

**Community Health Services Development (CHSD)  
Implementation Plan Report  
Draft Approval Form**

**Please Review Your Facility's Plan Carefully**

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.

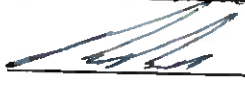
**Per IRS Form 990 Schedule H requirements, your facility is expected to perform the activities included in the Implementation Plan. Your facility is also responsible for:**

- a) Posting your community health needs assessment (CHNA) and your facility's Implementation Plan publicly – both "conspicuously" on your website as well as having a hard copy available at your facility should someone request to view either/both documents.
- b) Documenting approval of your facility's Implementation Plan by your facility's governing board. You must document the date upon which the plan was approved/adopted on the final page of the Implementation Plan in the "Dissemination" section.

**Healthcare Facility: Glendive Medical Center**  
**Date Draft was Received: Sept. 23, 2022**

*Do not assume everything is correct without proofing thoroughly.  
Be sure to complete and sign the Draft Approval Form.  
Please return draft approval form to the Montana Office of Rural Health.*

CEO Name (please print): Packer Powell Date: 9/26/22

CEO Signature: 

*By signing this form, I acknowledge my responsibilities as outlined above and have thoroughly reviewed and approve the Implementation Plan as drafted by the Montana Office of Rural Health.*

**The report is now the property of your healthcare facility. The Montana Office of Rural Health is not responsible for any changes found after the Draft Approval Form has been signed. If there are additional changes, you are responsible for making necessary corrections, alterations, or additions before publicly disseminating the Needs Assessment in some form and the Implementation Plan in its entirety.**

# IMPLEMENTATION PLAN

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## *Addressing Community Health Needs*



**Glendive  
Medical  
Center**

***Glendive, Montana***

***2022-2025***

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**1**

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**Table of Contents**

*The Implementation Planning Process*..... 3

*Prioritizing the Community Health Needs*..... 5

*GMC’s Existing Presence in the Community*..... 5

*List of Available Community Partnerships and Facility Resources to Address Needs*..... 6

*Dawson County Indicators* ..... 7

*Public Health and Underserved Populations Consultation Summaries* ..... 8

*Needs Identified and Prioritized*..... 10

*Prioritized Needs to Address* ..... 10

*Needs Unable to Address* ..... 11

*Executive Summary* ..... 12

*Implementation Plan Grid*..... 15

*Needs Not Addressed and Justification*..... 26

*Dissemination of Needs Assessment*..... 27

## The Implementation Planning Process

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

The Community Health Services Development (CHSD), community health needs assessment was performed in the spring of 2022 to determine the most important health needs and opportunities for Dawson County, Montana. The CHSD project is administrated by the Montana Office of Rural Health (MORH). “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 ([gmc.org/about-us/community-reports](http://gmc.org/about-us/community-reports)).

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

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

- **Mental and behavioral health**
- **Alcohol and substance abuse**
- **Cancer**

3

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In addressing the aforementioned issues, GMC seeks to:

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

**Facility Mission:** We are committed to caring, healing, and a healthier community.

**Values:** We support and nurture a culture of *Respect, Integrity, Compassion, and Excellence* (RICE).

**Vision:** We will be the quality leader for healthcare in the region through:

- Promoting patient centered care;
- Embracing a passionate commitment to exceptional quality and safety;
- Providing an exemplary patient experience;
- Attracting and retaining caring, innovative medical providers and employees;
- Achieving cost efficiency through progressive and effective resource management;
- Developing visionary leaders;
- Serving as a catalyst for a growing network of collaborative partners.

**Implementation Planning Committee Members:**

- Parker Powell, CEO - Glendive Medical Center (GMC)
- Jaime Shanks, Foundation and Marketing Director - GMC
- Danica Vaira, Executive Assistant - GMC
- Sam Hubbard, Vice President of Operations - GMC
- Jill Domek, Vice President of Clinical Services - GMC
- Shawna Dorwart, Vice President of Patient Care Services - GMC
- Bill Robinson, Chief Financial Officer - GMC

## Prioritizing the Community Health Needs

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

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

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

- Glendive Medical Center offers financial assistance to patients that do not have the ability to pay part or all of their hospital bills. Financial assistance is calculated on a sliding scale based on the Federal Poverty Guidelines published in the Federal Register each year, and number of households sharing the same income. Glendive Medical Center offers flexible payment plans with no credit check, 0% APR, and options to combine multiple bills and larger amounts into one monthly payment over an extended payment period.
- Providers of Glendive Medical Center go to local schools to provide information and presentations about various health topics.
- Patients at GMC have access to visiting specialists such as Cardiology, Dermatology, Psychiatry, Podiatry, Oncology, Ophthalmology, Neurology, Orthopedic Spine Specialist, Otorhinolaryngology (ENT), Podiatry, Neurosurgery, and Urology.
- Glendive Medical Center sponsors, promotes, and hosts a variety of events not limited to: Health Fairs and blood draws, the Dawson County Fair, Community Concert Association, Healthy Communities, Diabetes Support Group, Life Style Balance Pre-Diabetes program, Health screenings, Visit Glendive, C3 Meetings, Let's Get Squished Breast Cancer Awareness 5K, Building Active Glendive, Mental Health events, Corporate Sponsor of Chamber of Commerce, Alzheimer's Support Group, Baby Wellness Checks and Classes, Postpartum support group, Economic Development, and a Cancer outreach group.
- Many GMC employees serve on various boards and leadership positions in the community.

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

- Action for Eastern Montana
- A.W.A.R.E., Inc.
- Al-Anon & Alcoholics Anonymous (AA)
- Alzheimer Support Groups
- Baby Bistro – Glendive Medical Center
- Billings Clinic
- Boys & Girls Club of Richland County
- Boys & Girls Club of Dawson County
- Building Active Glendive
- The Cancer Outreach Center & American Cancer Society
- Cardiac/Pulmonary Rehabilitation – Glendive Medical Center
- Commodity Supplemental Food program
- Community Home Oxygen
- Dawson Co Extension
- Dawson Co Health Department
- Dawson Co Healthy Communities Coalition
- Dawson Co Housing Authority
- District II Alcohol & Drug
- Domestic Violence
- Eastern MT Community Mental Health Center
- Family Planning
- Glendive Chamber of Commerce & Agriculture
- Glendive Lions Club
- Glendive Public Schools
- Glendive Recreation Department
- Job Service
- Kiwanis
- Lifestyle Balance – Glendive Medical Center
- Makoshika Wellness
- Montana Office of Rural Health and Area Health Education Center (MORH/AHEC)
- Montana Hospital Association
- The Nurturing Tree
- The Nesting Place – Glendive Medical Center
- Richard Hadden’s book “Contented Cows Give Better Milk: The plain truth about employee relations and your bottom line”
- Rotary Club of Glendive
- Salvation Army
- Senior Citizens Center
- Watch East
- Youth Dynamics

### 3. Dawson County Indicators

#### Population Demographics

- 96.1% of Dawson County’s population is white, and 3.6% identifies as American Indian or Alaska Native.
- 15.6% of Dawson County’s population has disability status
- 18.6% of Dawson County’s population is 65 years and older.
- 9.9% of Dawson County’s population has Veteran status.
- 34.2% of Dawson County’s population are a high school graduate (includes equivalency) as their highest degree attained; 21.8% have some college, no degree.

#### Size of County and Remoteness

- 9,017 people in Dawson County
- 3.8 people per square mile

#### Socioeconomic Measures

- 9.0% of children live in poverty
- 11.1% of persons are below the federal poverty level
- 9.0% of adults (age<65) are uninsured; 5.0% of children less than age 18, are uninsured
- 6.5% of the population is enrolled in Medicaid

#### Select Health Measures

- 38.0% of adults are considered obese
- 28.0% of the adult population report physical inactivity
- 41.0% of adults living in frontier Montana report two or more chronic conditions.
- Montana’s veteran suicide rate (per 100,000 population) is 65.7 compared to 38.4 for the U.S.

#### Nearest Major Hospital

- Billings Clinic in Billings, MT - 222 miles from Glendive Medical Center



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

##### Name/Organization

Parker Powell, CEO Glendive Medical Center (GMC)

March 24, 2022

Jaime Shanks, GMC Marketing Director, Dawson County Healthy Communities Coalition Chairperson

Sam Hubbard, GMC VP of Operations

Bill Robinson, GMC CFO

Jill Domek, GMC VP of Clinical Services

Shawna Dorwart, GMC VP of Patient Care Services

Vernone Spencer, GMC Auxiliary Chairperson

Laureen Murphree, Dawson County Public Health Official

Terra Burman, Glendive Chamber of Commerce

Danica Vaira, GMC Executive Assistant

Kate Bosworth, GMC HR Director

##### Public and Community Health

- Breaking out social media into all modes (Facebook/Instagram/TikTok) so we can really identify where people are getting information.
- Adding in mental health providers instead of mental health center for services used other than the hospital, because there are quite a few.
- Also adding in private practice providers for the same above question.
- Payment assistance programs should remain in so we can gage if participants are utilizing those programs or even know about them.
- Similarly, keeping lactation/breastfeeding support in the survey for the same reason.
- We do have an obesity problem in the community, highlighting some of those programs/classes could be useful.

- We would like to leave COVID off of the survey as the topic is often polarizing and we may lose participants if included.
- Include privacy/confidentiality as an option for reasons for selecting hospital and primary care provider.
- Include question about affordable housing options to see what the community perspective and experience is like.

## Needs Identified and Prioritized

### Prioritized Needs to Address

1. 48.8% of survey respondents rated the general health of their community as “Somewhat healthy.”
2. The top three health concerns identified by survey respondents were: “Cancer” (46.9%), “Alcohol abuse/substance abuse” (44.5%), and “Mental health issues” (32.8%).
3. The top component of a healthy community identified by survey respondents is “Access to healthcare and other services” (48.4%).
4. 34.6% of survey respondents rated their knowledge of health services available through Glendive Medical Center as “fair” or “poor.”
5. Key informant interview participants expressed a desire for more outreach and awareness of local services.
6. 51.6% of survey respondents thought that “More specialists” would improve the community’s access to healthcare.
7. 9.4% of survey respondents shared that they had utilized a local mental health provider in the last three years.
8. 17.2% 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.
9. 31.7% of survey respondents thought that “More information about available services” would improve the community’s access to healthcare.
10. 22.2% of survey respondents thought that “Greater health education services” would improve the community’s access to healthcare.
11. Survey respondents indicated to what degree their life has been negatively affected a little by their own or someone else’s substance abuse issues, including alcohol, prescription, or other drugs: “A little” (19.7%), “Somewhat” (21.3%), and “A great deal” (3.1%).
12. Key informant interview participants noted concerns about mental health issues and subsequent need for additional resources to address mental health in the community. Participants shared that expanded telehealth, awareness of services, and working to reduce the stigma associated with accessing mental health services would be helpful.
13. Secondary data shows that 68.6% of women in Dawson County between the ages of 50-74 years of age had a mammography in the past two years compared to 73.4% for Montana.
14. Secondary data shows that Dawson County’s Breast Cancer age-adjusted incident rate is 126.6 per 100,000 population compared to 125.0 for Montana.

### *Needs Unable to Address*

*(See page 26 for additional information)*

1. 39.7% of survey respondents thought that “More primary care providers” would improve the community’s access to healthcare.
2. Key informant interview participants shared concerns related to navigating GMC’s billing system and accessing resources such as Medicaid and Supplemental Nutrition Assistance Program (SNAP) benefits that are typically offered through an Office of Public Assistance.
3. 10.2% of survey respondents reported that in the last year, cost was a barrier to getting or taking their medications regularly.
4. 36.2% of survey respondents reported that they do not feel that the community has adequate or affordable housing options available.

## 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 access to mental health services and reduce behavioral health disorders in our community.

**Strategy 1.1:** Implement an Integrated Behavioral Health program in the primary care setting.

- 1.1.1. Collaborate with Billings Clinic and the Montana Healthcare Foundation to implement the integrated behavioral health program into Glendive Medical Center’s (GMC) primary care setting.

**Strategy 1.2:** Improve access to mental health services available through GMC.

- 1.2.1. Explore expanding tele-psychiatry services to the surrounding communities to reduce the need to travel long distances to access mental health services.
- 1.2.2. Collaborate with the local school district(s) to provide mental health education and resources to adolescent students and their families.
- 1.2.3. Advocate for patients/employees who are struggling with their mental health through initiatives such as the National Alliance on Mental Illness’ (NAMI) “Pledge to Be Stigma Free.”

**Goal 2: Improve access to education, support, and treatment for alcohol/substance abuse programs and services.**

**Strategy 2.1:** Continue to offer alcohol and substance abuse programs and services throughout the service area.

- 2.1.1. Provide meeting space and other support of community events and programs providing support and education related to drug and alcohol abuse.
- 2.1.2. Continue partnership with local police departments on prescription drug drop off box which allows community to safely dispose of unused/unneeded drugs.
- 2.1.3. Provide educational materials in exam rooms, outpatient areas, and public media for providers, patients, and staff.
- 2.1.4. Expand chronic pain management clinic by creating marketing and outreach related to the program.
- 2.1.5. Explore the feasibility of implementing the Healing and Ending Addiction through Recovery and Treatment (HEART) program locally.

**Strategy 2.2:** Expand outreach regarding alcohol and substance use disorders in the community.

- 2.2.1. Provide GMC staff to engage in local community groups that are working to address alcohol and substance use disorders in Glendive and Dawson County.
- 2.2.2. Explore opportunities to partner with community stakeholders to provide education and prevention outreach (i.e., local schools, police, community mental health providers).

**Goal 3: Reduce the local cancer burden through early detection prevention measures and improve access to management.**

**Strategy 3.1:** Develop and implement a local breast cancer early detection program.

- 3.1.1.** Purchase and implement a nuclear medicine machine to support the local breast cancer screening program.
- 3.1.2.** Develop a partnership with Billings Clinic oncology in order to enhance patient continuity of care.
- 3.1.3.** Develop an education and outreach plan to promote the local breast cancer early detection program throughout the region (i.e., social media, newspaper, radio, website, community events, etc.).

**Strategy 3.2:** Implement evidence-based interventions to improve the utilization of cancer screening among community members.

- 3.2.1.** Implement evidence-based interventions to promote timely cancer screening among community members (i.e., breast, cervical, prostate, lung, etc.).
- 3.2.2.** Explore the feasibility of implementing provider level evidence-based interventions to increase cancer screening rates (i.e., motivational interviewing, referring to tobacco cessation resources and lifestyle management classes as necessary, etc.).

**Implementation Plan Grid**

**Goal 1:** Improve access to mental health services and reduce behavioral health disorders in our community.

**Strategy 1.1:** Implement an Integrated Behavioral Health program in the primary care setting.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
1.1.1. Collaborate with Billings Clinic and the Montana Healthcare Foundation to implement the integrated behavioral health program into Glendive Medical Center’s (GMC) primary care setting.	VP Operations, Primary care providers	3 year Process	CEO	Billings Clinic, Montana Healthcare Foundation	Resource and workforce limitations

**Needs Being Addressed by this Strategy:**

- 1. 48.8% of survey respondents rated the general health of their community as “Somewhat healthy.”
- 2. The top three health concerns identified by survey respondents were: “Cancer” (46.9%), “Alcohol abuse/substance abuse” (44.5%), and “Mental health issues” (32.8%).
- 3. The top component of a healthy community identified by survey respondents is “Access to healthcare and other services” (48.4%).

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

- Increase access to behavioral health services
- Improved health outcomes
- Services, policy, and resources development
- Improved access to high quality, coordinated care

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

- Monitor the progress of implementing the integrated behavioral health program
- Track the utilization of the integrated behavioral health program

**Measure of Success:** GMC will observe a decreased no show rate and increased rate of use for program services.



**Goal 1:** Improve access to mental health services and reduce behavioral health disorders in our community.

**Strategy 1.2:** Improve access to mental health services available through GMC.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
1.2.1. Explore expanding tele-psychiatry services to the surrounding communities to reduce the need to travel long distances to access mental health services.	VP Operations, CFO, Foundation Director	2023 3 <sup>rd</sup> Quarter	CEO	Regional health systems	Funding, staffing, and equipment Limitations
1.2.2. Collaborate with the local school district(s) to provide mental health education and resources to adolescent students and their families.	Foundation Director	2024 1 <sup>st</sup> Quarter	CEO	Local schools	Establishing the relationships Scheduling conflicts Resource limitations
1.2.3. Advocate for patients/employees who are struggling with their mental health through initiatives such as the National Alliance on Mental Illness’ (NAMI) “Pledge to Be Stigma Free.”	Administration , HR Director, Foundation Director	2022 4 <sup>th</sup> Quarter	CEO	NAMI, Montana Health Network	Time commitment Resource limitations

**Needs Being Addressed by this Strategy:**

- 1. 48.8% of survey respondents rated the general health of their community as “Somewhat healthy.”
- 2. The top three health concerns identified by survey respondents were: “Cancer” (46.9%), “Alcohol abuse/substance abuse” (44.5%), and “Mental health issues” (32.8%).
- 3. The top component of a healthy community identified by survey respondents is “Access to healthcare and other services” (48.4%).
- 4. 34.6% of survey respondents rated their knowledge of health services available through Glendive Medical Center as “fair” or “poor.”
- 5. Key informant interview participants expressed a desire for more outreach and awareness of local services.
- 7. 9.4% of survey respondents shared that they had utilized a local mental health provider in the last three years.

- 8. 17.2% 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.
- 9. 31.7% of survey respondents thought that “More information about available services” would improve the community’s access to healthcare.
- 10. 22.2% of survey respondents thought that “Greater health education services” would improve the community’s access to healthcare.
- 12. Key informant interview participants noted concerns about mental health issues and subsequent need for additional resources to address mental health in the community. Participants shared that expanded telehealth, awareness of services, and working to reduce the stigma associated with accessing mental health services would be helpful.

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

- Better knowledge and access for mental health services for the community.
- Providing mental health service to communities that do not currently provide it.
- Building community capacity
- Increased access to mental health services and resources
- Strengthen community partnerships
- Decrease societal stigma associated with mental illness
- Service, policy, and resource development

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

- Track progress towards expanding tele-psychiatry to surrounding communities.
- Track utilization of expanded tele-psychiatry services.
- Monitor the development of the partnership with the local school district(s).
- Track number and modes of GMC’s participation in mental health initiatives.
- Track community engagement with mental health initiatives.

**Measure of Success:** Decrease in the percentage of respondents identifying lack of mental health services as top health concern in next CHNA survey.

**Goal 2:** Improve access to education, support, and treatment for alcohol/substance abuse programs and services.

**Strategy 2.1:** Continue to offer alcohol and substance abuse programs and services throughout the service area.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
2.1.1. Provide meeting space and other support of community events and programs providing support and education related to drug and alcohol abuse.	Foundation Director	2022 3 <sup>rd</sup> Quarter	CEO	AA, Watch East, Eastern Montana Mental Health,	Infectious Disease Outbreak  Resource limitations
2.1.2. Continue partnership with local police departments on prescription drug drop off box which allows community to safely dispose of unused/unneeded drugs.	Foundation Director, Pharmacy Director	Twice per year	CEO	Local police department, public health department, local pharmacies	Workforce and resource limitations
2.1.3. Provide educational materials in exam rooms, outpatient areas, and public media for providers, patients, and staff.	Foundation Director	Ongoing	CEO	Public health department, H.E.A.R.T., AA, Watch East	Limited space in exam rooms and outpatient areas
2.1.4. Expand chronic pain management clinic by creating marketing and outreach related to the program.	VP of Clinical Services, Foundation Director	2022 4 <sup>th</sup> Quarter	CEO	N/A	Provider schedules may conflict with outreach location visits and PR/media interview opportunities.
2.1.5. Explore the feasibility of implementing the Healing and Ending Addiction through Recovery and Treatment (HEART) program locally.	CFO, CEO	2023 3 <sup>rd</sup> Quarter	CEO	Montana Department of Public Health and Human Services	Financial and workforce limitations  Scheduling conflicts

**Needs Being Addressed by this Strategy:**

- 1. 48.8% of survey respondents rated the general health of their community as “Somewhat healthy.”
- 2. The top three health concerns identified by survey respondents were: “Cancer” (46.9%), “Alcohol abuse/substance abuse” (44.5%), and “Mental health issues” (32.8%).
- 4. 34.6% of survey respondents rated their knowledge of health services available through Glendive Medical Center as “fair” or “poor.”
- 5. Key informant interview participants expressed a desire for more outreach and awareness of local services.
- 9. 31.7% of survey respondents thought that “More information about available services” would improve the community’s access to healthcare.
- 10. 22.2% of survey respondents thought that “Greater health education services” would improve the community’s access to healthcare.
- 11. Survey respondents indicated to what degree their life has been negatively affected a little by their own or someone else’s substance abuse issues, including alcohol, prescription, or other drugs: “A little” (19.7%), “Somewhat” (21.3%), and “A great deal” (3.1%).

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

- Increase knowledge of chronic pain management strategies and resources.
- Decrease number of unnecessary ED visits.
- Improve health outcomes.
- Build community capacity

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

- Track volume of pain patients each year.
- Track utilization with prescription drug drop off locations
- Track engagement with chronic pain management clinic
- Track progress towards implementing the HEART program

**Measure of Success:** Number of meetings held. GMC will continue to partner on the bi-annual drug disposal. Increase in patients seen through pain management program from 2023 to 2024.

**Goal 2:** Improve access to education, support, and treatment for alcohol/substance abuse programs and services.

**Strategy 2.2:** Expand outreach regarding alcohol and substance use disorders in the community.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
2.2.1. Provide GMC staff to engage in local community groups that are working to address alcohol and substance use disorders in Glendive and Dawson County.	Foundation Director	Ongoing	CEO	Watch East, AA, Eastern Montana Mental Health, Local Health Department, Ministerial Association, Domestic Violence	Scheduling Conflicts with providers and local community groups Infectious Disease Outbreak Resource limitations
2.2.2. Explore opportunities to partner with community stakeholders to provide education and prevention outreach (i.e., local schools, police, community mental health providers).	Foundation Director	Ongoing	CEO	Local schools, police department, community mental health providers, Local health department	Scheduling Conflicts with providers and local community groups Infectious Disease Outbreak Resource limitations

**Needs Being Addressed by this Strategy:**

- 1. 48.8% of survey respondents rated the general health of their community as “Somewhat healthy.”
- 2. The top three health concerns identified by survey respondents were: “Cancer” (46.9%), “Alcohol abuse/substance abuse” (44.5%), and “Mental health issues” (32.8%).
- 4. 34.6% of survey respondents rated their knowledge of health services available through Glendive Medical Center as “fair” or “poor.”
- 5. Key informant interview participants expressed a desire for more outreach and awareness of local services.
- 9. 31.7% of survey respondents thought that “More information about available services” would improve the community’s access to healthcare.

- 10. 22.2% of survey respondents thought that “Greater health education services” would improve the community’s access to healthcare.
- 11. Survey respondents indicated to what degree their life has been negatively affected a little by their own or someone else’s substance abuse issues, including alcohol, prescription, or other drugs: “A little” (19.7%), “Somewhat” (21.3%), and “A great deal” (3.1%).

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

- Increased access to LCSW/LAC services in clinic.
- Increase staff knowledge of available community events and programs.
- Improved health outcomes
- Build community capacity
- Strengthen community partnerships

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

- Track GMC participation in community events and programs related to alcohol and substance abuse.
- Track partnerships developed
- Track attendance at education opportunities
- Track number and mode of education and outreach opportunities
- Track engagement with outreach opportunities

**Measure of Success:** GMC will have an increase partnership/events in service area.

**Goal 3:** Reduce the local cancer burden through early detection prevention measures and improve access to management.

**Strategy 3.1:** Develop and implement a local breast cancer early detection program.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
3.1.1. Purchase and implement a nuclear medicine machine to support the local breast cancer screening program.	CFO, CEO	Completed	CEO, Board	N/A	Financial, workforce, and resource limitations
3.1.2. Develop a partnership with Billings Clinic oncology in order to enhance patient continuity of care.	VP of Clinical Services, Dr. Dinnan	2023 2 <sup>nd</sup> Quarter	CEO, Board	Billings Clinic	Workforce and resource limitations
3.1.3. Develop an education and outreach plan to promote the local breast cancer early detection program throughout the region (i.e., social media, newspaper, radio, website, community events, etc.).	Foundation Director	2023 3 <sup>rd</sup> Quarter	CEO	Newspaper, radio, regional clinics and hospitals, Local health departments	Delays in receiving up-to-date early detection information to share  Budget constraints to promote regionally on multiple platforms.

**Needs Being Addressed by this Strategy:**

- 1. 48.8% of survey respondents rated the general health of their community as “Somewhat healthy.”
- 2. The top three health concerns identified by survey respondents were: “Cancer” (46.9%), “Alcohol abuse/substance abuse” (44.5%), and “Mental health issues” (32.8%).
- 3. The top component of a healthy community identified by survey respondents is “Access to healthcare and other services” (48.4%).
- 4. 34.6% of survey respondents rated their knowledge of health services available through Glendive Medical Center as “fair” or “poor.”
- 5. Key informant interview participants expressed a desire for more outreach and awareness of local services.
- 6. 51.6% of survey respondents thought that “More specialists” would improve the community’s access to healthcare.
- 9. 31.7% of survey respondents thought that “More information about available services” would improve the community’s access to healthcare.

- 10. 22.2% of survey respondents thought that “Greater health education services” would improve the community’s access to healthcare.
- 13. Secondary data shows that 68.6% of women in Dawson County between the ages of 50-74 years of age had a mammography in the past two years compared to 73.4% for Montana.
- 14. Secondary data shows that Dawson County’s Breast Cancer age-adjusted incident rate is 126.6 per 100,000 population compared to 125.0 for Montana.

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

- Early detection of breast cancer
- Improved health outcomes
- Increased community knowledge of services and resources
- Increase in mammogram visits.

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

- Track mammogram visits per quarter.
- Track the development of the education and outreach plan
- Track modes of education opportunities
- Track number of and participation at education opportunities
- Track the engagement with the outreach opportunities
- Monitor breast cancer incidence rates on subsequent CHNA
- Monitor mammography screening rates on subsequent CHNA

**Measure of Success:** Compare mammogram visits per quarter to previous years.



**Goal 3:** Reduce the local cancer burden through early detection prevention measures and improve access to management.

**Strategy 3.2:** Implement evidence-based interventions to improve the utilization of cancer screening among community members.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
3.2.1. Implement evidence-based interventions to promote timely cancer screening among community members (i.e., breast, cervical, prostate, lung, etc.).	Foundation Director, Clinic Manager, Chronic Care Manager, VP of Clinical Services	Ongoing	CEO	ACO, Billings Clinic	Workforce, financial, and resource limitations
3.2.2. Explore the feasibility of implementing provider level evidence-based interventions to increase cancer screening rates (i.e., motivational interviewing, referring to tobacco cessation resources and lifestyle management classes as necessary, etc.).	Clinic Manager, Chronic Care Manager, VP of Clinical Services	Ongoing	CEO	ACO, Cerner	Workforce, financial, and resource limitations

**Needs Being Addressed by this Strategy:**

- 1. 48.8% of survey respondents rated the general health of their community as “Somewhat healthy.”
- 2. The top three health concerns identified by survey respondents were: “Cancer” (46.9%), “Alcohol abuse/substance abuse” (44.5%), and “Mental health issues” (32.8%).
- 3. The top component of a healthy community identified by survey respondents is “Access to healthcare and other services” (48.4%).
- 4. 34.6% of survey respondents rated their knowledge of health services available through Glendive Medical Center as “fair” or “poor.”
- 5. Key informant interview participants expressed a desire for more outreach and awareness of local services.
- 6. 51.6% of survey respondents thought that “More specialists” would improve the community’s access to healthcare.
- 9. 31.7% of survey respondents thought that “More information about available services” would improve the community’s access to healthcare.
- 10. 22.2% of survey respondents thought that “Greater health education services” would improve the community’s access to healthcare.

- 13. Secondary data shows that 68.6% of women in Dawson County between the ages of 50-74 years of age had a mammography in the past two years compared to 73.4% for Montana.
- 14. Secondary data shows that Dawson County's Breast Cancer age-adjusted incident rate is 126.6 per 100,000 population compared to 125.0 for Montana.

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

- Early detection of cancer
- Improved health outcomes
- Increased community knowledge of services and resources

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

- Monitor the implementation of interventions to improve cancer screening rates
- Monitor cancer incidence rates on subsequent CHNA
- Monitor cancer screening rates on subsequent CHNA

**Measure of Success:** Percentage of cancer screenings meets the ACO requirement per year.

**Needs Not Addressed and Justification**

Identified health needs unable to address by GMC	Rationale
<p>1. 39.7% of survey respondents thought that “More primary care providers” would improve the community’s access to healthcare.</p>	<ul style="list-style-type: none"> <li>Recruitment efforts continue for primary care providers in Family Medicine. In 2022, we moved our Physician Assistant from ER to Family Practice to help fill the gap for patients who need primary care.</li> </ul>
<p>2. Key informant interview participants shared concerns related to navigating GMC’s billing system and accessing resources such as Medicaid and Supplemental Nutrition Assistance Program (SNAP) benefits that are typically offered through an Office of Public Assistance.</p>	<ul style="list-style-type: none"> <li>GMC has implemented digital billing and a simpler online navigation system that includes text and email reminders. GMC Patient Advocacy Liaison works to help patients navigate insurance and provides forms for Medicaid for patients when necessary.</li> </ul>
<p>3. 10.2% of survey respondents reported that in the last year, cost was a barrier to getting or taking their medications regularly.</p>	<ul style="list-style-type: none"> <li>Providers have helped find coupons to afford prescriptions when patients do not have insurance to cover the cost. GMC Foundation offers assistance for ER patients with cost of med packs.</li> </ul>
<p>4. 36.2% of survey respondents reported that they do not feel that the community has adequate or affordable housing options available.</p>	<ul style="list-style-type: none"> <li>We provide housing for new providers and travelers that begin work at GMC and help them find affordable housing once their term for housing ends.</li> </ul>

## Dissemination of Needs Assessment

Glendive Medical Center “GMC” disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on their website ([gmc.org/about-us/community-reports](http://gmc.org/about-us/community-reports)) 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 GMC is utilizing their input. The Steering Committee, as well as the Board of Directors, will be encouraged to act as advocates in Dawson County as the facility seeks to address the healthcare needs of their community.

Furthermore, the board members of GMC will be directed to the hospital’s website to view the complete assessment results and the implementation plan. GMC board members approved and adopted the plan on **September 29, 2022**. Board members are encouraged to familiarize themselves with the needs assessment report and implementation plan, so they can publicly promote the facility’s plan to influence the community in a beneficial manner.

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

Marketing Department  
Glendive Medical Center  
202 Prospect Drive  
Glendive, Montana 59330

Please reach out to GMC’s Marketing Department at 406-345-2627 or [marketing@gmc.org](mailto:marketing@gmc.org) with and questions.