



Community Health Improvement Plan



**The Rehabilitation
Hospital of Montana**

*In Partnership with
Billings Clinic & St. Vincent Healthcare*

2022

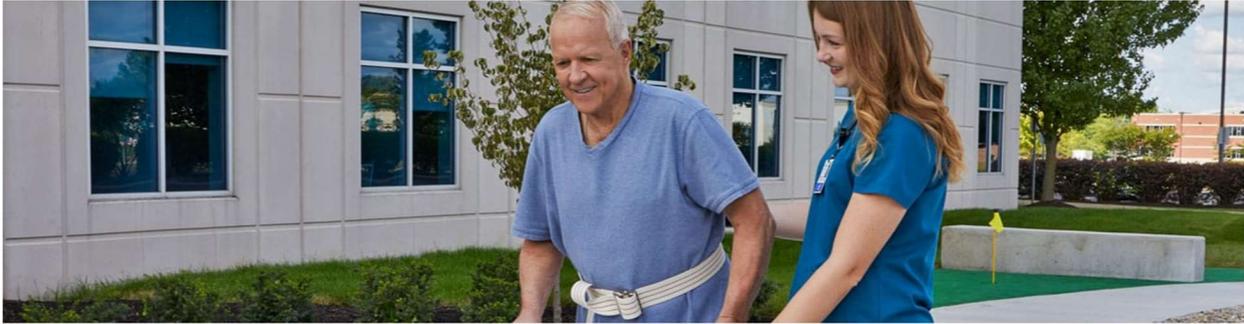


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Executive Summary and Letter to the Community from the CEO

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 at <https://www.rehabhospitalofmontana.com/patient-experience/community-health-needs-assessment>.

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. This is in alignment with our corporate mission of Making Communities Healthier.

Summary:

- The CHNA was conducted from June to August 2021.
- The geographic focus area for the CHNA was the state of Montana.
- The CHNA was published on August 10, 2021.
- The Board of Directors formally adopted the 2021 CHNA on August 23, 2021.
- Nine areas of opportunity were identified in the 2021 CHNA.
- Key stakeholders representing Rehabilitation Hospital of Montana, Billings Clinic, Kindred Health, and SCL Health St. Vincent Healthcare selected the following top three health priorities based on scope/severity and ability to impact: Access to Healthcare Services, Stroke and Brain Injury, and Falls Prevention.
- The Rehabilitation Hospital of Montana's Community Health Improvement Plan was formally adopted by the Board of Directors on May 13, 2022.

Letter from our CEO

The Rehabilitation Hospital of Montana was formed in 2019 to expand services to patients in our region who suffer devastating life events, such as a stroke, brain injury, neurological condition, trauma, spinal cord injury, or amputation. Access to Inpatient Rehabilitative Services is an essential component of healthcare for those who need it. The staff and providers of the Rehabilitation Hospital of Montana are committed to maximizing each patient's functional abilities during their hospital stay, with the goal of helping patients return home with as much independence as possible.



While excellent care after the fact is necessary, we recognize that preventing these devastating life events is also important. As a result, we strive to help prevent strokes, brain injuries, and falls, which are identified needs in our Community Health Needs Assessment. Our Community Health Improvement Plan prioritizes these identified needs and provides actionable steps to address them. Our LifePoint Health mission of “Making Communities Healthier” guides our actions and calls us to serve the needs of our state.

The Rehabilitation Hospital of Montana takes our responsibility to Yellowstone County, our surrounding region, and our state very seriously. We are pleased to partner with other healthcare institutions in meeting the needs of our community, in part through this plan.

In Service,

Jennifer J. Graves, MHA, RN
Chief Executive Officer

About Us

The Rehabilitation Hospital of Montana is a partnership between SCL Health St. Vincent Healthcare, Billings Clinic and Kindred Healthcare, Inc. Opening in August of 2019, the Rehabilitation Hospital of Montana provides a 34-bed inpatient rehabilitation hospital to treat patients recovering from conditions such as stroke, traumatic brain injury and spinal cord injury.



Our Mission

To help our patients reach their highest potential for health and healing with intensive medical and rehabilitative care through a compassionate patient experience.

Our Vision

Patients reach their highest potential for health and healing.

Our Values

We put our patients at the center of everything we do, and stay focused on what's best for them first and foremost. Our team members are passionate about delivering outstanding patient care, so we continually strive to provide a culture that allows each employee to be at his or her personal and professional best. We are committed to a shared set of values that guide our culture and encourage us all to become even better colleagues, partners, clinicians, and support staff.

Our Core Six Values



THE CORE SIX

Our Core Values



DO THE RIGHT
THING ALWAYS



STAY
FOCUSED ON
THE PATIENT



BE KINDER
THAN
EXPECTED



CREATE FUN
IN WHAT
YOU DO



GIVE YOUR
BEST



RESPECT
INDIVIDUALITY
TO CREATE THE TEAM

Community Health Needs Assessment

Community Health Needs Assessment (CHNA) Methodology and Process

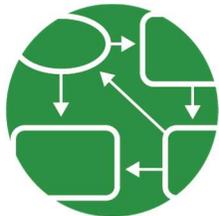
The 2021 CHNA was conducted by Rehabilitation Hospital of Montana in conjunction with Billings Clinic, St. Vincent Healthcare, and RiverStone Health. The CHNA study area includes the State of Montana with a focus on Yellowstone County.

The 2021 CHNA incorporated:

1. Primary quantitative data (a comprehensive CHNA for Yellowstone County),
2. Secondary quantitative data (existing public health data), and
3. Primary qualitative data (key informant surveys).



- 1) **Primary Quantitative Data:** the sample drawn for this survey is representative of the adult Yellowstone County population in terms of demographic and socioeconomic characteristics, as well as geographical location. The maximum error rate associated with the total sample of 404 residents is $\pm 4.9\%$ at the 95 percent level of confidence.



- 2) **Secondary Quantitative Data:** Statewide secondary data for the Rehabilitation Hospital of Montana Community Health Needs Assessment have been queried from the Montana Public Health Information System and include data from the Behavioral Health Risk Factor Surveillance System (BRFSS) and data from the Montana Hospital Discharge Data System (MHDDS).



- 3) **Primary Qualitative Data:** A survey was conducted with key informants at the end of July 2021. Surveys were emailed to 29 key stakeholders. The survey instrument included 8 questions focused on general health status, serious health concerns, needs for a healthy community including social determinants of health, services of the Rehabilitation Hospital of Montana, barriers to health for patients, and opportunities to address health needs. 15 key stakeholders completed the survey, a 51% response rate.

Key Survey Results

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

The nine needs identified, in alphabetical order, included:

- Access to healthcare services
- Brain injury
- Healthy behaviors and lifestyle (physical activity, nutrition, weight)
- Injuries including falls and trauma
- Mental health
- Tobacco use
- Socioeconomic barriers
- Stroke
- Substance use

Community Stakeholder Prioritization:

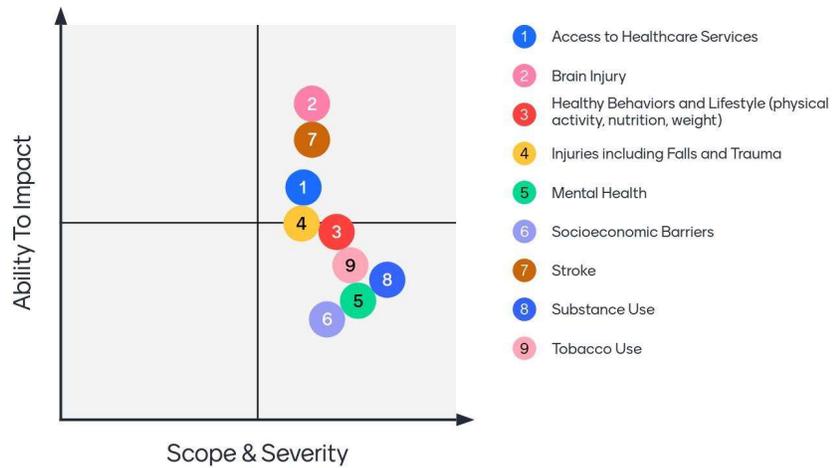
On August 10, 2021, a small group of stakeholders representing Rehabilitation Hospital of Montana, Billings Clinic, Kindred Health, and SCL Health St. Vincent Healthcare met to review findings from the Community Health Needs Assessment. Secondary data and key stakeholder survey data were reviewed.

The group evaluated and prioritized needs along two criteria:

- **Scope and Severity:** Including the magnitude of the problem and how much the problem may lead to death or disability, impair quality of life, or impact other health issues
- **Ability to Impact:** The perceived likelihood of having a positive impact on the identified health issue, given available resources, spheres of influence, and organizational mission

Areas of Opportunity

Mentimeter



From this process, three health need priorities emerged:

- Access to Healthcare Services
- Stroke and Brain Injury
- Falls prevention

Publication and Adoption of the CHNA

The full CHNA report can be found on our website,

<https://www.rehabhospitalofmontana.com/patient-experience/community-health-needs-assessment>

The Rehabilitation Hospital of Montana Board of Directors formally adopted the 2021 CHNA on August 23, 2021.



Community Health Improvement Plan

Rehabilitation Hospital of Montana's Community Health Improvement Plan was formally adopted by the Board of Directors on May 13, 2022.

2022-2024 Community Health Improvement Strategies Overview

Priority: Access to Healthcare Services

Strategies:

- Increase provider awareness of services through Clinical Liaison and Medical Director outreach
- Increase workforce capacity through healthcare student rotations for therapy students, certified nursing assistants, and nursing students

Priority: Brain Injury and Stroke

Strategies:

- Provide community health education to increase awareness of signs of stroke
- Provide community health education on brain injury
- Develop pet therapy program

Priority: Falls Prevention

Strategies:

- Provide community health education
- Implement fall scale designed for rehabilitation population
- Collaborate with community efforts for falls prevention



Other Significant Needs Not Prioritized

Each of the health needs identified in the CHNA are important and the Rehabilitation Hospital of Montana 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 Rehabilitation Hospital of Montana CHIP will only address the priority areas listed above in order to maximize resources, expertise and time to achieve meaningful impact.

Areas of Opportunity	
Healthy Lifestyles	Addressed through stroke, brain injury and falls prevention priorities
Mental Health	Addressed by partnering hospitals
Socioeconomic barriers	Addressed throughout priority areas
Substance Use	Addressed by partnering hospitals
Tobacco Use	Addressed through stroke prevention priority

Continuing the Work

The Community Health Improvement Plan (CHIP) is a living document that provides community health improvement direction for Rehabilitation Hospital of Montana, its partners, community organizations and residents of Yellowstone 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:

Kellie Lindsay, Director of Quality Management
Kellie.Lindsay@rehabhospitalofmontana.com