

- 1. 58.3% of survey respondents rated their community's health as "Somewhat healthy", 7.5% rated the community's health as "Unhealthy" or "Very Unhealthy".
- 2. Top component identified as most important for a healthy community was "Access to healthcare and other services".
- 3. Top 5 identified health concerns for the community were: cancer, alcohol abuse/substance abuse, heart disease, diabetes, and overweight/obesity.
- 4. Survey respondents indicated most interest in classes/programs related to a health fair, weight loss, health and wellness, women's health, and fitness.
- 5. Secondary data shows 30% of Fallon County adults are considered obese and 22% report physical inactivity.
- 6. Frontier communities have the highest percent of Montana adults with 2+ chronic conditions (41%). Those with a disability or have Veteran status also have higher rates.

- 7.8.2% of survey respondents indicated they exercise (of at least 20 min) "1-2 times per month" or "no physical activity".
- 8. Focus group participants indicated they felt having healthy food access and more opportunities to be fit would be beneficial for the community.

Anticipated Impact(s) of these Activities:

- Reduce disease burden
- Improve access to high quality, coordinated care
- Empower community to make healthful lifestyle choices
- Shift community attitudes and beliefs around healthy eating and physical activity

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

- Expand involvement in the Eastern MT Chronic Care Consortium (EM3C) with at least 4 patients participating.
- Track number of attendees at Lunch & Learns, striving to increase the number with each successive event.
- Track amount of outreach material produced and distributed.
- Monitor hits on Facebook postings.
- Track quantity of participants during wellness programs.

Measure of Success: Fallon Medical Complex will see an increase in chronic care management, attendance at education events and participation in community wellness programs by 2020.

Goal 2: Enhance behavioral health services (mental/behavioral/SUD) in the Fallon Medical Complex service area.					
Strategy 2.1: Foster development and coordination of behavioral health resources					
Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Convene community stakeholder group to assess available local, state, and regional behavioral/mental/SUD resources, gaps, and opportunities	Special Projects Coordinator	Q2 2020	CEO	MHN, EMCMHC, EMTN, Avera eCare	Resource limitations Scheduling conflicts
Create a resource list for FMC staff, partners and community (website, Lunch & Learn, other)	Special Projects Coordinator	Q2 2020	Special Projects Coordinator	MHN, EMCMHC, EMTN, Avera eCare	Resource limitations
Explore opportunities to expand behavioral health services via telemedicine	Special Projects Coordinator	Q3 2020	CEO	MHN, EMCMHC, EMTN, Avera eCare	Resource limitations Workforce limitations
Explore feasibility of developing detox (DT) services at FMC	DON	Q3 2020	CEO	MHN, HRH, EMCMHC, Local Police	Resource limitations Financial limitations
Continue to provide and promote community medication disposal and needle disposal/ exchange programs	DON	Q1 2020	DON	Local Police, Pharmacy, Public Health	Resource limitations Partner engagement
Explore enhancing staff training through opportunities offered by various state partners (Mental Health 1 st Aid, MOAB, PTSD debriefing, etc.)	DON/ADON	Q1 2020	DON	MT ORH, MT AHEC, MT DPHHS	Resource limitations Scheduling conflicts

Needs Being Addressed by this Strategy (refer to page 10- Needs Identified and Prioritized):

1. 58.3% of survey respondents rated their community's health as "Somewhat healthy", 7.5% rated the community's health as "Unhealthy" or "Very Unhealthy".

• 2. Top component identified as most important for a healthy community was "Access to healthcare and other services".

3. Top 5 identified health concerns for the community were: cancer, alcohol abuse/substance abuse, heart disease, diabetes, and overweight/obesity.

- 9. 10.1% of survey respondents indicated there were periods of at least three consecutive months in the past three years in which they
 felt depressed on most days.
- 10. Focus group participants noted access to mental health services was a high community health priority.
- 11. Survey respondents indicated the top ways to improve the community's access to healthcare were consistent primary care
 providers, more specialists, and more information about available services.

Anticipated Impact(s) of these Activities:

- Increase access to mental health services
- Decrease societal stigma associated with mental illness and substance use disorders
- Strengthen community partnerships
- Build community capacity
- Service, policy, and resources development
- Increased community knowledge of resources

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

- Monitor partner interest in evaluating available behavior health resources.
- Complete analysis of telehealth opportunities via telemedicine.
- Monitor number of patients who utilize our medication and needle disposal programs.
- Compare and contrast various staff training opportunities.

Measure of Success: Fallon Medical Complex will develop a keen understanding of behavioral health needs in the community as well as telemedicine opportunities, and beneficial training programs offered from the state by 2020.

Goal 3: Improve access to healthcare services and enhance continuity of care at Fallon Medical Complex.

Strategy 3.1: Enhance access to specialty services

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Expand therapy services and outreach by developing occupational therapy (OT) program at FMC	Rehabilitation Services Department	Q4 2019	CEO	Internal Only	Resource limitations Financial limitations Workforce limitations
Explore opportunities to expand specialty and diagnostic services either on-site or via telemedicine	Outreach Coordinator	Q2 2020	CEO	HRH, Billings Clinic, EMTN, Avera eCare	Resource limitations Financial limitations Workforce limitations
Explore feasibility to add optometry tech-like services (glasses adjustments/repairs) to enhance access and reduce travel burden	Outreach Coordinator	Q2 2020	Outreach Coordinator	Regional Optometrists	Resource limitations Financial limitations Workforce limitations
Create community education related to use of and applications of telemedicine services for consults and follow-up locally to enhance access and reduce travel burden	DON	Q1 2020	DON	Eastern Montana Telemedicine Network	Resource limitations

Needs Being Addressed by this Strategy (refer to page 10- Needs Identified and Prioritized):

- 2. Top component identified as most important for a healthy community was "Access to health care and other services".
- 3. Top 5 identified health concerns for the community were: cancer, alcohol abuse/substance abuse, heart disease, diabetes, and overweight/obesity.
- 11. Survey respondents indicated the top ways to improve the community's access to healthcare were consistent primary care
 providers, more specialists, and more information about available services.
- 12. Focus group participants noted a desire for additional specialty care services such as: pediatrics, eye care, cardiology, urology, OB (visiting).
- 13. 32.5% of survey respondents indicated they or someone in their household delayed or did not receive needed services within the last three years.
- 14. Top reasons identified for not getting or delay of needed services were could not get an appointment, too long to wait for an appointment, and office wasn't open when I could go.
- 15. Survey respondents' top two desired services (not currently available locally) were a walk-in clinic and optometry services.

Anticipated Impact(s) of these Activities:

- Increase access to healthcare services
- Build community capacity
- Increased community knowledge of services

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

- Track the number of patients treated by our Occupational Therapist.
- Compile responses to inquiries about expanded specialty services.
- Track the number of attendees at education sessions.
- Track the number of patients utilizing Telemedicine.

Measure of Success: Fallon Medical Complex will develop a well-utilized occupational therapy program by Q1 2020. We will engage in discussions with other hospitals about visiting specialists and see increased Telemedicine utilization.

Goal 3: Improve access to health care services and enhance continuity of care at Fallon Medical Complex.					
Strategy 3.2: Enhance access to primary care services					
Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Explore feasibility of implementing a staggered staffing model to expand available clinic appointments	Business Office Manager, CFO	Q2 2020	CEO	Internal Only	Resource limitations Financial limitations Scheduling conflicts
Explore alternative models in clinic to enhance outpatient service hours (weekend hours or urgent care/walk-in clinic like models)	Business Office Manager, CFO	Q2 2020	CEO	Internal Only	Resource limitations Financial limitations Scheduling conflicts
Develop FMC protocol for patient appointment reminders and follow-up post clinic appointments to enhance care coordination	Clinic Supervisor	Q1 2020	Business Office Manager	Internal Only	Resource limitations
Develop FMC protocol for patient follow-up post discharge in ED to enhance care coordination	DON/ADON	Q4 2019	DON	Internal Only	Resource limitations
Develop community education related to available clinic services and provider scope of work (i.e. pediatric, well baby services)	Outreach Coordinator	Q1 2020	Business Office Manager	Internal Only	Resource limitations
Explore expansion of primary care workforce	Provider Recruiter	Q1 2020	CEO	Placement firms, AHEC, MHN	Resource limitations Financial limitations Workforce limitations

Needs Being Addressed by this Strategy (refer to page 10- Needs Identified and Prioritized):

- 2. Top component identified as most important for a healthy community was "Access to healthcare and other services".
- 11. Survey respondents indicated the top ways to improve the community's access to healthcare were consistent primary care
 providers, more specialists, and more information about available services.
- 13. 32.5% of survey respondents indicated they or someone in their household delayed or did not receive needed services within the last three years.

- 14. Top reasons identified for not getting or delay of needed services were could not get an appointment, too long to wait for an appointment, and office wasn't open when I could go.
- 15. Survey respondents' top two desired services (not currently available locally) were a walk-in clinic and optometry services.
- 16. Focus group participants felt the quality of care was good, but there were concerns regarding continuity of care (due to provider rotation) and communication (between providers and provider/patients).
- 17. Focus group participants suggested exploring expanded clinic hours or staggered hours to include evenings and weekends.

Anticipated Impact(s) of these Activities:

- Increase access to healthcare services
- Increased community knowledge of services

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

- Track number of patients notified about appointments.
- Track decrease in missed appointments.
- Track provider employment opportunities.
- Track wait time to see a provider.
- Evaluate patient satisfaction with clinic hours changes.

Measure of Success: Fallon Medical Complex will be able to offer and sustain expanded clinic hours to meet our patient's needs, as well as stabilize a consistent and appropriate provider workforce. As a result, see increased patients by 2020.

Goal 3: Improve access to healthcare services and enhance continuity of care at Fallon Medical Complex.					
Strategy 3.3: Enhance education and outreach related to available community services					
Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Redesign FMC website to better inform community of available services and resources in a more user-friendly, patient focused manner	Special Projects Coordinator	Q1 2020	CEO	Website developers	Resource limitations Financial limitations
Design a new FMC services and programs calendar for website	Special Projects Coordinator	Q1 2020	PR Committee	Internal Only	Resource limitations
Partner with community stakeholders to update and disseminate community resources manual	Special Projects Coordinator	Q1 2020	CEO	Fallon County Departments, Chamber of Commerce	Resource limitations Financial limitations
Explore opportunities to provide community educational presentations for various community groups	Outreach Coordinator	Q1 2020	Outreach Coordinator	Fallon County Departments, Chamber of Commerce	Resource limitations Scheduling conflicts

Needs Being Addressed by this Strategy (refer to page 10- Needs Identified and Prioritized):

- 1. 58.3% of survey respondents rated their community's health as "Somewhat healthy", 7.5% rated the community's health as "Unhealthy" or "Very Unhealthy".
- 2. Top component identified as most important for a healthy community was "Access to healthcare and other services".
- 11. Survey respondents indicated the top ways to improve the community's access to healthcare were consistent primary care
 providers, more specialists, and more information about available services.

Anticipated Impact(s) of these Activities:

- Increase access to healthcare services
- Build community capacity
- Increased community knowledge of services
- Strengthen community partnerships

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

- Monitor Facebook visits.
- Track number of community presentations and attendees.
- Track number of resource manuals distributed.
- track utilization of available services.
- Track website hits/visits.

Measure of Success: Fallon Medical Complex will develop a more effective website that is informative, inviting visitors to explore FMC offerings, as well as upcoming community presentations by 2020.

Fallon Medical Complex– Baker, MT 2019					
Needs Not Addressed and Justification					
Identified health needs unable to address by FMC	Rationale				
 Focus group participants felt that healthcare costs seemed higher at FMC for services than at other regional hospitals. 	 Fallon Medical Complex recently purchased a database of peer group pricing for hospital services from its accountants. This database allowed it to determine how high or low it may be for the various services offered to patients. Its peer group included Montana hospitals of similar size, as well as larger hospitals located in the region. In addition, all hospitals are required to post their Charge Master on their websites, which can be accessed for price comparisons. The FY2020 budget was compiled with the peer pricing in mind, as will budgets during subsequent years, since some changes will need to be incrementally implemented. 				
 37.2% of survey respondents indicated they did not know or were unsure of programs that assist people in paying their healthcare bills. 	• Fallon Medical Complex offers financial assistance for those with a demonstrated need, as do various community partners (such as the Council on Aging and philanthropic organizations.) In addition, there are a number of public assistance programs offered through the State of MT. FMC intends to include a list of programs that offer financial assistance in the resource manual to be developed under this current Implementation Plan.				
 6.5% of survey respondents indicated they were unable to get or to take their medications regularly due to cost. 	 Fallon Medical Complex does offer a 340(b) program through SunRX that provides assistance with medication expenses in collaboration with Baker Rexall Drug. Qualified patients must demonstrate a need, from which they receive a discount card that entitles them to significantly lower pricing than retail on many, but not all, medications. 				

	Fallon Medical Complex– Baker, MT 2019
 Housing was discussed as a concern at all focus groups. Community members felt there was adequate housing, but at a higher cost than many can afford. 	 Unfortunately, Fallon Medical Complex cannot address or resolve the issue of housing. We, too, experience a hardship while trying to recruit staff members and providers. We have explored building our own housing, but persistent annual operating losses have prevented us from accumulating the required capital. Our Foundation Coordinator does participate in both SMART and EMEDA, which strive to address economic issues such as this one.
 Focus group participants expressed concern regarding environmental issues such as better water quality and road/sidewalk conditions. 	• Similarly, Fallon Medical Complex cannot address or resolve this issue either. Since all of our employees live in the area, we too are impacted by the concerns expressed by focus group participants. We really only have the resources to address better patient care and services. Nevertheless, as mentioned previously, our Foundation Coordinator participates in both SMART and EMEDA, which is working to resolve issues such as environmental concerns.
6. Unintentional injury death rate (per 100,000 population) for Fallon County is 65.6 compared to 41.3 for Montana.	 Fallon Medical Complex does periodically receive population data about health risks in the area, and it seems as though accidental death ranks high along with cancer and heart disease. Our providers do counsel our patients on safe practices, such as wearing helmets and seatbelts, etc. But the responsibility to provide public education about limiting unsafe occupational and recreational practices falls within the realm of Public Health Departments and the MT Department of Health and Human Services. It is their responsibility to monitor widespread health risks and to implement various programs to curtail further injuries, infection or loss of life.

Dissemination of Needs Assessment

Fallon Medical Complex "FMC" disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on their website (<u>www.fallonmedical.org</u>) as well as having copies available at the 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 FMC is utilizing their input. The Steering Committee, as well as the Board of Directors, will be encouraged to act as advocates in Fallon County as the facility seeks to address the healthcare needs of their community.

Furthermore, the board members of FMC will be directed to the hospital's website to view the complete assessment results and the implementation plan. FMC board members approved and adopted the plan on **August 7, 2019**. Board members are encouraged to familiarize themselves with the needs assessment report and implementation plan, so they can publicly promote the facility's plan to influence the community in a beneficial manner.

Written comments on this 2019-2022 Fallon Medical Complex Community Benefit Strategic Plan can be submitted to:

Administration Fallon Medical Complex P.O. Box 820 Baker, MT 59313

Contact April Bruha, FMC Administrative Assistant at (406) 778-3331, ext. 249 or albruha@fallonmedical.org with any questions.