



2022-2024 Community Health
Needs Assessment
Campbell County Health
Implementation Strategy

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Introduction

The following report contains the 2022–2024 Community Health Needs Assessment (CHNA) for Campbell County Health (CCH). The CHNA was conducted to identify significant community health needs and to help inform the development of an implementation strategy to address the identified needs.

In compliance with federal and state regulations, non-profit hospitals conduct CHNAs once every three years in collaboration with other health care providers, Campbell County CARE Board and community organizations. CHNAs also help guide our investments in community health programs and partnerships.

Our mission.

Serving our community by providing a lifetime of care with dedication, skill and compassion.

Our vision.

Campbell County Health will be the first choice for healthcare and wellness in Wyoming by providing Excellence Every Day.

Pillars and core values.

Care: Relentless pursuit of safety and quality

People: Fairness and dedication

Service: Care and compassion

Business: Fiscal responsibility with integrity and transparency

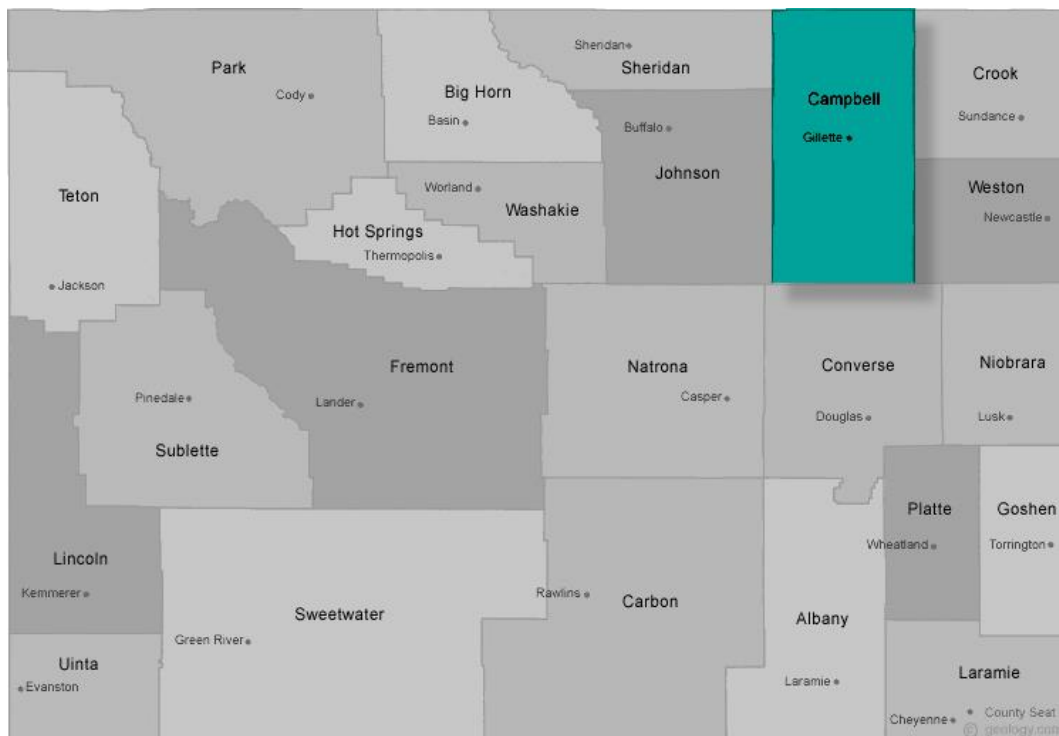
Campbell County Health Overview

Campbell County Health includes Campbell County Memorial Hospital (CCMH), an acute care, community hospital in Gillette, Wyoming; Campbell County Medical Group with nearly 20 clinics; and the Legacy Living & Rehabilitation Center long-term care center. CCMH is certified as an Area Trauma Hospital by the State of Wyoming.

There are 211 providers on the CCH medical staff including courtesy and telemedicine providers.

Communities Served

For the purposes of this CHNA, the community for CCH is defined as Campbell County. This county represents the geographic area most proximal to the hospital and the area in which a large portion of CCH patients reside. We also serve the communities of Crook County, Weston County, Johnson County and Sheridan County.



Demographic Characteristics of the Community Served

Campbell County is located in the northeast part of Wyoming, covering 4,761 square miles, or roughly 3 million acres. Campbell County produces 30% of the nation's coal in area surface mines. The coal bed methane industry and ranching are other major contributors to the Campbell County economy. Hunting tourism also creates revenue in the county.

The COVID-19 pandemic had a substantial impact on employment in the region. In addition to issues with access to health care and mental healthcare, housing, transportation and employment are issues facing the Campbell County community. The northeast region of Wyoming has the highest inflation rate in the state at 10.4% and costs related to food, recreation/personal care, and apparel are higher in Campbell County than statewide averages.

Demographic characteristics of the population residing within the county, in comparison with the state overall, are shown in the tables on the following page. Values highlighted in red indicate measures that vary from the state value and have the potential to influence the type or level of resources needed in the community.



Population

	Wyoming	Campbell County
Population	582,328	46,676

Age

	Wyoming	Campbell County
Percentage below 18 years of age	22.9%	26.9%
Percentage 65 years of age and older	17.8%	11.6%

Race and ethnicity

	Wyoming	Campbell County
Percentage Non-Hispanic Black	1.0%	0.5%
Percentage American Indian and Alaskan Native	2.8%	1.7%
Percentage Asian	1.1%	0.8%
Percentage Native Hawaiian/Other Pacific Islander	0.1%	0.1%
Percentage Hispanic	10.4%	8.7%
Percentage Non-Hispanic White	83.6%	87.2%

Economic stability and poverty

	Wyoming	Campbell County
Median household income	\$67,300	\$85,000
High school graduation rate	82%	80%
Some college	67%	60%
Unemployment rate	5.8%	6.9%
Food insecurity	12%	11%
2020 Wyoming births where the primary source of payment was Medicaid *	1,831 or 29.8% of births	188 births or 31.5% of births
Social associations <i>Number of membership associations per 10,000 population. The 2022 County Health Rankings used data from 2019 for this measure.</i>	13.8	8.4

Violent crime <i>Number of reported violent crime offenses per 100,000 population. The 2022 County Health Rankings used data from 2014 & 2016 for this measure.</i>	220	278
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Physical environment

	Wyoming	Campbell County
Severe housing problems <i>Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities. The 2022 County Health Rankings used data from 2014-2018 for this measure.</i>	12%	13%
Driving alone to work <i>Percentage of the workforce that drives alone to work. The 2022 County Health Rankings used data from 2016-2020 for this measure.</i>	77%	80%
Long commute - driving alone	15%	17%

Source for values above: [2022 County Health Rankings for Wyoming](#)

Additional source for values with * noted: <https://health.wyo.gov/admin/vitalstatistics/reports/>

2020 Detailed and County Level Vital Statistics Data:

https://www.countyhealthrankings.org/app/wyoming/2022/compare/snapshot?counties=56_005

Local population health indicators

Wyoming Behavior Risk Factor Surveillance System 2015-2019 County Data**	Wyoming	Campbell County
Wyoming adults with body mass index \geq 25.0 <i>weight in kg/height in meters squared</i>	65.2%	68.9%
Wyoming adults with body mass index \geq 30.0 <i>weight in kg/height in meters squared</i>	29.7%	30.5%
No leisure time physical activity <i>Wyoming adults reporting not participating in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise other than their regular job during the past month.</i>	24.6%	27.5%
Not living a healthy lifestyle <i>Wyoming adults reporting smoking, no leisure time activity, or not being at a healthy weight.</i>	78.3%	82.6%
Does not always wear seatbelts		

Wyoming adults who ever ride in a car reporting not always wearing a seatbelt from choices of always, nearly always, sometimes, seldom, and never.	24.2%	23.8%
Inadequate fruit and vegetable consumption Wyoming adults reporting consuming fruits and vegetables less than 5 times per day.	89.0%	87.0%
Binge drinking Wyoming men reporting having 5 or more drinks on an occasion at least once in the past 30 days and women reporting 4 or more drinks on an occasion in the past 30 days.	17.7%	16.4%
Cigarette smoking Wyoming adults reporting having smoked at least 100 cigarettes in their lifetime and are currently smoking everyday or some days.	18.4%	23.3%
Smokeless tobacco use for males Wyoming men reporting currently using smokeless tobacco products such as chewing tobacco or snuff.	16.4%	22.7%
Any current tobacco use Wyoming adults reporting current smoking or smokeless tobacco use.	24.8%	30.7%
E-cigarette use Wyoming adults reporting they ever used e-cigarettes.	27.6%	30.2%
Marijuana use Wyoming adults reporting marijuana use in the past 30 days.	9.0%	6.5%
Diabetes Wyoming adults who report they were told by a doctor they have diabetes. Women who were only told during pregnancy are counted as not having diabetes.	7.8%	7.5%
Depression Wyoming adults reporting having been told they had a depressive disorder.	19.2%	17.3%
No health care coverage Wyoming adults who report they have no healthcare coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare.	15.6%	14.2%

No personal doctor <i>Wyoming adults who report they do not have one or more persons they think of as their personal doctor or healthcare provider.</i>	33.0%	34.7%
Unable to get needed care in past 12 months <i>Wyoming adults reporting they needed to see a doctor but couldn't because of the cost at least one time in the past 12 months.</i>	13.5%	12.8%
Any access issue <i>Wyoming adults reporting any of the 3 access to care issues.</i>	42.8%	44.2%

Additional source for values with ** noted: <https://health.wyo.gov/publichealth/chronic-disease-and-maternal-child-health-epidemiology-unit/wyoming-behavior-risk-factor-surveillance-system-2/brfss-data-2/2015-2019-county-data/>

Community Health Needs Assessment

Between July 1, 2021 and June 30, 2022, CCH conducted the CHNA which provided an opportunity for the hospital to engage public health experts, medical providers and community stakeholders in a formal process to ensure that community benefit programs and resources are focused on significant health needs identified within the communities served.

Methods used to conduct the Community Health Needs Assessment

A multi-phased approach was used to identify the top health priorities for future impact. The process included:

- A comprehensive analysis of local population health indicators.
- A thorough review of the 2022 Campbell County Community Needs Assessment (CNA) which include community feedback on community health needs.
- A web-based survey distributed to health care providers at CCH to

gather input on community health needs.

After collecting data and soliciting input from the community, the county and healthcare providers, the Internal Advisory Group (IAG) for CCH, a subset of the hospital's leadership team, reviewed all information obtained from the activities described above and identified recommended health needs areas of focus for the 2022–2024 CHNA. As described later in this report, recommendations for priority areas of focus were presented to the CCH Board of Trustees for review and approval.

The following illustrates the CHNA process components and participants:

Identify community health needs.

Secondary data analysis:

- Population characteristics.
- Social and economic factors.
- Health data.

Community and health care provider input:

- Discussion of community health issues.
- Ranking of community's most significant issues.

Prioritize significant community health needs.

Consolidation and synthesis of information:

- In-depth secondary data analysis.
- Community and provider input.
- IAG recommendations.

Prioritization of issues:

- Scope and severity of the health need.
- Hospital's ability to impact the issue.
- Economic feasibility to address the health need.
- Alignment with goals of CCH, local community, Wyoming and the U.S. overall.

Written comment on previously conducted CHNA

The most recent CCH CHNA, which includes the action plan, has been available to the public on the CCH website. Opportunities for the community to provide input on the hospital's efforts to impact community health needs have been provided in a variety of forums, including individual discussions with community leaders and attendance at local community meetings.

Previously, suicide, access to care (uninsured/underinsured), abuse (adult and child) and cancer prevention/early detection were identified as areas of potential concern. No comments requiring a response were received specific to the CHNA, CHNA process or implementation plan.

Findings

Secondary data review and analysis

The initial phase of the secondary data review included an assessment of local population health indicators obtained through the [2022 County Health Rankings](#) for Wyoming and the [2022 Campbell County Community Needs Assessment](#), [the State of Wyoming Department of Health Vital Statistics](#), [the Wyoming Prevention Depot](#), and [the Centers for Disease Control and Prevention](#).

Survey indicator values were assessed at the county and state levels. Work on previous CHNAs was also taken into account. Key health needs were determined based on the indicator values and trends, current priorities of Campbell County, the potential to impact the issues using evidence-based practices and alignment with the priorities of CCH.

Categories evaluated include:

- Demographics, education and socioeconomic status
- Healthcare access and services
- Health behaviors
- Maternal and child health
- Mental health
- Nutrition and physical activity
- Substance use disorders

From this review and feedback from the most recent CHNA, the most significant issues identified were:

- Access to care
- Behavioral health
- Behavioral health - suicide prevention
- Behavioral health - substance use disorders
- Cancer
- Chronic disease
- Domestic abuse (adult and child)
- Maternal health
- Safety/violence
- Sexually transmitted diseases
- Smoking and smoking while pregnant
- Social and economic factors
- Wellness - lifestyle

Information gaps impacting ability to assess needs

Within the review of the secondary data, gaps were identified related to the health status of minority populations as well as individuals who are medically underserved due to lack of adequate insurance or who encounter barriers to receiving timely and comprehensive healthcare services.

To gather additional insights, CCH regularly participates in meetings facilitated by the other local partner agencies that focus on identifying and implementing best practices for reducing these barriers.

Community engagement synopsis

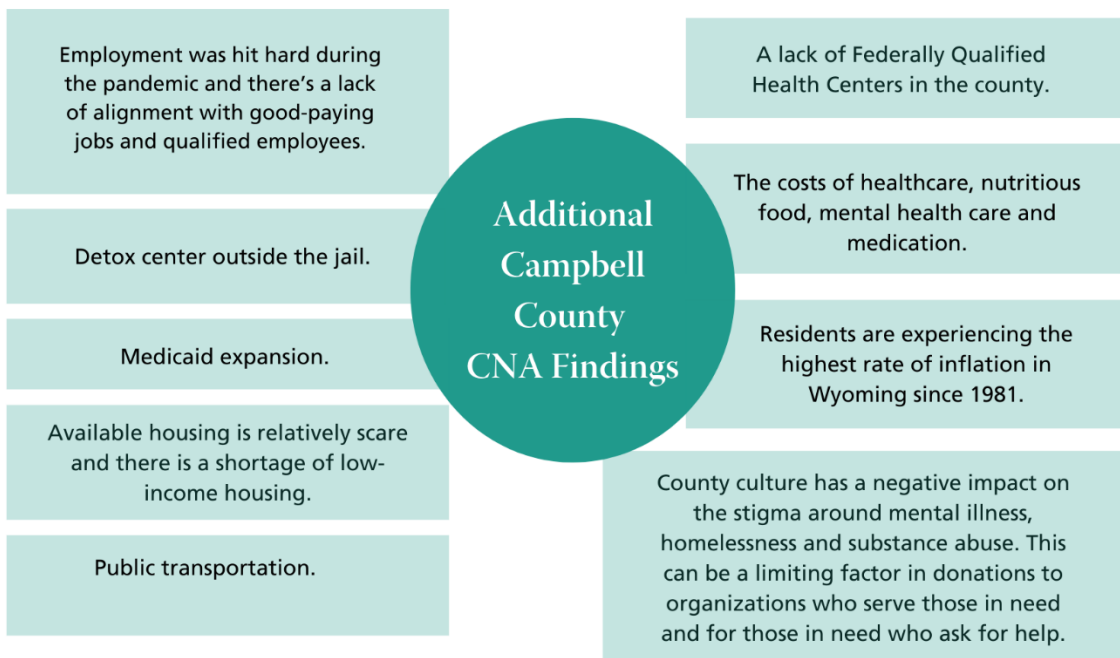
Community input was solicited through Campbell County’s Community Needs Assessment (CNA) conducted by the Campbell County CARE Board. Data for the Campbell County CNA was collected through publicly available data sources, from county residents via focus groups, interviews and an electronic Community Needs Survey. During the Campbell County CNA prioritization activity, six top needs were identified.

Campbell County residents identified their top six health priorities:

- 01** Healthcare access and outcomes
- 02** Transportation
- 03** Inflation/cost of goods and services
- 04** Housing
- 05** Employment
- 06** Culture

According to the Campbell County CNA, “Campbell County is 13th out of 23 counties in overall health outcomes (County Health Rankings & Roadmaps). Healthcare costs are prohibitive for many, especially those with limited or fixed incomes. Many providers in the county do not accept Medicaid insurance, leaving patients to travel long distances (to Rapid City or Casper) to seek services, especially dental services. The county’s mental health and substance abuse service providers are at capacity; many patients need to wait 2-3 months for an appointment, which is difficult when you are dealing with an addiction or a mental health crisis. Respondents to the survey reported medical care and health insurance as the most needed community services.”

Specific to social and economic factors, health issues described by respondents included food insecurity, housing and transportation.



Provider survey results

A survey asking providers to rank a set of community health needs in order of importance to the community was sent to the CCH medical staff, which includes 61 active physicians and 73 limited healthcare practitioners, for a total of 134 providers. Thirty-four providers responded to the survey. The results of the survey are provided below. The score represents the weighted average for all responses on a scale from 1–12, and higher values indicate a higher priority.

Provider Reported Community Health Needs (ranked):

1. Behavioral health (10.15)
2. Access to healthcare (9.79)
3. Behavioral health – substance use disorder (8.34)
4. Behavioral health – suicide prevention (8.25)
5. Chronic disease (7.61)
6. Maternal health (6.06)
7. Wellness – lifestyle (5.94)
8. Cancer (5.69)
9. Domestic abuse (5.26)
10. Safety/violence (4.47)
11. Social and economic factors (4.00)
12. Sexually transmitted diseases (2.66)

Provider comments identified issues related to primary care access, behavioral health support and chronic conditions. Provider survey respondents also identified community agencies addressing these issues and with whom CCH could potentially partner or help support. This input

will be used during the development of the CHNA implementation strategy later this year and will be posted on the CCH website by 11/15/2022 in compliance with federal mandate.

Community-wide healthcare resources available to address needs

Recognizing the current scope of services available to meet the healthcare needs of community members is an important component of a community health needs assessment.

The Campbell County community is served by Campbell County Health and includes CCH, Campbell County Medical Group with nearly 20 clinics, including a walk-in clinic that is open year-round, the Legacy Living & Rehabilitation Center long-term care center, and a home health and hospice department. In addition, CCH offers a wide array of virtual health options.

The surgery centers in Campbell County are Advanced Surgical Care of Wyoming, LLC, Black Hills Surgery Center of Wyoming, The Center for Surgical Excellence, Inc., and Northeast Wyoming Surgery Center, LLC, and Powder River Surgery Center (which is partially owned by CCH). Campbell County has a Public Health Nursing department and there are two independent, privately operated imaging centers. There is also an urgent care center, Black Hills Urgent Care, privately owned and operated. There are three additional home health agencies separate from CCH: Healing Hearts Home Health, Tendercare and Tammie’s Home Care Services, Inc.

The community is cared for by private practice physicians and providers as well as those employed by Campbell County Medical Group. In 2021, CCH hired a consulting firm to complete an analysis of medical and surgical specialty provider availability in the Gillette, Wyoming region. The firm, 3Dhealth, noted a demonstrated community need for the following specialties:

- Allergy and immunology
- Cardio/thoracic surgery
- Cardiology
- Dermatology
- Gastroenterology
- General primary care*
- Hematology/oncology
- Infectious disease
- Nephrology
- Neurology
- Neurosurgery
- Obstetrics and gynecology*
- Ophthalmology
- Otolaryngology
- Pediatrics*
- Physical Medicine and Rehab
- Plastic surgery
- Psychiatry
- Pulmonology
- Rheumatology
- Urology

* Notes primary care physician category for the purpose of the 3Dhealth review.

The 3Dhealth analysis concludes that there is a deficit of primary care and the region needs an additional 32 primary care FTEs to properly care for patients. Additionally, 15.4 FTEs are needed within the medical specialties and 1.1 additional surgical specialty FTEs. Within the surgical specialty area, there is a surplus of orthopedic surgeons but a deficit of cardio/thoracic surgery, neurosurgery, ophthalmology, otolaryngology, plastic surgery and urology with slightly more demand for podiatry than is currently available. This data demonstrates a substantial need for additional providers in the Gillette area to better care for patients and serve the region.

Though some services may be available, the CHNA findings reveal that the ability to receive care in a timely and coordinated manner remains a challenge for many residents, especially vulnerable residents.

Alignment with the State of Wyoming

In 2021, the Wyoming Department of Health, together with the State Health Improvement Plan Steering Committee, created the overall state health improvement plan for Wyoming. This team chose behavioral health, access to healthcare and unintentional injury as top priorities.

Proven strategies available to impact health issues

An important factor for consideration during the health-issue prioritization process was recognizing the availability of proven strategies or evidence-based interventions that, if implemented, could make an impact on the significant health issues identified.

Resources reviewed included:

- 2022 Wyoming County Health Rankings
- 3Dhealth assessment for providers in the Gillette region
- Campbell County Community Needs Assessment
- Wyoming Department of Health Vital Statistics
- Wyoming Prevention Depot

Summary of actions taken by hospital since last Community Health Needs Assessment

To understand the effectiveness and scope of actions taken by CCH since the completion of the most recent CHNA, a review of community-benefit activities was completed. The prior CHNA identified suicide, access to care (uninsured/underinsured), abuse (adult and child) and cancer prevention/early detection as areas of potential concern. In order to address these identified needs, CCH:

- Partners with the Campbell County School District to provide the Kid Clinic, a school-based clinic collaboration providing mental health counseling and primary medical care to children and adolescents. This clinic, caring for the community since 2014, offers a sliding fee scale for low income patients for mental health services.
- Participates in monthly meetings with the Campbell County Prevention Council and the Campbell County Suicide Coalition.
- Participates in a juvenile services prevention group, a subcommittee of the Campbell County Juvenile and Family Court Board, aimed at helping juvenile offenders access resources.
- Partners with the Council of Community Services to help address homelessness, hunger and emergency assistance.
- Provides breast cancer patients with free fittings for prosthetics at the Heptner Cancer Center.

Prior to COVID-19, CCH was working to collaborate with the City of Gillette and Campbell County around suicide prevention but due to the COVID-19 pandemic, efforts were placed on hold. The

COVID-19 pandemic made a large impact on CCH available resources. Many programs paused while funds were reallocated to care for the sickest patients. As we move forward into the endemic stage of COVID-19, we are reassessing available funding and analyzing efforts to determine what will be most impactful in our community as we create our Implementation Plan.

Board of Directors Implementation Strategy

Internal Advisory Group recommendations

The CCH Internal Advisory Group (IAG) reviewed all findings obtained from the activities described previously. The IAG conducted a meeting specifically to identify health needs priorities for the CHNA and considered the following criteria during the decision-making process:

- Scope and severity of the health need.
- Potential for CCH to impact the health need.
- Economic feasibility to address the health need.
- Alignment with CCH, CCH strategies, as well as local/county, state and national objectives.

The CCH IAG identified the following health needs as priorities for the 2022–2024 CHNA:

- | | |
|--|--|
| 01 Behavioral health | 04 Behavioral health – Suicide prevention |
| 02 Access to health care | 05 Chronic conditions |
| 03 Behavioral health – Substance use disorder | |

Priority Health Issue: Behavioral Health

Goal: Improve identification, treatment or resource referral for individuals with behavioral health needs.

According to the U.S. Department of Health and Human Services, mental health disorders are among the most common causes of disability in the United States. The resulting disease burden of mental illness is among the highest of all diseases.

In September 2021, the State of Wyoming published the Behavioral Health Redesign initial report. This report summarizes the history of behavioral health care in the State of Wyoming from 1946 to 2021, explains challenges in the state and makes first steps toward creating legislation to support the committee work dedicated to changing the current system. Some of this work focuses on payment structures, looking at fixed, service and outcomes-based models.

The report notes that there are 12 Centers that provide both mental and substance use disorder support, two centers provide mental health services only and four centers which provide substance use disorder support exclusively. While this support is better than it has been in past decades, it's not enough to keep up with current needs in the state.

The report also notes that the number of registered out-of-State licenses is steadily increasing as more providers are seeing patients via telehealth. This redesign process could impact the landscape of behavioral health in Wyoming and influence the CCH implementation strategy around behavioral health in the coming years.

In Campbell County's 2022 Community Needs Assessment, substance abuse services (58%), mental health services (53%), and dental services (53%) were the 3rd, 4th, and 5th most needed community resources after affordable housing (68%). The county's survey also mentioned a cultural issue around mental health assistance, noting stigma related mental illness, homelessness and substance abuse, potentially blocking individuals from reaching out for support.

Wait times for behavioral health access are not unique to Campbell County and are an issue throughout the state. This applies to long term placement, adolescent residential treatment centers and outpatient community resources.

The ratios of behavioral health providers in Campbell County are: 460:1 compared to 270:1 for the state. Feedback from the community includes lengthy wait times for providers who accept MHSA (mental health service administrator) and there is a lack of providers who have capacity to care for additional patients.

In 2021, CCH hired consulting company MTM Services to create a gap analysis on wait times and available staff hours for behavioral health services. The outcome of this analysis shows a wait time of 64 days for adult psych, adult mental health, child psych, adolescent mental health and

adult substance use disorder. Some of the findings and recommendations can be included in the implementation strategy.

<i>Programs and initiatives</i>	<i>Activities</i>	<i>Anticipated impact</i>	<i>Existing or planned collaborations</i>	<i>Resources</i>
<i>Virtual behavioral health</i>	<i>Expand access to primary care providers through telehealth</i>	<i>Improved access to behavioral health care</i>	<i>Campbell County Health and UHealth</i>	<p><i>Staff time to support the implementation of the programs and initiatives.</i></p> <p><i>In-kind expenses and financial support associated with the ongoing operations of the programs.</i></p> <p><i>In-kind expenses associated with collaborations with community organizations.</i></p>
<i>Mental health crisis services</i>	<i>Continue to provide 24/7 crisis line services and enhance crisis evaluation services in the emergency department</i>	<i>Enhance the delivery of appropriate care for patients experiencing a mental health crisis</i>	<i>Campbell County Health and UHealth</i>	
<i>Community collaborations</i> <i>Campbell County Suicide Prevention Coalition, local community mental health providers</i>	<i>Collaborate with county and community partners on community initiatives related to mental health and suicide prevention</i>	<i>Enhanced behavioral health treatment and support services, increased community awareness of mental health issues and suicide prevention resources.</i>	<i>Campbell County Health, Campbell County, community mental health providers</i>	
<i>Recruitment of new mental health providers to Campbell County</i>	<i>Evaluate opportunities to recruit additional mental health providers to Campbell County</i>	<i>Increased access to mental health providers for those seeking care in Campbell County.</i>	<i>Campbell County Health</i>	

Priority Health Issue: Behavioral Health – Substance Use Disorder

Goal: Improve identification, treatment or resource referral for individuals with substance abuse disorders.

According to the U.S. Department of Health and Human Services, mental health disorders are among the most common causes of disability in the U.S. The resulting disease burden of mental illness is among the highest of all diseases.

According to the National Institutes of Health, a substance use disorder (SUD) is a condition that affects a person’s brain and behavior, leading to a person’s inability to control their use of substances such as legal or illegal drugs, alcohol or medications.

Alcohol

According to the Wyoming Prevention Depot report (which is based upon 2015-2019 data):

- In Campbell County, the rate per 100,000 population of alcohol-related vehicular crashes resulting in fatalities, injuries, or property damage (where Blood Alcohol Content by volume is greater than 0.01) was 124 compared to the State rate of 125.
- Wyoming alcohol-related motor vehicle fatalities are lower in Campbell County at 6 compared to the State at 8. (The rate per 100,000 population of alcohol-related vehicular fatalities where Blood Alcohol Content by volume is greater than 0.01.)
- Driving a vehicle after having too much to drink are the lowest in the state in Campbell County at 0.6% compared to 2.6% in the State. (The percentage of Wyoming adults reporting driving a vehicle after having perhaps too much to drink, sometime in the past month.)
- DUI arrests in Campbell County are the highest in the state at 1,001 per 100,000 population.

<i>Programs and Initiatives</i>	<i>Activities</i>	<i>Anticipated impact</i>	<i>Existing or planned collaborations</i>	<i>Resources</i>
<i>Alternatives to opioids</i>	<i>Implement protocols for pain management without the use of opioids in the</i>	<i>Decreased administration of opioids in the emergency</i>	<i>Campbell County Health and UHealth</i>	<i>Staff time to support the implementation of</i>

	<p><i>emergency department and inpatient Behavioral Health Services (BHS). Further adapt the protocols for use in both inpatient and outpatient settings.</i></p>	<p><i>department and inpatient units.</i></p>	<p><i>the programs and initiatives.</i></p> <p><i>In-kind expenses and financial support associated with the ongoing operations of the programs.</i></p> <p><i>In-kind expenses associated with collaborations with community organizations.</i></p>
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Priority Health Issue: Access to Care

Goal: Improve access to comprehensive, quality health care services.

Since the advent of the Affordable Care Act, there has been a sharp decline in the proportion of residents without any health insurance. In Campbell County, 13% of the population is uninsured compared to 15% in the state. However, there are still many barriers to accessing primary and behavioral healthcare services through both Medicaid and other payer sources and many feel the cost of healthcare prevents access. According to the Campbell County CNA, Campbell County ranks 13th out of 23 counties in overall health outcomes in Wyoming, showing much room for improvement.

Research shows that access to primary care is associated with positive health outcomes. Individuals with an established primary care physician are more likely to receive recommended preventive services such as flu shots, blood pressure screenings and cancer screenings. Disparities in access to primary health care include language-related barriers, physical disabilities, inability to take time off work to attend appointments and transportation-related barriers.

There is a highly unfavorable ratio of the population in Campbell County to primary providers, 2,010:1 compared to the state numbers of 1,400:1. These disparities decrease access to services and increase the risk of poor health outcomes for individuals with limited resources.

According to the Wyoming Department of Health, 34.7% of residents in Campbell County don't have a personal doctor, compared to 33.0% in the state. In Campbell County 44.2% of residents reported an access to care issue compared to 42.8% in the State. These numbers echo the data of provider to patient ratios, demonstrating a substantial unmet need for access to healthcare for residents in Wyoming and Campbell County.

This lack of access can also be seen in other data points like health screenings. In Campbell County, mammography screening numbers are among the worst in the state according to the Wyoming 2022 County Health Ranking, with only 29% of eligible women in Campbell County receiving their annual mammogram, compared to 37% in the state. (This measure analyzes the percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening. The 2022 County Health Rankings used data from 2019 for this measure.) According to the [CDC's 2018 mammography data](#), 64.8% of women in the United States age 65 and over receive an annual mammogram.

In addition, feedback from the provider survey and resident feedback captured in the Campbell County CNA indicates that access to mental and behavioral health services and primary care remains a challenge in the community, particularly for those at higher risk of health inequities.

The Campbell County CNA noted that respondents identified medical care and health insurance as the most needed community services.

<i>Programs and initiatives</i>	<i>Activities</i>	<i>Anticipated impact</i>	<i>Existing or planned collaborations</i>	<i>Resources</i>
<i>Recruitment of new healthcare providers to Campbell County</i>	<i>Evaluate opportunities to recruit additional healthcare providers to Campbell County</i>	<i>Increased access to healthcare providers for those seeking care in Campbell County.</i>	<i>Campbell County Medical Group and independent providers</i>	<i>Staff time to support the implementation of the programs and initiatives.</i>

<i>Virtual primary care</i>	<i>Expand access to primary care providers through telehealth</i>	<i>Increased access to healthcare providers by those seeking care in Campbell County</i>	<i>Campbell County Health and UHealth</i>	<p><i>In-kind expenses and financial support associated with the ongoing operations of the programs.</i></p> <p><i>In-kind expenses associated with collaborations with community organizations.</i></p>
<i>Subsidy for Gillette College School of Nursing</i>	<i>Continue to subsidize salary for 1 full-time nursing instructor and .5 Nursing program Administrator</i>	<i>Increased capacity to graduate additional students in the nursing program</i>	<i>Campbell County Health and Gillette College</i>	
<i>Continuing medical education (CME) for healthcare providers</i>	<i>Continue to provide the opportunity for continuing medical education programs for community healthcare providers</i>	<i>Increased access to current treatment trends and information to enhance and improve patient care</i>	<i>Campbell County Health, UHealth, HealthONE, Billings Clinic</i>	
<i>Enrollment assistance in public programs for underinsured residents</i>	<i>Continue Patient Advocate services for inpatients and ED patients to qualify and register for eligible assistance programs</i>	<i>Increase likelihood to seek care when needed</i>	<i>Campbell County Health, Elevate</i>	
<i>Community paramedicine program</i>	<i>Expand community paramedicine program to target known healthcare gaps</i>	<i>Reduce emergency visits and readmissions</i>	<i>Campbell County Health</i>	

<i>Pediatric flu vaccination program</i>	<i>Continue to subsidize free flu vaccination program in local schools</i>	<i>Improve access to vaccination for children in Campbell County to reduce absenteeism, improve ability to learn</i>	<i>Campbell County Health, Campbell County School District, Campbell County Public Health</i>	
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Priority Health Issue: Behavioral Health – Suicide Prevention

Goal: Improve identification, treatment or resource referral for individuals at risk for suicide.

Deaths due to drug overdose

According to data is from the Wyoming Department of Health Vital Statistics, in Wyoming in 2020 there were 38 deaths attributed to prescription drug overdose, 43 deaths attributed to illicit drugs and an additional 9 due to a combination of prescription and illicit drugs for a total of 90 lives lost.

In addition, public health and medical professionals in Campbell County recognize that opioid use and addiction is becoming an increasing problem in the county for both youth and adults. Campbell County Health Emergency Medical Services carry and administer the overdose reversal drug Naloxone, brand name Narcan. In January 2020, the Gillette Police Department also began carrying Naloxone routinely, indicative of growing need for this life saving tool in response to increases in drug overdoses within the community.

<i>Programs and initiatives</i>	<i>Activities</i>	<i>Anticipated impact</i>	<i>Existing or planned collaborations</i>	<i>Resources</i>
<i>ZERO Suicide implementation</i>	<i>Implement evidence-based suicide prevention program through clinical practice</i>	<i>Expanded clinical use of evidence-based protocols that directly target</i>	<i>Campbell County Health and UCHHealth</i>	<i>Staff time to support the implementation of</i>

	<i>aimed at screening and appropriate referral for individuals at risk for suicide</i>	<i>suicidal thoughts/behaviors</i>		<i>the programs and initiatives.</i>
<i>QPR training</i>	<i>Expand QPR training to community groups and individuals</i>	<i>Increased ability to identify those at risk for suicide</i>	<i>Campbell County Health, Campbell County, community mental health providers</i>	<i>In-kind expenses and financial support associated with the ongoing operations of the programs.</i>
				<i>In-kind expenses associated with collaborations with community organizations.</i>

Priority Health Issue: Chronic Conditions

Goal: Provide evidence-based education, prevention and self-management strategies to impact and empower those with – or at risk for – chronic conditions.

According to the Centers for Disease Control and Prevention, chronic diseases and conditions are one of the leading causes of death and disability in the United States. Chronic conditions—including some cancers, cerebrovascular disease, heart disease, obesity, diabetes and lung disease—share risk factors such as tobacco use, excessive alcohol use, unhealthy diet, physical inactivity and lack of access to preventive care.

According to the 2022 Wyoming Rankings, adult obesity is 32% in Campbell County compared to 30% in the state. The rate of physical inactivity is 27% in Campbell County compared to 24% in the state. The access to exercise opportunities rate is 79% in Campbell County compared to 73% in the state.

When looking at health behaviors, the rate of sexually transmitted infections is 412.2 per 100,000 population compared to the state rate of 378.2 per 100,000 population. The teen birth rate is also higher in Campbell County at 31 compared to the state rate at 24 (number of births per 1,000 female population ages 15-19).

<i>Programs and initiatives</i>	<i>Activities</i>	<i>Anticipated impact</i>	<i>Existing or planned collaborations</i>	<i>Resources</i>
<i>Chronic disease self-management programs, including Healthy U and Living Well in the Community</i>	<i>Provide evidence-based interventions to elicit positive changes in management of type 2 diabetes and support of overall quality of life and wellbeing for people with disabilities</i>	<i>Improved self-efficacy in managing chronic disease. Improved ability to develop goals in support of larger life changes.</i>	<i>Campbell County Health, Wyoming Independent Living, Wyoming Center on Aging, Wyoming Department of Health</i>	<i>Staff time to support the implementation of the programs and initiatives.</i>
<i>Senior Health Fair</i>	<i>Provide resources for low-cost blood screenings and education events for seniors at risk for chronic conditions</i>	<i>Improved access to information in identifying and managing chronic disease</i>	<i>Campbell County Health, Campbell County Senior Center</i>	<i>In-kind expenses and financial support associated with the ongoing operations of the programs.</i>
<i>Medicare benefits counseling, education and enrollment assistance</i>	<i>Provide information on accessing services and sponsoring periodic in-person counseling</i>	<i>Increased enrollment in appropriate Medicare coverage and/or savings program</i>	<i>Campbell County Health, Well-Advised, Wyoming Hospital Association</i>	<i>In-kind expenses associated with collaborations with community organizations.</i>

Conclusion

CCH's implementation strategy for 2023 – 2024 will serve as one of the numerous ways that CCH supports the local community.

This report summarizes our plan to impact our patients and the communities we serve through a focus on the prioritized areas of need identified within the CHNA.

CCH will regularly identify ways to refine its implementation strategy over the next three years, including collaboration with leaders from across UHealth to explore policies, practices and programs that might be implemented within CCH's community. CCH will continue to focus its efforts in the community to promote health improvement and ultimately achieve the mission of improving the lives of those we serve.

Board of Trustees review and approval

During their October 2022 special session to review the 2022-2024 CCH CHNA implementation strategy, the Campbell County Health Board of Trustees reviewed, discussed and approved the information contained within this report.

Acknowledgments, recommendations and next steps

We would like to thank Campbell County, community agencies as well as medical providers and community members who provided insight and expertise that greatly assisted in the completion of this report.

In the following months, implementation strategies designed to address the identified health needs within Campbell County will be prepared and presented to the CCH Board of Trustees for approval. The CCH CHNA report will be made available to the public for viewing or download on the CCH website, as well as in hard copy located in the CCH administrative office.

Appendices

Appendix 1—Data sources

- 2022 County Health Rankings for Wyoming:
<https://www.countyhealthrankings.org/app/wyoming/2022/rankings/campbell/county/outcomes/overall/snAPSHOT>

	Wyoming	Campbell County
Health Outcomes		
Length of Life		
Premature death	7,800	7,700
Quality of Life		
Poor or fair health	16%	16%
Poor physical health days	3.5	3.6
Poor mental health days	4.1	4.1
Low birthweight	9%	10%
Health Factors		
Health Behaviors		
Adult smoking	18%	20%
Adult obesity	30%	32%
Food environment index	7	7.8
Physical inactivity	24%	27%
Access to exercise opportunities	73%	79%
Excessive drinking	20%	18%
Alcohol-impaired driving deaths	32%	32%
Sexually transmitted infections	378.2	412.2
Teen births	24	31
Clinical Care		
Uninsured	15%	13%
Primary care physicians	1,400:1	2,010:1
Dentists	1,440:1	2,590:1
Mental health providers	270:01:00	460:01:00
Preventable hospital stays	3,155	1,854
Mammography screening	37%	29%
Flu vaccinations	43%	45%
Social & Economic Factors		
High school completion	94%	93%
Some college	67%	60%

Unemployment	5.80%	6.90%
Children in poverty	10%	8%
Income inequality	4.3	4.4
Children in single-parent households	18%	17%
Social associations	13.8	8.4
Violent crime	220	278
Injury deaths	95	70
Physical Environment		
Air pollution - particulate matter	5	4.9
Drinking water violations		Yes
Severe housing problems	12%	13%
Driving alone to work	77%	80%
Long commute - driving alone	15%	17%

- Campbell County Community Needs Assessment for 2022-2024: <https://www.campbellcountwy.gov/233/CARE-Board>
- 3Dhealth assessment for providers in the Gillette region (a proprietary written document not for public distribution).
- State of Wyoming Department of Health <https://health.wyo.gov/publichealth/chronic-disease-and-maternal-child-health-epidemiology-unit/cancer-surveillance/annualreports/>
<https://health.wyo.gov/publichealth/cancer-and-chronic-disease-prevention-unit/chronicdisease/data/>
- State of Wyoming Department of Health Vital Statistics: <https://health.wyo.gov/admin/vitalstatistics/reports/>
<https://health.wyo.gov/publichealth/chronic-disease-and-maternal-child-health-epidemiology-unit/wyoming-behavior-risk-factor-surveillance-system-2/brfss-data-2/2015-2019-county-data/>
<https://health.wyo.gov/wp-content/uploads/2021/10/2020ARD10-Ten-Year-Suicide-Rate.pdf>
<https://health.wyo.gov/wp-content/uploads/2021/10/2020ARD11-Suicide-by-Means.pdf>
<https://health.wyo.gov/wp-content/uploads/2021/10/2020ARD12-Overdose.pdf>
<https://health.wyo.gov/wp-content/uploads/2021/10/2020ARD08-Top-5-Causes.pdf>
- Wyoming Prevention Depot, a combined effort of the Wyoming Department of Health and the University of Wyoming: <https://wyomingpreventiondepot.org/>
- CDC Mammography Fast Facts: <https://www.cdc.gov/nchs/data/hus/2019/033-508.pdf>
- CDC Wyoming leading causes of death: <https://www.cdc.gov/nchs/pressroom/states/wyoming/wy.htm>

Appendix 2 – Community organizations

- Boys and Girls Club of Campbell County
- Campbell County Government
- Campbell County Juvenile and Family Court Board
- Campbell County Parks and Recreation
- Campbell County Prevention Council
- Campbell County Public Health
- Campbell County School District
- Campbell County Senior Center
- Campbell County Suicide Coalition
- City of Gillette
- Council of Community Services
- Crook County Medical Foundation
- Gillette College (Health Science Education Center)
- Gillette College Foundation
- Northeast Wyoming Community Health Foundation
- The Kid Clinic collaboration with Campbell County School District
- Visitation and Advocacy Center
- YES (Youth Emergency Services) Foundation