



Photo credit: Montana Office of Rural Health

Community Health Improvement Plan

Holy Rosary Healthcare

2021





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Executive Summary and Letter to the Community from the CEO

Community Health Needs Assessment (CHNA) is a systematic approach to determining the health status, behaviors and needs of people living in our area. *The full report is available on our website <https://www.sclhealth.org/-/media/files/care-sites/holy-rosary/about/community-benefit/hrh-2020-final-chna-report.pdf?la=en>*

Following the needs assessment, we select health priorities to impact community health through direct and/or collaborative efforts. The Community Health Improvement Plan (CHIP) is the strategic document that outlines the hospitals' plans, actions and anticipated impact on the identified health needs.

Summary:

- The CHNA was conducted by the Montana Office of Rural Health from March to May 2020.
- The geographic focus area for the CHNA was Custer County, MT and the communities of Baker, Terry, Fallon, Plevna, Volberg, Ismay, Kinsey, and Powderville.
- The CHNA was published on June 26, 2020.
- The Board of Directors formally adopted the 2020 CHNA on August 20, 2020.
- Five areas of opportunity were identified in the 2020 CHNA.
- Community members ranked these priorities at the top: Mental Health/Suicide, Health/Wellness/Physical Activity, Awareness/Knowledge of Local Services, Alcohol/Substance Use and Chronic Disease
- Holy Rosary Healthcare's Leadership Team selected the following top two health priorities based on community priorities, strategic direction/assets, and current efforts: Behavioral Health (Mental Health and Substance Use) and Chronic Disease Management and Prevention.
- Holy Rosary Healthcare's Community Health Improvement Plan was formally adopted by the Board of Directors on November 19, 2020.

Letter from our CEO

Holy Rosary Healthcare has a century-long commitment to the people of Eastern Montana. Our legacy began August 15, 1910, when the Presentation Sisters assumed management and later purchased the County Hospital in Miles City, renaming it Holy Rosary Hospital. Through the years, the hospital continued to grow and evolve.



Throughout this growth and evolution, one thing has remained constant; Holy Rosary Healthcare continues to identify and meet the needs of the community. We are working to improve access to healthcare services, increase behavioral and mental health resources, increase the use of preventive cancer screening and continue to provide care for the poor and vulnerable of our community.

As a care site of SCL Health, Holy Rosary has direct access to best practices in healthcare delivery, resources, technology, talent and strategic capital. Together, the physicians, providers, associates and volunteers of Holy Rosary Healthcare extend God's healing love in the tradition of the Presentation Sisters, the Sisters of Charity, and our own rich history of providing care in eastern Montana.

With gratitude and blessings,

A handwritten signature in black ink that reads "Karen Costello". The signature is written in a cursive, flowing style.

Karen Costello
President, Holy Rosary Healthcare

About Us

Founded in 1910, Holy Rosary Healthcare is eastern Montana's healthcare destination. Holy Rosary operates a 25-bed comprehensive acute-care critical access hospital, physician-based clinic, residential living/skilled nursing facility, and outpatient palliative and hospice care services. These robust offerings provide a complete continuum of care to a 10-county region of eastern Montana.



As part of SCL Health, Holy Rosary has direct access to best practices, resources, technology, talent and strategic capital. The hospital offers expertise in Family Health and Wellness, Women's Health, Imaging, Cancer Care and Rehabilitation services. Holy Rosary is the region's largest private employer.

Our Mission

We reveal and foster God's healing love by improving the health of the people and communities we serve, especially those who are poor and vulnerable.

Our Values

Caring Spirit – We honor the sacred dignity of each person.

Excellence – We set and surpass high standards.

Good Humor – We create joyful and welcoming environments.

Integrity – We do the right thing with openness and pride.

Safety – We deliver care that seeks to eliminate all harm for patients and associates.

Stewardship – We are accountable for the resources entrusted to us.

Community Health Needs Assessment

Community Health Needs Assessment (CHNA) Methodology and Process

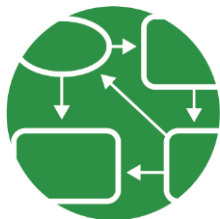
The 2020 CHNA was conducted by Holy Rosary Healthcare (HRH) in conjunction with the Montana Office of Rural Health. A Steering Committee consisting of representatives from public health, faith communities, government, social services, and businesses provided guidance for the entire CHNA process.

The CHNA study area includes each of the residential ZIP codes significantly represented by the number of inpatient and outpatient admissions including the communities of Miles City, Baker, Terry, Fallon, Plevna, Volberg, Ismay, Kinsey, and Powderville.

The 2020 CHNA incorporated: 1) primary quantitative data (741 randomly selected household mailed surveys), 2) secondary quantitative data (existing public health data) and 3) primary qualitative data (key informant telephone interviews).



- 1) **Primary Quantitative Data:** A total of 741 surveys were distributed amongst Holy Rosary Healthcare's service area. One-hundred forty were completed for an 18.89% response rate. 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 8.25%.



- 2) **Secondary Quantitative Data:** A variety of existing (secondary) data sources was consulted to complement the research quality of the CHNA.

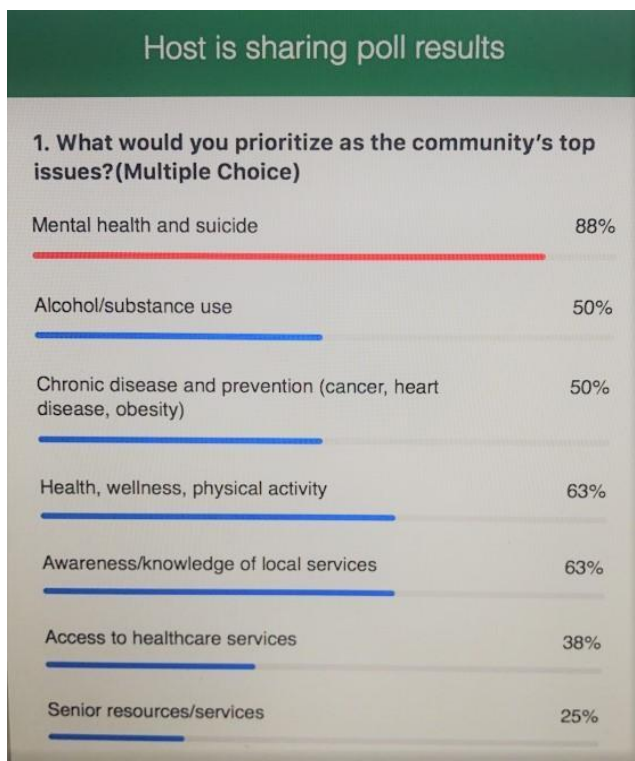


- 3) **Primary Qualitative Data:** A key informant telephone survey was implemented to further gain perspective from community members and local organizations as part of the CHNA process. Eleven community stakeholders took part in the key informant survey.

Key Survey Results

Five areas of need were identified through review of the primary data, secondary data, and key informant responses:

- Access to Healthcare
- Behavioral Health
 - Mental Health
 - Substance Use
- Chronic Disease
 - Asthma
 - Cancer
 - Diabetes
 - Heart Disease
 - Stroke
- Healthy Lifestyles
 - Nutrition
 - Physical Activity
 - Obesity Prevention
- Senior Issues/Aging



Community Stakeholder Prioritization:

Members of the Community Health Needs Assessment Steering Committee were presented with data from the CHNA and asked to prioritize the top needs.

These community members ranked “Mental Health/Suicide” as their top choice (88%), “Health/Wellness/Physical Activity” and “Awareness/Knowledge of Local Services” tied for second (63%), and “Alcohol/Substance Use” and “Chronic Disease” tied for third (50%).

Prioritization

Holy Rosary Healthcare's leadership team reviewed the data and prioritized needs based on the following criteria:

- Ability to impact (internal and community resources)
- Scope and severity of issue (prevalence and impact on community)
- Community prioritization of issues
- Potential community partners
- Alignment with current efforts and strategies

From this process, two priority areas were identified as a focus for the 2021-2023 Community Health Improvement Plan:

- Behavioral Health (Mental Health and Substance Use)
- Chronic Disease Prevention and Management

Publication and Adoption of the CHNA

The full CHNA report, including the executive summary and CHNA process, methodology and prioritized list of health needs can be found on our website, <https://www.sclhealth.org/-/media/files/care-sites/holy-rosary/about/community-benefit/hrh-2020-final-chna-report.pdf?la=en>

The Montana Region Board of Directors formally adopted the 2020 CHNA on August 20, 2020.



Community Health Improvement Plan

Community Health Improvement Plan Priorities

Holy Rosary Healthcare's Community Benefit Committee of the Board reviewed the results of the CHNA and recommended two priority focus areas: Improved Behavioral Health Status and Chronic Disease Management and Prevention. Those recommendations were provided to Senior Leadership and two priority areas were adopted.

Following vetting from Holy Rosary Healthcare's Senior Leadership team, the draft Community Health Improvement Plan was presented to the Holy Rosary Healthcare Community Benefit Committee of the Regional Board of Directors for review and input on October 21, 2020. Feedback from this Committee was incorporated into the final Community Health Improvement Plan.

Holy Rosary Healthcare's Community Health Improvement Plan was formally adopted by the Montana Regional Board of Directors on November 19, 2020.

Community Health Improvement Plan Guiding Principles

There are five Community health improvement core strategies that support program development. We want to:

- Leverage community benefit investments toward the greatest area of impact to achieve our mission (*alignment with CHNA and vulnerable populations*)
- Utilize intervention strategies that are evidence-based and work to answer the sustainability question during program build
- Encourage innovation pilots that can address "dual" or disparate health needs
- Expand collective impact opportunities by engaging multi-sector partnerships
- Improve community engagement by highlighting community impact stories, increasing digital-based communication and attention to diversity and inclusion initiatives

In addition, whenever possible we want to align measurement objectives with other community improvement efforts locally, regionally, and nationally.

2021-2023 Community Health Improvement Strategies Overview

Priority: Behavioral Health

Strategies:

1. Improve access to mental health services and resources
2. Improve supports for substance use treatment and prevention
3. Increase knowledge of available resources

Priority: Chronic Disease Prevention and Management

Strategies:

1. Increase access to interventions for chronic disease prevention
2. Increase access to individual interventions for chronic disease management for individuals living with chronic disease



<p>Priority:</p> <p>Behavioral Health (Mental Health and Substance Use)</p>	<p>Vision: All residents will have improved mental health and less reported substance use.</p> <p>Outcome Goal(s):</p> <p>The percentage of adults in Holy Rosary’s primary service area rating their overall mental health as fair or poor will decrease 5%; from 9.4% to 8.93% in 2023 (CHNA)</p> <p>The percentage of adults in Holy Rosary’s primary service area reporting a negative impact on their lives by substance use will decrease 5%; from 25% to 23.75% in 2023 (CHNA)</p>		
<p>Behavioral Health Strategy: Improve access to mental health services and resources</p>			
<p>Objective: Increase access to mental health resources to improve mental health status</p>	<p>Partners:</p> <ul style="list-style-type: none"> • SCL Health Medical Group • Montana Healthcare Foundation • Behavioral Health Advisory Committee • OneHealth 		
<p style="background-color: #0056b3; color: white; text-align: center;"> </p>			
	<p>Need Indicator(s):</p> <ul style="list-style-type: none"> • 9.4% of adults in Holy Rosary Healthcare’s primary service area report their overall mental health as “fair” or “poor” (CHNA 2020) • 14% of adults in Holy Rosary Healthcare’s primary service area report feeling depressed on most days (CHNA, 2020) • 7% of adults in Holy Rosary Healthcare’s primary service area report feeling isolated or lonely (CHNA, 2020) • Suicide rate deaths per 100,000 population was 32.1 for Custer County; higher than the state rate of 22.5 and national rate of 13.9 (CHNA, 2020) 		
<p><i>Tactic(s)</i></p>	<p><i>Community Partner(s)</i></p>	<p><i>Metric</i></p>	<p><i>Status</i></p>

Integrate behavioral health services into primary care clinic to increase access and decrease stigma	SCL Health Medical Group Montana Healthcare Foundation	Number of clinics with integrated behavioral health services	Target: Increase from zero to one clinics with integrated behavioral health
			Progress:
Prenatal mental health and substance use screening	SCL Health Medical Group	Percentage of obstetric patients screened for mental health needs and substance use	Target: 90% of obstetric patients will be screened for mental health and substance use during prenatal visits
			Progress:
Provide gatekeeper training such as Mental Health First Aid or QPR to community members	Behavioral Health Advisory Committee	Number of trainings provided	Target: Provide a minimum of two mental health trainings for community members annually
			Progress:
Promote opportunities for increased social connection	OneHealth Custer County Extension Miles Community College	Number of opportunities for social connection promoted by Holy Rosary Healthcare	Target: Holy Rosary Healthcare will promote at least two social connection opportunities or events for community members

	Miles City Chamber of Commerce		annually to decrease social isolation, especially for seniors
			Progress:

Behavioral Health
Goal: Improve supports for substance abuse treatment and prevention

Objective: Increase access to substance use screening and prevention	Partners: <ul style="list-style-type: none"> • Opioid Reduction Community Association (ORCA) • SCL Health Medical Group • Montana Healthcare Foundation 		
	Need Indicator(s): <ul style="list-style-type: none"> • 25% of adults in Holy Rosary Healthcare’s primary service area report their lives have been somewhat or greatly affected by substance use (CHNA, 2020) • 30% of adults in Custer County report excessive drinking versus a state rate of 21% (CHNA, 2020) 		

<i>Tactic(s)</i>	<i>Community Partner(s)</i>	<i>Metric</i>	<i>Status</i>
Prenatal substance use and mental health screening	SCL Health Medical Group	Percentage of obstetric patients screened for substance use and mental health needs	Target: 90% of obstetric patients will be screened for substance use and mental health needs during prenatal visits

			Progress:
Integrate behavioral health services into primary care clinic to increase access and decrease stigma	SCL Health Medical Group Montana Healthcare Foundation	Number of clinics with integrated behavioral health services	Target: Increase from zero to one clinics with integrated behavioral health
			Progress:

Behavioral Health Goal: Increase knowledge of available resources			
Objective: Improve community awareness of available resources to address behavioral health needs	Partners: <ul style="list-style-type: none"> Community-based organizations Opioid Reduction Community Association (ORCA) United Way of Yellowstone County 		
	Need Indicator(s): <ul style="list-style-type: none"> 28% of adults in Holy Rosary Healthcare's primary service area report fair/poor knowledge of local healthcare services (CHNA, 2020) 33% of adults in Holy Rosary Healthcare's primary service area felt information about available services would improve their access to healthcare services (CHNA, 2020) 		
<i>Tactic(s)</i>	<i>Community Partner(s)</i>	<i>Metric</i>	<i>Status</i>
Promote website MT211 as a community resource directory	Opioid Reduction Community Association	Number of presentations about	Target: Promote MT211 to three

	<p>Community-based organizations</p> <p>United Way of Yellowstone County</p>	<p>MT211 to community organizations</p> <p>Number of community members utilizing MT211 annually</p>	<p>organizations or coalitions annually</p> <p>Target: Increase number of Miles City residents using MT211 by 25% from 33 to 42 by December 31, 2021</p>
			<p>Progress:</p>

<p>Priority:</p> <p>Chronic Disease Prevention and Management</p>	<p>Vision: All residents will lead a healthy lifestyle to the best of their ability.</p> <p>Outcome Indicator(s):</p> <p>The obesity rate of adults in Custer County will decrease 5% from 30% to 28.5% in 2023 (CHNA)</p> <p>Rates of physical inactivity for adults in Custer County will decrease 5% from 26% to 24.7% in 2023 (CHNA)</p> <p>The hospitalization rate for diabetes will decrease by 5% from 1,444.7 per 100,000 to 1,372.4 per 100,000 in 2023 (CHNA)</p> <p>The hospitalization for stroke will decrease by 5% from 185.1 per 100,000 to 175.8 per 100,000 in 2023 (CHNA)</p>
<p>Chronic Disease Prevention and Management Goal: Prevent chronic disease occurrence through obesity prevention and increased physical activity.</p>	
<p>Objective: Increase access to interventions for Chronic Disease Prevention</p>	<p>Partners:</p> <ul style="list-style-type: none"> ● Montana Department of Public Health and Human Services (DPHHS) ● Montana Extension Office ● SCL Health Medical Group <hr/> <p>Need Indicator(s):</p> <ul style="list-style-type: none"> ● 30% of adults in Custer County are obese (CHNA 2020) ● 26% of adults in Custer County are physical inactive (CHNA 2020) ● 31% of adults in Holy Rosary Healthcare's Primary Service Area expressed interest in health and wellness classes (CHNA 2020) ● Higher all sites cancer rate in Custer County; 497 per 100,000 versus 441 per 100,000 for Montana overall (CHNA 2020)

Tactic(s)	Community Partner(s)	Metric	Status
Healthy Lifestyles Program (Diabetes & Heart Disease Prevention Program)	Montana Department of Public Health and Human Services (DPHHS) SCL Health Medical Group	Percentage of participants losing an average of 5% of their starting body weight	Target: 45% of participants will lose an average of 5% of their starting body weight by the end of the program
			Progress:
Provide support for youth physical activity through athletic trainers	Custer County High School Miles Community College	Number of schools or youth organizations supported	Target: Support two schools with athletic trainers
			Progress:
Increase preventive cancer screenings	SCL Health Medical Group	Percent of patients receiving recommended screenings	Target: 76% screened for breast cancer 70% screened for cervical cancer 73% screened for colorectal cancer
			Progress
Community education for healthy lifestyles	Schools	Number of events	Target: One educational

	Community Organizations	focused on educating the community on chronic disease prevention	event or opportunity annually
			Progress:

Chronic Disease Prevention and Management
Goal: Increase disease management for individuals with chronic disease.

<p>Objective: Decrease hospitalization rates for chronic disease including diabetes and stroke</p>	<p>Partners:</p> <ul style="list-style-type: none"> • SCL Health Medical Group • SCL Health Montana Region • SCL Health Heart & Vascular Institute • Dialysis Clinic Inc. (DCI) • Community-based organizations
	<p>Need Indicator(s):</p> <ul style="list-style-type: none"> • Hospitalization rate in Custer County for diabetes is 144.7 per 100,000 residents, higher than the state rate of 1058.9 per 100,000 (CHNA 2020) • Hospitalization rate in Custer County for stroke is 1851.1 per 100,000 residents, compared to 152 per 100,000 residents in Montana overall(CHNA 2020) • 42% of adults in Holy Rosary Healthcare’s primary service area report high blood pressure (CHNA 2020) • 27% of adults in Holy Rosary Healthcare’s primary service area report high cholesterol (CHNA 2020) • 20% of adults in Holy Rosary Healthcare’s primary service area report diabetes (CHNA 2020) • 20% of adults in Holy Rosary Healthcare’s primary service area report cancer (CHNA 2020)

<i>Tactic(s)</i>	<i>Community Partner(s)</i>	<i>Metric</i>	<i>Status</i>
Outpatient Medical Nutrition Therapy	SCL Health Medical Group	Number of individuals with diabetes, heart disease and obesity utilizing medical nutrition therapy	Target: Six patients per month
			Progress:
Nutrition services for End Stage Renal Disease patients	Dialysis Clinic Inc. (DCI)	Number of hours per month	Target: 20 hours per month
A1C monitoring	SCL Health Medical Group	Percentage of patients with diabetes who have uncontrolled diabetes	Target: Less than 24% of patients with diabetes will have an A1C greater than 9.0%
			Progress:
Blood pressure control for individuals diagnosed with hypertension	SCL Health Medical Group	Percentage of patients with hypertension who have controlled blood pressure	Target: 75% of patients with hypertension will have blood pressure less than 140/90

			Progress:
Cardiology outreach services	SCL Health Heart & Vascular Institute	Number of months with outreach services provided	Target: Outreach services provided all 12 months annually
			Progress:
Provide Cardiac Rehabilitation program	SCL Health Medical Group	Number of new patients receiving cardiac rehabilitation	Target: Increase number of new cardiac rehabilitation patients by 5% from 53 to 56 by December 31, 2021
			Progress:
Community education for chronic disease management to increase awareness of locally available services	Community-based organizations	Number of educational sessions related to chronic disease management	Target: One educational session related to chronic disease management will be offered annually
			Progress:

Other Significant Needs Not Prioritized

Each of the health needs identified in the CHNA are important and Holy Rosary Healthcare along with numerous partners throughout the community are addressing these needs through various innovative programs and initiatives. Some examples of these are provided below. The Holy Rosary Healthcare CHIP will only address the priority areas listed above in order to maximize resources, expertise and time to achieve meaningful impact.

Areas of Opportunity	
Access to Healthcare	Telemedicine and virtual health opportunities especially for specialty care, recruitment of healthcare providers, outreach clinics and transportation support
Healthy Lifestyles	Addressed through chronic disease priority
Senior Issues/Aging	Skilled nursing facility, palliative care and hospice

Continuing the Work

The Community Health Improvement Plan is a living document that provides community health improvement direction for Holy Rosary Healthcare, its partners, community organizations and residents of Custer County, MT and surrounding communities. As such, the CHIP is a working document and will be updated and amended on an annual basis as new programs, partnerships, and collaborations develop. The progress of our work will be evaluated on an on-going basis, not simply at the three-year mark. Strategies and actions that do not yield the intended outcomes will be revised and re-implemented.

Contact:

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