

Northeast Montana Health Services

Community Health Services Development
Survey Report

Survey conducted by
Trinity Hospital - Wolf Point, Montana

Poplar Community Hospital
Poplar, Montana

June 2022

**Northeast Montana Health Services Community Survey
Summary Report
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I. Introduction

The Poplar Hospital Association (Poplar, Montana) and Trinity Hospital Association (Wolf Point, Montana) located in Northeast Montana merged on July 1, 1996 to form Northeast Montana Health Services (NEMHS); a local community non-profit healthcare system. Both hospitals share the same Federal ID number. In 1999, the Centers for Medicare and Medicaid approved the conversion of the Poplar Hospital to a 20-bed Critical Access Hospital. Trinity Hospital converted to a 22-bed Critical Access Hospital, receiving its designation in July of 2003. Today, NEMHS has 380 employees and eight providers making the facilities the largest employer in Roosevelt County. NEMHS is comprised of seven facilities in Poplar and Wolf Point: Poplar Hospital, Riverside Clinic, Poplar Tele-Pharmacy, Trinity Hospital, Listerud Rural Health Clinic, Wolf Point Tele-Pharmacy, and Faith Lutheran Home. NEMHS's service area consists of both non-Indian and Indian residents on the Fort Peck Reservation. It is the ninth-largest Indian reservation in the United States and comprises parts of four counties. In descending order of land area they are Roosevelt, Valley, Daniels, and Sheridan counties. A part of this project is community engagement which includes a health care service survey and focus groups, which were conducted by Northeast Montana Health Services.

In the spring of 2022, Northeast Montana Health Services' service area was re-surveyed about its health care system. This report shows the results of the survey in both narrative and chart formats. At the end of this report, we have included a copy of the survey instrument. Readers are invited to familiarize themselves with the survey instrument and then look at the findings. Our narrative report touches on the highlights while the charts present data for virtually every question asked.

II. Health Assessment Process

A Steering Committee will be convened to assist Northeast Montana Health Services in the implementation planning phase of the CHSD. A diverse group of community members, representing various organizations and populations within the community (ex. Public health, elderly, uninsured) will come together in the fall of 2016. For a list of all Steering Committee members and their affiliations, see Appendix A. The Steering Committee will meet at least once during the CHSD implementation process to review results of the survey and focus groups.

III. Survey Methodology

Survey Instrument

In April 2022, hard surveys were mailed out to the residents in Northeast Montana Health Services' service area. This includes the communities of Frazer, Wolf Point, Poplar, and Brockton, Montana. Also utilized was Survey Monkey

The survey was marketed via the NEMHS Facebook page and on the NEMHS Website. Survey Monkey was designed to market the younger, more techno literate population base. The survey on Survey Monkey was identical to the hard copy survey sent out to the residents of the communities listed in Roosevelt County. The surveys were to provide each facility with information from local residents regarding:

- Demographics of Respondents
- Hospitals, primary care providers and specialists used, and reasons for selection
- Local Health care provider usage
- Services preferred locally
- Perception and Satisfaction of local health care

Sampling

Northeast Montana Health Services sent out 300 hard copy random surveys via Bulk Mailing. Residence was stratified in the hard copy sample selection so that each area would be represented in proportion to the overall served population and the proportion of year to date admissions. Of the 300 surveys sent out, 180 or 60 % were sent to residents with a zip code of 59201 (Wolf Point), 100 or 33% were sent to residents with a 59255 (Poplar) zip code, 10 surveys or 3% to residents with 59213 (Brockton) and 10 surveys or 3% were sent to residents from the 59225 (Frazier) zip code. As stated, statistically, these are in-line with our total YTD in-patient admissions. Of the total admissions, YTD, 54% are from the 59201 exchange, 33% from 59255, 4% from 59213 and 5% from 59225 zip code. (Note: Although the survey samples were proportionately selected, actual surveys returned from each population area varied, which may result in slightly less proportional results).

Survey sampling was also done through the use of Survey Monkey, an on-line survey tool, which is being used nation-wide for various applications. Residents of our survey area were able to access a link to Survey Monkey found on our Web site and also on our Face Book page. The survey process was conducted for 14 days.

Information Gaps

Data

It is a difficult task to define the health of the 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 continue 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 require regional reporting of many major health indices including chronic disease burden and behavior health indices. 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 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 community focus groups and key informant interviews in addition to the random sample survey and the on-line Survey Monkey allows for a more robust sample and, ultimately, these efforts help to increase the community response rate.

Survey Implementation

In April, the community health services survey, along with a cover letter from the Northeast Montana Health Services' Chief Executive Officer's signature on Northeast Montana Health Services' letter head, and a postage paid reply envelope were mailed to 300 randomly selected residents in the Northeast Montana Health Services' service area. A news release was sent to local newspapers prior to the survey along with radio adds announcing that Northeast Montana Health Services would be conducting a community health services survey throughout the region. In addition, we announced that we would be utilizing Survey Monkey for our patients that utilize today's technology. We also used our Face Book page and website to announcement our survey process.

As shown in the table below, 133 surveys were completed. Mail returns have been purged with the on-line surveys. From this point on, the responses will be based on 133 returns.

IV. Survey Respondent Demographics

The following tables indicate the demographic characteristics of the 133 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.

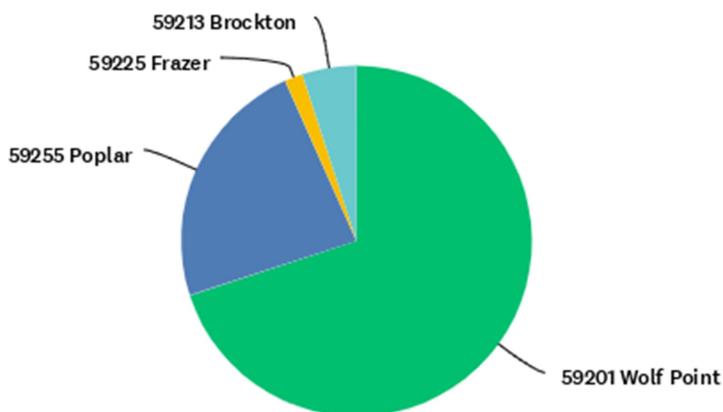
Place of Residence (Question 31)

While there are some large differences in the percentages below, the absolute differences are small. The returned surveys are skewed toward the Wolf Point and Poplar populations which is reasonable given that this is where most of the services are located.

Location	Zip Code	Count	Percent
Wolf Point	59201	84	70%
Poplar	59255	28	23.33%
Frazer	59225	2	1.67%
Brockton	59213	6	5%
Skipped Question		13	
TOTAL		133	100.0%

Q31 Where do you currently live by zip code?

Answered: 120 Skipped: 13

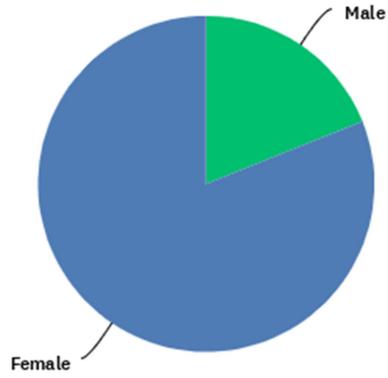


Gender (Question 32)

Of the 133 surveys returned, 81.06% of survey respondents were female; 18.94% were male, and 1 person chose not to answer this question. It is not unusual for survey respondents to be predominantly female, particularly when the survey is health care oriented since women are frequently the health care decision makers for families.

Q32 What is your gender?

Answered: 132 Skipped: 1

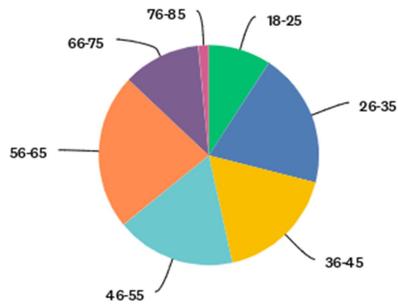


ANSWER CHOICES	RESPONSES	
Male	18.94%	25
Female	81.06%	107
TOTAL		132

Age of Respondents (Question 33)

Q33 What age range represents you?

Answered: 131 Skipped: 2

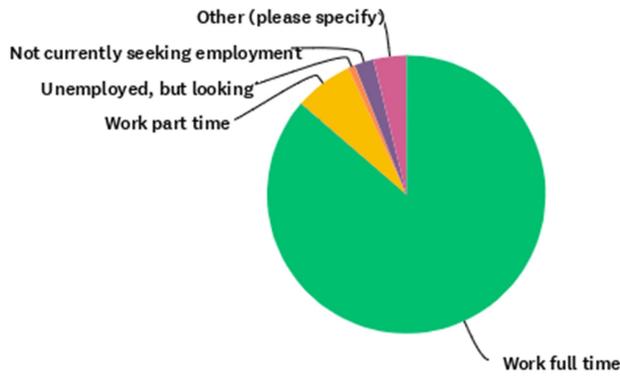


ANSWER CHOICES	RESPONSES	
18-25	9.16%	12
26-35	19.85%	26
36-45	17.56%	23
46-55	17.56%	23
56-65	22.90%	30
66-75	11.45%	15
76-85	1.53%	2
86+	0.00%	0
TOTAL		131

Employment of Respondents (Question 34)

Q34 What is your employment status?

Answered: 132 Skipped: 1



ANSWER CHOICES	RESPONSES	
Work full time	86.36%	114
Student	0.00%	0
Work part time	6.82%	9
Collect disability	0.00%	0
Unemployed, but looking	0.76%	1
Not currently seeking employment	2.27%	3
Other (please specify)	3.79%	5
TOTAL		132

#	OTHER (PLEASE SPECIFY)
1	Retired
2	Retired
3	Retired
4	Self employed
5	Own Business

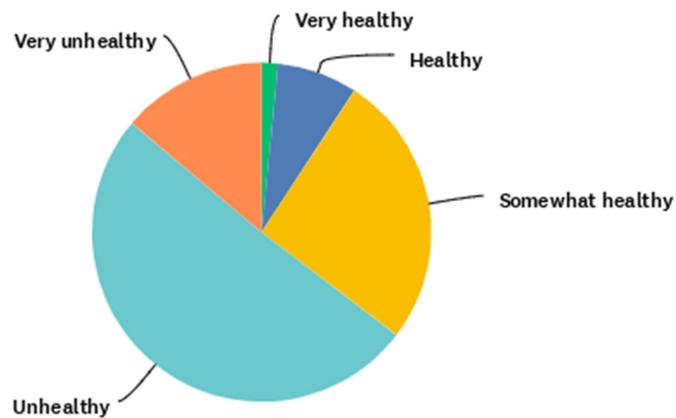
V. Survey Findings- Community Health

Impression of Community (Question 1)

Respondents were asked to indicate how they would rate the general health of their community. 50.77% rated their community as “Unhealthy.” 26.15% felt their community was “Somewhat Unhealthy” and 1.54% felt their community was “Very Unhealthy.” Three respondents chose not to respond to this question. According to this survey as compared to the survey three years ago, the respondents feel the overall health has substantially declined.

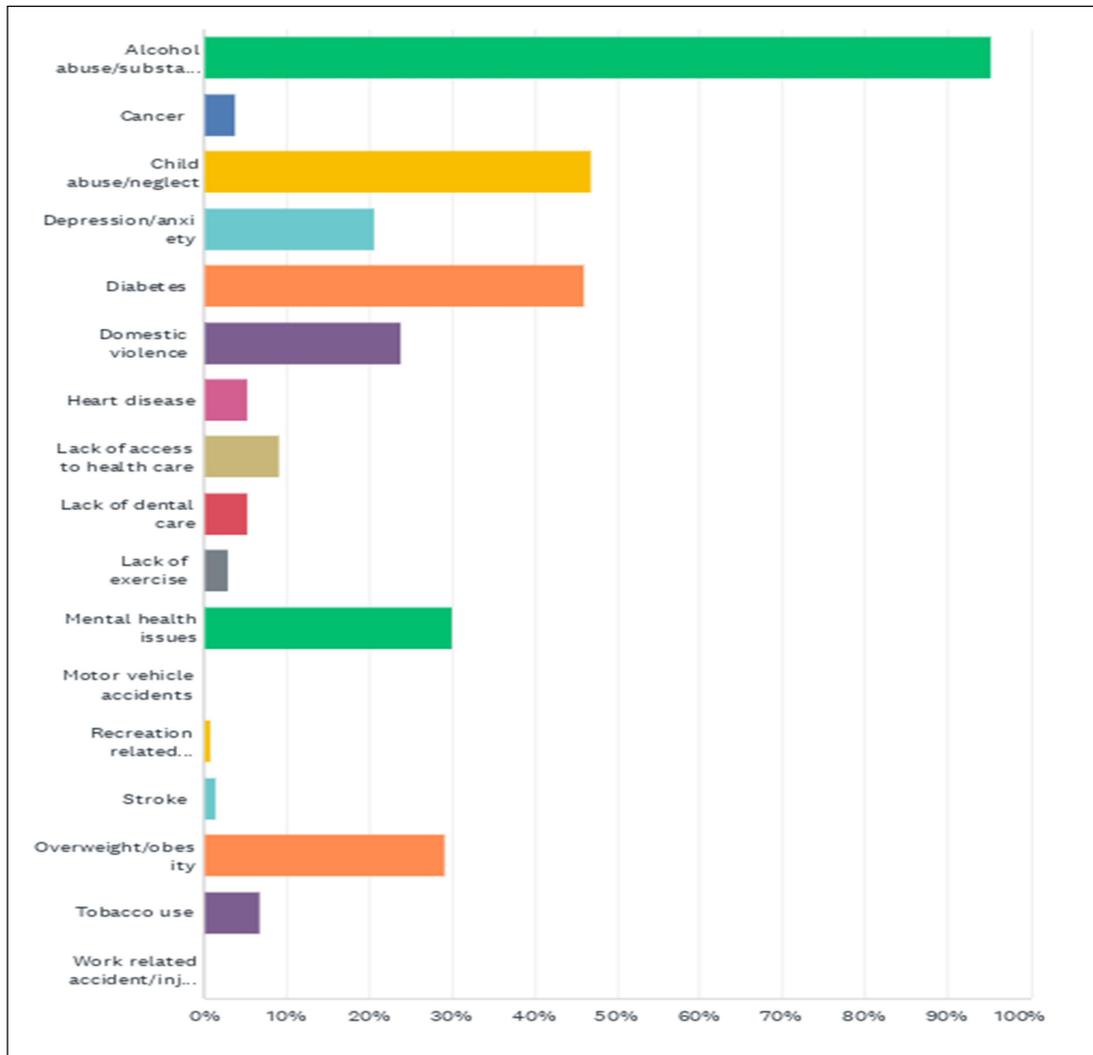
Q1 How would you rate the general health of our community?

Answered: 130 Skipped: 3



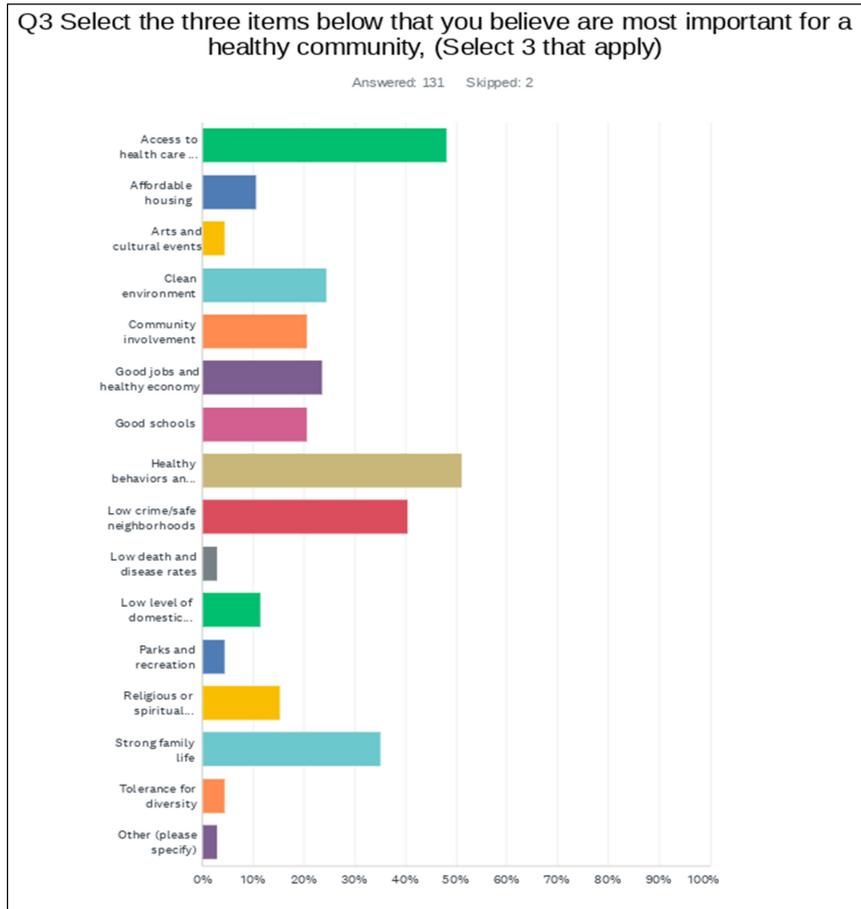
Health Concerns for Community (Question 2)

Respondents were asked what they felt the three most serious health concerns were in their community. The number one health concern identified by respondents was “Alcohol abuse/substance abuse” at 95.38%. “Diabetes” and “child neglect/abuse” was also a high priority at 46.15% and 46.92%. “Mental Health Issues” was close with 30%.



Components of a Healthy Community (Question 3)

Respondents were asked to identify the three most important things for a healthy community. 51.5% of respondents indicated that “Healthy Behaviors and lifestyles” is important for a healthy community. “Access To healthcare” was the second most indicated component at 48.09% and third was “Low Crime/safe neighborhoods” at 40.46%. Very closely behind was “Strong family life” at 35.11%. Respondents were asked to identify their top three choices thus the percentages will not add up to 100%.

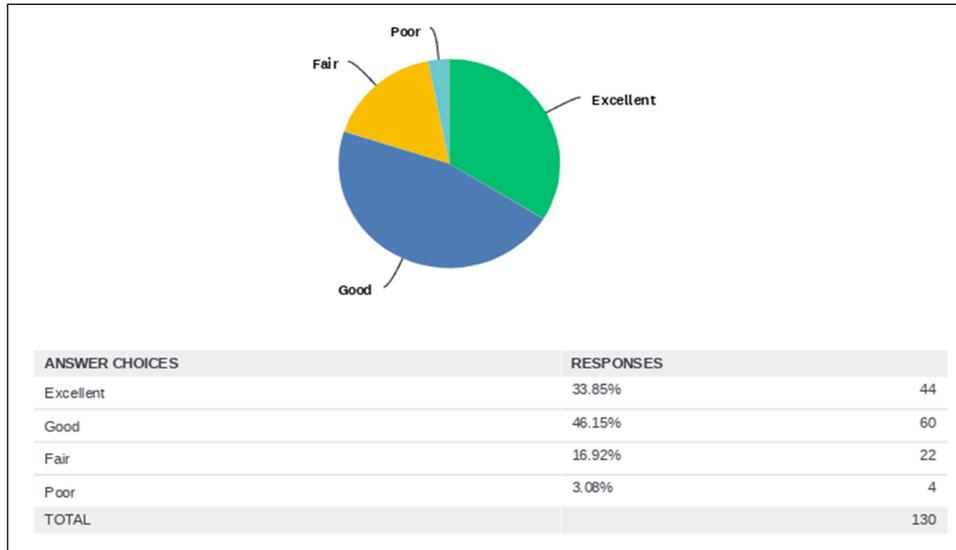


#	OTHER (PLEASE SPECIFY)
1	Cultural sensitivity to the community your serving.
2	law enforcement involvement
3	Quality food availability
4	Access to mental health services

VI. Survey Findings- Awareness of Services

Overall Awareness of Northeast Montana Health Services' Services (Question 4)

Respondents were asked to rate their knowledge of the healthcare services available at Northeast Montana Health Services. 33.85% of respondents rated their knowledge of services as "Excellent." 46.15% rated their knowledge as "Good". 16.92% of respondents rated their knowledge as "Fair." 3.08% of respondents rated their knowledge of services as "Poor". Three respondents chose not to answer this question.



How Respondents Learn of Health Care Services (Question 5)

"Health care provider" was the most frequent method of learning about available services at 65.89% . Healthcare provider was the most frequent method used three years ago also. "Word of mouth/reputation" is still the second most common method at 62.79%. "Friends/family" was the third most frequent response at 54.26% and "Website/Internet" was reported at 41.86%. Respondents could select more than one method so percentages do not equal 100%.

ANSWER CHOICES	RESPONSES	
Health care provider	65.89%	85
Newspaper	24.03%	31
Friends/family	54.26%	70
IHS Clinic	12.40%	16
Mailings/newsletter	11.63%	15
Presentations	4.65%	6
Word of mouth/reputation	62.79%	81
Website/internet	41.86%	54
Public health	15.50%	20
Radio	27.91%	36
Other (please specify)	3.10%	4
Total Respondents: 129		

#	OTHER (PLEASE SPECIFY)
1	Hpdp
2	Self inquiry
3	social media
4	social media

Other Community Health Resources Utilized (Question 6)

Respondents were asked which community health resources, other than the hospital or clinic, they had used in the last three years. “Pharmacy” was the most frequent community health resource cited by respondents at 88.10%. “Public Health” at 30.95% and “Dentist” at 30.16% were highly utilized as well. Respondents could select more than one method so percentages do not equal 100%.

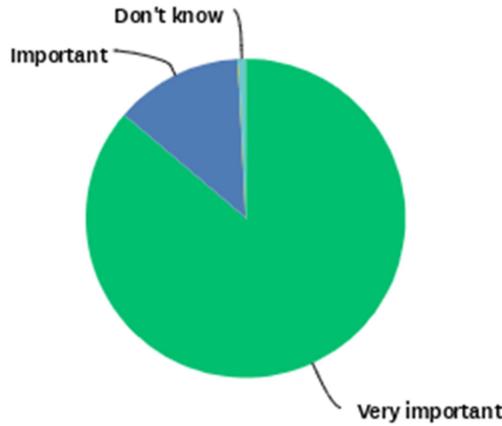
ANSWER CHOICES	RESPONSES	
Pharmacy	88.10%	111
Public health	30.95%	39
Dentist	30.16%	38
Mental health	8.73%	11
Senior Center	3.17%	4
IHS Clinic	25.40%	32
VA	0.00%	0
Other (please specify)	10.32%	13
Total Respondents: 126		

The following were listed as “other”

- HPDP
- Eye Doctor
- Clinic
- Optometrist
- Optometrist/Chiropractor
- RFC
- College Wellness Center

Economic Importance of Local Health Care Providers and Services (Question 7)

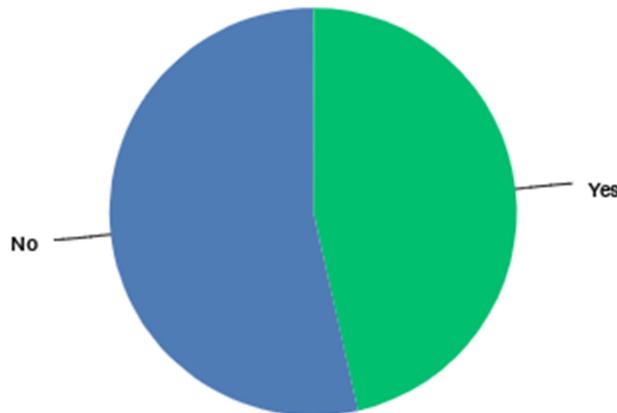
The majority of respondents, 86.26% indicated that local health care providers and services (i.e.: hospitals, clinics, nursing homes, assisted living, etc.) are “Very Important” to the economic well-being of the area. 12.98% of respondents indicated they are “Important” and only one person, or 0.76% indicated that they “Don’t know”.



VII. Survey Findings- General Use of Health Care Services

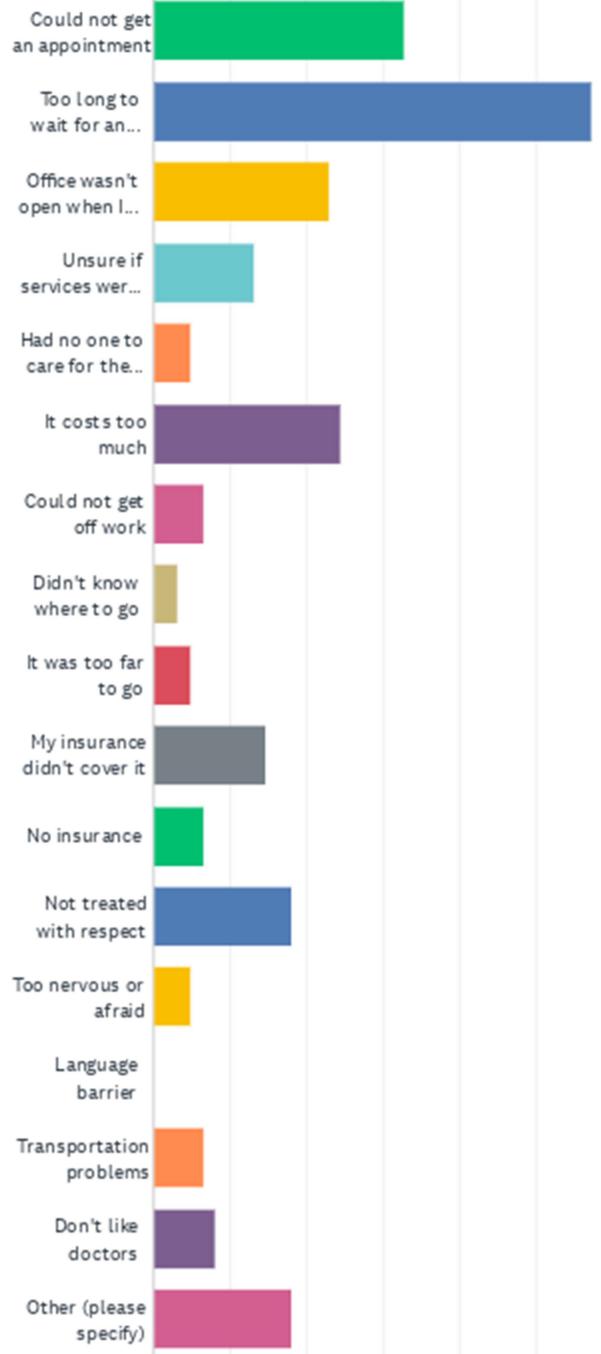
Needed/Delayed Hospital Care During the Past Three Years (Question 8)

Of the 133 surveys returned, 46.46% of respondents reported that they or a member of their household thought they needed health care services, but did not get it or delayed getting it. 53.54% percent of respondents felt they were able to get the health care services they needed without delay and six respondents chose not to answer this question.



Reasons for NOT Being Able to Receive Services or Delay in Receiving Health Care Services (Question 9)

For those who indicated they were unable to receive or had to delay services, the reasons most cited were: “Too long to wait for an appointment” (57.38%), “Could not get an appointment” (32.7*%) and “It costs too much” (24.59%). Respondents were asked to indicate their top three choices thus percentages do not total 100%. 72 respondents skipped this question.



Preventative Testing (Question 10)

Respondents were asked if they had utilized any of the services listed in the past year. “Routine health checkup” was selected by 52.2% of respondents (n=117). 50.4% of respondents (n=113) indicated they received a “Flu shot” and another 40.6% of respondents (n=91) had a “Routine blood pressure check”. Respondents could check all that apply thus the percentages will not equal 100%.

ANSWER CHOICES	RESPONSES	
Children's checkup/Well baby	13.18%	17
Cholesterol check	31.78%	41
Colonoscopy	9.30%	12
Routine blood pressure check	34.88%	45
Mammography	27.13%	35
Pap smear	17.83%	23
Prostate (PSA)	0.78%	1
Routine health checkup	51.94%	67
Flu shot	48.84%	63
None	11.63%	15
Other (please specify)	17.05%	22
Total Respondents: 129		

“Other” comments:

- Dental
- Pharmacy
- Diabetic apt
- Went out of town for services
- ER
- Clinic
- ER, Physical Therapy, Covid shots
- Emergency 2 times for my children
- Birthday Special
- Covid Vaccine
- Flu and Moderna
- Labs
- Menstrual issues, Acute illness visits
- Dental Checkup/cleaning
- Inpatient

Desired Local Health Care Services (Question 11)

Respondents were asked to indicate which additional health care services presently not available at Northeast Montana Health Services they would use if available locally. The following list shows the responses to this open-ended question.

- Mental Health, Physical Therapy
- Counseling
- None now. I will always go elsewhere
- Hospice/ Palliative care
- Proper dental care
- MRI
- Dermatologist
- Good health care services
- Ethics and Diversity for the staff on the community they are serving. Prevention-not waiting until its life or death to be treated
- Drug/alcohol treatment center/services
- Blood work for my eye medication that I need to have drawn every three months at Glasgow so they can get it to Bismarck. Also the telecommunication with our specialists in Billings to save on travel costs.
- After hours clinic/urgent care
- Counseling
- OBGYN
- Endocrinology
- Weekend Clinic
- Cardiac rehab
- More choices of actual doctors not just PA's
- Dental, Therapeutic
- Detox, Sober living
- Mental Health Services
- The Community Cultural Center
- EENT
- Women Care
- Visiting specialists

Importance of Desired Health Service (Question 12)

Respondents were asked to indicate why they thought the health services they noted in question eleven are important for their community. The following list shows the responses to this open-ended question. 83 respondents skipped the question.

- Can't be healthy if bad, infected teeth
- Because there are lots of terminal conditions in our community because of lifestyle choices as well as simple aging and there is the desire for care in the home, but no assistance in this area and so a person comes to the hospital to die.

- People should be given the opportunity to LIVE as they wish to as close to the end as possible with the option for pain management and condition management with a skilled helper. Families get overwhelmed and need the help and skills that hospice can bring, as well as the opportunity to face end of life issues with their own beliefs being valued and respected. Hospice would benefit us all.
- DM, obesity, poor nutrition major contributor to poor health
- Surgical Rehab, Cardiac Rehab, Therapy for injuries
- Just don't have this available to us when we need them
- For healthy workers
- Patients are more likely to pay for services if they do not have to travel miles on miles. Also, many cannot afford travel and bypass needed treatments and tests.
- All of those procedure leave our community and an MRI is a fairly common diagnostic tool
- Yes. Especially a pediatrician.
- Keep the money locally.
- It is important to have prenatal, OB and delivery services available at all times for expectant mothers. Otherwise if there is an emergency, OB patients are sent to Glasgow, Williston, etc.
- Less travel time for dental, less expense at a walk in clinic instead of emergency room.
- A PERSON HAS TO WAIT AT THE VERY LEAST 2 WEEKS TO GET IN TO SEE THE EYE DR.
- There are many people who have physical ailments that could be helped by physical therapy/ and or chiropractic – but who do not have transportation to other towns to receive treatment-or if they have cars, don't have the money to go to wolf point or Culbertson several times a week.
- Because it keeps community people using our health care if we have Drs available.
- Close to where people live
- The number of diabetics ~ billings is too far.
- Bad problem on the Rez
- Because the age of the community
- It is too far to travel to a good dentist and some aren't accepting any new patients
- PT requires frequent appointments which are impossible to get to out of town.
- MRI
- I am considering moving from this area because there is no access to physical therapy
- Travel is hard for some members of the community
- Our community is suffering from obesity and diabetes severely.
- The most problems we are facing today in the community of Wolf Point.
- There seems to be none available.
- So many people have dental problems here & you can't pick what you want.
- Sob less people would get to keep foot ore leg.
- Because of travel to another hospital to have this.
- Easier to get.
- Lack for funds to travel to receive physical therapy after surgeries
- Many people traveling out of town for theses health care services
- ABUSE
- Have to travel for these things and not a lot of people can afford to.
- Everybody needs to take good care of their teeth. Well taken care of teeth are very important parts of good hygiene.
- We have a lot of young mothers with poor support systems.
- The rate of unwanted children being born, stds, rape culture, yata yata is sad.
- Because most of the community is unhealthy and have nothing to do. Might as well exercise!
- So the babies, children can get their checkups – are if need to go to clinic – just important
- Keep it local
- None that I can think of right now
- Because many people have these issues
- Many, many community members go out of town for these two services, having them available would keep money in town.

- People don't trust I.H.S. doctors
- Improves access to healthcare, stops patients from leaving community for needed health care.
- Obesity in our community is a problem not the biggest problem but is #4
- Eliminates travel an additional expense
- People don't get sick on a schedule, and we need non-emergency care after hours and on weekends.
- Working in my profession I see a lot of people struggling with skin conditions. Maybe people would like to see someone with dermatology education
- MRI would be a good addition so that patients do not have to travel hours to have one, it would also bring in a lot of income for our hospital
- WE HAVE A LOT OF CHILD ABUSE AND NEGLECT
- Because hanging to travel to another city is a pain
- Would help with keeping things within reach instead of having to travel out of town. This usually requires taking time off from work to do so.
- Competition leads to lower costs and higher quality
- Not everyone can travel out of town
- As a parent, access to a child specialist in this area always means travel, time off work, overnight stays and gas bills
- There are numerous people in our community that aren't able to take care of themselves or loved ones.
- Money/Insurance is always going to be an ongoing issue so I understand why we don't have it but if we could these would be a great asset to our community
- Education
- People have to work
- The primary clinics get busier in afternoon with walk-ins who could not get into I.H.S. clinic; extended hours would help to better serve the area in addition, others, who work could schedule appointments without having to take time off.
- Going to Billings or Sidney is a pain.
- Physical therapy is conducted in Glasgow when available, this an hour drive away. If rehabilitation is needed, the drive to, combined with the PT and drive back to increase the pain of the individual.
- Going to Sidney or Billings is a pain.