



2022

COMMUNITY HEALTH NEEDS ASSESSMENT

Sidney, Montana

*Assessment conducted by **Sidney Health Center** in
cooperation with the Montana Office of Rural Health*



MONTANA
STATE UNIVERSITY

Office of Rural Health
Area Health
Education Center

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INTRODUCTION

Introduction

Sidney Health Center (SHC) is a nonprofit community based 25-bed Critical Access Hospital (CAH) based in Sidney, Montana. SHC serves Richland County of approximately 2,100 square miles and provides medical services to a service population of approximately 11,000 people. SHC is the only hospital in Richland County and houses both clinic and hospital services in the same facility as well as providing outreach clinic services in Fairview at the MonDak Family Clinic. SHC’s



primary service area includes the communities of Sidney, Fairview, Crane, Savage and Lambert; with most of the County’s populated communities located along US 200 or US 16. Richland County has a low population density and is considered a Frontier (six or less people per square mile) by the US Department of Health and Human Services. For further demographic, socioeconomic and other related county and state data, please see Appendix C to review the Secondary Data Analysis.

Sidney Health Center provides a complete range of healthcare services to the residents of Richland County and surrounding areas. In addition to their clinic appointments, SHC campus offers hospital, cancer care center, sleep center, retail pharmacy with durable medical equipment and extended care facility offering services from birth to end-of-life. SHC also oversees The Lodge, an assisted living facility, and outreach services include Richland County Ambulance services.

Mission: To help you achieve your highest level of health and well-being.

Vision: To redefine rural healthcare through patient centered innovation and collaboration.

Core Values: Sidney Health Center will be guided by the following principles:

- Integrity
- Compassion
- Accountability
- Respect
- Excellence

Sidney Health Center participated in the Community Health Services Development (CHSD) Project administrated by the Montana Office of Rural Health (MORH) and funded in part through the Montana Health Research and Education Foundation (MHREF) Flex Grant. Community involvement in steering committee meetings and key informant interviews enhance community engagement in the assessment process.

In April 2022, SHC's service area was surveyed about its healthcare system. This report shows the results of the survey in both narrative and chart formats. A copy of the survey instrument is included at the end of this report (Appendix E). Readers are invited to familiarize themselves with the survey instrument and the subsequent findings. The narrative report touches on the highlights while the charts present data for virtually every question asked.

Please note we are able to compare some of the 2022 survey data with data from previous surveys conducted in partnership with the Montana Office of Rural Health in 2013 and 2019. If any statistical significance exists, it will be reported. The significance level was set at 0.05.

Health Assessment Process

A steering committee was convened to assist Sidney Health Center in conducting CHSD. A diverse group of community members representing various organizations and populations within the community (ex. public health, elderly, uninsured) came together in February 2022. For a list of all steering committee members and their affiliations, see Appendix A. The Steering Committee met twice during the CHSD process; first to discuss health concerns in the community and offer their perspective in designing the survey instrument, and again to review results of the CHNA and to assist in the prioritization of health needs.

Survey Methodology

Survey Instrument

In March 2022, surveys were mailed out to the residents in Richland County, Montana. Survey respondents had the ability to complete the survey mailed to them, or via an online survey hosted at Montana State University's HELPS Lab web portal. The survey was based on a design that has been used extensively in the states of Washington, Wyoming, Alaska, Montana, and Idaho. The survey was designed to provide each facility with information from local residents regarding:

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

Sampling

Sidney Health Center provided a list of aggregated outpatient and inpatient admissions. Those zip codes with the greatest number of admissions were selected to be included in the survey. A random list of 800 residents was then selected with the assistance of the MSU HELPS lab. Residence was stratified in the initial sample selection so that each area would be represented in proportion to the overall served population and the proportion of past admissions. Although the survey samples were proportionately selected, actual surveys returned from each population area varied, which may result in slightly less proportional results. See survey distribution table on the next page.

Zip Code	Population ¹	Community Name	Total Distribution	# Male	# Female
59270	7467	Sidney	590	295	295
59221	1573	Fairview	108	54	54
59262	771	Savage	44	22	22
59218	994	Culbertson	30	15	15
59243	290	Lambert	28	14	14
Total	51255		800	400	400

¹ US Census Bureau - American Community Survey (2019)

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

Information Gaps- Data

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



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

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

Limitations in Survey & Focus Group Methodology

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

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



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

Survey Implementation

In March 2022, a survey, cover letter on Sidney Health Center’s letterhead with the Chief Executive Officer’s signature, and a postage paid envelope were mailed to 800 randomly selected residents in the hospital’s service area. A news release was sent to the local newspaper as well as social media postings prior to the survey distribution announcing that Sidney Health Center would be conducting a community health services survey throughout the region in cooperation with the Montana Office of Rural Health.

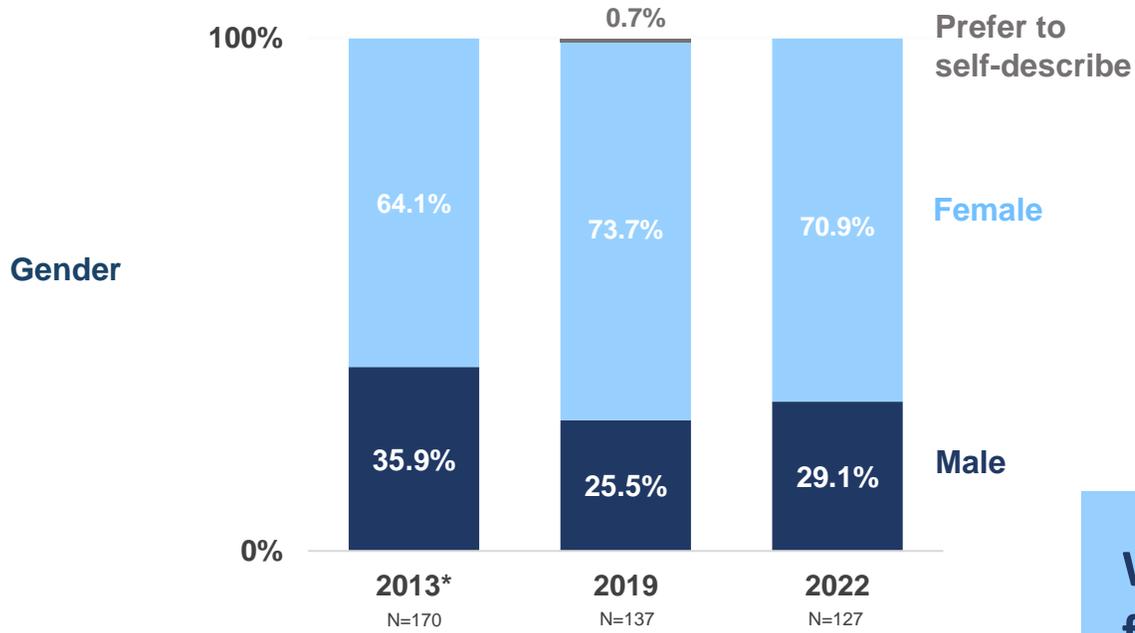
One hundred twenty-seven surveys were returned out of 800. Of those 800 surveys, 65 surveys were returned undeliverable for a 17.3% response rate. From this point on, the total number of surveys will be out of 735. Based upon the sample size, we can be 95% confident that the responses to the survey questions are representative of the service area population, plus or minus 8.65%.

Survey Respondent Demographics

A total of 735 surveys were distributed amongst Sidney Health Center’s service area. One-hundred twenty-seven were completed for a 17.3% response rate. The following tables indicate the demographic characteristics of the survey respondents. Information on location, gender, age, and employment is included. Percentages indicated on the tables and graphs are based upon the total number of responses for each individual question, as some respondents did not answer all questions.

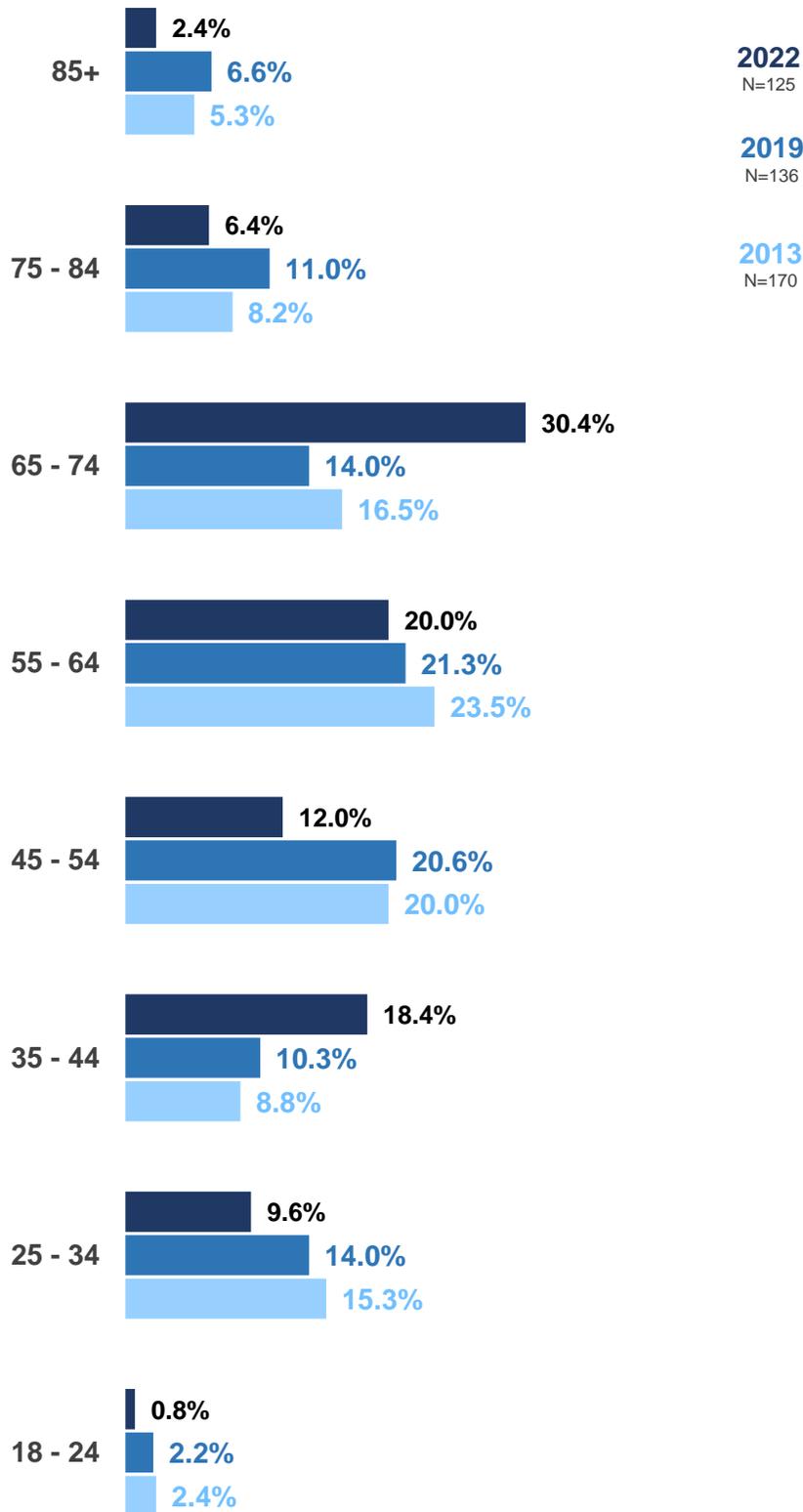
Place of Residence	2013 % (n)	2019 % (n)	2022 % (n)
Number of respondents	165	136	127
59270 Sidney	79.4% (131)	69.9% (95)	78.0% (99)
59221 Fairview	13.3% (22)	17.6% (24)	9.4% (12)
59262 Savage	4.8% (8)	4.4% (6)	6.3% (8)
59243 Lambert	1.8% (3)	3.7% (5)	3.9% (5)
59218 Culbertson		4.4% (6)	2.4% (3)
Other	0.6% (1)	0.0% (0)	0.0% (0)
TOTAL	99.9% (165)	100.0% (136)	100.0% (127)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year.



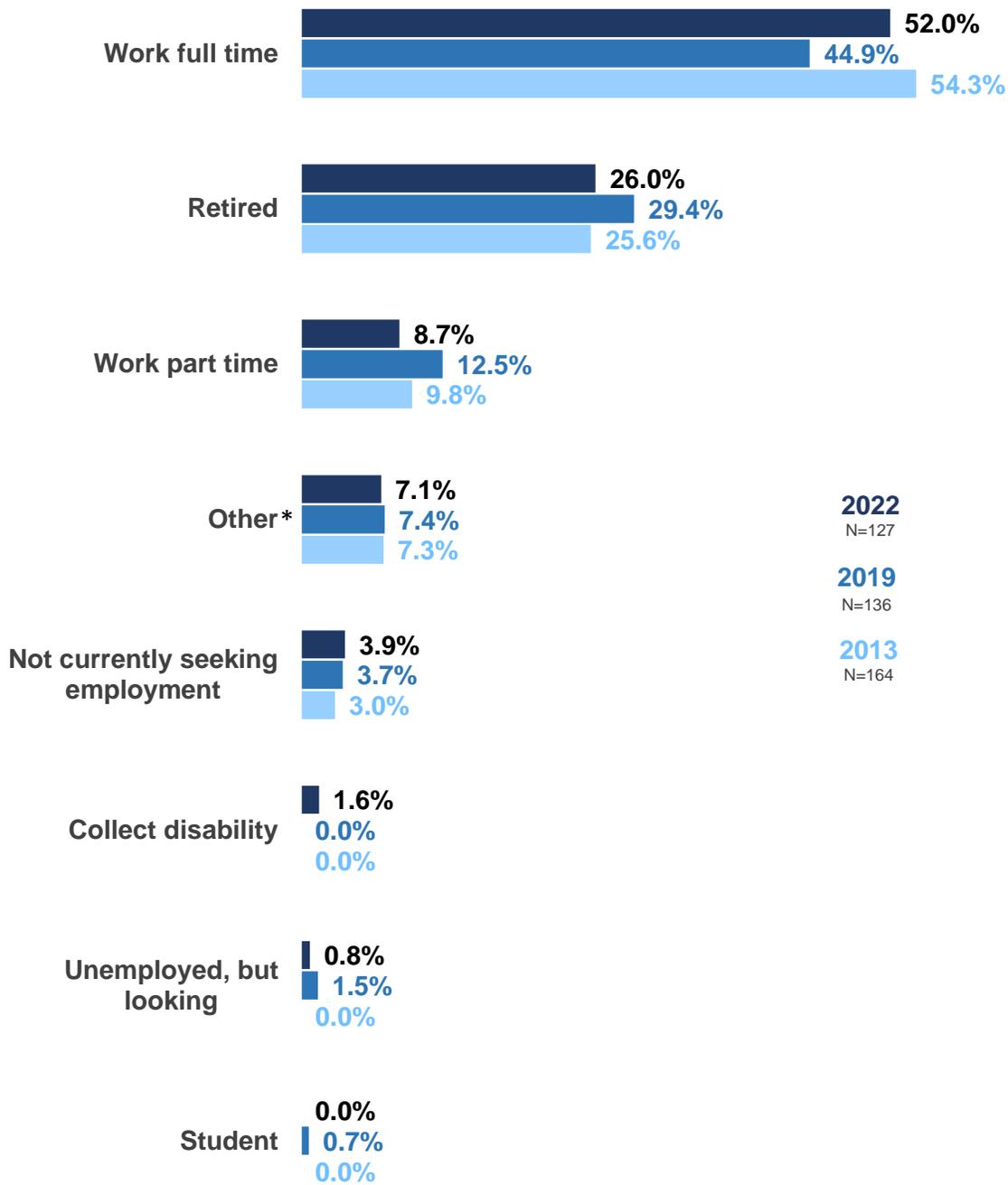
Women are frequently the healthcare decision makers for their families and more likely to respond to a health-related survey.

Age of respondents for all years of the survey



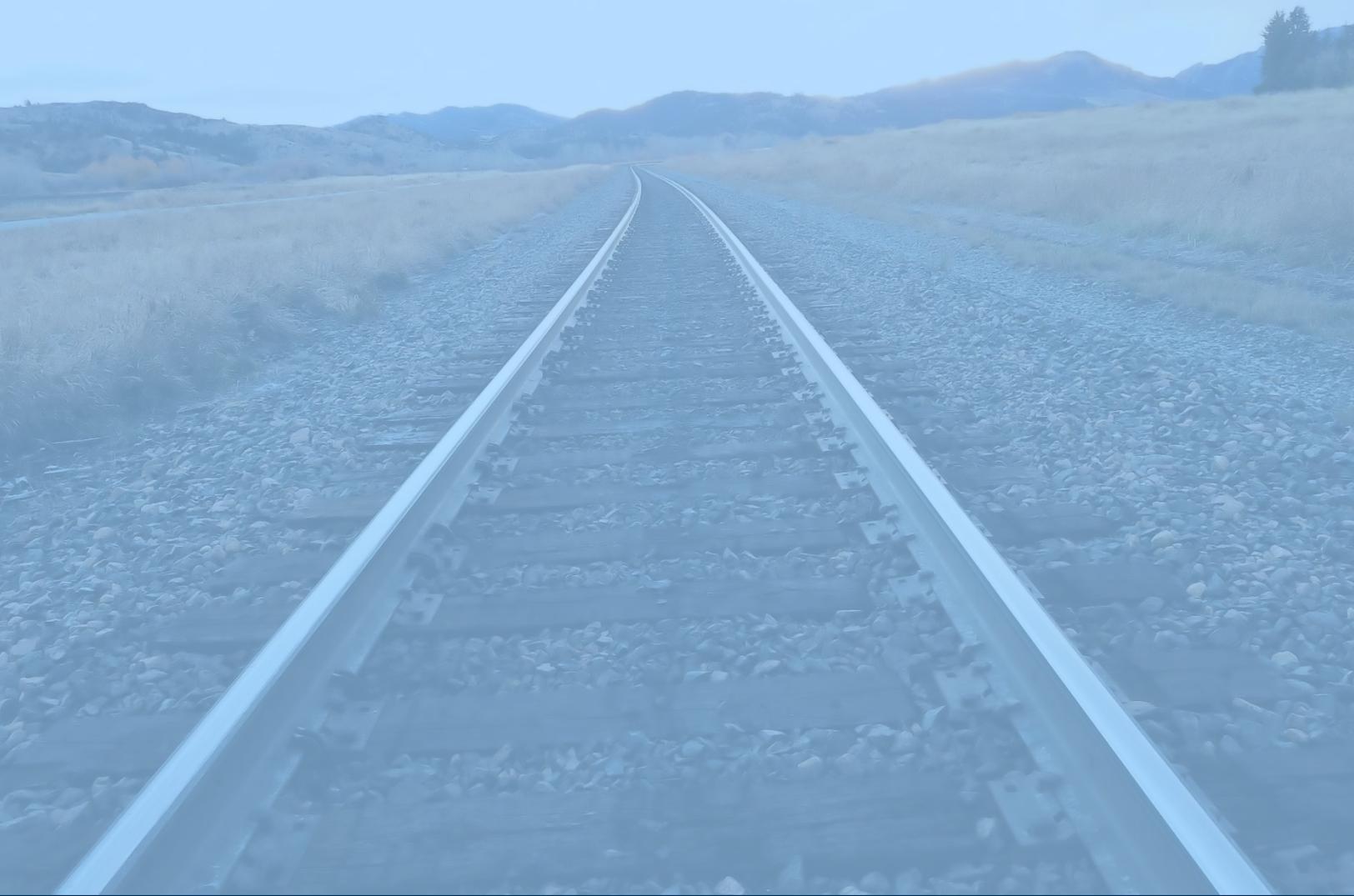
The increasing percentage of aging rural residents is a statewide trend and will likely have a significant impact on demand for future healthcare services.

The majority of 2022 respondents are retired or work full time.



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

"Other" comments included: Self-employed (3)



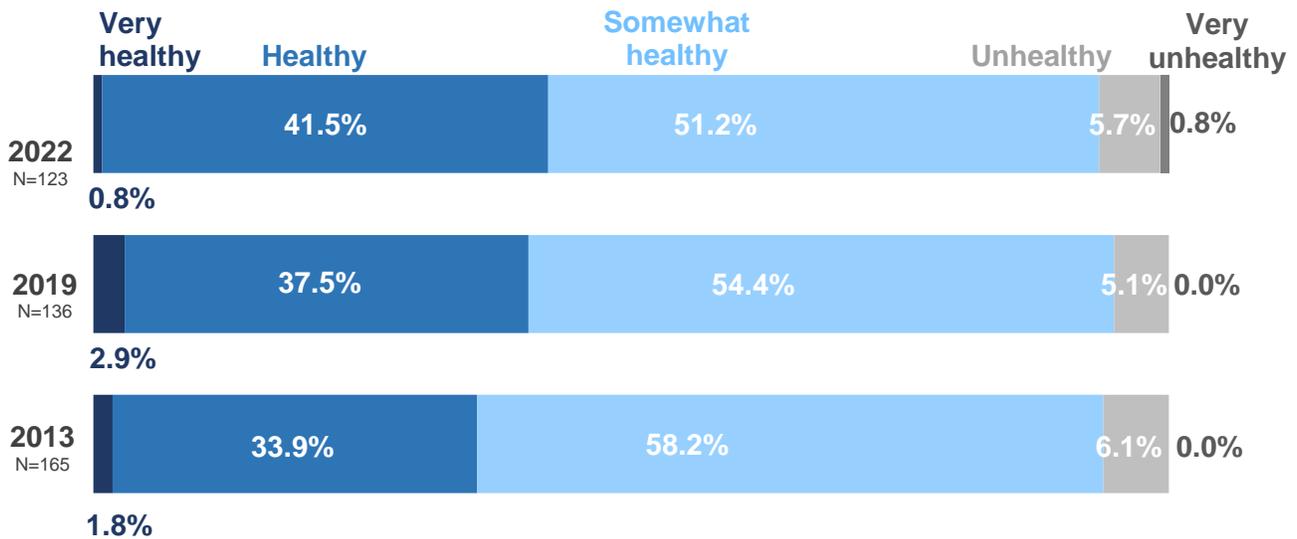
SURVEY RESULTS

Survey Results

Rating of Healthy Community (Question 1)

Respondents were asked to indicate how they would rate the general health of their community. Fifty-one-point two percent of respondents (n=63) rated their community as “Somewhat healthy,” and 41.5% of respondents (n=51) felt their community was “Healthy.” Only one respondent indicated they felt their community was “Very Unhealthy.”

Over half of 2022 respondents rate their community as **somewhat healthy**



Over 90% of survey respondents feel their community is somewhat healthy or healthy.

Health Concerns for Community (Question 2)

Respondents were asked what they felt the three most serious health concerns were in their community. The top identified health concern was “Cancer” at 36.2% (n=46), which experienced a significant change since the last assessment. “Drug abuse” was also a high priority at 34.6% (n=44), followed closely by “Alcohol abuse/substance abuse” at 33.9% (n=43).

Health Concern	2013 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	170	137	127	
Cancer	51.8% (88)	47.4% (65)	36.2% (46)	■
Drug abuse	32.9% (56)	21.2% (29)	34.6% (44)	■
Alcohol abuse/substance abuse	57.1% (97)	39.4% (54)	33.9% (43)	■
Overweight/obesity	35.3% (60)	20.4% (28)	26.8% (34)	■
Depression/anxiety	5.9% (10)	15.3% (21)	24.4% (31)	■
Lack of mental health professionals	9.4% (16)	20.4% (28)	20.5% (26)	■
Mental health issues	8.2% (14)	14.6% (20)	19.7% (25)	■
Heart disease	11.2% (19)	13.1% (18)	11.8% (15)	□
Tobacco use (cigarettes, vaping, smokeless)	17.6% (30)	10.9% (15)	11.8% (15)	□
Lack of access to healthcare	8.8% (15)	5.1% (7)	11.0% (14)	□
Work/economic stress			9.4% (12)	□
Diabetes	14.1% (24)	14.6% (20)	8.7% (11)	□
Suicide		21.9% (30)	7.9% (10)	■
Social isolation/loneliness		2.9% (4)	6.3% (8)	□
Respiratory disease (asthma, COPD)		2.2% (3)	5.5% (7)	□
Alzheimer’s/dementia		5.1% (7)	4.7% (6)	□
Lack of exercise	12.4% (21)	8.8% (12)	3.9% (5)	■
COVID-19			3.1% (4)	□
Lack of dental care	1.8% (3)	0.7% (1)	2.4% (3)	□
Child abuse/neglect	2.4% (4)	1.5% (2)	1.6% (2)	□
Domestic violence	2.4% (4)		0.8% (1)	□
Motor vehicle accidents	21.2% (36)	4.4% (6)	0.8% (1)	■
Poor air/water quality	4.7% (8)	1.5% (2)	0.8% (1)	□
Recreation related accidents/injuries	2.4% (4)	0.0% (0)	0.8% (1)	□
Work related accidents/injuries	12.4% (21)	0.7% (1)	0.8% (1)	■
Hunger		0.0% (0)	0.0% (0)	□

Table continued on next page

Stroke	1.8% (3)	1.5% (2)	0.0% (0)	<input type="checkbox"/>
Traumatic experience(s)		0.7% (1)	0.0% (0)	<input type="checkbox"/>
Other*	0.6% (1)	5.8% (8)	3.9% (5)	<input checked="" type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three serious health concerns, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=2) who selected over the allotted amount were moved to "Other."

Components of a Healthy Community (Question 3)

Respondents were asked to identify the three most important things for a healthy community. Forty-eight percent of respondents (n=61) indicated that "Access to healthcare and other services" are important for a healthy community, followed closely by "Good jobs and a healthy economy" at 44.9% (n=57), and "Strong family life" at 29.9% (n=38).

Components of a Healthy Community	2013 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	170	137	127	
Access to healthcare and other services	57.6% (98)	44.5% (61)	48.0% (61)	<input type="checkbox"/>
Good jobs and a healthy economy	30.0% (51)	42.3% (58)	44.9% (57)	<input checked="" type="checkbox"/>
Strong family life	29.4% (50)	35.0% (48)	29.9% (38)	<input type="checkbox"/>
Affordable housing	36.5% (62)	23.4% (32)	27.6% (35)	<input checked="" type="checkbox"/>
Healthy behaviors and lifestyles	31.8% (54)	27.0% (37)	26.8% (34)	<input type="checkbox"/>
Low crime/safe neighborhoods	25.9% (44)	16.1% (22)	16.5% (21)	<input type="checkbox"/>
Religious or spiritual values	23.5% (40)	21.2% (29)	15.7% (20)	<input type="checkbox"/>
Good schools	18.2% (31)	25.5% (35)	15.0% (19)	<input type="checkbox"/>
Community involvement	6.5% (11)	7.3% (10)	11.8% (15)	<input type="checkbox"/>
Access to childcare/after school programs		9.5% (13)	10.2% (13)	<input type="checkbox"/>
Access to healthy foods			9.4% (12)	<input type="checkbox"/>
Clean environment (air/water)	17.1% (29)	13.1% (18)	7.9% (10)	<input type="checkbox"/>
Healthy food choices	11.8% (20)	3.6% (5)	6.3% (8)	<input checked="" type="checkbox"/>
Tolerance for diversity	4.7% (8)	4.4% (6)	4.7% (6)	<input type="checkbox"/>
Transportation services	1.2% (2)	2.2% (3)	4.7% (6)	<input type="checkbox"/>

Table continued on next page

Arts and cultural events	1.2% (2)	0.7% (1)	2.4% (3)	<input type="checkbox"/>
Low level of domestic violence	2.9% (5)	2.2% (3)	2.4% (3)	<input type="checkbox"/>
Parks and recreation	2.9% (5)	6.6% (9)	2.4% (3)	<input type="checkbox"/>
Low death and disease rates	0.6% (1)	1.5% (2)	0.8% (1)	<input type="checkbox"/>
Other*	1.8% (3)	1.5% (2)	3.9% (5)	<input type="checkbox"/>

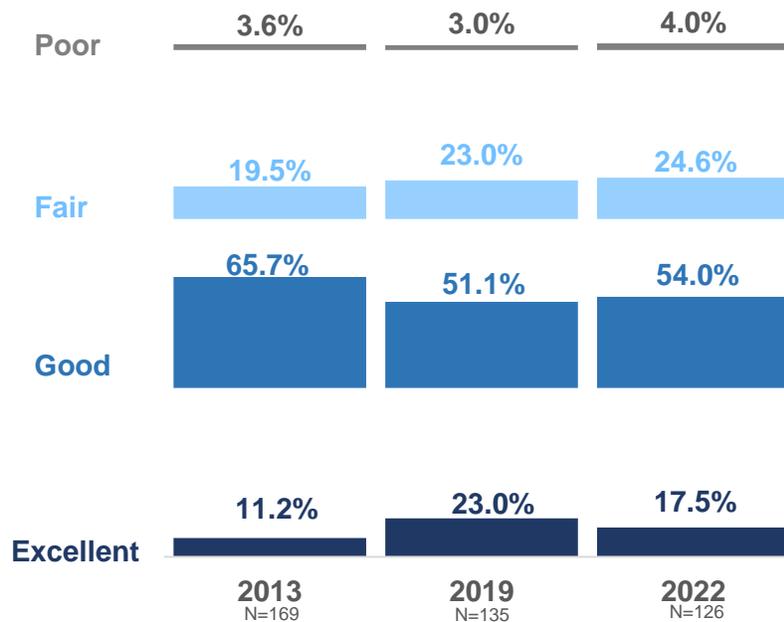
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three components of a healthy community, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=2) who selected over the allotted amount were moved to “Other.”

“Other” comments included: “Good mail and phone service”

Knowledge of Health Services (Question 4)

Respondents were asked to rate their knowledge of the health services available through Sidney Health Center. Fifty-four percent (n=68) of respondents rated their knowledge of health services as “Good.” “Fair” was selected by 24.6% percent (n=31), and “Excellent” was chosen by 17.5% of respondents (n=22).

Nearly half of 2022 respondents rated their knowledge of services as good



How Respondents Learn of Health Services (Question 5)

The most frequently indicated method of learning about available services was “Friends/family” at 68.0% (n=85). “Healthcare provider” was next at 60.8% (n=76), followed by “Word of mouth/reputation” at 56.8% (n=71).

How Respondents Learn about Community Health Services	2013 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	170	137	125	
Friends/family	66.5% (113)	65.0% (89)	68.0% (85)	<input type="checkbox"/>
Healthcare provider	43.5% (74)	55.5% (76)	60.8% (76)	<input checked="" type="checkbox"/>
Word of mouth/reputation	54.7% (93)	57.7% (79)	56.8% (71)	<input type="checkbox"/>
Social media	2.9% (5)	28.5% (39)	35.2% (44)	<input checked="" type="checkbox"/>
Website/internet	11.8% (20)	19.0% (26)	28.0% (35)	<input checked="" type="checkbox"/>
Newspaper	46.5% (79)	48.2% (66)	27.2% (34)	<input checked="" type="checkbox"/>
Public Health	10.6% (18)	17.5% (24)	16.8% (21)	<input type="checkbox"/>
Mailings/newsletter	13.5% (23)	26.3% (36)	15.2% (19)	<input checked="" type="checkbox"/>
Radio	11.2% (19)	9.5% (13)	10.4% (13)	<input type="checkbox"/>
Chamber of Commerce		4.4% (6)	5.6% (7)	<input type="checkbox"/>
Television	12.9% (22)	8.8% (12)	4.0% (5)	<input checked="" type="checkbox"/>
Presentations	4.7% (8)	3.6% (5)	0.8% (1)	<input type="checkbox"/>
Other	4.7% (8)	3.6% (5)	2.4% (3)	<input type="checkbox"/>

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

“Other” comments included: “At work”

View a cross tabulation of how respondents learn with how they rate their knowledge on p. 84

Utilized Community Health Resources (Question 6)

Respondents were asked which community health resources they had used in the last three years. “Pharmacy” was the most frequently utilized community health resource at 81.5% (n=101). The “Dentist” was utilized by 79.0% (n=98) of respondents, followed by “Eye doctor” at 76.6% (n=95).

Use of Community Health Resources	2013 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	170	137	124	
Pharmacy	75.3% (128)	78.1% (107)	81.5% (101)	<input type="checkbox"/>
Dentist	68.2% (116)	76.6% (105)	79.0% (98)	<input type="checkbox"/>
Eye doctor	63.5% (108)	77.4% (106)	76.6% (95)	<input checked="" type="checkbox"/>
Chiropractor	34.7% (59)	36.5% (50)	42.7% (53)	<input type="checkbox"/>
Massage		29.9% (41)	24.2% (30)	<input type="checkbox"/>
Fitness center/trainer	23.5% (40)	26.3% (36)	22.6% (28)	<input type="checkbox"/>
Public Health	21.8% (37)	18.2% (25)	20.2% (25)	<input type="checkbox"/>
Private clinic			12.1% (15)	<input type="checkbox"/>
Telehealth			12.1% (15)	<input type="checkbox"/>
Mental health	4.1% (7)	8.8% (12)	8.9% (11)	<input type="checkbox"/>
Medical spa		1.5% (2)	4.8% (6)	<input type="checkbox"/>
Certified health coach		1.5% (2)	4.0% (5)	<input type="checkbox"/>
Pregnancy center			3.2% (4)	<input type="checkbox"/>
Senior center		8.0% (11)	3.2% (4)	<input type="checkbox"/>
Food bank		1.5% (2)	2.4% (3)	<input type="checkbox"/>
Occupational health clinic			2.4% (3)	<input type="checkbox"/>
Acupuncture		4.4% (6)	1.6% (2)	<input type="checkbox"/>
Home care services		2.9% (4)	0.0% (0)	<input type="checkbox"/>
Meals on Wheels		0.7% (1)	0.0% (0)	<input type="checkbox"/>
Substance abuse services/AA, NA		2.9% (4)	0.0% (0)	<input type="checkbox"/>
Other	4.1% (7)	4.4% (6)	4.0% (5)	<input type="checkbox"/>

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

Improve Community’s Access to Healthcare (Question 7)

Respondents were asked to indicate what they felt would improve their community’s access to healthcare. The majority of respondents (51.6%, n=64) reported that “Expanded same-day clinic availability” would make the greatest improvement. Fifty percent of respondents (n=62) indicated “More primary care providers” would improve access which was a significant decrease compared to previous years, followed closely by “More specialists” at 45.2% (n=56).

Expanded same-day clinic availability would make the greatest improvement

What Would Improve Community Access to Healthcare	2013 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	170	137	124	
Expanded same-day clinic availability			51.6% (64)	<input type="checkbox"/>
More primary care providers	64.7% (110)	56.9% (78)	50.0% (62)	<input checked="" type="checkbox"/>
More specialists	58.2% (99)	62.8% (86)	45.2% (56)	<input checked="" type="checkbox"/>
Improved quality of care	28.2% (48)	18.2% (25)	33.9% (42)	<input checked="" type="checkbox"/>
Health insurance assistance		19.0% (26)	32.3% (40)	<input checked="" type="checkbox"/>
Payment assistance programs (healthcare expenses)			31.5% (39)	<input type="checkbox"/>
Access to health insurance		21.9% (30)	26.6% (33)	<input type="checkbox"/>
More information about available services		23.4% (32)	21.0% (26)	<input type="checkbox"/>
Telehealth	7.1% (12)	12.4% (17)	18.5% (23)	<input checked="" type="checkbox"/>
Outpatient services expanded hours	54.7% (93)	47.4% (65)	15.3% (19)	<input checked="" type="checkbox"/>
Greater health education services			13.7% (17)	<input type="checkbox"/>
Health education resources	11.2% (19)	8.0% (11)	7.3% (9)	<input type="checkbox"/>
Transportation assistance	5.3% (9)	10.9% (15)	4.8% (6)	<input type="checkbox"/>
Cultural sensitivity	1.2% (2)	2.2% (3)	1.6% (2)	<input type="checkbox"/>
Interpreter services	1.8% (3)	2.9% (4)	0.8% (1)	<input type="checkbox"/>
Other	4.7% (8)	6.6% (9)	7.3% (9)	<input type="checkbox"/>

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

“Other” comments included: “Improved pediatrics” and “Mental Health Services”

Interest in Educational Classes/Programs (Question 8)

Respondents were asked if they would be interested in any educational classes/programs made available to the community. The most frequently selected class/program was “Weight loss” at 41.8% (n=46). Interest in “Health and wellness” followed with 35.5% (n=39), while 31.8% of respondents (n=35) were interested in “Women’s health.”

Interest in Classes or Programs	2013 % (n)	2019 % (n)	2022 % (n)
Number of respondents	170	137	110
Weight loss	32.9% (56)	28.5% (39)	41.8% (46)
Health and wellness	30.6% (52)	27.0% (37)	35.5% (39)
Women’s health	22.9% (39)	31.4% (43)	31.8% (35)
Fitness	36.5% (62)	27.7% (38)	30.9% (34)
Health insurance education (Medicare/Medicaid/Private)	22.4% (38)	25.5% (35)	30.0% (33)
Nutrition	27.6% (47)	27.0% (37)	27.3% (30)
Mental health	8.8% (15)	15.3% (21)	26.4% (29)
First aid/CPR	27.6% (47)	19.7% (27)	21.8% (24)
Diabetes	19.4% (33)	10.2% (14)	19.1% (21)
Grief counseling	11.2% (19)	11.7% (16)	18.2% (20)
Chronic disease management		6.6% (9)	16.4% (18)
Cancer	17.1% (29)	13.9% (19)	15.5% (17)
Heart disease	14.1% (24)	4.4% (6)	15.5% (17)
Living will/Advanced directives		12.4% (17)	15.5% (17)
Men’s health	16.5% (28)	5.1% (7)	13.6% (15)
Support groups	8.2% (14)		13.6% (15)
Alzheimer’s	16.5% (28)	8.8% (12)	11.8% (13)
Parenting	7.6% (13)	11.7% (16)	10.0% (11)
Caregiver training		10.9% (15)	9.1% (10)
Smoking/tobacco cessation	10.0% (17)	3.6% (5)	9.1% (10)
Pulmonary health	10.0% (17)	4.4% (6)	8.2% (9)
Alcohol/substance abuse	10.0% (17)	3.6% (5)	3.6% (4)

Table continued on next page

Lactation/breastfeeding support		4.4% (6)	2.7% (3)
Prenatal	4.7% (8)	3.6% (5)	2.7% (3)
Other	1.8% (3)	2.2% (3)	3.6% (4)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents were asked to pick all classes or programs that are of interest, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Support for arthritis”

Interest in Support Groups (Question 9)

Respondents were asked if they would be interested in any support groups if made available to the community. The most frequently selected support group was “Stress management” at 48.5% (n=47). “Weight loss” was the next most desired support group at 46.4% (n=45), followed by “Depression/anxiety” at 36.1% (n=35).

Desired Support Groups	2013 % (n)	2019 % (n)	2022 % (n)
Number of respondents	0	137	97
Stress management		23.4% (32)	48.5% (47)
Weight loss		21.9% (30)	46.4% (45)
Depression/anxiety		20.4% (28)	36.1% (35)
Diabetes		8.0% (11)	19.6% (19)
Grief		11.7% (16)	14.4% (14)
Cancer		12.4% (17)	11.3% (11)
Caregivers		10.9% (15)	11.3% (11)
Veterans		6.6% (9)	11.3% (11)
Disability		5.1% (7)	7.2% (7)
Suicide survivor		7.3% (10)	7.2% (7)
Other		7.3% (10)	9.3% (9)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents could select any of the desired support groups listed, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Dialysis” and “Parenting support”

Desired Local Health Services (Question 10)

Respondents were asked to indicate which additional services they would utilize if available locally. Respondents expressed the most interest in “Chronic pain management” at 37.8% (n=37). Twenty-nine point six percent (n=29) respondents were interested in “Urology,” while 22.4% (n=22, each) desire “Acupuncture” and “Ophthalmology” locally.

Desired Local Services	2013 % (n)	2019 % (n)	2022 % (n)
Number of respondents	170	137	98
Chronic pain management		14.6% (20)	37.8% (37)
Urology		10.9% (15)	29.6% (29)
Acupuncture	20.0% (34)	20.4% (28)	22.4% (22)
Ophthalmology			22.4% (22)
Oral surgery		15.3% (21)	22.4% (22)
Psychiatrist			19.4% (19)
Vein doctor	14.1% (24)	11.7% (16)	6.1% (6)
Fertility			5.1% (5)
Other	2.9% (5)	6.6% (9)	12.2% (12)

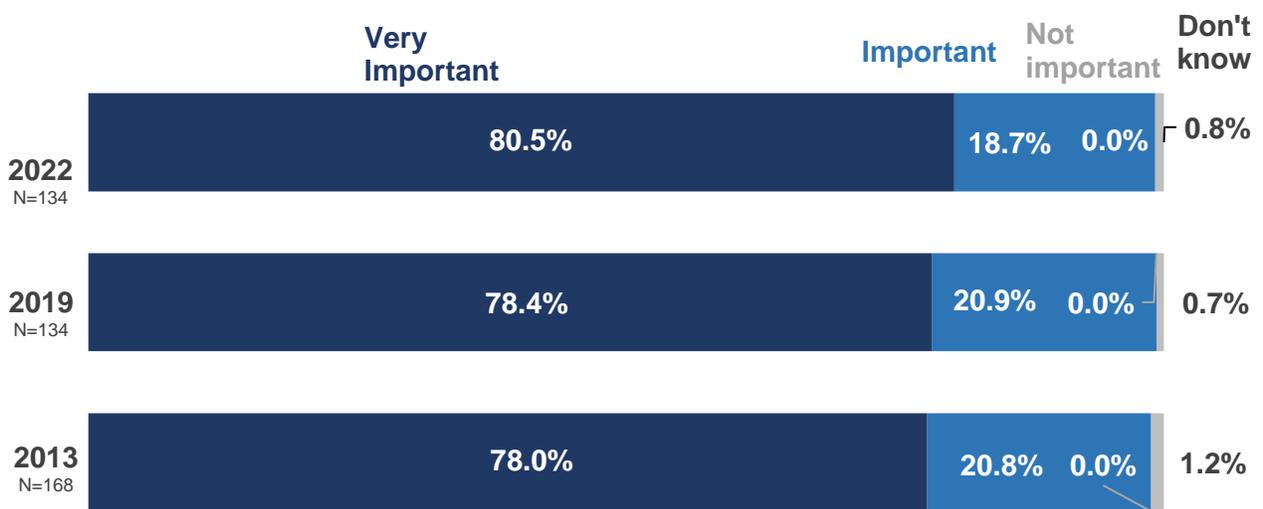
Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents were asked to pick all desired local healthcare services that are of interest, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Dialysis Treatment”, “Allergist”, and “Dermatology”

Economic Importance of Healthcare (Question 11)

The majority of respondents (80.5%, n=99) indicated that local healthcare providers and services (i.e., hospitals, clinics, nursing homes, assisted living, etc.) are “Very important” to the economic well-being of the area. Eighteen point seven percent of respondents (n=23) indicated they are “Important,” and no respondents felt they are not important.

99.2% of 2022 respondents think local providers and healthcare services are **very important or **important** to Sidney's economic well-being**



Utilization of Preventive Services (Question 12)

Respondents were asked if they had utilized any of the preventive services listed in the past year. “Flu shot/immunizations was selected by 60.2% of respondents (n=74), followed closely by “Dental exam” at 56.1% (n=69). Fifty-five point three percent of respondents (n=68) indicated they had “Birthday lab work.” Survey respondents could select all services that applied.

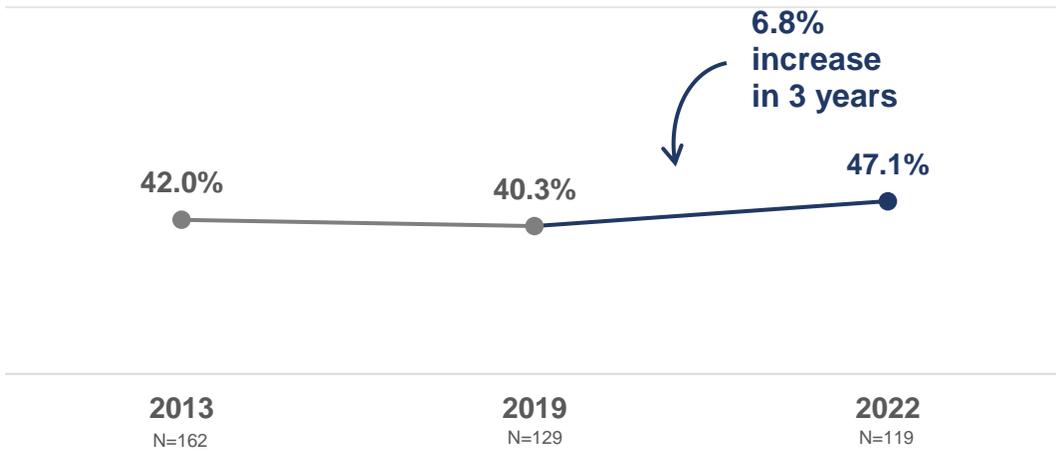
Use of Preventive Services	2013 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	170	137	123	
Flu shot/immunizations	53.5% (91)	56.2% (77)	60.2% (74)	<input type="checkbox"/>
Dental exam		65.7% (90)	56.1% (69)	<input type="checkbox"/>
Birthday lab work	51.2% (87)	56.9% (78)	55.3% (68)	<input type="checkbox"/>
Health checkup	44.1% (75)	56.2% (77)	48.8% (60)	<input type="checkbox"/>
Vision check		57.7% (79)	48.0% (59)	<input type="checkbox"/>
Blood pressure check	30.0% (51)	40.9% (56)	35.8% (44)	<input type="checkbox"/>
Mammography	24.1% (41)	35.0% (48)	30.1% (37)	<input type="checkbox"/>
Cholesterol check	20.0% (34)	32.1% (44)	25.2% (31)	<input type="checkbox"/>
Pap test	19.4% (33)	23.4% (32)	19.5% (24)	<input type="checkbox"/>
Hearing check		13.9% (19)	17.1% (21)	<input type="checkbox"/>
Colonoscopy	8.2% (14)	18.2% (25)	16.3% (20)	<input checked="" type="checkbox"/>
Prostate (PSA)	16.5% (28)	13.9% (19)	15.4% (19)	<input type="checkbox"/>
Children’s checkup/Well baby	6.5% (11)	10.2% (14)	10.6% (13)	<input type="checkbox"/>
None	11.8% (20)	3.6% (5)	8.1% (10)	<input checked="" type="checkbox"/>
Mental health counseling		6.6% (9)	7.3% (9)	<input type="checkbox"/>
Other	1.8% (3)	2.2% (3)	1.6% (2)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents could select any of the preventive services listed, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

Delay of Services (Question 13)

Forty-seven point one percent of respondents (n=56) reported that they or a member of their household thought they needed healthcare services but did not get them or had to delay getting them. Fifty-two point nine percent of respondents (n=63) felt they were able to get the healthcare services they needed without delay.

Nearly half of the respondents delayed or did not receive needed services



View a cross tabulation of where respondents live and 'delay of healthcare services' on p. 85

Reason for Not Receiving/Delaying Needed Services (Question 14)

For those who indicated they were unable to receive or had to delay services (n=56), the reason most cited was that they “Could not get an appointment” (48.2%, n=27). “Too long to wait for an appointment” was selected by 39.3% (n=22), while 30.4% of respondents (n=17) indicated “It cost too much.”

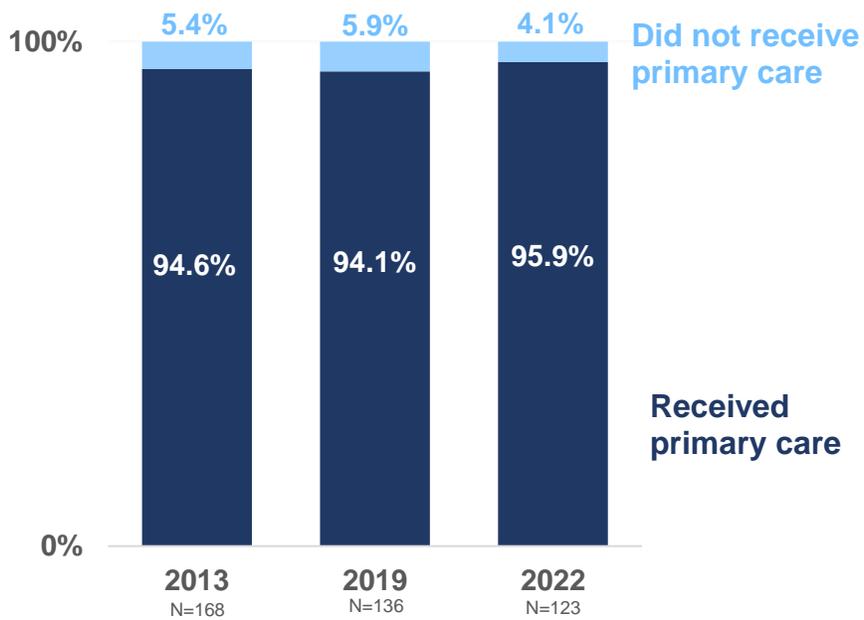
Reasons for Delay in Receiving Needed Healthcare	2013 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	68	52	56	
Could not get an appointment	57.4% (39)	46.2% (24)	48.2% (27)	<input type="checkbox"/>
Too long to wait for an appointment	42.6% (29)	51.9% (27)	39.3% (22)	<input type="checkbox"/>
It cost too much	48.5% (33)	25.0% (13)	30.4% (17)	<input checked="" type="checkbox"/>
COVID-19 barriers/concerns			21.4% (12)	<input type="checkbox"/>
Office wasn't open when I could go	17.6% (12)	11.5% (6)	16.1% (9)	<input type="checkbox"/>
Don't like doctors or other providers	11.8% (8)	13.5% (7)	14.3% (8)	<input type="checkbox"/>
My insurance didn't cover it	8.8% (6)	13.5% (7)	14.3% (8)	<input type="checkbox"/>
No insurance	19.1% (13)	5.8% (3)	10.7% (6)	<input type="checkbox"/>
Could not get off work	1.5% (1)	5.8% (3)	8.9% (5)	<input type="checkbox"/>
It was too far to go	4.4% (3)	5.8% (3)	7.1% (4)	<input type="checkbox"/>
Not treated with respect	8.8% (6)	5.8% (3)	7.1% (4)	<input type="checkbox"/>
Too busy, not a priority		5.8% (3)	3.6% (2)	<input type="checkbox"/>
Transportation problems	2.9% (2)	0.0% (0)	3.6% (2)	<input type="checkbox"/>
Didn't know where to go	2.9% (2)	13.5% (7)	1.8% (1)	<input checked="" type="checkbox"/>
Had no one to care for the children	2.9% (2)	3.8% (2)	1.8% (1)	<input type="checkbox"/>
Too nervous or afraid	4.4% (3)	7.7% (4)	1.8% (1)	<input type="checkbox"/>
Language barrier	1.5% (1)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Unsure if services were available	4.4% (3)	1.9% (1)	0.0% (0)	<input type="checkbox"/>
Other*	16.2% (11)	19.2% (10)	7.1% (4)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate the top three reasons for a delay in seeking healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=4) who selected over the allotted amount were moved to “Other.”

Primary Care Services (Question 15)

Ninety-five point nine percent of respondents (n=118) indicated they or someone in their household had been seen by a primary care provider (such as a family physician, physician assistant, or nurse practitioner) for healthcare services in the past three years. Four point one percent of respondents (n=5) indicated they had not received primary care.

Primary care utilization has remained consistent since the 2013 assessment



Location of Primary Care Services (Question 16)

Of the 118 respondents who indicated receiving primary care services in the previous three years, 59.3% (n=70) reported receiving care in Sidney, and 11.0% of respondents (n=13) went to Fairview. Nineteen respondents were moved to “other” due to selecting more than one primary care provider location.

Location of Primary Care Provider	2013 % (n)	2019 % (n)	2022 % (n)
Number of respondents	148	127	118
Sidney	83.1% (123)	73.2% (93)	59.3% (70)
Fairview	6.1% (9)	8.7% (11)	11.0% (13)
Billings			5.1% (6)
Culbertson		1.6% (2)	2.5% (3)
Glendive	2.7% (4)	0.8% (1)	1.7% (2)
Miles City		0.8% (1)	1.7% (2)
Williston, ND	4.7% (7)	3.1% (4)	0.8% (1)
Bismarck, ND		0.8% (1)	0.0% (0)
Minot, ND		0.0% (0)	0.0% (0)
VA		0.8% (1)	0.0% (0)
Watford City, ND		0.0% (0)	0.0% (0)
Other*	3.4% (5)	10.2% (13)	17.8% (21)
TOTAL	100.0% (148)	100.0% (127)	99.9% (118)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. *Respondents (N=19) who selected over the allotted amount were moved to “Other.”

View a cross tabulation of where respondents live with where they utilize primary care services on p. 86

Reasons for Primary Care Provider Selection (Question 17)

Those respondents who indicated they or someone in their household had been seen by a primary care provider within the past three years were asked to indicate why they chose that primary care provider. “Prior experience with clinic” was the most frequently selected reason at 47.5% (n=56) followed by “Clinic/provider’s reputation for quality” at 40.7% (n=48), and “Closest to home” at 30.5% (n=36).

Reasons for Selecting Primary Care Provider	2013 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	159	128	118	
Prior experience with clinic	40.9% (65)	49.2% (63)	47.5% (56)	<input type="checkbox"/>
Clinic/provider’s reputation for quality	20.8% (33)	42.2% (54)	40.7% (48)	<input checked="" type="checkbox"/>
Closest to home	48.4% (77)	50.0% (64)	30.5% (36)	<input checked="" type="checkbox"/>
Recommended by family or friends	23.9% (38)	19.5% (25)	27.1% (32)	<input type="checkbox"/>
Appointment availability	36.5% (58)	34.4% (44)	26.3% (31)	<input type="checkbox"/>
Referred by physician or other provider	13.2% (21)	13.3% (17)	15.3% (18)	<input type="checkbox"/>
Length of waiting room time	8.2% (13)	10.2% (13)	5.1% (6)	<input type="checkbox"/>
Cost of care	3.8% (6)	3.9% (5)	2.5% (3)	<input type="checkbox"/>
Required by insurance plan/in-network provider	4.4% (7)	3.1% (4)	2.5% (3)	<input type="checkbox"/>
Indian Health Services	0.0% (0)	0.0% (0)	0.8% (1)	<input type="checkbox"/>
VA/Military requirement	0.6% (1)	1.6% (2)	0.8% (1)	<input type="checkbox"/>
Other	7.5% (12)	7.0% (9)	12.7% (15)	<input type="checkbox"/>

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

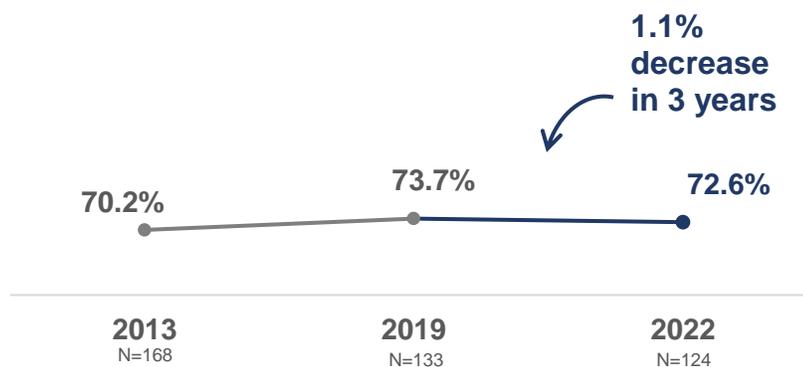
“Other” comments included: “Keeps specialist updated” and “Attentive and trustworthy”

View a cross tabulation of where respondents utilize primary care services with their reasons for selecting their provider on p. 87

Hospital Care Services (Question 18)

Respondents were asked if they or someone in their household had received hospital care in the last three years. Hospitalization was quantified as hospitalized overnight, day surgery, obstetrical care, rehabilitation, radiology, or emergency care. Seventy-two point six percent of respondents (n=90) reported that they or a member of their family had received hospital care during the previous three years, and 27.4% (n=34) had not received hospital services.

The majority of respondents report utilization of hospital services



Location of Hospital Services (Question 19)

The 90 respondents who indicated receiving hospital care in the last three years, shared which hospital they use most often. Sixty-eight point nine percent (n=62) reported receiving care in Sidney, while 18.9% (n=17) received services in Billings. Seven respondents were moved to “Other” for selecting more than one hospital location.

Hospital Used Most Often	2013 % (n)	2019 % (n)	2022 % (n)
Number of respondents	115	96	90
Sidney	67.8% (78)	75.0% (72)	68.9% (62)
Billings	15.7% (18)	8.3% (8)	18.9% (17)
Bismarck, ND		0.0% (0)	1.1% (1)
Glendive	4.3% (5)	2.1% (2)	1.1% (1)

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Miles City		0.0% (0)	1.1% (1)
Williston, ND	9.6% (11)	2.1% (2)	1.1% (1)
Minot, ND		0.0% (0)	0.0% (0)
VA		1.0% (1)	0.0% (0)
Watford City, ND		0.0% (0)	0.0% (0)
Other*	2.6% (3)	11.5% (11)	7.8% (7)
TOTAL	100.0% (115)	100.0% (96)	100.0% (90)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. *Respondents (N=7) who selected over the allotted amount were moved to "Other."

"Other" comments included: "Denver, CO" and "Aurora, CO"

View a cross tabulation of where respondents live with where they utilize hospital services on p. 88

Reasons for Hospital Selection (Question 20)

Of the 90 respondents who had a personal or family experience at a hospital within the past three years, the primary reason given for selecting the facility used most often was “Closest to home” at 67.8% (n=61). “Prior experience with hospital” was selected by 36.7% of the respondents (n=33), and 31.1% (n=28) chose “Referred by physician or other provider.”

Reasons for Selecting Hospital	2013 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	118	98	90	
Closest to home	72.9% (86)	71.4% (70)	67.8% (61)	<input type="checkbox"/>
Prior experience with hospital	41.5% (49)	31.6% (31)	36.7% (33)	<input type="checkbox"/>
Referred by physician or other provider	33.9% (40)	24.5% (24)	31.1% (28)	<input type="checkbox"/>
Emergency, no choice	38.1% (45)	36.7% (36)	25.6% (23)	<input type="checkbox"/>
Hospital’s reputation for quality	28.8% (34)	26.5% (26)	24.4% (22)	<input type="checkbox"/>
Closest to work	14.4% (17)	13.3% (13)	12.2% (11)	<input type="checkbox"/>
Cost of care	5.9% (7)	4.1% (4)	4.4% (4)	<input type="checkbox"/>
Recommended by family or friends	12.7% (15)	11.2% (11)	4.4% (4)	<input type="checkbox"/>
Required by insurance plan/In-network hospital	7.6% (9)	4.1% (4)	4.4% (4)	<input type="checkbox"/>
Financial assistance programs		1.0% (1)	3.3% (3)	<input type="checkbox"/>
VA/Military requirement	0.8% (1)	1.0% (1)	3.3% (3)	<input type="checkbox"/>
Privacy/confidentiality			2.2% (2)	<input type="checkbox"/>
Indian Health Services		1.0% (1)	1.1% (1)	<input type="checkbox"/>
Other*	6.8% (8)	9.2% (9)	6.7% (6)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three reasons for selecting a hospital, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=3) who selected over the allotted amount were moved to “Other.”

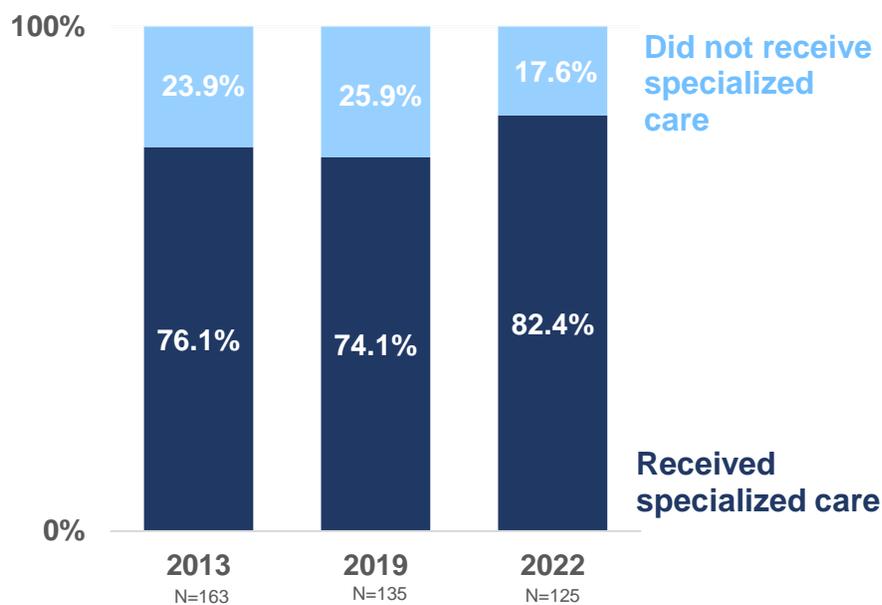
“Other” comments included: “Location of specialist”

View a cross tabulation of where respondents utilize hospital services with their reasons for selecting that facility p. 89

Specialty Care Services (Question 21)

Respondents were asked if they or someone in their household had seen a healthcare specialist in the last three years. Specialty care was quantified as a health provider other than their primary care provider or family doctor. Eighty-two point four percent of the respondents (n=103) indicated they or a household member had seen a healthcare specialist during the past three years, while 17.6% (n=22) indicated they had not.

Majority of the 2022 respondents saw a specialist in the past 3 years



Location of Healthcare Specialist(s) (Question 22)

Of the 103 respondents who indicated they saw a healthcare specialist in the past three years, 65.0% (n=67) sought care in Billings. Forty point eight percent of respondents (n=42) utilized specialty services in Sidney, while 17.5% of respondents (n=18) received specialty care in Williston, ND.

Location of Specialist	2013 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	124	100	103	
Billings	50.0% (62)	59.0% (59)	65.0% (67)	<input type="checkbox"/>
Sidney	58.9% (73)	44.0% (44)	40.8% (42)	<input checked="" type="checkbox"/>
Williston, ND	27.4% (34)	14.0% (14)	17.5% (18)	<input checked="" type="checkbox"/>
Glendive		10.0% (10)	11.7% (12)	<input type="checkbox"/>
Miles City		1.0% (1)	10.7% (11)	<input checked="" type="checkbox"/>
Bismarck, ND	4.0% (5)	13.0% (13)	4.9% (5)	<input checked="" type="checkbox"/>
Minot, ND		6.0% (6)	4.9% (5)	<input type="checkbox"/>
Watford City, ND		1.0% (1)	1.0% (1)	<input type="checkbox"/>
VA		2.0% (2)	0.0% (0)	<input type="checkbox"/>
Other	18.5% (23)	8.0% (8)	13.6% (14)	<input type="checkbox"/>

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

“Other” comments included: “Bozeman, MT (2)”, “Denver, CO (2)”, and “Miles City”

Type of Healthcare Specialist Seen (Question 23)

The survey respondents (n=103) saw a wide array of healthcare specialists in the past three years. The most frequently utilized specialist was a “Cardiologist” at 27.2% (n=28). A “Dentist” was seen by 25.2% of respondents (n=26) followed by the “Optometrist” at 20.4% (n=21). Respondents were asked to choose all that apply, so the percentages do not equal 100%.

Type of Specialists Seen	2013 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	124	100	103	
Cardiologist	16.1% (20)	20.0% (20)	27.2% (28)	<input type="checkbox"/>
Dentist	45.2% (56)	23.0% (23)	25.2% (26)	<input checked="" type="checkbox"/>
Optometrist		17.0% (17)	20.4% (21)	<input type="checkbox"/>
General surgeon	17.7% (22)	18.0% (18)	19.4% (20)	<input type="checkbox"/>
OB/GYN	18.5% (23)	15.0% (15)	16.5% (17)	<input type="checkbox"/>
Orthopedic surgeon	15.3% (19)	18.0% (18)	16.5% (17)	<input type="checkbox"/>
Gastroenterologist	5.6% (7)	6.0% (6)	15.5% (16)	<input checked="" type="checkbox"/>
Ophthalmologist	9.7% (12)	11.0% (11)	12.6% (13)	<input type="checkbox"/>
Urologist	11.3% (14)	12.0% (12)	12.6% (13)	<input type="checkbox"/>
Chiropractor	28.2% (35)	10.0% (10)	11.7% (12)	<input checked="" type="checkbox"/>
Dermatologist	11.3% (14)	18.0% (18)	11.7% (12)	<input type="checkbox"/>
Physical therapist	13.7% (17)	13.0% (13)	10.7% (11)	<input type="checkbox"/>
Radiologist	15.3% (19)	8.0% (8)	10.7% (11)	<input type="checkbox"/>
Mental health counselor	3.2% (4)	7.0% (7)	9.7% (10)	<input type="checkbox"/>
Audiologist	5.6% (7)	6.0% (6)	8.7% (9)	<input type="checkbox"/>
Neurologist	8.1% (10)	9.0% (9)	8.7% (9)	<input type="checkbox"/>
Oncologist	9.7% (12)	5.0% (5)	8.7% (9)	<input type="checkbox"/>
Rheumatologist	4.0% (5)	3.0% (3)	8.7% (9)	<input type="checkbox"/>
ENT (ear/nose/throat)	8.1% (10)	13.0% (13)	7.8% (8)	<input type="checkbox"/>
Pediatrician	6.5% (8)	4.0% (4)	5.8% (6)	<input type="checkbox"/>
Allergist	3.2% (4)	7.0% (7)	4.9% (5)	<input type="checkbox"/>

Table continued on the next page.

Neurosurgeon	5.6% (7)	3.0% (3)	4.9% (5)	<input type="checkbox"/>
Pulmonologist	1.6% (2)	5.0% (5)	4.9% (5)	<input type="checkbox"/>
Endocrinologist	6.5% (8)	7.0% (7)	3.9% (4)	<input type="checkbox"/>
Occupational therapist	1.6% (2)	2.0% (2)	3.9% (4)	<input type="checkbox"/>
Psychiatrist (M.D.)	4.0% (5)	5.0% (5)	2.9% (3)	<input type="checkbox"/>
Podiatrist	5.6% (7)	8.0% (8)	1.9% (2)	<input type="checkbox"/>
Psychologist	1.6% (2)	1.0% (1)	1.0% (1)	<input type="checkbox"/>
Social worker	0.0% (0)	2.0% (2)	1.0% (1)	<input type="checkbox"/>
Speech therapist	0.0% (0)	1.0% (1)	1.0% (1)	<input type="checkbox"/>
Dietician	4.0% (5)		0.0% (0)	<input checked="" type="checkbox"/>
Geriatrician	0.0% (0)	2.0% (2)	0.0% (0)	<input type="checkbox"/>
Substance abuse counselor	0.8% (1)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other	4.8% (6)	5.0% (5)	6.8% (7)	<input type="checkbox"/>

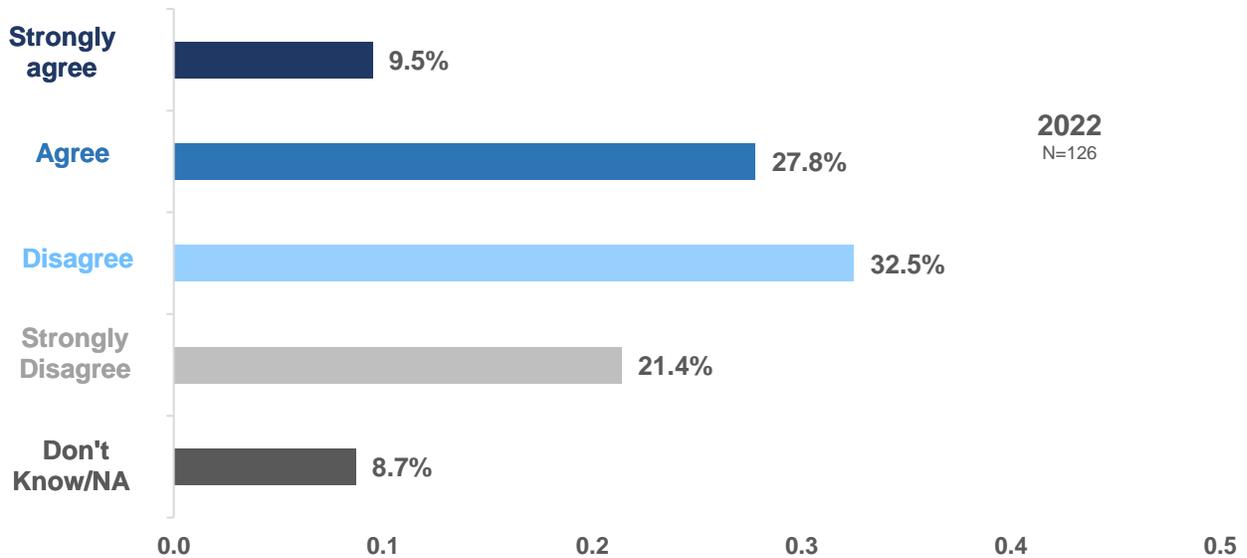
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate each type of specialist seen, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Nephrologist” and “Infectious disease specialist (2)”

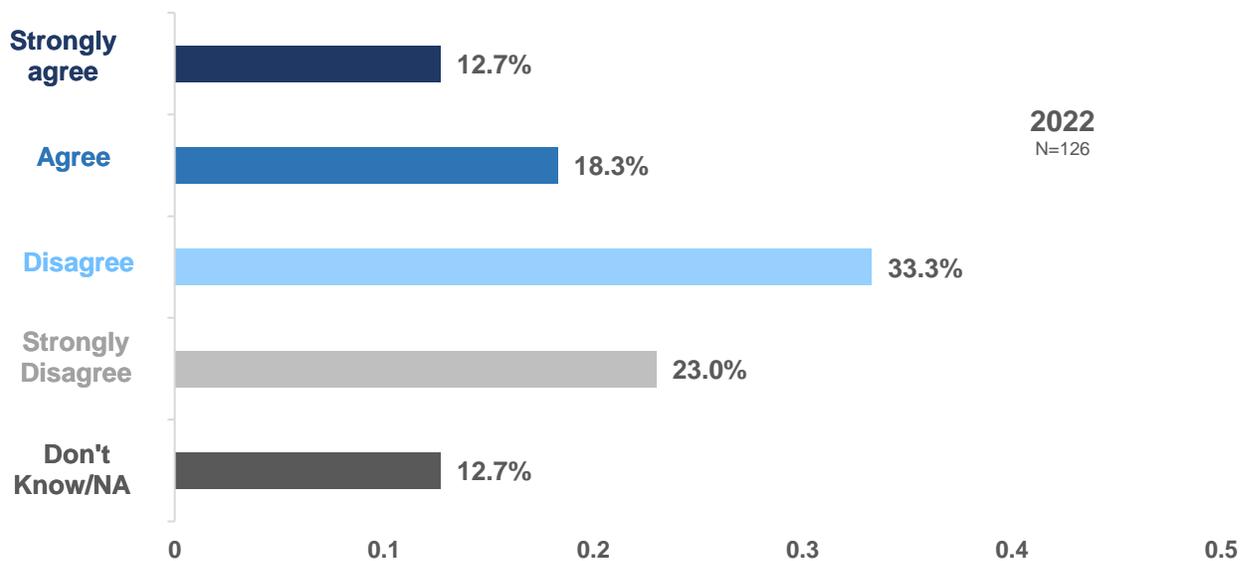
Due to the COVID-19 Pandemic (Question 24)

Respondents were asked to rate the impact of the COVID-19 pandemic on their household regarding difficulty paying for household expenses, getting needed items such as food, and obtaining healthcare or mental health services. Explore the subsequent graphs for more detail.

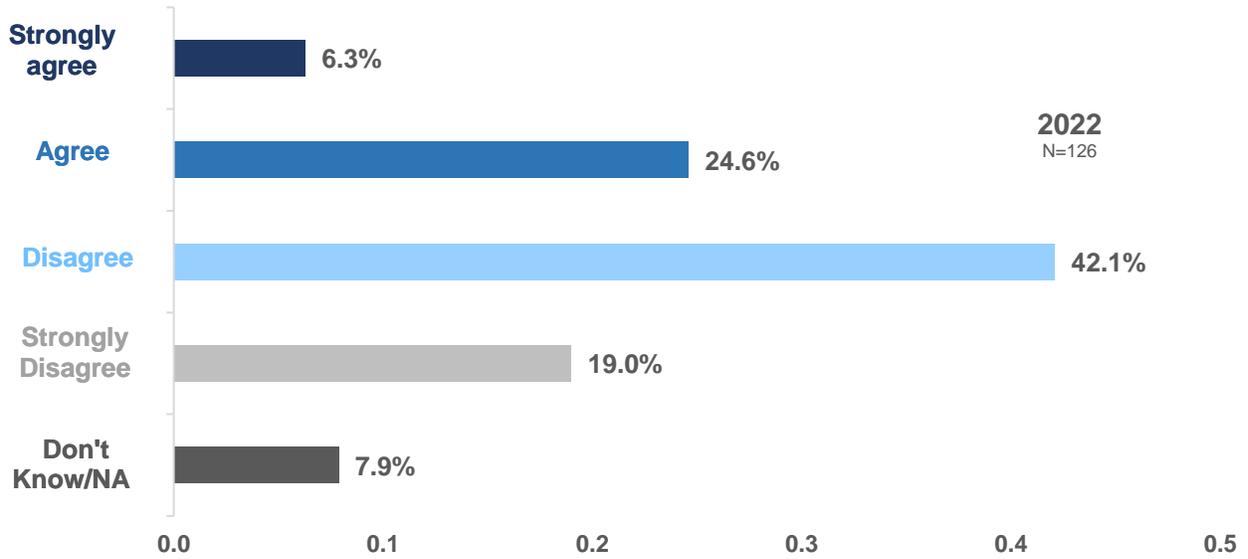
My household has had more difficulty than usual getting needed items, food, or services



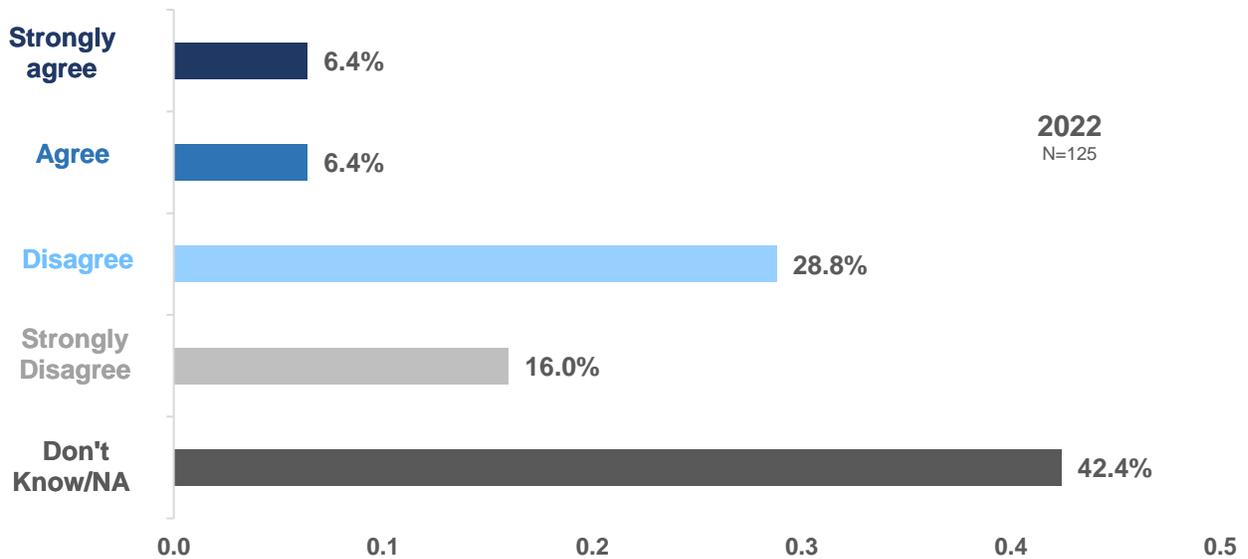
My household has had more difficulty than usual paying for bills and expenses



A household member or I have had more difficulty than usual obtaining medical care



A household member or I have had more difficulty than usual obtaining mental health care



Overall Quality of Care through Sidney Health Center (Question 25)

Respondents were asked to rate various services available through Sidney Health Center using the scale of 4= Excellent, 3= Good, 2= Fair, 1=Poor, and Haven't Used. The service that received the highest score was "Cancer care" with a rating of 3.6 out of 4.0 (n=32), "Ambulance services" at 3.4 (n=34), and "Laboratory" at 3.3 (n=112). Overall, the average rating of quality for the health services listed through SHC was 3.1 out of 4.0.

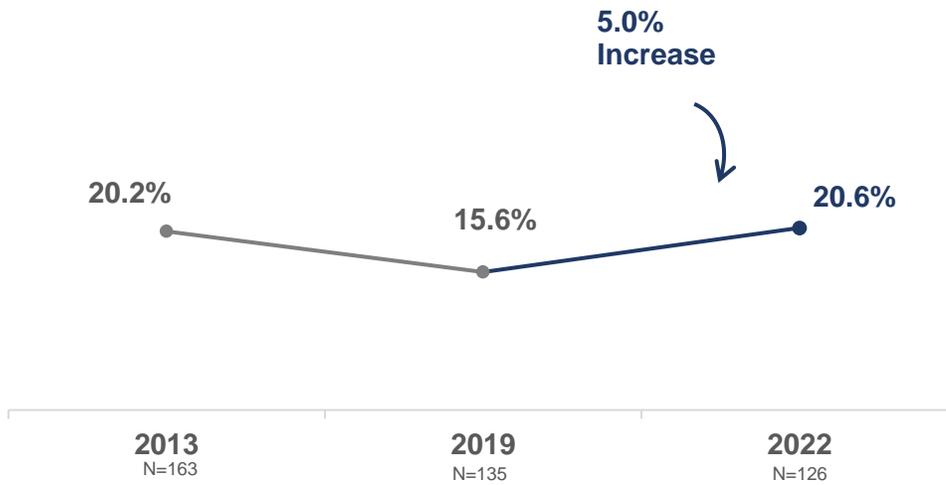
Quality of Care Rating at Sidney Health Center	2013 Average (n)	2019 Average (n)	2022 Average (n)	SIGNIFICANT CHANGE
4 Point Scale: Poor = 1, Fair = 2, Good = 3, Excellent = 4				
Total number of respondents	155	132	123	
Cancer care	3.6 (38)	3.8 (25)	3.6 (32)	<input type="checkbox"/>
Ambulance services	3.4 (65)	3.6 (45)	3.4 (34)	<input type="checkbox"/>
Laboratory	3.2 (126)	3.4 (113)	3.3 (112)	<input type="checkbox"/>
Surgical services		3.5 (71)	3.2 (61)	<input checked="" type="checkbox"/>
Radiology services (x-ray, CT-scan, MRI)		3.4 (98)	3.2 (103)	<input checked="" type="checkbox"/>
Physical therapy	3.3 (59)	3.4 (57)	3.1 (56)	<input checked="" type="checkbox"/>
Telemedicine	3.3 (19)	2.8 (20)	3.0 (17)	<input type="checkbox"/>
Emergency room	2.9 (126)	3.2 (101)	2.9 (94)	<input checked="" type="checkbox"/>
Nursing home		2.9 (33)	2.9 (18)	<input type="checkbox"/>
Visiting nurse/Hospice/Personal care		3.6 (22)	2.9 (18)	<input checked="" type="checkbox"/>
Clinic services	3.0 (128)	3.1 (118)	2.9 (112)	<input type="checkbox"/>
Cardiac rehabilitation		3.5 (18)	2.8 (19)	<input checked="" type="checkbox"/>
Sleep center	2.8 (27)	3.3 (27)	2.6 (30)	<input checked="" type="checkbox"/>
Overall average	3.1 (155)	3.3 (132)	3.1 (123)	<input checked="" type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Grayed out cells indicate the question was not asked that year.

Depression (Question 26)

Respondents were asked to indicate if there were periods of at least three consecutive months in the past three years where they felt depressed on most days. Twenty point six percent of respondents (n=26) indicated they had experienced periods of depression, and 79.4% of respondents (n=100) indicated they had not.

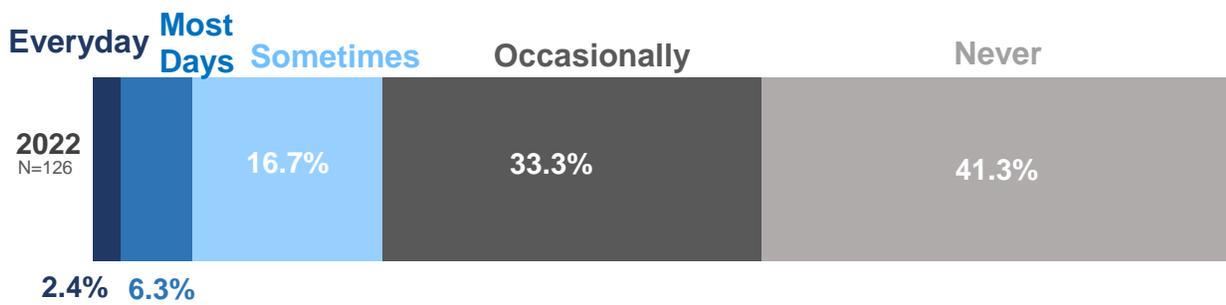
More respondents report experiencing periods of depression since the last assessment



Lonely or Isolated (Question 27)

Respondents were asked to indicate how often they felt lonely or isolated in the past year. Forty-one point three percent of respondents (n=52) indicated they never felt lonely or isolated, and 33.3% of respondents (n=42) indicated they occasionally (1-2 days per month) felt lonely or isolated. Sixteen point seven percent (n=21) reported they felt lonely or isolated sometimes (3-5 days per month).

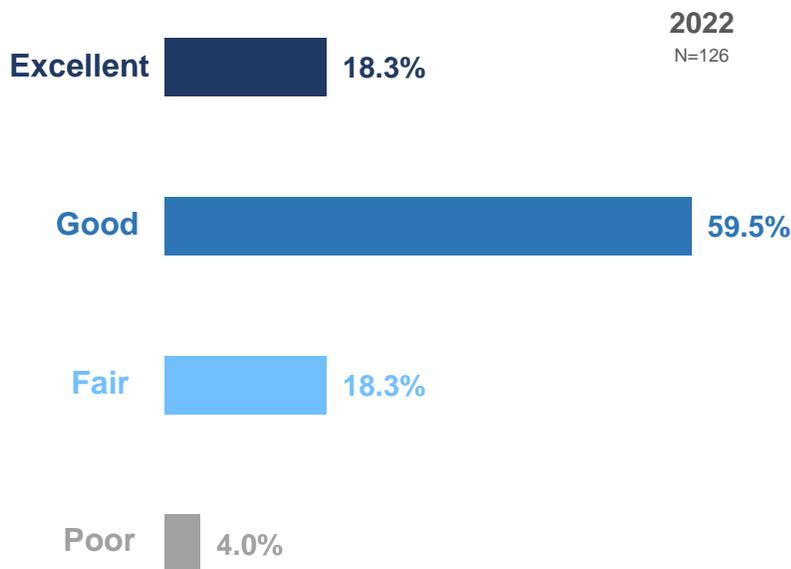
74.6% of respondents either never felt lonely or occasionally felt lonely (1-2 days per month) in the past year



Rating of Mental Health (Question 28)

Respondents were asked to indicate how they would describe their mental health in general when considering stress, anxiety, depression, and emotional problems. Fifty-nine point five percent of respondents (n=75) felt their mental health was “Good,” 18.3% (n=23) rated their mental health as “Excellent,” and 18.3% of respondents (n=23) felt their mental health was “Fair.”

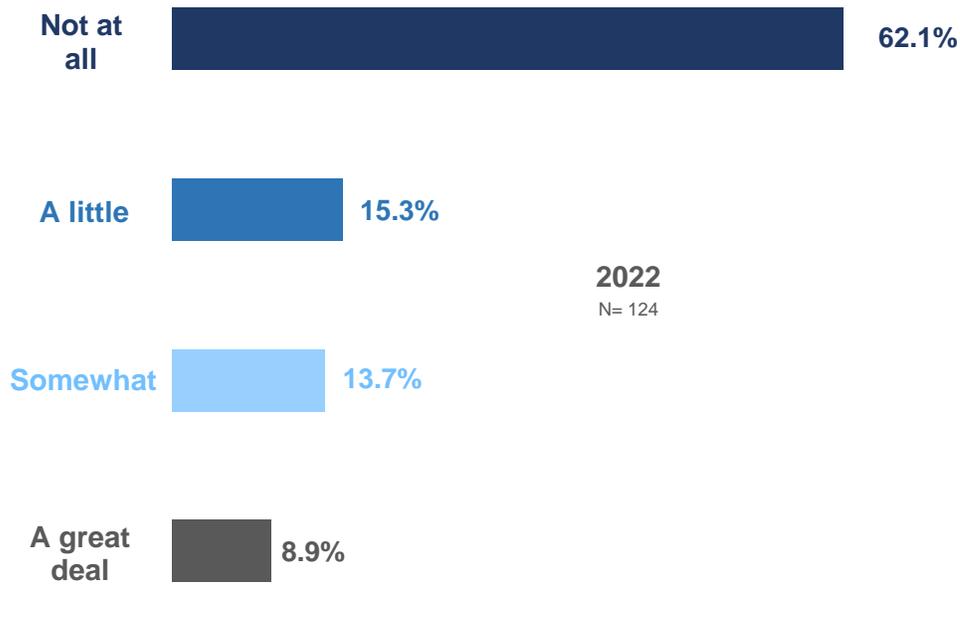
Over half of respondents rated their mental health as **good**



Impact of Substance Abuse (Question 29)

Respondents were asked to indicate to what degree their life has been negatively affected by their own or someone else’s substance abuse issues, including alcohol, prescription, or other drugs. Sixty-two point one percent of respondents (n=77) indicated their life was “Not at all” affected. Thirteen point seven percent of respondents (n=17) indicated they were “Somewhat” negatively affected, while 8.9% of respondents (n=11) indicated their life was affected “a great deal” by their own or someone else’s substance abuse issues.

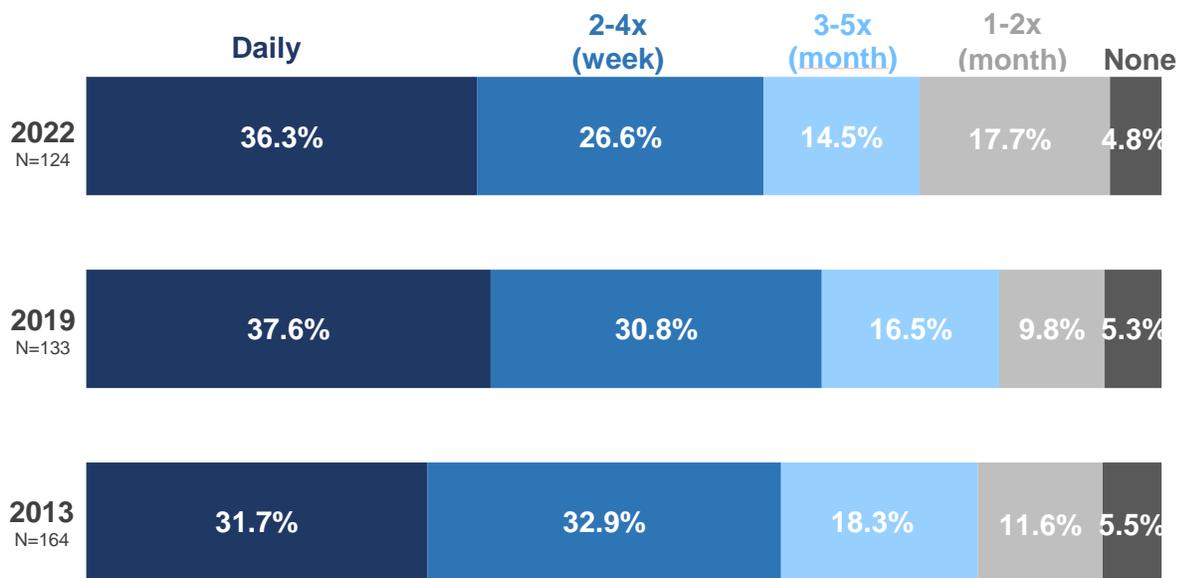
13.7% of respondents were somewhat affected by their own or someone else's substance use issues



Physical Activity (Question 30)

Respondents were asked to indicate how frequently they had physical activity for at least twenty minutes over the past month. Thirty-six point three percent of respondents (n=45) indicated they had physical activity “Daily,” and 26.6% (n=33) indicated they had physical activity of at least twenty minutes “2-4 times per week.” Four point eight percent of respondents (n=6) indicated they had “No physical activity.”

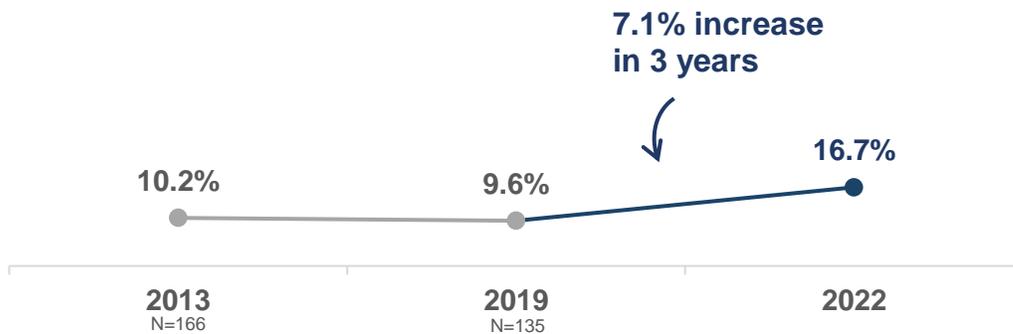
Physical activity has remained consistent since the 2019 assessment



Difficulty Getting Prescriptions (Question 31)

Respondents were asked to indicate if, during the last year, medication costs had prohibited them from getting a prescription or taking their medication regularly. Sixteen point seven percent of respondents (n=21) indicated that they had difficulty getting a prescription or taking their medication regularly in the last year. Sixty-eight point three percent of respondents (n=86) indicated that they did not have trouble getting or taking prescriptions, while 15.1% of respondents (n=19) stated it was not a pertinent question for them.

Cost as a barrier to taking medications increased since the last assessment



Medical Insurance Type (Question 32)

Respondents were asked to indicate what type of medical insurance covers the majority of their medical expenses. Forty point two percent (n=51) indicated they have “Employer sponsored” coverage. Twenty-six point eight percent (n=34) indicated they have “Medicare” coverage, and 8.7% (n=11, each) selected “Medicaid” and “Private insurance/private plan.”

Type of Health Insurance	2013 % (n)	2019 % (n)	2022 % (n)
Number of respondents	137	134	127
Employer sponsored	53.3% (73)	42.5% (57)	40.2% (51)
Medicare	19.0% (26)	14.9% (20)	26.8% (34)
Medicaid	1.5% (2)	3.0% (4)	8.7% (11)
Private insurance/private plan	11.7% (16)	11.2% (15)	8.7% (11)
None/pay out of pocket	11.7% (16)	3.0% (4)	3.1% (4)
Health Insurance Marketplace		3.0% (4)	2.4% (3)
Health Savings Account	0.7% (1)	3.0% (4)	0.8% (1)
Indian Health	0.0% (0)	0.0% (0)	0.8% (1)
Health expense shared group		0.0% (0)	0.0% (0)
Healthy MT Kids	0.0% (0)	1.5% (2)	0.0% (0)
Other*	2.2% (3)	17.9% (24)	8.7% (11)
TOTAL	100.0% (137)	100.0% (134)	100.0% (127)

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Grayed out cells indicate the question was not asked that year. *Respondents (N=8) who selected over the allotted amount were moved to “Other.”

“Other” comments included: “Major medical” and “Medicare supplement”

Barriers to Having Insurance (Question 33)

For those who indicated they did not have insurance (n=3), the top reason selected for not having insurance was “Can’t afford to pay for health insurance.” Respondents could select all that apply.

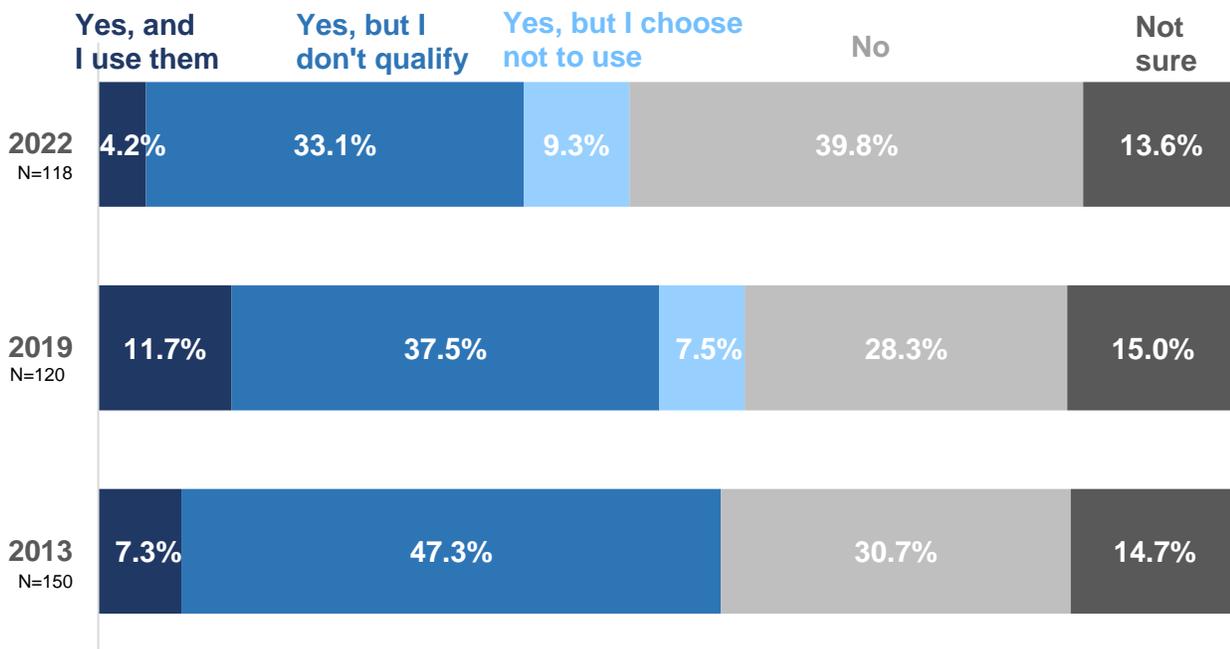
Reasons for No Health Insurance	2013 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	16	4	3	
Can’t afford to pay for health insurance	75.0% (12)	75.0% (3)	66.7% (2)	<input type="checkbox"/>
Employer does not offer insurance	18.8% (3)	25.0% (1)	0.0% (0)	<input type="checkbox"/>
Choose not to have health insurance	12.5% (2)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Too confusing/don’t know how to apply			0.0% (0)	<input type="checkbox"/>
Other	6.3% (1)	50.0% (2)	33.3% (1)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Grayed out cells indicate the question was not asked that year.

Awareness of Health Cost Assistance Programs (Question 34)

Respondents were asked to indicate their awareness of programs that help people pay for healthcare bills. Thirty-nine point eight percent of respondents (n=47) indicated that they were not aware of health cost assistance programs, and 33.1% (n=39) indicated they were aware of these programs but did not qualify to utilize them.

Nearly 40% of 2022 respondents are not aware of programs that help people pay for healthcare expenses





KEY INFORMANT INTERVIEW RESULTS

Key Informant Interview Methodology

Eleven key informant interviews were conducted in April 2022. Participants were identified as people living in Sidney Health Center's service area.

The 11 interviews were conducted over the telephone. The meetings lasted up to 15 minutes in length and followed the same line of questioning. Interview transcripts can be found in Appendix I. Interviews were facilitated by Montana Office of Rural Health staff.



Key Informant Interview Themes

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



HEALTHCARE WORKFORCE RECRUITMENT & RETENTION

The most common thread of interviews was a concern for the retention of healthcare workforce. Overall, interview participants were grateful for having access to and ensuring the success of Sidney Health Center. While community members were generally happy with the addition of the same day clinic, several shared that they have a desire to establish care and develop a relationship with a consistent primary care provider over time.

On the topic of the same day clinic, nearly all participants commented that if you don't call for an appointment by 7 a.m., you will likely have to wait until the next day to be seen. One participant shared that this was particularly challenging when employers were requiring notes to return to work during the COVID-19 pandemic. They poignantly stated, "If people can't get a doctor's note to return, they are risking the loss of wages which has trickling impacts on rent, food, etc. – it's a vicious cycle."

MENTAL HEALTH



Access to mental health resources and services was another top theme among interview participants. Community members seemed to think this was a challenge across the lifespan and not isolated in one particular pocket of the population.

Community members were generally appreciative that there are resources and momentum towards addressing mental health issues locally, but there was also a sense of urgency in needing to collectively do more. One person shared that, “I think we have serious issues accessing mental health care locally.” They continued, “I know that Sidney Health Center is working on it, but I don’t know if we can wait to get all the pieces in place.” Alternatively, another community member stated, “We still have a lot of work to do to try and remove the stigma associated with accessing mental health services and get necessary resources to parents.” They continued with, “Many parents and people around here still call 911 in a mental health crisis, and many of those that respond to the calls aren’t any better trained on responding to mental health crisis.”

AGING IN PLACE



The key informant interview participants were concerned about the area’s aging population. The biggest subthemes among those interviewed fell under the topics of workforce and opportunities for promoting safe movement.

Nearly all key informant interview participants expressed their desire to support seniors in staying at home as long as they wish and age within the community. While this is a value among the community, there was an understanding that finding and sustaining adequate workforce for these caretaking roles has been a challenge for the area.

Another topic that a community member described is a need for opportunities to promote safe movement among seniors. Specifically, they stated that while there are a couple of fitness centers in town, there aren’t currently any classes teaching seniors how to move safely, such as fall prevention and walking with ease.

SERVICES NEEDED IN THE COMMUNITY



- Primary care providers
- Eye care
- Home health and hospice
- Healthcare workforce recruitment and retention
- Pediatrician(s)
- Urologist
- Dermatologist
- Lactation support services
- Childcare
- More advertising and awareness of local services
- Mental and behavioral health resources
- Better access to enrollment in resources like Medicaid and Supplemental Nutrition Assistance Program (SNAP) benefits
- Preventive health education (healthy eating, active living, smoking cessation, weight management, etc.)
- Community center for recreational and health education opportunities.



EXECUTIVE SUMMARY

Executive Summary

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

Areas of Opportunity	Secondary Data	Survey	Interviews
Access to Healthcare Services			
Barriers to access			
<i>More primary care providers</i>	⊗	✓	☑
<i>Specialty services (i.e., urgent care, mental health)</i>	⊗	✓	☑
<i>Awareness of available services</i>		✓	☑
Cost of services			
<i>Affordability and insurance</i>	⊗	✓	☑
<i>Healthcare navigator (i.e., Assistance signing up for insurance, Medicare, or Medicaid)</i>		✓	☑
Senior Services			
<i>Workforce capacity for senior services</i>		✓	☑
<i>Accessibility and movement</i>		✓	☑
Chronic Disease Prevention			
<i>Overweight/obesity/physical inactivity</i>	⊗	✓	☑
<i>Health education for fitness and nutrition</i>		✓	☑
Mental and Behavioral Health			
<i>More mental health services/resources</i>	⊗	✓	☑
<i>Alcohol/substance abuse</i>	⊗	✓	☑
Health Measures			
<i>Cancer</i>	⊗	✓	
<i>Vaccination [i.e., children up-to-date (UTD), HPV UTD, vaccine preventable diseases]</i>	⊗		



NEXT STEPS & RESOURCES

Prioritization of Health Needs

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

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

- Access to healthcare services
- Behavioral health
- Community engagement and collaboration

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

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

Available Community Resources

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

- Agency for Healthcare Research & Quality (AHRQ)
- Alanon, Alcoholics Anonymous [AA]
- Area Medical Providers Sidney Health Center medical providers and visiting specialists (complete current listing located on SHC's Website)
- Boys and Girls Club of Richland County
- Civic Organizations – Sidney Lions Club and Kiwanis
- Eastern Montana Mental Health Center
- Eastern Montana Telemedicine Network (EMTN).
- Local Law Enforcement - Richland County Sheriff's Department, Sidney and Fairview Police Departments
- Ministerial Association
- MonDak Stock Growers Association
- Montana Nutrition and Physical Activity program (NAPA)
- Montana Office of Rural Health/Area Health Education Center (MORH/AHEC)
- MSU Extension Service
- National Alliance for the Mentally Ill
- Prairie Hills Recovery
- Regional Healthcare Facilities
- Richland County Cancer Coalition
- Richland County Coalition Against Domestic Violence
- Richland County Commissioners
- Richland County Health Department
- Richland County Nutrition Coalition
- Richland County Public Schools (Sidney, Fairview, Savage, Lambert, Rau and Brorson)
- Richland County Transportation Advisory Council
- Sidney Area Chamber of Commerce and Agriculture
- Sidney Parks and Recreation Board
- The Montana Department of Public Health and Human Services (MT DPHHS)
- Montana Hospital Association (MHA), Flex Program

Evaluation of Previous CHNA & Implementation Plan

Sidney Health Center provided the Montana Office of Rural Health with an update on their Implementation Plan activities from their previous CHNA process. The SHC Board of Directors approved its previous implementation plan in 2019. The plan prioritized the following health issues:

- Access to healthcare services
- Behavioral Health
- Community engagement and collaboration

The following tables include completed activities, accomplishments and impacts/outcomes within the facility’s proposed goals. To view SHC’s full Implementation Plan visit: sidneyhealth.org

Goal 1: Enhance access to healthcare services in Richland County.

	Activities	Accomplishments	Community Impact/Outcomes
Strategy 1.1: Improve community access to clinic-based services at Sidney Health Center	Expand access to primary care by recruiting additional medical providers	Recruited Primary Care Clinic Providers: Noel Nguewoun, MD (2020); Joan Turek, PA-C (2021); Sarah Farrow, AGNP (2022); Same-Day Clinic: Adrienne Bryant, PA-C (2021)	Increased access to primary care appointments and a referral base to surgical specialties.
	Conduct study to determine availability and clinic hours to best meet community appointment needs	Added a third provider in the Same-Day Clinic on Mondays and Tuesdays during COVID-19 surges to help alleviate ER patient loads	Reduced non-emergent ER Visits
	Enhance utilization of technology (MyChart/online scheduling, etc.) to assist patients in making appointments, accessing patient chart information, and additional resources	60% of all patients of SHC have active MyChart accounts. Telehealth appointments started and accounted for 98 Telehealth visits and 270 Phone Verbal visits	Patients have access to records and results from anywhere and can facilitate an appointment from their home.
	Explore feasibility of implementing online appointment scheduling for Walk-in-Clinic appointments	Worked with Sanford to expand MyChart appointment scheduling.	MyChart users will be able to set appointments from MyChart without needing to call in.
	Develop Outreach Services Plan to enhance care coordination throughout the service area	Outreach Clinics: General Surgery, Ortho, Audiology and Cancer Care (Plentywood); ENT (Glasgow & Watford City); Podiatry (Glendive)	Increased accessed to specialty services in outlying areas; improved coordination of care with area providers

<p>Strategy 1.2: Improve community access to hospital-based services at Sidney Health Center</p>	<p>Explore opportunities to expand/enhance specialty care services onsite and via telemedicine</p>	<p>Utilized telehealth in-house with SHC providers during the COVID-19 pandemic shutdown; SHC expanded visiting specialists onsite and through telemedicine to include urology, cardiology, pediatric gastroenterology; working on standardizing telehealth process; partnered mental health tele</p>	<p>Convenient access to specialty care without having to travel long distances.</p>
	<p>Explore alternative ER models to expand access, improve wait times, and enhance patient experience</p>	<p>Covid-19 Mandated guidelines, lead to changes for safety. New plan developed and implementation begun for remodel.</p>	<p>ED care rendered in a safe way in the midst of a Pandemic. Lessons learned from the Pandemic and ED plan updated and implemented to improve access, wait times and enhance patient experience and privacy.</p>
<p>Strategy 1.3: Improve community access to preventative services</p>	<p>Improve access to screening and preventative services by enhancing coordination between hospital, clinic, and community resources/services) expand cancer screening, men's/women's health, ACO efforts, etc.)</p>	<p>Men's Health Screenings held in June 2021 and March 2022 by appointment; Offered evening appointments for Mammogram Screenings during the month of October;</p>	<p>Preventative medicine including regular screenings improves quality of care and better outcomes as diseases are diagnosed earlier.</p>
	<p>Continue and explore opportunities to expand SHC preventative outreach/education (birthday labs, educational events with schools, community screening events, certified diabetes educations classes, lunch and learns, social media, etc.)</p>	<p>Resumed offering Birthday Month Health Screens after the COVID-19 shutdown in 2020; BP checks offered at Reynolds Grocery Store in February; Social media campaigns in place with health tips during national recognition weeks including immunization, heart, stroke, sleep, nutrition, mental, breast, women and men's health, etc.</p>	<p>Awareness of local services and screenings available locally</p>
	<p>Continue offering subsidized/lower-cost SHC fitness membership to community to increase access to and encourage physical activity</p>	<p>Membership reimbursement options offered to participating organizations; Guest passes offered to new moms that deliver at SHC;</p>	<p>Support and encourage healthy behaviors resulting in better health outcomes</p>

Goal 2: Strengthen behavioral health services in Richland County

	Activities	Accomplishments	Community Impact/Outcomes
<p>Strategy 2.1: Enhance access to and knowledge of behavioral health services in Richland County</p>	Continue to participate and support Local Mental Health Advisory Committee efforts	Participation is ongoing.	LAC focus on Community Education and Support. Those opportunities have expanded with QPR, Mental Health First Aid, and Support Group offerings.
	Continue to offer training opportunities for community members at no cost (Mental Health First Aid, Critical Incident Stress Management, etc.)	Goal assumed by Mental Health LAC group.	LAC focus on Community Education and Support. Those opportunities have expanded with QPR, Mental Health First Aid, and Support Group offerings.
	Continue developing partnerships with local mental health and chemical dependency providers/resources to enhance emergency mental health services	Written agreements established with local mental health and chemical dependency providers. Contract established with Array Mental Health to provide ED and Inpatient psychiatry consults,	Consults available as noted to all clients, no matter payor source. Distance option provides psychiatry support.
	Explore Behavioral Health Community Healthy Worker position utilizing Americorp Volunteer to enhance behavioral health care coordination	Grant work and analysis completed, and additional grant obtained from the Montana Healthcare Foundation: Meadowlark Grant	Need established, additional staff now supported with LCPC, and providing additional services focused on OB care.
	Develop and implement mental health screening/assessment and protocols in the clinic setting	Universal screening developed in the clinic. Additional grant work expanded this to OB.	Screening continues. Expanded from adult to include OB, and working to expand to pediatric.
	Explore models/best practices for emergency department mental health screenings/assessments	Contract established with Array Telemedicine with that additional option starting during the pandemic.	Psychiatric consult now available 24/7 in the ED and inpatient.
	Explore opportunities to expand behavioral and chemical dependency services via use of technology and telemedicine	Contract established with Array Telemedicine with that additional option starting during the pandemic	Psychiatric consult now available 24/7 in the ED and inpatient.
	Continue to partner with and promote local medication disposal program	Medication disposal available in Retail Pharmacy, Mondak Clinic, and Visiting Nurse office. System in partnership with Richland County Sheriff Office.	Available to any citizen that can access those locations.

Goal 3: Enhance SHC community engagement and collaboration efforts in Richland County.

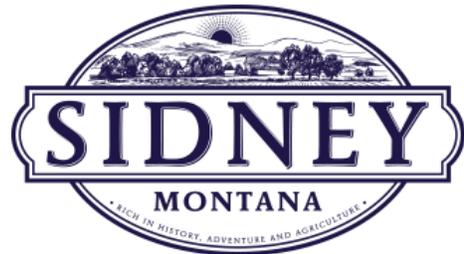
	Activities	Accomplishments	Community Impact/Outcomes
Strategy 3.1: Strengthen engagement and relationships with community partners and stakeholders	Continue to participate and foster relationships with community partners and stakeholders that work to influence community health Sidney and Richland County (Communities in Action, various coalitions and workgroups: mental health, chronic disease, cancer, nutrition, etc.)	Continued participation on the Community Steering Committee and local coalitions including the Cancer, Nutrition, Injury Prevention, Mental Health, and Chronic Disease. SHC has partnered with the RCHD to provide COVID-19 testing and vaccinations. Started a new venture with fAIRMED (SHC Care Flight) in 2021 to offer air ambulance service at SHC and for surrounding facilities with reasonable charges.	Drive-Thru COVID Testing offered to public since September 2021. Vaccinations offered to employees and volunteers since they were available in Dec 2020 and to the general public since October 2021. Air ambulance service now available locally for patients who need a higher level of care. SHC Care Flight has contracted with several insurance plans to help alleviate high out-of-pocket expenses for patients.
	Explore opportunities to enhance information dissemination and health resource knowledge (Create educational outreach on use and benefits of “My Chart” (appointments, patient records, information and resources))	Social media campaign continues highlighting the benefits of MyChart;	COVID-19 Test Results are disseminated through MyChart which greatly increased participation of MyChart
	Expand outreach and education efforts to include community presentations and lunch and learns with local community groups (Senior Center, Kiwanis, Lions, Chamber, etc.)	CEO continues to speak at SHC Membership Annual Meeting as well as Kiwanis, Lions, and Chamber Leadership highlighting strategic direction and community health priorities	Awareness of local services
	Create community education related to payer information (Medicare, Medicaid, private insurance, Marketplace), financial resources, medication assistance programs, and other community resources	Social Services maintains certification in the Marketplace options. Social Service staff available both inpatient and ECF to assist walk in clients directly with questions.	ECF has conducted community education events. Social Services throughout the facility serve all clients that come to then, no matter the relationship to the facility.
	Enhance SHC community engagement and responsiveness through the development of a SHC Patient Advisory council to increase community knowledge and navigation of local healthcare services	19 patient family advisors recruited and serving on various in-house committees	Improvement processes are put in place as a result of feedback from these engaged community members



APPENDICES

Appendix A- Steering Committee

Steering Committee Member	Organization Affiliation
Jennifer Doty	CEO – Sidney Health Center (SHC)
Rita Steinbeisser	Senior Executive, Marketing – SHC
Marie Logan	Eastern Montana Community Mental Health Center
Brittney Peterson	Public Health Administrator – Richland County Health Dept
Josh Deschaine	Physicians Assistant (PA) – Same Day Clinic
Elaine Stedman	Administrator – Boys & Girls Club of Richland County
Lance Averett	SHC Board Member
Katie Dasinger	Director of Programs - Sidney Area Chamber of Commerce
Loren Young	Richland County Commissioner
Ashley Tanner	Administrator – SHC Extended Care
Janelle Stoner	Director – Richland Opportunities, Inc.
Jon Skinner	Principal – Fairview School District



Richland County



Appendix B- Public Health & Populations Consultation

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

Name/Organization

<i>Jennifer Doty</i>	CEO – Sidney Health Center (SHC)
<i>Rita Steinbeisser</i>	Senior Executive, Marketing – SHC
<i>Marie Logan</i>	Eastern Montana Community Mental Health Center
<i>Brittney Peterson</i>	Public Health Administrator – Richland County Health Dept
<i>Josh Deschaine</i>	Physicians Assistant (PA) – Same Day Clinic
<i>Elaine Stedman</i>	Administrator/Teacher – Boys & Girls Club
<i>Lance Averett</i>	SHC Board Member
<i>Katie Dasinger</i>	Director – Sidney Area Chamber
<i>Loren Young</i>	Richland County Commissioner
<i>Ashley Tanner</i>	Administrator – SHC Extended Care
<i>Janelle Stoner</i>	Director – Richland Opportunities, Inc.
<i>Jon Skinner</i>	Principal – Fairview School District

Type of Consultation (Interview, Steering Committee, Focus Group, etc.)

First Steering Committee	February 8, 2022
Key informant interviews	April 2022
Second Steering Committee	May 9, 2022

Public and Community Health

- Trauma and ACES should be separated so that individuals who experience trauma in adulthood do not feel that the response only pertains to childhood experiences.
- Need to add COVID-19 to list of most serious health concerns as a response option.
- People may interpret the hospital as complacent/unaware if we do not have COVID-19 as an option.
- Grocery stores have a large plethora of healthy food options but the restaurants and fast food places in town do not.
- We have a pregnancy center in town, also adding private clinics as an option.
- Occupational health services are also offered in town (drug testing).
- Cardiology, Occupational health, and Dermatology are all available locally so we can remove from the survey.

- Add psychiatrist and fertility clinic as possible services to add locally.
- We have other mental health services but we do not have a psychiatrist.
- Add men's health screening to list of preventive services in past year.
- Covid-19 barriers and concerns should be added to reasons for delayed care, as we often do not have beds available for some of the surgeries people request.

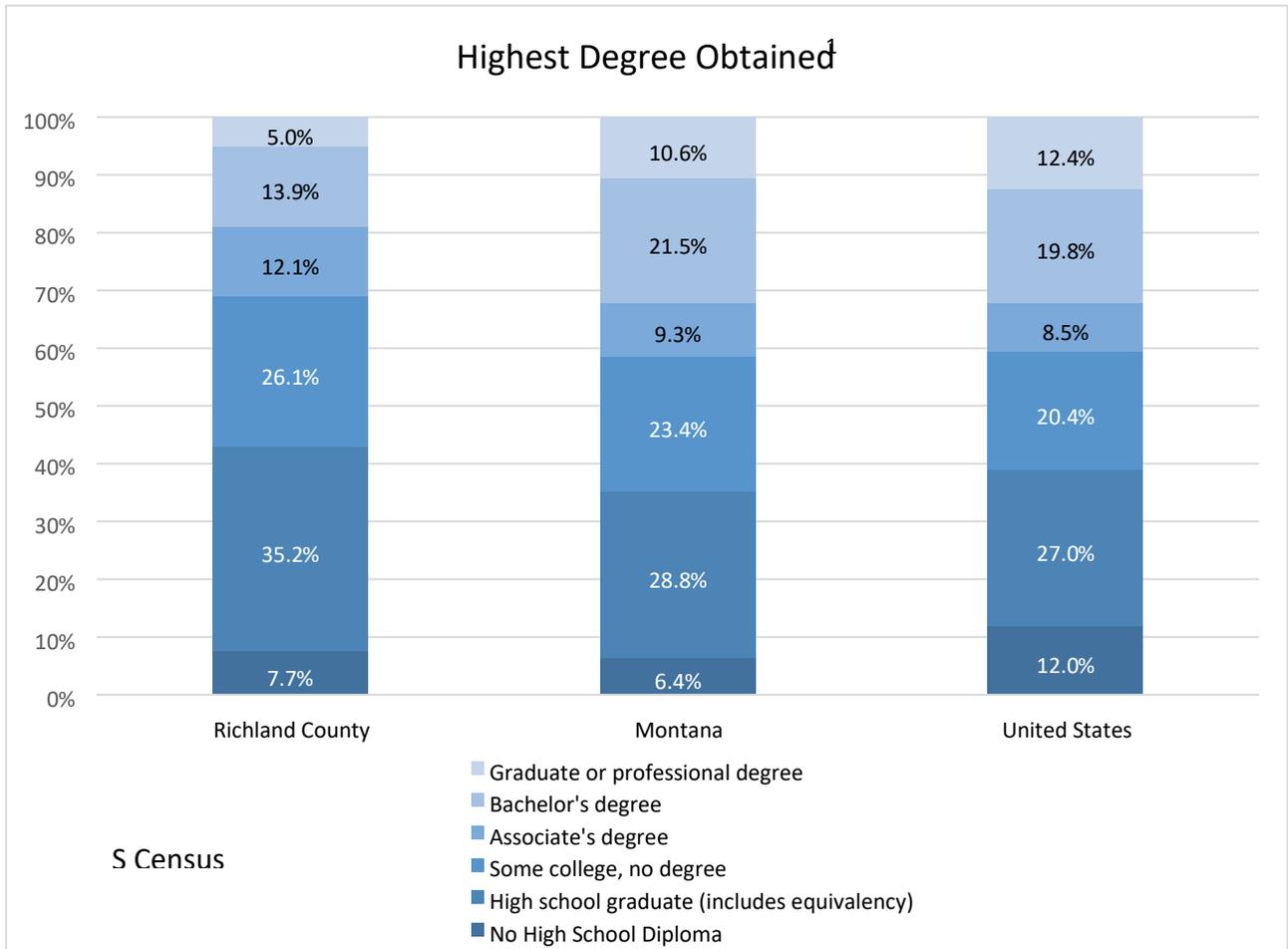
Population: Low-Income, Underinsured

- Many patients need help filling out healthcare forms and finding policies, adding some sort of healthcare navigator/educator option would be beneficial.

Appendix C- Richland Co. Secondary Data

Demographic Measure (%)		County			Montana			Nation		
Population ¹		11,199			1,050,649			324,697,795		
Population Density ¹		5.3			7.1			85.5		
Veteran Status ¹		7.5%			10.4%			7.3%		
Disability Status ¹		12.3%			13.6%			12.6%		
Age ¹		<5	18-64	65+	<5	18-64	65+	<5	18-64	65+
		6.1%	60.0%	14.7%	5.8%	60.1%	18.2%	6.1%	61.7%	15.6%
Gender ¹		Male		Female	Male		Female	Male		Female
		51.0%		49.0%	50.3%		49.7%	49.2%		50.8%
Race/Ethnic Distribution ¹		White			91.4%			75.3%		
		American Indian or Alaska Native			8.3%			1.7%		
		Other †			3.7%			26.5%		

¹ US Census Bureau - American Community Survey (2019) † Black, Asian/Pacific Islanders, Hispanic & Non-Hispanic Ancestry



¹ US Census Bureau-American Community Survey (2019)

Socioeconomic Measures (%)	County	Montana	Nation
Median Income ¹	\$67,205	\$54,970	\$62,843
Unemployment Rate ¹	2.3%	4.0%	5.3%
Persons Below Poverty Level ¹	5.8%	13.1%	13.4%
Children in Poverty ¹	1.8%	15.8%	18.5%
Internet at Home ²	78.4%	81.5%	-
Households with Population Age 65+ Living Alone ²	595	52,166	-
Households Without a Vehicle ²	290	21,284	-
Households Receiving SNAP ²	145	56,724	-
Eligible Recipients of Free or Reduced Price Lunch ³ 2019/2020 school year	24.4%	42.9%	-

Enrolled in Medicaid^{4, 1}	5.9%	9.7%	19.8%
Uninsured Adults^{5, 6} Age <65	11.0%	12.0%	12.1%
Uninsured Children^{5, 6} Age <18	8.0%	6.0%	5.1%

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

Maternal Child Health	County	Montana	Nation
General Fertility Rate* ⁷ <i>Per 1,000 Women 15-44 years of age (2017-2019)</i>	74.6	59.3	-
Preterm Births⁷ <i>Born less than 37 weeks (2017-2019)</i>	6.5%	9.4%	-
Adolescent Birth Rate⁷ <i>Per 1,000 years females 15-19 years of age (2017-2019)</i>	NA	18.3	-
Smoking during pregnancy^{3, 8}	14.9%	16.5%	7.2%
Kotelchuck Prenatal Care** ⁷ <i>Adequate or Adequate-Plus (2017-2019)</i>	82.8%	75.7%	-
Low and very low birth weight infants⁷ Less than 2500 grams (2017-2019)	NA	7.6%	-
Childhood Immunization Up-To-Date (UTD)^{§ 9}	79.8%	64.8%	-

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

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

**The Kotelchuck Index, also called the Adequacy of Prenatal Care Utilization (APNCU) Index, uses two crucial elements obtained from birth certificate data-when prenatal care began (initiation) and the number of prenatal visits from when prenatal care began until delivery (received services). The Kotelchuck index classifies the adequacy of initiation as follows: pregnancy months 1 and 2; months 3 and 4; months 5 and 6; and months 7 to 9. A ratio of observed to expected visits is calculated and grouped into four categories: Inadequate (received less than 50% of expected visits); Intermediate (50%-79%); Adequate (80%-109%); Adequate Plus (110% or more). § UTD = 4 DTaP, 3 Polio, 1 MMR, 3/4 HIB, 3 Hep B, 1 Var, 4 PCV by 24 – 35-month-old children.

Behavioral Health	County	Montana	Nation
Adult Smoking ⁵	19.0%	19.0%	16.0%
Excessive Drinking ⁵	24.0%	22.0%	15.0%
Adult Obesity ⁵	35.0%	27.0%	26.0%
Poor Mental Health Days ⁵ (Past 30 days)	4.1	3.9	3.8
Physical Inactivity ⁵	29.0%	22.0%	19.0%
Do NOT wear seatbelts ¹⁰ State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	10.3%	6.3%
Drink and Drive ¹⁰ State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	3.7%	3.1%

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

Cancer prevention & screening	County	Montana	Nation
Human Papillomavirus (HPV) vaccination UTD †† ¹¹ , ¹² Adolescents 13-17 years of age (2020)	23.1%	54.4%	58.6%
Cervical cancer screening in past 3 years ^{13, 10} Age adjusted (county/state) and crude (nation) prevalence among adult women aged 21–65 years (2018)	84.7%	76.8%	80.1%
Mammography in past 2 years ^{13, 10} Age adjusted (county/state) and crude (nation) prevalence among women 50-74 years (2018)	66.3%	73.4%	78.3%
Colorectal Cancer Screening ^{13, 10} Age adjusted (county) and crude (state/nation) prevalence among adults age 50-75 years (2018)	60.3%	64.5%	69.7%

¹¹ Adolescent Immunization Coverage by County, MT-DPHHS (2020), ¹² National Center for Immunization and Respiratory Diseases, CDC

(2021), ¹³ PLACES Project, CDC (2020), ¹⁰ Behavioral Risk Factor Surveillance System, CDC (2019)

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

Infectious Disease Incidence Rates¹⁴ <i>Per 100,000 people (2015-2017)</i>	County	Montana
Enteric Diseases *	57.3	80.1
Hepatitis C virus	63.9	93.4
Sexually Transmitted Diseases (STD) †	400.9	551.6
Vaccine Preventable Diseases (VPD) §	94.5	91.5

[14](#) IBIS Community Snapshot, MT-DPPHS

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

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

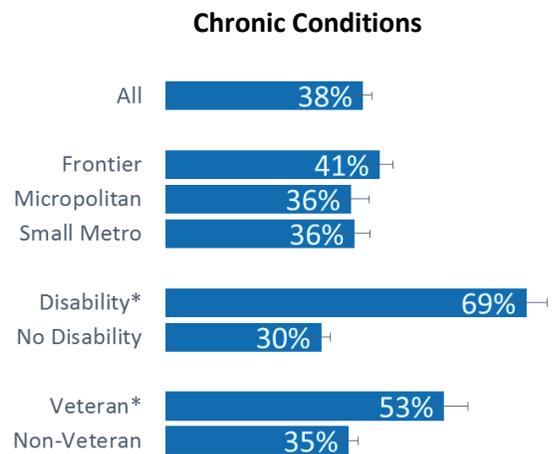
Chronic Conditions¹⁰	County	Montana	Nation
Cardiovascular Disease (CVD) prevalence <i>Adults aged 18 years and older (2014-2016)</i>	**	7.9	8.6
Chronic Obstructive Pulmonary Disease (COPD) prevalence <i>Adults aged 18 years and older (2014-2016)</i>	**	6.6	6.4
Diabetes Prevalence <i>Adults aged 18 years and older (2014-2016)</i>	**	8.3	10.6
Breast Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	167.3	125.0	124.1
Cervical Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	7.9	7.4
Colon and Rectum Cancer (CRC) Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	37.1	38.9
Lung Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	52.2	60.0

Melanoma Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	26.3	21.0
Prostate Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	87.8	109.6	103.0

[14](#) IBIS Community Snapshot, MT
DPPHS ** Data were suppressed to protect privacy.

Percent of Montana Adults with Two or More Chronic Conditions

Montana Adults with Self-Reported Chronic Condition ¹¹	
1. Arthritis	29.0%
2. Depression	24.1%
3. Asthma	10.0%
4. Diabetes	7.6%
5. COPD	6.8%
6. Cardiovascular disease	3.9%
7. Kidney disease	2.4%



[10](#) Behavioral Risk Factor Surveillance System, CDC (2019)

Mortality	County	Montana	Nation
Suicide Rate¹⁵ <i>Per 100,000 population (2009-2018)</i>	29.3	23.9	-
Veteran Suicide Rate¹⁵ <i>Per 100,000 population (2009-2018)</i>	-	65.7	38.4
Alzheimer's Disease Mortality Rate¹⁶ <i>Age-Adjusted per 100,000 population (2017-2019)</i>	-	21.7	-
Pneumonia/Influenza Mortality Rate¹⁷ <i>Age-Adjusted per 100,000</i>	-	10.5	12.3

Leading Causes of Death^{16, 18}	-	<ol style="list-style-type: none"> 1. Heart Disease 2. Cancer 3. Chronic Lower Respiratory Disease (CLRD) 	<ol style="list-style-type: none"> 1. Heart Disease 2. Cancer 3. Unintentional injuries
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[15](#) Suicide in Montana, MT-DPHHS (2021), [16](#) IBIS Mortality Query, MT- DPPHS (2019), [17](#) Kaiser State Health Facts, National Pneumonia Death Rate (2019), [18](#) National Vital Statistics, CDC (2019) ** Data were suppressed to protect privacy.

Montana Health Disparities¹⁰	White, non-Hispanic	American Indian/Alaska Native	Low Income*
14+ Days when physical health status was NOT good <i>Crude prevalence (2019)</i>	13.0%	17.9%	28.9%
14+ Days when mental health status was NOT good <i>Crude prevalence (2019)</i>	13.2%	19.2%	30.0%
Current smoker <i>Crude prevalence (2019)</i>	14.5%	41.5%	32.9%
Routine checkup in the past year <i>Crude prevalence (2019)</i>	72.8%	74.1%	81.1%
No personal doctor or health care provider <i>Crude prevalence (2019)</i>	26.5%	28.8%	23.8%
No dental visit in the last year for any reason <i>Crude prevalence (2020)</i>	34.9%	41.6%	48.1%
Consumed fruit less than one time per day <i>Crude prevalence (2019)</i>	40.5%	46.8%	49.5%
Consumed vegetables less than one time per day <i>Crude prevalence (2019)</i>	16.7%	18.0%	22.0%
Does not always wear a seat belt <i>Crude prevalence (2020)</i>	10.8%	15.9%	16.0%

[10](#) Behavioral Risk Factor Surveillance System, CDC (2019)

*Annual household income < \$15,000

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

¹⁹ Montana Youth Risk Behavior Survey (2019)

Secondary Data – Healthcare Workforce Data 2021

Health Professional Shortage Area & Medically Underserved Areas/Populations

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

Health Professional Shortage Area Designation ¹ - Richland County, Montana		
Discipline	HPSA Score	HPSA
Primary Care	15	✓ Federally Qualified Health Center (FQHC)
Dental Health	19	✓ Federally Qualified Health Center (FQHC)
Mental Health	18*	✓ High needs geographic population

HPSA Scores range from 0 to 25 (primary care and mental health) and 0 to 26 (dental health) where the higher the score, the greater the priority

¹ Health Resources and Services Administration (2021)

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

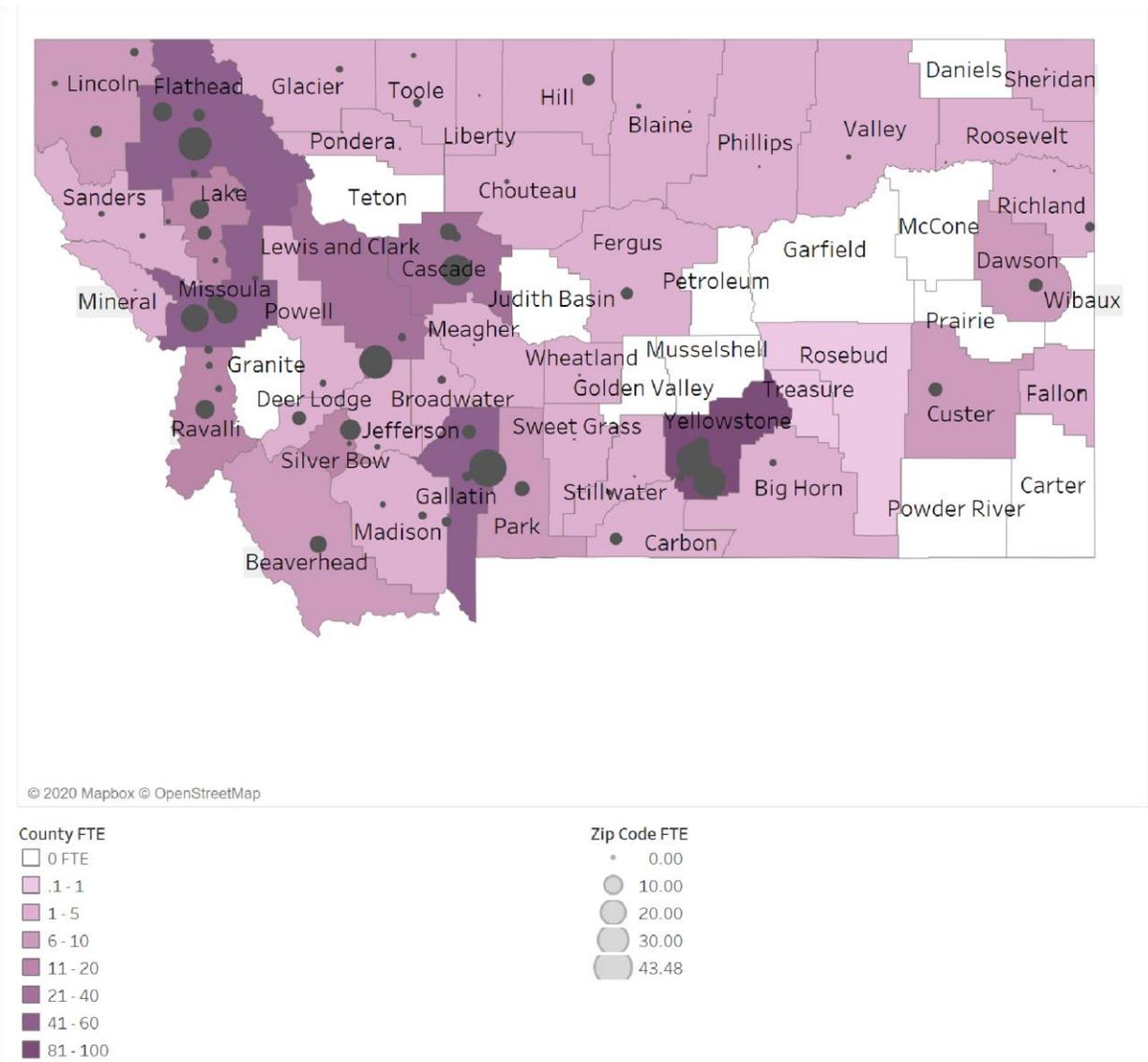
Provider Supply and Access to Care ²				
Measure	Description	Richland Co. (N = 1) **	Montana (N = 49) **	National (N = 1347) **
Primary care physicians	Ratio of population to primary care physicians	2871:1	1349:1	1050:1
Other primary care providers	Ratio of population to other primary care providers including nurse practitioners, physician assistants, and clinical nurse specialists	1577:1	878:1	726:1
Dentists	Ratio of population to dentists	2208:1	1388:1	1260:1
Mental health providers	Ratio of population to mental health providers	849:1	356:1	310:1

² Critical Access Hospital Measurement and Performance Assessment System (CAHMPAS) - FLEX Monitoring (2019) ** Total number of CAHs in region

Healthcare workforce Distribution Maps

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

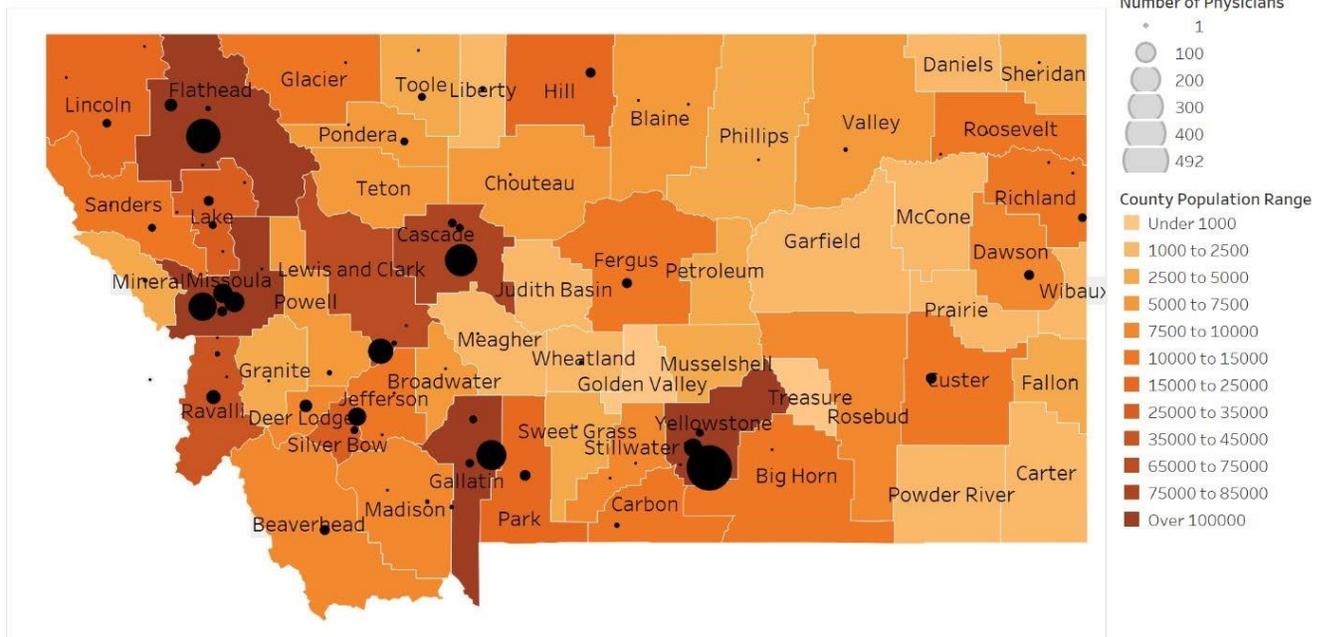
- Counts only include actively practicing providers.
- Counts do not include providers at limited access facilities (VA, Malmstrom AFB, Indian Health Services, Montana State Prison, Montana State Hospital, therapeutic boarding schools) •
Counts only include primary practice locations. Locum Tenens providers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



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

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

Physicians (All Specialties) by County Population Range



Data Source: Montana Primary Care Office data (2020) and WIM Tracking (Sept. 2020) *Note: Does not include IHS or Tribal Health physicians.

Appendix D- Survey Cover Letter

March 11, 2022

Dear [LASTNAME] household:



Participate in our Community Health Needs Assessment survey for a chance to **WIN one of five \$50 Gas Cards!**

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

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

1. Due date to complete survey: April 15, 2022
2. Complete the enclosed survey and return it in the envelope provided - no stamp needed.
3. You can also access the survey at <http://helpslab.montana.edu/survey.html>. Select "Sidney Health Center Survey." Your access code is [CODED]
4. The winners of the gift cards will be contacted the week of April 25, 2022

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

Thank you for your assistance. We appreciate your time.

Sincerely,

A handwritten signature in black ink that reads 'Jennifer Doty'.

Jennifer Doty, CEO

Access the survey on your smart phone: Use your camera to scan the QR code

Appendix E- Survey Instrument

Community Health Services Development Survey Sidney, Montana

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

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

- Very healthy Healthy Somewhat healthy Unhealthy Very unhealthy

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

- | | | |
|---|--|--|
| <input type="checkbox"/> Alcohol abuse | <input type="checkbox"/> Lack of access to healthcare | <input type="checkbox"/> Respiratory disease (asthma, COPD) |
| <input type="checkbox"/> Alzheimer's/dementia | <input type="checkbox"/> Lack of dental care | <input type="checkbox"/> Social isolation/loneliness |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Lack of exercise | <input type="checkbox"/> Stroke |
| <input type="checkbox"/> Child abuse/neglect | <input type="checkbox"/> Lack of mental health professionals | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> COVID-19 | <input type="checkbox"/> Mental health issues | <input type="checkbox"/> Tobacco use (cigarettes, vaping, smokeless) |
| <input type="checkbox"/> Depression/anxiety | <input type="checkbox"/> Motor vehicle accidents | <input type="checkbox"/> Traumatic experience(s) |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Overweight/obesity | <input type="checkbox"/> Work/economic stress |
| <input type="checkbox"/> Domestic violence | <input type="checkbox"/> Poor air/water quality | <input type="checkbox"/> Work related accidents/injuries |
| <input type="checkbox"/> Drug abuse | <input type="checkbox"/> Recreation related accidents/injuries | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Heart disease | | |
| <input type="checkbox"/> Hunger | | |

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

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

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

- Excellent Good Fair Poor

5. How do you learn about the health services available in our community? (**Select ALL that apply**)

- | | | |
|--|--|---|
| <input type="checkbox"/> Chamber of Commerce | <input type="checkbox"/> Presentations | <input type="checkbox"/> Website/internet |
| <input type="checkbox"/> Friends/family | <input type="checkbox"/> Public Health | <input type="checkbox"/> Word of mouth/reputation |
| <input type="checkbox"/> Healthcare provider | <input type="checkbox"/> Radio | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Mailings/newsletter | <input type="checkbox"/> Social media | |
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Television | |

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

- | | | |
|---|---|--|
| <input type="checkbox"/> Acupuncture | <input type="checkbox"/> Home care services | <input type="checkbox"/> Private clinic |
| <input type="checkbox"/> Certified health coach | <input type="checkbox"/> Massage | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Chiropractor | <input type="checkbox"/> Meals on Wheels | <input type="checkbox"/> Senior center |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Medical spa | <input type="checkbox"/> Substance abuse services/AA, NA |
| <input type="checkbox"/> Eye doctor | <input type="checkbox"/> Mental health | <input type="checkbox"/> Telehealth |
| <input type="checkbox"/> Fitness center/trainer | <input type="checkbox"/> Occupational health clinic | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Food bank | <input type="checkbox"/> Pharmacy | |
| | <input type="checkbox"/> Pregnancy center | |

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

- | | |
|--|--|
| <input type="checkbox"/> Access to health insurance | <input type="checkbox"/> More information about available services |
| <input type="checkbox"/> Cultural sensitivity | <input type="checkbox"/> More primary care providers |
| <input type="checkbox"/> Greater health education services | <input type="checkbox"/> More specialists |
| <input type="checkbox"/> Expanded same-day clinic availability | <input type="checkbox"/> Outpatient services expanded hours |
| <input type="checkbox"/> Health education resources | <input type="checkbox"/> Payment assistance programs (healthcare expenses) |
| <input type="checkbox"/> Health insurance assistance | <input type="checkbox"/> Telehealth |
| <input type="checkbox"/> Improved quality of care | <input type="checkbox"/> Transportation assistance |
| <input type="checkbox"/> Interpreter services | <input type="checkbox"/> Other: _____ |

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

- | | | |
|---|--|--|
| <input type="checkbox"/> Alcohol/substance abuse | <input type="checkbox"/> Health and wellness | <input type="checkbox"/> Parenting |
| <input type="checkbox"/> Alzheimer's | <input type="checkbox"/> Health insurance education
(Medicare/Medicaid/Private) | <input type="checkbox"/> Prenatal |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Heart disease | <input type="checkbox"/> Pulmonary health |
| <input type="checkbox"/> Caregiver training | <input type="checkbox"/> Lactation/breastfeeding support | <input type="checkbox"/> Smoking/tobacco cessation |
| <input type="checkbox"/> Chronic disease management | <input type="checkbox"/> Living will/Advanced directives | <input type="checkbox"/> Support groups |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Men's health | <input type="checkbox"/> Weight loss |
| <input type="checkbox"/> First aid/CPR | <input type="checkbox"/> Mental health | <input type="checkbox"/> Women's health |
| <input type="checkbox"/> Fitness | <input type="checkbox"/> Nutrition | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Grief counseling | | |

9. Which of the following support groups would you be most interested in if available locally? **(Select ALL that apply)**

- | | | | |
|---|-------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Stress management | <input type="checkbox"/> Weight loss |
| <input type="checkbox"/> Caregivers | <input type="checkbox"/> Disability | <input type="checkbox"/> Suicide survivor | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Depression/anxiety | <input type="checkbox"/> Grief | <input type="checkbox"/> Veterans | |

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

- | | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> Acupuncture | <input type="checkbox"/> Ophthalmology | <input type="checkbox"/> Urology |
| <input type="checkbox"/> Chronic pain management | <input type="checkbox"/> Oral surgery | <input type="checkbox"/> Vein doctor |
| <input type="checkbox"/> Fertility | <input type="checkbox"/> Psychiatrist | <input type="checkbox"/> Other: _____ |

11. How important are local healthcare providers and services (i.e.: hospitals, clinics, nursing homes, assisted living, etc.) to the economic well-being of the area?

- Very important Important Not important Don't know

12. Which of the following preventive services have you used in the past year? **(Select ALL that apply)**

- | | | |
|---|---|---|
| <input type="checkbox"/> Birthday lab work | <input type="checkbox"/> Flu shot/immunizations | <input type="checkbox"/> Prostate (PSA) |
| <input type="checkbox"/> Blood pressure check | <input type="checkbox"/> Health checkup | <input type="checkbox"/> Vision check |
| <input type="checkbox"/> Children's checkup/Well baby | <input type="checkbox"/> Hearing check | <input type="checkbox"/> None |
| <input type="checkbox"/> Cholesterol check | <input type="checkbox"/> Mammography | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Colonoscopy | <input type="checkbox"/> Mental health counseling | |
| <input type="checkbox"/> Dental exam | <input type="checkbox"/> Pap test | |

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

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

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

- | | | |
|--|---|--|
| <input type="checkbox"/> Could not get an appointment | <input type="checkbox"/> It was too far to go | <input type="checkbox"/> Too long to wait for an appointment |
| <input type="checkbox"/> Could not get off work | <input type="checkbox"/> Language barrier | <input type="checkbox"/> Too nervous or afraid |
| <input type="checkbox"/> COVID-19 barriers/concerns | <input type="checkbox"/> My insurance didn't cover it | <input type="checkbox"/> Transportation problems |
| <input type="checkbox"/> Didn't know where to go | <input type="checkbox"/> No insurance | <input type="checkbox"/> Unsure if services were available |
| <input type="checkbox"/> Don't like doctors or other providers | <input type="checkbox"/> Not treated with respect | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Had no one to care for the children | <input type="checkbox"/> Office wasn't open when I could go | |
| <input type="checkbox"/> It cost too much | <input type="checkbox"/> Too busy, not a priority | |

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

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

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

- | | | |
|---------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Billings | <input type="checkbox"/> Glendive | <input type="checkbox"/> VA |
| <input type="checkbox"/> Bismarck, ND | <input type="checkbox"/> Miles City | <input type="checkbox"/> Watford City, ND |
| <input type="checkbox"/> Culbertson | <input type="checkbox"/> Minot, ND | <input type="checkbox"/> Williston, ND |
| <input type="checkbox"/> Fairview | <input type="checkbox"/> Sidney | <input type="checkbox"/> Other: _____ |

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

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

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

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

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

- | | | | |
|---------------------------------------|-------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Billings | <input type="checkbox"/> Miles City | <input type="checkbox"/> VA | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Bismarck, ND | <input type="checkbox"/> Minot, ND | <input type="checkbox"/> Watford City, ND | |
| <input type="checkbox"/> Glendive | <input type="checkbox"/> Sidney | <input type="checkbox"/> Williston, ND | |

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

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

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

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

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

- | | | | |
|---------------------------------------|-------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Billings | <input type="checkbox"/> Miles City | <input type="checkbox"/> VA | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Bismarck, ND | <input type="checkbox"/> Minot, ND | <input type="checkbox"/> Watford City, ND | |
| <input type="checkbox"/> Glendive | <input type="checkbox"/> Sidney | <input type="checkbox"/> Williston, ND | |

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

- | | | |
|--|--|--|
| <input type="checkbox"/> Allergist | <input type="checkbox"/> Mental health counselor | <input type="checkbox"/> Psychiatrist (M.D.) |
| <input type="checkbox"/> Audiologist | <input type="checkbox"/> Neurologist | <input type="checkbox"/> Psychologist |
| <input type="checkbox"/> Cardiologist | <input type="checkbox"/> Neurosurgeon | <input type="checkbox"/> Pulmonologist |
| <input type="checkbox"/> Chiropractor | <input type="checkbox"/> OB/GYN | <input type="checkbox"/> Radiologist |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Occupational therapist | <input type="checkbox"/> Rheumatologist |
| <input type="checkbox"/> Dermatologist | <input type="checkbox"/> Oncologist | <input type="checkbox"/> Social worker |
| <input type="checkbox"/> Dietician | <input type="checkbox"/> Ophthalmologist | <input type="checkbox"/> Speech therapist |
| <input type="checkbox"/> Endocrinologist | <input type="checkbox"/> Optometrist | <input type="checkbox"/> Substance abuse counselor |
| <input type="checkbox"/> ENT (ear/nose/throat) | <input type="checkbox"/> Orthopedic surgeon | <input type="checkbox"/> Urologist |
| <input type="checkbox"/> Gastroenterologist | <input type="checkbox"/> Pediatrician | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> General surgeon | <input type="checkbox"/> Physical therapist | |
| <input type="checkbox"/> Geriatrician | <input type="checkbox"/> Podiatrist | |

24. Please describe/rate your level of agreement with the following statements:

Due to the COVID-19 pandemic;	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know/NA
24.1) My household has had more difficulty than usual paying for bills and expenses	4	3	2	1	N/A
24.2) My household has had more difficulty than usual getting needed items, food, or services	4	3	2	1	N/A
24.3) A household member or I have had more difficulty than usual obtaining medical care	4	3	2	1	N/A
24.4) A household member or I have had more difficulty than usual obtaining mental health care	4	3	2	1	N/A

24.5) Other comments:

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

	Excellent	Good	Fair	Poor	Haven't Used	Don't Know
Ambulance services	4	3	2	1	N/A	DK
Cancer care	4	3	2	1	N/A	DK
Cardiac rehabilitation	4	3	2	1	N/A	DK
Clinic services	4	3	2	1	N/A	DK
Emergency room	4	3	2	1	N/A	DK
Laboratory	4	3	2	1	N/A	DK
Nursing home	4	3	2	1	N/A	DK
Physical therapy	4	3	2	1	N/A	DK
Radiology services (x-ray, CT-scan, MRI)	4	3	2	1	N/A	DK
Sleep center	4	3	2	1	N/A	DK
Surgical services	4	3	2	1	N/A	DK
Telemedicine	4	3	2	1	N/A	DK
Visiting nurse/Hospice/Personal care	4	3	2	1	N/A	DK

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

- Yes No

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

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

28. Thinking about your mental health (which can be impacted by stress, anxiety, depression and problems with emotions), how would you rate your mental health in general?

- Excellent Good Fair Poor

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

- A great deal Somewhat A little Not at all

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

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

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

- Yes No Not applicable

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

- 33. If you **do NOT** have health insurance, why? (**Select ALL that apply**)**
- | | |
|---|--|
| <input type="checkbox"/> Can't afford to pay for health insurance | <input type="checkbox"/> Too confusing/don't know how to apply |
| <input type="checkbox"/> Employer does not offer insurance | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Choose not to have health insurance | |

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

Demographics

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

- 35. Where do you currently live, by zip code?**
- | | | |
|---------------------------------------|---|--|
| <input type="checkbox"/> 59270 Sidney | <input type="checkbox"/> 59221 Fairview | <input type="checkbox"/> 59243 Lambert |
| <input type="checkbox"/> 59262 Savage | <input type="checkbox"/> 59218 Culbertson | <input type="checkbox"/> Other: _____ |

- 36. What is your gender?**
- Male Female Prefer to self-describe: _____

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

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

[CODED]

Please return in the postage-paid envelope enclosed with this survey or mail to:

HELPS Lab
 Montana State University
 PO Box 172245
 Bozeman, MT 59717

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

Appendix F- Cross Tabulation Analysis

Knowledge Rating of Sidney Health Center Services by How Respondents Learn About Healthcare Services

	Excellent	Good	Fair	Poor	Total
Friends/family	20.2% (17)	56.0% (47)	19.0% (16)	4.8% (4)	84
Healthcare provider	22.7% (17)	57.3% (43)	17.3% (13)	2.7% (2)	75
Word of mouth/reputation	18.3% (13)	54.9% (39)	22.5% (16)	4.2% (3)	71
Social media	18.2% (8)	59.1% (26)	18.2% (8)	4.5% (2)	44
Newspaper	17.6% (6)	58.8% (20)	23.5% (8)	-	34
Website/internet	20.6% (7)	50.0% (17)	29.4% (10)	-	34
Public Health nurse	14.3% (3)	71.4% (15)	14.3% (3)	-	21
Mailings/newsletter	15.8% (3)	68.4% (13)	10.5% (2)	5.3% (1)	19
Radio	30.8% (4)	46.2% (6)	23.1% (3)	-	13
Chamber of Commerce	28.6% (2)	42.9% (3)	28.6% (2)	-	7
Television	40.0% (2)	60.0% (3)	-	-	5
Presentations	-	-	100.0% (1)	-	1
Other	33.3% (1)	33.3% (1)	33.3% (1)	-	3

Delay or Did Not Get Needed Healthcare Services by Residence

	Yes	No	Total
59270 Sidney	42.9% (39)	57.1% (52)	91
59221 Fairview	58.3% (7)	41.7% (5)	12
59262 Savage	50.0% (4)	50.0% (4)	8
59243 Lambert	60.0% (3)	40.0% (2)	5
59218 Culbertson	100.0% (3)	-	3
TOTAL	47.1% (56)	52.9% (63)	100.0% (119)

* "Other" removed from residence (first column) due to non-response.

Location of Primary Care Clinic Most Utilized by Residence

	Billings	Culbertson	Fairview	Glendive	Miles City	Sidney	Williston, ND	Other	TOTAL
59270 Sidney	5.4% (5)	-	10.8% (10)	1.1% (1)	1.1% (1)	64.5% (60)	-	17.2% (16)	93
59221 Fairview	-	-	18.2% (2)	-	9.1% (1)	45.5% (5)	9.1% (1)	18.2% (2)	11
59262 Savage	16.7% (1)	-	-	16.7% (1)	-	33.3% (2)	-	33.3% (2)	6
59243 Lambert	-	-	20.0% (1)	-	-	60.0% (3)	-	20.0% (1)	5
59218 Culbertson	-	100.0% (3)	-	-	-	-	-	-	3
TOTAL	5.1% (6)	2.5% (3)	11.0% (13)	1.7% (2)	1.7% (2)	59.3% (70)	0.8% (1)	17.8% (21)	99.9% (118)

* Bismarck, ND, Minot, ND, VA clinic, and Watford City, ND removed from primary care clinic location (top row) due to non-response.

** "Other" removed from residence (first column) due to non-response.

Location of Primary Care Provider Most Utilized by Reasons for Clinic/Provider Selection

	Billings	Culbertson	Fairview	Glendive	Miles City	Sidney	Williston, ND	Other	TOTAL
Prior experience with clinic	7.1% (4)	3.6% (2)	10.7% (6)	3.6% (2)	3.6% (2)	58.9% (33)	-	12.5% (7)	56
Clinic/provider's reputation for quality	8.3% (4)	2.1% (1)	20.8% (10)	2.1% (1)	2.1% (1)	41.7% (20)	2.1% (1)	20.8% (10)	48
Closest to home	5.6% (2)	8.3% (3)	5.6% (2)	-	-	63.9% (23)	-	16.7% (6)	36
Recommended by family or friends	3.1% (1)	3.1% (1)	18.8% (6)	3.1% (1)	-	46.9% (15)	-	25.0% (8)	32
Appointment availability	12.9% (4)	-	9.7% (3)	3.2% (1)	6.5% (2)	45.2% (14)	-	22.6% (7)	31
Referred by physician or other provider	11.1% (2)	-	5.6% (1)	-	-	50.0% (9)	-	33.3% (6)	18
Length of waiting room time	16.7% (1)	16.7% (1)	-	-	16.7% (1)	16.7% (1)	-	33.3% (2)	6
Cost of care	33.3% (1)	-	-	-	33.3% (1)	-	-	33.3% (1)	3
Required by insurance plan/in-network provider	33.3% (1)	-	-	-	33.3% (1)	33.3% (1)	-	-	3
Indian Health Services	-	-	-	-	-	-	-	100.0% (1)	1
VA/Military requirement	-	-	-	100.0% (1)	-	-	-	-	1
Other	-	-	6.7% (1)	-	-	66.7% (10)	-	26.7% (4)	15

*** Bismarck, ND, Minot, ND, VA clinic, and Watford City, ND removed from primary care clinic location (top row) due to non-response.**

Location of Most Utilized Hospital by Residence

	Billings	Bismarck, ND	Glendive Medical Center	Miles City	Sidney	Williston, ND	Other	Total
59270 Sidney	20.8% (15)	1.4% (1)	1.4% (1)	-	69.4% (50)	1.4% (1)	5.6% (4)	72
59221 Fairview	-	-	-	12.5% (1)	75.0% (6)	-	12.5% (1)	8
59262 Savage	20.0% (1)	-	-	-	40.0% (2)	-	40.0% (2)	5
59243 Lambert	33.3% (1)	-	-	-	66.7% (2)	-	-	3
59218 Culbertson	-	-	-	-	100.0% (2)	-	-	2
TOTAL	18.9% (17)	1.1% (1)	1.1% (1)	1.1% (1)	68.9% (62)	1.1% (1)	7.8% (7)	90

* Minot, ND, VA clinic, and Watford City, ND removed from hospital location (top row) due to non-response.

** "Other" removed from residence (first column) due to non-response.

Location of Most Recent Hospitalization by Reasons for Hospital Selection

	Billings	Bismarck, ND	Glendive Medical Center	Miles City	Sidney	Williston, ND	Other	Total
Closest to home	8.2% (5)	-	1.6% (1)	-	82.0% (50)	-	8.2% (5)	61
Prior experience with hospital	15.2% (5)	3.0% (1)	-	3.0% (1)	72.7% (24)	-	6.1% (2)	33
Referred by physician or other provider	35.7% (10)	3.6% (1)	-	3.6% (1)	39.3% (11)	3.6% (1)	14.3% (4)	28
Emergency, no choice	13.0% (3)	-	-	-	73.9% (17)	-	13.0% (3)	23
Hospital's reputation for quality	40.9% (9)	4.5% (1)	4.5% (1)	4.5% (1)	40.9% (9)	4.5% (1)	-	22
Closest to work	-	-	-	-	90.9% (10)	-	9.1% (1)	11
Cost of care	25.0% (1)	-	-	-	75.0% (3)	-	-	4
Recommended by family or friends	50.0% (2)	-	-	-	50.0% (2)	-	-	4
Required by insurance plan/In-network hospital	25.0% (1)	-	-	-	50.0% (2)	-	25.0% (1)	4
Financial assistance programs	33.3% (1)	-	-	-	66.7% (2)	-	-	3
VA/Military requirement	66.7% (2)	-	-	-	33.3% (1)	-	-	3
Privacy/confidentiality	50.0% (1)	-	-	-	-	50.0% (1)	-	2
Indian Health Services	-	-	-	-	100.0% (1)	-	-	1
Other	33.3% (2)	-	-	-	66.7% (4)	-	-	6

* Minot, ND, VA clinic, and Watford City, ND removed from hospital location (top row) due to non-response.

Appendix G- Responses to Other & Comments

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

- Poor pediatric's
- All of the above should be considered as serious concerns equally

*Responses when more than 3 were selected (2 participants):

- Alcohol abuse (2)
- Cancer (1)
- COVID-19 (1)
- Depression/anxiety (1)
- Drug abuse (2)
- Overweight/obesity (1)

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

- All of them for healthy community we need
- Brochures on other businesses
- Good mail and phone service
- Marital education after marriage every 5 year check ups
- All are most important

*Responses when more than 3 were selected (2 participants):

- Healthy behaviors and lifestyles (2)
- Low crime/safe neighborhoods (2)
- Religious or spiritual values (1)
- Strong family life (1)

5. How do you learn about the health services available in our community?

- Other people
- Facebook
- Work

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

- Physical Therapy
- Eye care out of town
- ER
- My God
- AA meetings

7. In your opinion, what would improve our community's access to healthcare?

- More Doctors that prescribe psychotropic medications.
- Better pediatric services
- Not having to travel for some services
- Pediatricians
- More preventative care
- Someone to clean out my ears
- More understanding doctors who are not money oriented but not overworked
- Mental Health Unit
- NOTHING in Sidney

8. If any of the following classes/programs were made available to the community, which would you be most interested in attending?

- None (2)
- Support for arthritis
- Nothing in Sidney

9. Which of the following support groups would you be most interested in if available locally?

- Dialysis
- None (3)
- Parenting teens
- NA
- Fitness
- Arthritis
- Nothing in Sidney

10. What additional healthcare services would you use if available locally?

- Dialysis Treatments
- None (2)
- Heart stuff
- NA
- Dermatology
- Acupressure, Pediatric neurologist
- Pulmonology
- More M.D. doctors
- Allergist
- Gastro
- Nothing in Sidney

12. Which of the following preventive services have you used in the past year?

- Surgery

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

*Responses when more than 3 were selected (4 participants):

- Could not get an appointment (2)
- Could not get off work (3)
- COVID-19 barriers/concerns (2)
- Don't like doctors or other providers (1)
- It cost too much (3)
- My insurance didn't cover it (3)
- Office wasn't open when I could go (2)
- Too long to wait for an appointment (3)

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

- Hawaii
- Bozeman MT eye care
- Trenton, ND
- Bozeman
- Scobey
- Denver CO, Bowman ND

*Responses when more than 1 was selected (19 participants):

- Billings (9)
- Culbertson (1)
- Fairview (5)
- Glendive (2)
- Sidney (16)
- VA (3)
- Williston, ND (4)

17. Why did you select the primary care provider you are currently seeing?

- She actually listened to what I said
- Keeps cardiologist updated with everything from here
- Only one around
- Only availability in reasonable timeframe/distance
- Very easy to deal with
- I have been his patient since he stated here.
- Was Mom's Doctor
- Previous physician and I did not get along well
- ER
- Because I was sick, at time my doctor was out of town but going back to him now.
- Trust
- After an ER visit he saved me

- Gone to her for years
- SMART Doctor! Council

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

- UC Health Aurora CO *Did due to traumatic injury
- Denver CO

*Responses when more than 1 was selected (7 participants):

- Billings (5)
- Miles City (1)
- Sidney (6)

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

- Location of specialist (2)

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

- Closest to home (2)
- Closest to work (1)
- Emergency, no choice (1)
- Hospital's reputation for quality (1)
- Prior experience with hospital (2)
- Recommended by family or friends (1)
- Referred by physician or other provider (3)
- Required by insurance plan/In-network hospital (1)

22. Where was the healthcare specialist seen?

- Mayo - Rochester
- Texas
- Miles City, UC Health Aurora CO
- Casper, WY
- At home
- Bozeman, MT (2)
- Williston, ND
- South Dakota
- Fargo, ND
- Denver CO, Portland OR
- Denver CO

23. What type of healthcare specialist was seen?

- Nephrologist
- Cardiac EP
- Infectious disease

- Infectious Disease Specialist
- Fertility specialist
- ER Doc
- Diabetes insulin pump education
- Psychiatrist

24.5. Please describe/rate your level of agreement with the following statements: Due to the COVID-19 pandemic; Other comments:

- SHC has opened up much more over past 6 months.
- COVID-19 did very little to effect my household. I am a cattle hauler and I worked through the whole season.
- Wish more psychiatrist here & mental health that was cheaper & didn't have to travel
- This is especially true for children
- I live by myself
- Retired, Medicare
- On fixed income - no changes
- COVID-19 has little to no impact on my life or finances
- Unaffected by COVID-19 as I am an essential worker
- We need more general practitioners in Sidney
- When you need to talk to a Dr. everyone wants to know why or keep asking questions that you only talk to the Dr. about or forgot to give Dr. the message or don't take the time to have the Dr. call you back so I'm going back to my doctor.
- Was supposed to see my doctor in 2 months but kept canceling, took 6 months to get in
- We have had covid and have been fine

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

- Blue Cross
- NA
- I have had major medical only due to cost. Fortunately, I have not needed it. All office expenses and prescriptions are paid for out of pocket.
- Medicare supplement

*Responses when more than 1 was selected (8 participants):

- Employer sponsored (2)
- Health expense shared group (1)
- Health Savings Account (3)
- Medicare (6)
- Private insurance/private plan (3)

33. If you **do NOT** have medical insurance, why?

- Medicare
- Age, wealth

35. Where do you currently live, by zip code?

- No “Other” responses

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

- No “Other” responses

38. What is your employment status?

- Three jobs, one full two part time
- Homemaker
- Own my own business and work from home
- Self-employed/semi-retired
- Self Employed
- Self-employed

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

- Work full time (1)
- Work part time (2)
- Retired (2)
- Student (2)

General comments

- (Q2)
 - Below question choices wrote “Hard to get in. Walk-in clinic is even busy.”
 - Selected “Lack of mental health professionals” and wrote “good ones”
- (Q6)
 - Selected “Public health” and wrote “covid test”
- (Q7)
 - Selected “Access to health insurance” and wrote “good insurance”
 - Selected “Health insurance assistance” and wrote “training”
- (Q8)
 - Underlined but did not select “Grief counseling” and wrote “available at Ebenezer Congressional Church”
- (Q9)
 - Underlined but did not select “Grief” and wrote “available at Ebenezer Congressional Church”
- (Q11)
 - Selected “Very important” and wrote “if less expensive”
 - Selected “Very important” and wrote “bring back home health”
-
- (Q23)
 - Selected “OB/GYN” and wrote “referral from Sidney”

- (Q24.3)
 - Circled “3” and wrote “better over last 6 months”
- (Q25)
 - For service “Surgical services” selected both “N/A” and “DK” and wrote “not lately”
 - Below question matrix wrote “Very hard to get an appointment with my regular physician – clinic run like a jail/love to send you to E.R. – just being honest”
- (Q30)
 - Selected “3-5 times per month” and wrote “too cold and icy for walking outside”
- (Q31)
 - Selected “No” and wrote “Not on many”
 - Selected “No” and wrote “not yet thanks to a credit card”
 - Selected “Yes” and wrote “prescribed by doctor for treatment but over-the-counter”
 - Selected “No” and wrote “Because I grow my medicine in the form of marijuana. Got off prescription drug. Best thing I ever did.”
- (Q34)
 - Selected “Yes, but I do not qualify” and wrote “most of them”
 - Selected “Yes, and I use them” and wrote “have healthcare.gov”
- General comments
 - I’m not a person who likes to do survey’s I feel they are a waste of time and trees.

Appendix H- Key Informant - Questions

Key Informant Interview Questions

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

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

2. What are your views/opinions about these local services:
 - Hospital/clinic
 - EMS Services (ER/Ambulance)
 - Public/County Health Department
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - Services for Low-Income Individuals/Families

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

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

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

Appendix I- Key Informant - Transcripts

Key Informant Interview #1

Wednesday, April 6, 2022 – Anonymous – Via phone interview

1. How do you feel about the general health of your community?
 - I feel general health of Sidney is good.
 - The only exception to this might be mental health. I feel like it's a challenge for all regardless of demographics. We have a shortage of providers and resources, which I know is not an issue unique to Sidney right now.
 - Since the onset of COVID, mental health has really been brought it to the forefront.
-
2. What are your views/opinions about these local services:
 - Hospital/clinic:
 - I feel truly blessed to have the care that we have in this community.
 - I feel like Sidney Health Center's team is very self-reflective in that if there are issues, they try to address them head on which is a positive in my book.
 - They really offer a lot for such a small community!
 - EMS Services (ER/Ambulance)
 - I feel like we're lucky to have the ambulance fully staffed
 - If the case is too much to handle, there seems to be easy access to Life Flight.
 - Public/County Health Department
 - I feel like right now with COVID, they've kind of dropped ball. They used to care about COVID quarantine orders and contact tracing. But now they don't seem to be doing that. I'm not sure how they can get accurate numbers if they aren't wanting folks to report cases.
 - It seems like there's little to no support for public health.
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - For a community of our size, there's a lot of options for the community to age in place – it's nice that we're able to keep our loved ones local!
 - Services for Low-Income Individuals/Families
 - I feel like there's a lot of housing available. We have a generous community, but there's always more we can do, though!
 - We have a local women's violence center called the Richland County Coalition Against Domestic Violence.
 - We also have a local Boys and Girls Club that offers scholarships for those who cannot pay.
 - And we have a few thrift stores with necessary clothing and furniture.

- 3. What do you think are the most important local healthcare issues?**
 - Across the board, we really need more mental health services/providers. A lot of community members are driving 45 minutes to an hour one way, to receive services. We just don't have enough support or resources locally.
 - In addition to mental health, we need to recruit more pediatric and family practice doctors. Sometimes it's hard to get into your provider.

- 4. What other healthcare services are needed in the community?**
 - I've already mentioned that we need more mental health services/resources and doctors.
 - With that, I think we're also lacking in Child Protective Services (CPS). Families in crisis are often not dealt with or are referred to other supports who may not be in town that day. I don't believe that they're always given the due diligence they deserve.
 -

- 5. What would make your community a healthier place to live?**
 - I would love to see a community center with an indoor pool, workout equipment, and space for health education and gathering. Ultimately, I wish things were more readily available at a price that more families could afford.

Key Informant Interview #2

Thursday, April 7, 2022 – Anonymous – Via phone interview

1. How do you feel about the general health of your community?
 - I think it's pretty good overall.
 - Our area fared well through COVID.
 -
2. What are your views/opinions about these local services:
 - Hospital/clinic:
 - I really like them and think they do a good job.
 - EMS Services (ER/Ambulance)
 - I think the ambulance service does a really great job!
 - The emergency room does a lot even though its small. Sometimes they get backed up though.
 - Public/County Health Department
 - I haven't been to the health department except one time to get flu shot, so I can't really speak much to this area.
 - I know that they're located right across from hospital, though!
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - From what I've seen, our area seems to do a good job for senior services.
 - But I think a few more services could be nice. The extended care is short on beds, and I've heard that several are having a hard time getting in.
 - Services for Low-Income Individuals/Families
 - From what I understand, they could probably have more social workers locally.
 - Housing affordability is challenging here. We really need to get more information out about low income housing, for example, what additional services are available, etc.
3. What do you think are the most important local healthcare issues?
 - One of the top issues that I've seen and heard about in this area is accessing your primary care provider. The average wait time to see doctors around here is 8-12 weeks.
 - And unfortunately, the same day clinic is challenging to access in same day. You have to call at 7 a.m. and if they're filled up, you have to call next day.
 - This was particularly challenging with employers requiring notes to return to work. If people can't get doctors note to return, they are risking the loss of wages which has trickling impacts on rent, food, etc. It's a vicious cycle.
 -
4. What other healthcare services are needed in the community?

- We really need better access to primary care. Another couple of providers at the same day clinic would be helpful, even if they rotate in!
 - As I mentioned earlier, this area could also use a couple more social workers.
 - These aside though, I think we have just about everything we need.
-
- 5. What would make your community a healthier place to live?**
- Some more healthy opportunities like yoga classes through the Senior Center, health fairs, blood pressure checks, tips for exercise, etc.

Key Informant Interview #3

Monday, April 11, 2022 – Anonymous – Via phone interview

1. How do you feel about the general health of your community?
 - I guess I would consider the health of our area above average.
 - We have wide open spaces and a mix of ages. There inherent health concerns that come with those in the advanced ages.
 - Homelessness and high drug use aren't as much of an issue like in other areas of the state.
-
2. What are your views/opinions about these local services:
 - Hospital/clinic:
 - I think Sidney Health Center (SHC) is excellent given the constraints they work under.
 - Being that they are a critical access hospital, that pretty well outlines what their role is. They know that sometimes it's too bundle up and transfer to a larger, more resourced health system. That's the way its structured – I'm not sure everyone realizes that.
 - They are now able to provide life flight services to anyone who needs it. It's been such an asset for our area.
 - EMS Services (ER/Ambulance)
 - I believe these are separate entities – the ER and ambulance.
 - Currently, SHC is working on the physical layout of the emergency room (ER). I believe it will eventually provide better access to ambulance service and walk in service which will be great.
 - As for the emergency room, its frequently at the influence of luck of the draw when it comes to physicians. I think improvements could be made with some of their bedside manner.
 - As it stands currently, I realize there's not much that can be done in terms of continuity of care within the ER. Most ER physicians here rotate around the area. They have differences in approaches which makes it challenging. With that being said, it would be good if they could be more unified.
 - Our EMS seems to be surprisingly well staffed. I know they sometimes have challenges finding certain addresses. I think response times internally are probably good, but when they get out to try to find addresses, they are a bit delayed. I think the Sheriffs Department steps in to help find some addresses.
-
- Public/County Health Department
 - If it weren't for the pandemic, I wouldn't know anything about the local health department.

- In their response to COVID-19, though, they are very well organized and forthcoming with latest statistics. I believe they dealt with political aspects in Montana very well.

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

- Locally, I think the senior needs are pretty well met. We have The Lodge, which is an assisted living facility and a long-term care attached to hospital.
- I think the senior center could probably be more visible in the area and share more about what they have going on. Perhaps some more advertising!
- The strongest social piece in this area seems to be the coffee clubs. A lot of social interactions happen spontaneously for those who can get out.

Services for Low-Income Individuals/Families

- I think the services are good and that we have above average coverage in this area compared to the rest of the state. We frequently see things pop up on the area Facebook pages sharing community happenings, requesting things like extra clothes and other needs people might have.
- We have at least two food pantries locally. One is part of a local church which is consistently and proactively stocked. And then there's a Richland County Food Pantry.
- I'm really not sure why housing is still an issue. It seems that we're still maintaining oil boom level rent and housing prices. It's definitely a challenge unless you're in the bracket to qualify for assistance.

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

- Well one of the big ones is the retention of caregivers.
- It seems like SHC can attract nurses to the hospital to work. But there's challenges attracting folks to the town of Sidney.
- I'm wondering if they have they maximized the staff or potential staff who have long term widespread roots in the area. Maybe there are some people in the locally who are no longer working in healthcare that could return to that sector of work.

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

- At this point in time, there's only one company that owns a substantial corner on the durable medical equipment (DME) market. This makes it challenging and limits the selection locally.
- At the local level, we don't have anyone on the payroll with healthcare experience that's helping to handle medical equipment or advising people on the proper use. Inherently, this leads to a less than desirable situation.
- So if you're monitoring your blood pressure weekly, you have to submit the results to the company and then they submit them to Sidney Health Center on

your behalf. It's a totally money driven approach, that really takes the human out of healthcare.

- Aside from DME, there might also be home health needs that I'm not as familiar with.

•

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

- Access to indoor ambulation, or walking, would be an asset to this area. Winters are so long here. And there's not really many places to go and get exercise. Walking is great for your health!
- Sidney Health Center has an outdoor track.
- We have a community center that is part of fairgrounds that sits empty most of time. This could be an excellent place to use!

Key Informant Interview #4

Monday, April 11, 2022 – Anonymous – Via phone interview

1. How do you feel about the general health of your community?
 - I guess I feel pretty good about the health of our community members. But I'm also involved in a lot of the local gyms and activities so that would impact my rating.
 -
2. What are your views/opinions about these local services:
 - Hospital/clinic:
 - I haven't had a lot of interaction with the local hospital. But considering the services I have had to use, it's been great.
 - Even though I haven't had much experience with them, I do think they are a necessary service that we need in this community and area.
 - EMS Services (ER/Ambulance)
 - I haven't used either, so I don't have an opinion to share.
 - Public/County Health Department
 - I haven't interacted with the public health department, so I don't have an opinion to provide – I guess I'm neutral on this one too.
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - The Lodge has an excellent facility, but I don't know anything about the long term care facility attached to the hospital. The Lodge seems to take very good care of their residents and families. The food seems fairly healthy and they have transportation for in-town local services.
 - Services for Low-Income Individuals/Families
 - I don't have a lot to comment on regarding these services.
 - The area seems to offer a lot though.
 - The food bank always seems to be stocked, which is great.
 - Aside from that, the Sunrise Women's Clinic seems to have great leadership!
3. What do you think are the most important local healthcare issues?
 - We desperately need pediatrics locally. There are limited providers locally that will care for children, so I would estimate that about half receive care for their children locally, and the other half are left traveling out for this care.
 -
4. What other healthcare services are needed in the community?
 - We have a really great cancer center. So I'm not sure we really need anything else!
 -
5. What would make your community a healthier place to live?

- This is a hard one, but I think trying to get people to get more involved in exercise and making healthier food choices more accessible and the choice option. Much of our community members have access to a lot of processed foods. Ultimately, I would like to see less food waste and try to use what we have locally.
- To tag onto that, maybe some health education would be great. A majority of the classes that are currently offered are more focused on entertainment rather than healthy behaviors and lifestyles.

Key Informant Interview #5

Tuesday, April 12, 2022 – Anonymous – Via phone interview

1. How do you feel about the general health of your community?
 - I would say the health of our community is fair overall – I think we need more people that are more active!
 - We have a more sedative community.
 - But having access to healthcare is a positive!
 -
2. What are your views/opinions about these local services:
 - Hospital/clinic:
 - I think we have a wonderful selection of providers locally.
 - There is a great choice of services with the same day clinic.
 - EMS Services (ER/Ambulance)
 - I have a strong, positive opinion with the ambulance. I have been very impressed with their skillset!
 - I think their response times are adequate.
 - Public/County Health Department
 - I think they have an amazing number of services that they offer this area.
 - They hosted plenty of COVID vaccination clinics.
 - They've also sponsored some adult education for those with high blood pressure.
 - They are in a great location and have plenty of signage to help with visibility.
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - We have an array of services for seniors available locally. There's independent living options, assisted living, and a nursing home for those needing more advanced care. I think there are workforce challenges limiting nursing homes beds.
 - All in all though, I have only heard really positive things about the services we have.
 - Services for Low-Income Individuals/Families
 - I'm not sure I know much about these services.
 - We don't have a local place to sign up for things like Supplemental Nutrition Assistance Program (SNAP) benefits. We lost the ability of signing up locally about 3-5 years ago - it all must be done online now. I think there's a lack of education and help with navigating the sign up. I believe many community members that don't have internet at home, go to public library to use their computers to sign up.
 - We seem to have a strong low income housing program that's run through the Richland County housing authority.

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

- Having somewhat inactive people creates other healthcare issues. To that end, I think we need to motivate people to use our great, wide array of services like walking paths, pools, etc.

•

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

- People obviously have to travel to access most specialty care since we're in a rural area and we cannot have everything available locally. With things like initial diagnosis and treatment for heart issues, you will likely always have to go to a bigger area like Billings.
- With that though, we could use dermatology locally.
- I think we could use stronger mental health facilities and more providers. We have limited mental health services available locally. Making someone travel for counseling is tough.

•

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

- I would like to see us offering some tools to connect people to local social and physical activities.

Key Informant Interview #6

Wednesday, April 13, 2022 – Anonymous – Via phone interview

1. How do you feel about the general health of your community?
 - Considering physical health, I would say we are probably better than average.
 - Mental health seems to be a problem around here though. Everyone from youth to your elderly are struggling.
 -
2. What are your views/opinions about these local services:
 - Hospital/clinic:
 - I think they're doing great job!
 - Better parking might be nice, though!
 - EMS Services (ER/Ambulance)
 - I think the ambulance is phenomenal.
 - Public/County Health Department
 - I think they're doing the best they can with the resources they have. They really need more funding and people to support the great work they could be doing.
 - One of my concerns with the health department is that they have so many AmeriCorps VISTAs starting projects and then they move onto their next position. It's often hard to see the outcomes when there are so many cycling through.
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - I think we're top notch for a rural area like Sidney because of the continuity of services you can access! We even have a memory unit. The nursing home is so homey and well organized.
 - Sidney's Senior Center has great meals for the elderly.
 - This area is still lacking hospice services. We're short on nurses, but I don't think this is a unique problem for Sidney, you hear about it everywhere really!
 - Services for Low-Income Individuals/Families
 - I would venture to say we're lacking in this area as I'm not as familiar with these services.
 - It would be nice to have more coordination of these services.
3. What do you think are the most important local healthcare issues?
 - Mental health providers, especially for youth is a big issue around here. We still have a lot of work to do to try and remove stigma associated with accessing mental health services and get necessary resources to parents. Many parents and people around here still call 911 in a mental health crisis, and many of those that respond to the calls aren't any better trained on responding to mental health crisis. Often times, it goes to EMS, then ER and then transported to a

hospital, sometimes out of the area. Then they may sit there for however long and have transportation problems getting home. With that, I think we could use 3-4 additional mental health providers in this area.

- Community volunteers have tried to step up and learn Youth Mental Health First Aid, which is great, but I think we need to do more.
- I think we have one of the top cancer facilities in the nation, so we seem to be good there.
- Home health care is another challenge I'm seeing. It would be nice to give folks the resources and support for caregivers to be able to keep their loved one's home longer. This could help with mental health!

•

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

- I've already mentioned that I think we need home health services and 3-4 more mental health providers.
- We could probably use expanded hospice services.
- The final thing I'd like to note here is that it's challenging to get in to see your primary care doctor. While we have the walk in clinic now, people miss building the relationships with their chosen doctors. Doctors used to be independent and have private practices, but now they're all under one system which likely makes fiscal sense. It makes it challenging to develop relationships and have a medical home when you are calling into a big phone tree.

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

- I think it's really a combination of all the topics I've discussed. Making mental health services more accessible and have less stigma would be a great step in the right direction.
- Healthier depends on what we define it as. I'm not sure health education alone is going to help create a healthier community.

Key Informant Interview #7

Thursday, April 14, 2022 – Anonymous – Via phone interview

1. How do you feel about the general health of your community?
 - In my opinion, Sidney is a fairly healthy community
 - We're a farming/ranching community and people seem to take care of themselves.
 -
2. What are your views/opinions about these local services:
 - Hospital/clinic:
 - I think the hospital has some room for improvement.
 - The lack of Pediatric care options locally is challenging for our local families. A lot have to travel to Williston for this sort of care.
 - We only have one family doctor locally. And we have some specialists.
 - We just don't have a lot of options for day-to-day things.
 - EMS Services (ER/Ambulance)
 - From my knowledge and experience, the ambulance is wonderful! They have a lot of caring and kind staff and volunteers.
 - On the flip side, I have had some not so good experiences with the emergency room; most of the doctors are traveling doctors. Bedside manner is challenging, and triage times can be long.
 - Public/County Health Department
 - They've been great anytime we need to use them for anything. Our family primarily uses them for flu shots and all of the COVID boosters.
 - Their office is easy to get to and they have consistent hours.
 - They share a lot of timely information on Facebook!
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - I don't have a ton of experience with these services yet.
 - I miss the neat experiences that let kids interact with elderly in the Extended care unit at the hospital like trick or treating and other activities. The kids and elderly were able to create some great relationships – I think it benefited both!
 - Aside from those experiences, I've heard the care is positive.
 - Services for Low-Income Individuals/Families
 - Honestly, I don't know anything about these so I can't share an opinion.
3. What do you think are the most important local healthcare issues?
 - The lack of pediatrics and family doctors are such issues for this area. Going out of town is unfortunate because you'd really like to access care locally.
 - The one family doctor that has a private practice is always busy
 - Having access to medical providers is probably the biggest issue with this area.

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

- Well, I've already mentioned family doctors and pediatricians are a need.
- It would also be nice to have a Dermatologist. Currently, you have to travel out to either Billings or Williston to access these services.

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

- Having access to more doctors!
- Sidney, in general, has a lack of healthy food options. We have a lot of fast food restaurants and two grocery stores. Sometimes the produce is on its last leg when it gets here.
- It would be nice to have somewhere indoors where we can take kids to run around and play, particularly in the winter months.

Key Informant Interview #8

Monday, April 18, 2022 – Anonymous – Via phone interview

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

- Overall, I think we have a high cancer rate, but despite that, I think we are very well off though.

•

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

Hospital/clinic:

- I think they're good and for the most, I've had positive experiences.
- I do think that they're still strained in terms of workforce though. It's hard to get into the main provider.
- The walk-in clinic helps some, but older people still struggle with getting in when they need. If you can't call right when they open, chances are you are not getting in until the next day at the earliest.
- Finding providers and workforce that will stick around seems to be a persistent issue for our area.

EMS Services (ER/Ambulance)

- I think the ambulance is strained and stressed being that they're low on volunteers.
- But they really have a lot of good tools available to them so they're a great service to have locally.
- The emergency room has a lot of locums that come in. Overall I would say its pretty good. But sometimes I think they can be a bit complacent with people coming in just looking for drugs and they can miss things.
- Triage time can be fairly slow.

• Public/County Health Department

- Even though they were leading a lot of the work around COVID, they seemed to be a little kinder and understanding about COVID compared to hospital.
- I think they did a good job through COVID.

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

- We need so much more in this area. We have a lot of seniors that are at home, so services like trimming toe nails are great. We also have a Meals on Wheels program.
- I know there's a Senior Coalition that helps direct seniors to needed services. But I think it would be nice to raise more awareness of the available local services.

Services for Low-Income Individuals/Families

- Well we have the housing authority.
- We also have the Richland transportation bus that's available to all, even seniors. It's a huge benefit for this area to just pay a dollar each way whenever you need it. They do only stay within the County though.

- Currently accessing things like Medicaid and SNAP are very challenging. Unfortunately, if they have any questions on your applications, you are at the mercy of a call back. If you miss that call, it kicks them out of the program and they would have to redo everything. Those who have the means, would travel two hours to access physical offices.
- 3. What do you think are the most important local healthcare issues?**
- Lack of nurses - I want to say we're down like 100 nurses locally.
 - Morale of hospital staff is another issue I see. We'll always have a workforce shortage if we can't improve this. It's really hard to recruit and retain workforce around.
-
- 4. What other healthcare services are needed in the community?**
- I would like to see more senior resources and programming to keep them at home longer. Things like affordable occupational healthcare, home health, senior exercise classes, etc. would be great!
 - We could use an expanded walk in clinic. More general practitioners would be great.
 - We also don't currently have pediatrics.
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- 5. What would make your community a healthier place to live?**
- Increasing our general practitioners and pediatrics, as well as get them up and running would be a big help. Its so hard for people to get in when they need, and for the most part, people are winging it.

Key Informant Interview #9

Monday, April 18, 2022 – Anonymous – Via phone interview

1. How do you feel about the general health of your community?
 - I think the health of our community is fine. I don't really think about it on a day-to-day basis though.
 -
2. What are your views/opinions about these local services:
 - Hospital/clinic:
 - Overall, I like Sidney Health Center.
 - My one wish is for the Walk In Clinic to have an easier system in terms of scheduling and accessibility. I realize it's probably a staffing issue, but out of everything I've experienced and heard about from others in the community, it's probably our biggest challenge.
 - EMS Services (ER/Ambulance)
 - Thankfully, I haven't had to use either of these services, but I'm glad we have them here locally if we were to need them.
 - Public/County Health Department
 - I feel bad for them- COVID was really hard for them! But I think that was true across the nation because no one really knew who was in charge.
 - That aside though, I think they work really hard.
 - But vaccination hours are pretty limited. I know there's a lot of vaccine hesitancy around here around things like getting sick or having a reaction to the vaccine and with such limited vaccination hours, I think it really misses where people are at.
 - I think they could do a better job communicating on a large scale, what programs they have. They only seem to use Facebook for events and vaccination clinics. There's really no one good source of health information for the area in general though.
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - I think that we try to provide a lot of senior services in this area. But it sounds like we have a workforce challenge associated with caretaking.
 - COVID stopped a lot of the cool programming that use to be available through the hospital for seniors – things like trick or treating so the elders would get to interact with the local youth.
 - We have a Meals on Wheels program – I love them! I just wish they had more funding for volunteers and expanding their reach.
 - We also have a ride assist program which seems to be well received in the area.
 - I know Fairview has a senior center, but outside of that, I'm not aware of what's available for seniors outside of Sidney.

Services for Low-Income Individuals/Families

- I think that we do our best, there's always room for improvement.
- We really need more low-income housing! I know the state uses payroll taxes to assess what is and is not qualifying for housing assistance. The oil fields and hospital offset funding that we desperately need for housing assistance.
- We got new buildings for low-income housing about seven to eight years ago, but we could not apply for any partners with state. There's still a big waitlist to access these units. I know city steps in for the utilities.

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

- I think we have serious issues accessing mental health care locally. I know that Sidney Health Center is working on it, but I don't know if we can wait to get all the pieces in place.
- We also need someone in the hospital or at the health department to be certified to conduct sexual assault nurse exams (SANE). The closest place that someone can access a SANE is Miles City, which is about 2 hours away. That's a long way to travel considering the factors associated with needing such a resource. I know there was a lawsuit years ago that resulted in this being taken out of the area. But it does feel like a disservice for a population of around 12,000 people.

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

- I know we're having provider workforce challenges locally, but I think we could use one to two more pediatricians. Currently, families are having to travel out to other towns like Glendive, Williston, and Billings.
- We have one private practice eye doctor, but I think it would be nice to have another locally.
- We have plenty of dentists, which is great!
- I know community members would love other specialists, like cardiology, but I'd rather focus on the specialties that would be feasible to sustain here.

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

- I would like to see improved and sustainable indoor and outdoor recreational access for youth. We have gyms in schools, but it leaves out the demographic that doesn't play organized sports.
- Our local walking trails aren't lit and only traverse a small section of community. Sidewalks aren't required in Sidney, and a lot of the land that surrounds Sidney is privately owned, so while some might like to partner and support a golf course in an adjacent field, most parcels just go untouched and are left unused.

Key Informant Interview #10

Tuesday, April 19, 2022 – Anonymous – Via phone interview

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

- I'm going to be transparent, that I discussed these questions with my friends because I know they all have had valuable experiences to share through a project like this. I'll be sharing a combination of mine and their experiences throughout and removing any personal stories.
- I think the health of our community needs improvement. Access to healthcare services is not the best around here due to the long wait times to see your doctor. I would like to see more thorough testing and interpretation of results.
- One of my friends thinks that the general overall health of our area receives a grade of "C." Its mediocre at best. We need access to healthy food options. Our community would also benefit from better access to recreational activities – there's no place for kids to go blow off steam in the winter months.

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

Hospital/clinic:

- I think the hospital and clinic are excellent. Through the hospital specifically, I think the needs are well taken care of.
- One of my friends has experienced challenges getting into their provider.
- Another friend thinks our hospital and clinic are good for a small community, but you still likely have to travel a distance for what you need.
- I have heard that a lot of community members experience challenges accessing clinic. Specifically, going through central hub has been challenging because it's hard to get in touch with the doctors and nurses who are familiar with your medical history. There's been a lot of turnover in providers and each time you are moved to a new doctor, you have to have a separate appointment to establish care before you can get in to talk about what you really need.

EMS Services (ER/Ambulance)

- Sidney Health Center's purchase of an airplane has been fabulous for this area! They have flown it to outlying towns like Forsyth to take people to Billings.
- I have heard of major issues accessing the emergency room lately. The waiting room is currently shared with lab and other services right now which make privacy challenging. Triage times can also be challenging, but experiences seem to vary from person to person. I would like to see a streamlined process for intake in the ER.
- One of my friends is concerned about our surgeons available for emergency situations. We have two surgeons on staff, one who does not do surgery on children. This frightening to my friend and does not give them any confidence in

the ER if an emergency were to happen and that doctor is the on call doctor. They think we are too small of a community for this. If we are to have surgeons on staff, they should be able and willing to perform surgery on any patient. To have one who is not practiced in this manner on a regular basis is putting children who need an emergency surgery in the ER in danger if that is the only surgeon available.

- Public/County Health Department
 - Everyone I've talked to about the local health department gives it good ratings!
 - They have a fantastic nursing staff, but some of the office staff could be more friendly though.
 - I think our public health department deserves more praise than they receive. I have so much confidence in them.
 - They are a great resource for our area.

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

- Apparently, the Hospice House is being approached. I think they're moving, but it's unclear.
- Our home health is short staffed here. They really need support!
- The County Transit bus is great for this area! You don't have to pay if you're over the age of 65.

Services for Low-Income Individuals/Families

- We don't have a Medicaid or Supplemental Nutrition Assistance Program (SNAP) office anymore. I know this isn't just a county issue, but a statewide issue. To not have an Office of Public Assistance locally is a disservice. It can take people about eight tries to get through the phone tree – that could easily mean at least three hours on the phone.
- Miles City has the closest Office of Public Assistance. What low-income individual and/or family has time or resources for this? This system is designed to keep people out.

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

- I think the urgent care – not ER – needs to be extended and enhanced.
- Aside from that, retaining good doctors is a real issue for our area that needs to be addressed.

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

- We could use a Urologist, Pediatric surgeon, Asthma specialist, dietician, diabetes management support and lactation services locally.
- I think it's also important to make people aware of changing policies in the hospital system. I've noticed that some changes have happened, but they don't seem to be very well advertised or communicated with community.

- Not sure these are things we could work on through a project like this, but they would be nice to work on eventually. The first thing that would be nice is a community center where community members can gather and host events, particularly in inclement weather. The other item that would be nice are good restaurants. We primarily have fast food options. I think we need healthier choices that are more family oriented, sit down restaurants.
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- 5. What would make your community a healthier place to live?
 - This is a hard question. The grocery stores we do have here are pretty expensive. The general consensus seems to be that folks want to support local, but it doesn't always work out that way.
 - The doctors and visiting doctors are good, which helps. But I don't like this centralized clinic model. There's only one doctor that has a private around here.

Key Informant Interview #11

Thursday, April 28, 2022 – Anonymous – Via phone interview

1. How do you feel about the general health of your community?
 - For the small community we have, I would say we have very good health overall.
 - Our biggest struggle is the retention of doctors and specialists. But we have the ability to get to specialists with that new plane.
 - Continuity of care is pretty good if you see a specialist elsewhere.
 -
2. What are your views/opinions about these local services:
 - Hospital/clinic:
 - I think our hospital struggles a bit with communication. Anything involving doctors seems to be a struggle – they’re very overwhelmed. We just do not have enough providers locally, but I think the nurses are great. There are one to two doctors that cover and just do hospital rounds, which can be a plus and a minus. Sometimes it’s nice for the additional feedback, but consensus on a treatment plan among providers is hard.
 - I think the clinic has improved with addition of the walk-in clinic. Appointments can be challenging to get though. You have to call by 7 a.m., otherwise you’ll have to wait at least another day to get in.
 - EMS Services (ER/Ambulance)
 - I think the local ambulance has been very good. They are great about getting there and transporting to the hospital as fast as possible!
 - The emergency room is a struggle though. Wait times are hard, but it’s getting better because of COVID rates declining.
 - If ER is packed, it can overwhelm other adjacent services like timeliness of lab work.
 - I will say that the emergency room is set up in a way that the counter is in the center. I think they really need to be careful as they’re having conversations. I think more privacy would help the ER staff.
 - Public/County Health Department
 - I haven’t had a lot of interaction with them.
 - I’ve heard that there’s a nutrition coalition that has lots of meetings! They seem to host some health education opportunities at Reynolds grocery store.
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - I think we struggle with these services a lot.
 - Home health does not have enough nursing workforce. I know they’ve had to cut back on their number of clients because of the amount of need, but also due to the lack of workforce.

- We don't really have hospice locally. It's hard because you have to go into hospital if you need this level of care.
- Senior housing is lacking. It would be nice if they could have their own space, like assisted living. There's really nothing between their home and the Lodge which is our nursing home. We have Crestwood available, but it's not just open to seniors, it's also open to those with low income.
- The senior center is open for meals twice per week and I know they'll come get you if you don't have a ride. They host cards about twice per week and have a Meals on Wheels program. It's unfortunate that they aren't open everyday though.
- I know we have Council on Aging which helps our area!

Services for Low-Income Individuals/Families

- As I mentioned earlier, we have Crestwood, which is open to those with low income.
- We also have the WIC program locally.
- I would think it's probably hard to know how to sign up for assistance programs though. They closed our Office of Public Assistance in Richland County. So to access necessary services, you have to either call or travel, which can be very challenging.
- Childcare is difficult to come by too. Daycare is very few and far between. It's a challenge for our working parents.

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

- I would think a big issue for our area probably surrounds vaccines and their safety. It's a bit up and down in this area- there's a lot of very strong opinions one way or another.
- Having the Cancer Center locally helps, but cancer is still a strong issue in our area.
- Aside from that getting out of the area to access care is really hard! You have to travel some significant distances to access specialty care like cardiology.

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

- Eye care! We currently only have one eye doctor. I think they might have brought a second in, but I'm not completely sure.
- Infant care is also a big need as we only have one pediatrician locally.
- I mentioned the general senior needs of home health services and really just allowing our elders the opportunity to stay home longer if they would like.
- More doctors would be great! The walk-in clinic is fine for a basic cold, but anything outside of that, you should just be able to get to know a doctor and develop those relationships over time.

- We used to have a lot more traveling specialists from the Billings area. They used to list the specialty schedules in the paper so community members were aware of what was available
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- 5. What would make your community a healthier place to live?
 - I would like to see more education on topics like nutrition, weight loss, exercise. We do have two fitness centers, but again it's the cost, hours, and education on how to do the stretches and exercises. Many folks might not know how and where to start.
 - There also isn't anything specifically for seniors on how to move safely.
 - I know when the health department does workshops the attendance is typically pretty low.

Appendix J- Request for Comments

Written comments on this 2022 Community Health Needs Assessment Report can be submitted to the Administration Department at Sidney Health Center:

Administration
Sidney Health Center
216 14th Ave SW.
Sidney, MT 59270