Executive Summary

In 2018, Abraham Lincoln Memorial Hospital (ALMH) completed a community health needs assessment (CHNA) for Logan County, Ill., as required of nonprofit hospitals by the Affordable Care Act of 2010. The hospital completed previous needs assessments in 2012 and 2015.

As an affiliate of Memorial Health System (MHS), ALMH worked with three other affiliate hospitals on the overall timeline and process steps for the CHNA, but completed its Logan County assessment independently in collaboration with its local community partners. In order to help narrow down the multiple needs and issues facing the community to a set of final priorities the hospital would address, MHS hospitals agreed to use the same defining criteria throughout the CHNA process. These defining criteria are:

1. Institute of Medicine Triple Aim Impact
2. Magnitude of the Issue
3. Seriousness of the Issue
4. Feasibility to Address the Issue

ALMH collaborated with the Logan County Department of Public Health. Community health needs were prioritized based on reviews of secondary community data, as well as primary data gathered from a Community Advisory Committee comprised of 22 representatives from community organizations. Social determinants of health were included in all data reviews. A community health survey was conducted for Logan County by the University of Illinois’ Survey Research Department. The Community Advisory Committee offered additional input following the survey and helped to prioritize the final needs. ALMH then convened an Internal Advisory Committee, which approved the final priorities selected by ALMH.

These are:

1. Cancer
2. Mental Health
3. Obesity
4. Substance Abuse

The Abraham Lincoln Memorial Hospital Board approved the 2018 community health needs assessment report and final priorities on Aug. 15, 2018. This report is available online at ChooseMemorial.org/HealthyCommunities or by contacting the ALMH community benefit department at 217–605–5008.

An implementation strategy is being developed to address the identified needs, which ALMH will implement in FY2019-FY2021. The strategy will be posted at the same website in December 2018.
Introduction to Memorial Health System

Memorial Health System of Springfield, one of the leading healthcare organizations in Illinois, is a community-based, not-for-profit corporation dedicated to patient care, education and research. Our highly skilled team has a passion for excellence and is dedicated to providing a great patient experience for every patient every time.

Memorial Health System includes four hospitals: Memorial Medical Center in Sangamon County, Abraham Lincoln Memorial Hospital in Logan County, Taylorville Memorial Hospital in Christian County and Passavant Area Hospital in Morgan County. Memorial Health System also includes Memorial Behavioral Health, Memorial Physician Services and Memorial Home Services. Our more than 7,100 staff members, partnering physicians and hundreds of volunteers are dedicated to improving the health of the communities we have served since 1897. In fiscal year 2017, our hospitals served more than 43,000 inpatients and nearly 573,000 outpatients.

Community health needs assessments (CHNAs) were completed in 2018 in each of the counties where the hospitals are located. These needs assessments meet the requirements of federal health reform’s Section 9007 of the Patient Protection and Affordable Care Act of March 2010 as well as requirements of the IRS 990 Schedule H report. Memorial Health System hospitals also completed needs assessments in 2012 and 2015.
Leadership of Community Benefit and Community Health Needs Assessment

An appointed board committee made up of board members, community representatives and senior leadership approves and oversees all aspects of Memorial Health System’s community benefit programs and community health needs assessments. Community benefit and outcomes of the hospital community health needs assessments are included in the Memorial Health System Strategic Plan, which contains five goals:

1. Great Patient Outcomes
2. Great Place to Work
3. Great Partner for Physicians
4. Great Regional Presence
5. Great Financial Stewardship

Under the final goal of Great Financial Stewardship, all MHS affiliates are required to “achieve 100 percent of approved Community Benefit targets.” The MHS Board’s Community Benefit Committee oversight includes:

- MHS charity care policies
- Tri-annual community health needs assessment processes for the four MHS hospitals
- Annual review and approval of CHNA implementation strategies for the four MHS hospitals
- Annual review of measures of success in meeting the goals of the CHNA implementation strategies
Introduction to Abraham Lincoln Memorial Hospital

Abraham Lincoln Memorial Hospital (ALMH) is a 25-bed, not-for-profit, community-based rural critical access hospital affiliated with Memorial Health System. ALMH is located in Lincoln, Illinois, approximately 30 miles northeast of the state capital of Springfield. ALMH serves the people and communities of Logan and eastern Mason counties. The hospital employs 369 people and is one of the major employers in Logan County. These jobs directly impact the local economy.

In addition to providing job opportunities for the local community, ALMH makes an overall economic impact by increasing access to healthcare for local residents. Decisions for industrial and business locations are significantly influenced by the availability of healthcare. Additionally, the recruitment and retention of retirement-aged residents are impacted by quality healthcare systems. ALMH enhances Logan County’s ability to attract new business and industry and has the potential to attract new jobs and new families to the county.

ALMH offers a full range of general (secondary) hospital inpatient and outpatient care on site. Tertiary care, including psychiatric services, when appropriate and required, is provided through affiliation agreements with other providers, including Memorial Medical Center (MMC) of Springfield, Illinois. Neonatal high-risk care is provided, when appropriate, through HSHS St. John’s Neonatal Center. ALMH is licensed under the Federal Government Rural Hospital Flexibility Program (Critical Access).

In FY2017, ALMH provided the following care to the community:

- Patient Days of Care: 2,853
- Discharges: 896
- Outpatient Visits: 42,980

Clinical services provided on-site include:

- General Acute Care
- Observation
- Swing Bed
- Obstetrics and Gynecology
- Surgical Services
- Emergency Medicine
- Special Procedures
A full range of ancillary and support services are provided on-site, including:

- Laboratory
- Radiology
- Pharmacy
- Clinical Dietetics
- Diabetes Self-Management Education
- Cardiology
- Sleep Study
- Physical Therapy
- Speech-Language Pathology
- Occupational Therapy
- Respiratory Therapy
- Cardiopulmonary Rehabilitation

Outpatient mental health services are provided by Memorial Behavioral Health. The ALMH Emergency Department is staffed by a qualified physician 24 hours a day. Community physicians provide back-up coverage on a rotating basis. Criteria and guidelines for evaluating emergency patients relative to appropriate care setting have been established and appropriate transfer agreements are in place. Emergency transportation, including air transport when required, is immediately available. ALMH operates 24 hours a day, 365 days a year. All clinical and support departments maintain appropriate staffing plans to support this coverage, including call schedules. A nurse manager, an administrative representative and appropriate physicians are always available on call.

ALMH is accredited by the Joint Commission and is a member of the American Hospital Association, the Illinois Hospital Association and Vizient.

As a nonprofit community hospital, Abraham Lincoln Memorial Hospital provides millions of dollars in community support each year, both for its patients and in support of community partnerships. For the past three years, ALMH’s community benefits have totaled $27.7 million. (FY18 totals were not available at the time this report was completed.)
### ABRAHAM LINCOLN MEMORIAL HOSPITAL COMMUNITY BENEFIT

<table>
<thead>
<tr>
<th></th>
<th>FY2015</th>
<th>FY2016</th>
<th>FY2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Financial Assistance</td>
<td>$731,000</td>
<td>$503,000</td>
<td>$663,000</td>
</tr>
<tr>
<td>Unpaid Medicaid</td>
<td>$4.6 million</td>
<td>$6.6 million</td>
<td>$7.5 million</td>
</tr>
<tr>
<td>Other Community Programs</td>
<td>$2.2 million</td>
<td>$2.4 million</td>
<td>$2.5 million</td>
</tr>
<tr>
<td><strong>TOTAL COMMUNITY BENEFIT</strong></td>
<td><strong>$7.5 million</strong></td>
<td><strong>$9.5 million</strong></td>
<td><strong>$10.7 million</strong></td>
</tr>
</tbody>
</table>

### ALMH Community Health Collaborative

In 1996, Abraham Lincoln Memorial Hospital was a critical partner in developing the Healthy Communities Partnership organization, including employing a full-time coordinator. In 2017, the organization transitioned into the ALMH Community Health Collaborative (CHC). The CHC is an open, collaborative group that offers information-sharing and networking opportunities among a variety of community service providers and stakeholders in Logan County.

The CHC addresses the needs of our community through partnership. More than 30 different health and social service agencies, education organizations and others participate in the ALMH Community Health Collaborative. The mission of the ALMH Community Health Collaborative is to improve the health of the people and communities it serves, and its vision is to create the healthiest community in the nation. The objectives of the Collaborative are four-fold:

1. Expand and enhance access to clinical care
2. Promote and encourage healthy behaviors
3. Improve the physical environment
4. Address the social determinants of health
The newly reorganized CHC is still funded by the ALMH Foundation but is now headed by an advisory committee chaired by a representative of the ALMH Foundation. The advisory board includes representatives from ALMH, Logan County Department of Public Health, Memorial Behavioral Health, Lincoln Park District, Lincoln Area YMCA, private businesses, Logan County Parks and Trails Foundation, Lincoln Police Department, Community Action Partnership of Central Illinois and the Logan County Regional Planning Commission. The CHC director supports the advisory board and the CHC network that continues to meet regularly to provide networking and leveraging opportunities. The director also oversees daily operations and implements activities on behalf of the ALMH CHC.

Whether it is an individual project or a long-term issue, critical community players are brought to the table to use resources efficiently and take action on important issues affecting Logan County residents. The advisory board and full CHC network each meet approximately four times annually. Task forces are created and meet according to community need. Current task forces address substance abuse and promote breastfeeding.

Recent Awards and Recognitions

- International Hospital Federation: Memorial Health System was one of two winners in 2017 of the Excellence Awards in the category of Quality & Safety and Patient-Centered Care. Memorial received the Honorable Mention award at the 41st World Hospital Congress in Taipei, Taiwan.
- In 2018, Becker's Hospital Review recognized Abraham Lincoln Memorial Hospital on the “66 Critical Access Hospitals to Know” list. ALMH was also listed in their 2015, 2016 and 2017 recognition lists.
- In 2017, Abraham Lincoln Memorial Hospital was named among the nation’s most wired hospitals by Hospital and Health Networks for the fifth year in a row. The award serves as an industry-standard benchmark study that measures the level of information technology used in U.S. hospitals and health systems.
- In 2017, Abraham Lincoln Memorial Hospital was recognized by iVantage Health Analytics as one of the nation's top 100 best-performing critical access hospitals. The honor is based on iVantage’s Hospital Strength Index and its measures of market conditions, clinical and operational performance and financial and qualitative outcomes.
- Abraham Lincoln Memorial Hospital was recognized in 2017 by the Chartis Center for Rural Health/iVantage Health Analytics and the National Organization of State Office of Rural Health (NSOSRH) for overall excellence, reflecting top quartile performance among all rural hospitals in the nation.
- Abraham Lincoln Memorial Hospital was recognized in 2017 and 2018 by Practice
Greenhealth. The award is given to healthcare facilities that are changing their practices to become more sustainable and have achieved progress in areas such as waste reduction, renewable energy adoption, food purchasing and mercury elimination. They also must have a recycling rate of at least 10 percent for their entire waste stream.
The majority of patients served by Abraham Lincoln Memorial Hospital come from Logan County, where ALMH focuses most community outreach efforts and health improvement projects. Logan County comprises 619 square miles, with a population of 29,527 people. It is a rural, agricultural area, with corn and soybeans as the primary agricultural products. Small businesses and mining are also important contributors to the economy.

The city of Lincoln (population 13,969), where ALMH is located, is the county seat. Lincoln contains almost half of the county’s population. ALMH is the only hospital in the primary service area of Logan County. Race/ethnic makeup is 86 percent white, 8 percent black and 6 percent other backgrounds. The median household income is $52,676. Persons age 65 and older make up 17.7 percent of Logan County’s population. 12.5 percent of all residents live below the federal poverty level. High school graduates make up 87.4 percent of residents. Only 18.4 percent of residents have earned a bachelor’s degree or higher, in comparison to the state average of 32.9 percent.

Lincoln is home to a private liberal arts college, a Christian university and graduate seminary. A community college based 38 miles away in Normal, Illinois, also offers classes locally.

Existing healthcare providers in Logan County include Logan County Department of Public Health, Memorial Physician Services primary care practice, Springfield Clinic primary care practice and Memorial Behavioral Health. Memorial Home Services also provides durable medical equipment locally with a store in Lincoln and provides hospice services in Logan County. Safe Haven Hospice is also available for hospice care in Logan County. There is one medically underserved area in Logan County. The SIU Family Medicine Center, a federally qualified health center, opened in April 2017 at the Logan County Department of Public Health.

Logan County Residents

LOGAN COUNTY: INCOME & POVERTY

<table>
<thead>
<tr>
<th></th>
<th>Logan County</th>
<th>Illinois</th>
</tr>
</thead>
<tbody>
<tr>
<td>Median household income, 2012-2016</td>
<td>$52,676</td>
<td>$55,322</td>
</tr>
<tr>
<td>Persons in poverty, percent</td>
<td>12.5%</td>
<td>15.1%</td>
</tr>
<tr>
<td>Children living in poverty</td>
<td>18.5%</td>
<td>19.5%</td>
</tr>
</tbody>
</table>


Primary/Chronic Diseases and Health Issues of Uninsured, Low-Income and Minority Groups

The 2018 SocioNeeds Index, created by Conduent Healthy Communities Institute, showed the 62656 zip code as having the highest correlation of socioeconomic need and poor health outcomes in Logan County. It is the only Logan County zip code assigned a score of 5 (“high need”) in the service area. Latham was assigned the second highest score of 4. Atlanta and Beason were assigned a score of 3. (See pages 13-14)

Several social determinants of health can be identified that may be creating this high need in Lincoln. The percentage of individuals with an earned bachelor’s degree or higher is only 18.4%, much lower than the state average of 32.9%. There is a high number of single-parent
households in Lincoln (39.1%) compared to the state average of 32.4%. The median income in Lincoln is 24% less than the median household income in the state of Illinois. The per capita income, $23,410, is 25% less in Lincoln than the state average. The poverty rate for children in Lincoln is 23.9%, higher than the state average of 19.5%. Children and families living below the poverty line are increasing in recent years. In Lincoln, mental health and mental disorders are often performing in the lowest quartile of the state including the age-adjusted ER rate due to pediatric mental health and adult mental health. Additional areas that contribute to high visits to the emergency department include: diabetes, short-term complications of diabetes, heart failure, bacterial pneumonia, dental problems, urinary tract infections, asthma and COPD (chronic obstructive pulmonary disease).

Areas of Logan County with High Socioeconomic Need

The 2017 SocioNeeds Index, created by Conduent Healthy Communities Institute, is a measure of socioeconomic need that is correlated with poor health outcomes. All zip codes, counties and county equivalents in the United States are given an Index Value from 0 (low need) to 100 (high need). To help find the areas of highest need in Logan County, the selected locations are ranked from 1 (low need) to 5 (high need) based on their Index Value.

In Logan County, the zip code estimated with the highest socioeconomic need is 62656, where the city of Lincoln and ALMH are located. Residents here face higher risks of preventable hospitalizations or premature death. Other areas of the county with high socioeconomic need include 62543 (Latham) and 62512 (Beason).

Logan County Zip Codes Ranked by SocioNeeds

<table>
<thead>
<tr>
<th>Zip Code</th>
<th>Index</th>
<th>Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>62656</td>
<td>74.9</td>
<td>5</td>
</tr>
<tr>
<td>62543</td>
<td>50.1</td>
<td>4</td>
</tr>
<tr>
<td>62512</td>
<td>42.2</td>
<td>4</td>
</tr>
<tr>
<td>61723</td>
<td>36.0</td>
<td>4</td>
</tr>
<tr>
<td>62635</td>
<td>28.4</td>
<td>3</td>
</tr>
<tr>
<td>62648</td>
<td>27.0</td>
<td>3</td>
</tr>
<tr>
<td>62643</td>
<td>24.3</td>
<td>3</td>
</tr>
<tr>
<td>62518</td>
<td>22.4</td>
<td>3</td>
</tr>
<tr>
<td>62671</td>
<td>13.0</td>
<td>2</td>
</tr>
<tr>
<td>62666</td>
<td>1.7</td>
<td>1</td>
</tr>
</tbody>
</table>

METHODOLOGY

As they did in 2015, Abraham Lincoln Memorial Hospital and the Logan County Department of Public Health (LCDPH) decided to work collaboratively on the community health needs assessment. The organizations collaborated on data collection and were both highly involved in implementing the timeline to review the data; both organizations also played an important role in the CHNA Internal Advisory Board. The process allowed both entities to identify needs and choose the priorities that were best suited to their resources and expertise.

Internal Advisory Board

Newly established in October 2017, the ALMH Community Health Collaborative (CHC) Advisory Board served as the Internal Advisory Board. The ALMH Community Health Collaborative succeeds the Healthy Communities Partnership (HCP), a collaboration established in 1996 to address community health issues. Over the years, the HCP has worked on issues of teen substance use, teen pregnancy, access to care, domestic abuse and opioid abuse. The new ALMH Community Health Collaborative, funded by the ALMH Foundation and led by the hospital, continues this work with an advisory board and network of partners.

The CHC mission statement is to improve the health of the people and communities we serve, and its vision is to become the healthiest community in the nation.

The CHC advisory board meets quarterly to recommend and review efforts of the ALMH CHC and also provided critical feedback during the Community Health Needs Assessment process. A diverse group of stakeholders hold seats on the Advisory Board, with the following entities represented:

- ALMH
- ALMH Foundation
- Community Action Partnership of Central Illinois
- Lincoln School District 27
- Private businesses
- Lincoln Area YMCA
- Lincoln Police Department
- Lincoln Park District
- Logan County Parks and Trails Foundation
- Logan County Regional Planning Commission
- Logan County Department of Public Health
- Memorial Behavioral Health
Internal Advisory Board Charter: The Logan County Community Health Needs Assessment Internal Advisory Committee will gather and review primary and secondary data in order to identify high-priority health needs in Logan County.

Using the criteria identified by Memorial Health System, primary data was gathered from the findings and observations of local community organizations who are members of the ALMH Community Health Collaborative Network. ALMH did not face any information gaps that limited our ability to identify community health issues.

Community Advisory Committee

Community Advisory Committee Charter: The Logan County Community Health Needs Assessment Community Advisory Committee will review primary and secondary data in order to assist in identifying high-priority health needs in Logan County.

The Community Advisory Committee Group consisted of members from the Abraham Lincoln Memorial Hospital Community Health Collaborative Network.

In order to develop a comprehensive understanding of health needs in our service area, community involvement was critical. In addition to encouraging involvement from all of the members of the ALMH Community Health Collaborative, it was important to ensure that the vulnerable and underserved members of our community were represented in an equal and fair manner. We accomplished this by involving the following entities in our process:

- SIU Family Health Center
- Community Action Partnership of Central Illinois
- Gateway Foundation
- Moms Who Care
- Heartland Community College
- Lincoln College
- Lincoln Park District
- Memorial Behavioral Health
- Logan County Department of Public Health
- SIU School of Medicine
- Logan County Probation
- Chestnut Health System
- SIU Office of Population Science and Policy
Timeline

The following timeline was established for completion of the community health needs assessment and community health implementation plan.

**TIMELINE FOR THE 2018 LOGAN COUNTY COMMUNITY HEALTH NEED ASSESSMENT**

<table>
<thead>
<tr>
<th>Timeline</th>
<th>Activity</th>
</tr>
</thead>
</table>
| Oct. – Dec. 2017 | • Obtained county-specific data from Healthy Communities Institute  
• Reviewed existing needs assessment  
• Developed questions for the community survey  
• Convened Internal Advisory Group  
• Introduced process to Internal Advisory Board  
• Convened External Advisory Group to review secondary data and began narrowing priorities with external advisory feedback to establish top 10 priorities |
| Jan. 2018 – March 2018 | • Conducted community survey Jan. 12 to Feb. 10 |
| April 2018 – June 2018 | • UIS analysis completed  
• Convened Internal Advisory Group to review outcomes of community survey and ranking of the External Advisory Group  
• ALMH and LCDPH identified the final top priorities  
• Completed focus groups with UIS |
| July 2018 – Aug. 2018 | • Development of the Community Health Implementation Plan (CHIP)  
• Developed and finalized FY19 Implementation Plan researching evidence-based strategies  
• Gained ALMH Board approval of FY19 Community Health Needs Assessment on Aug. 15, 2018 |
| Sept. 2018 | • Posted CHNA process on ALMH website |
| Oct. 2018 | • Implementation Plan will be approved by ALMH Board of Directors |
| Nov. 2018 | • Community Health Implementation Plan posted on ALMH website |
Memorial Health System Hospitals 2018 CHNA Timeline

In addition to the timeline established for the Logan County CHNA, the following overall timeline was established for the four Memorial Health System hospitals to complete the 2018 CHNA process in their respective communities.

- **Jan. 2017-Summer 2017**: CHNA Planning
- **March-July 2018**: Select Priorities & Implementation
- **Aug.-Sept. 2018**: Board Approves
- **Nov. 2018**: Final Implementation Strategies/Board Approval

Data Collection and Analysis

County-specific secondary data was obtained from a variety of sources. Since 2011, Memorial Health System has contracted with Conduent Healthy Communities Institute in Berkeley, California, to obtain community health and social determinant indicators specific to Logan County, as well as the three other counties that are home to MHS hospitals. The data is available on the hospital’s website for all in the community to use. It includes information from national resources, including Healthy People 2020, state resources and local hospital utilization data. Once again, the Conduent Healthy Communities Institute data played a major role in examining and narrowing down significant health issues affecting Logan County during the 2018 CHNA process.

Primary data was gathered from the findings and observations of local community organizations that are members of the ALMH Community Health Collaborative Network. ALMH did not face any information gaps that limited our ability to identify community health issues.

After comprehensive review of the primary and secondary data, the external and internal advisory groups met separately to choose the areas of concern in Logan County. Community Health Collaborative Network members were asked to choose priority needs based on discussion of the following defined criteria:

- **Triple Aim** – improve individual or population health or reduce healthcare costs
- **Magnitude** – how many people are affected
**Seriousness** – whether the issue contributes to death, disability  
**Feasibility** – whether we can do something about it

The Dot Method/Dotmocracy was the method chosen due to the size of the group reviewing the data and selecting the priorities from the original list of 25 potential priorities. Individuals were given 10 dots to serve as votes for the needs they believed best met the defined criteria. After the top 16 criteria were established, the participants were given eight dots to select their top eight priorities once again using the selected criteria.

Ten areas of need for Logan County were identified based on the criteria, along with identified increases in occurrence and timeline trending identified in the secondary data. This served as a baseline to narrow the list down to those areas that most met our criteria for action planning during the community survey and internal advisory board final selection process. The original list included the following areas:

**CHC Network Chosen Priorities Top 10**

1. Poverty  
2. Child Abuse/Neglect  
3. Youth Mental Health/ Mental Health Access/ Suicide/Depression in Seniors  
4. Substance Abuse  
5. Cancer  
6. High School Graduation Rate  
7. Disconnected Youth  
8. Bullying  
9. Obesity  
10. Housing

In some situations, the needs were combined into general categories. For example, concerns about youth mental health, depression in seniors and access to mental providers were combined into the category of mental health.
In February/March 2017, University of Illinois at Springfield’s Survey Research Program conducted a community survey. Participants were asked to rank the top 10 priorities identified by the external advisory group and encouraged to write in additional concerns. The survey also asked participants to choose areas they would improve for the health of Logan County. A total of 565 individuals completed the survey (546 online surveys and 19 printed surveys).

![Survey response graph]

**FIGURE 1: SURVEY SAMPLE COMPARED TO POPULATION**
### COMMUNITY SURVEY: RANKING AS A TOP 5 HEALTH PRIORITY AREA

<table>
<thead>
<tr>
<th>Priority</th>
<th>Percentage Ranking in Top 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Substance Abuse</td>
<td>8.3%</td>
</tr>
<tr>
<td>2. Obesity</td>
<td>66.4%</td>
</tr>
<tr>
<td>3. Mental Health</td>
<td>64.4%</td>
</tr>
<tr>
<td>4. Poverty</td>
<td>63.4%</td>
</tr>
<tr>
<td>5. Chronic Disease</td>
<td>45.1%</td>
</tr>
<tr>
<td>6. Education</td>
<td>34%</td>
</tr>
<tr>
<td>7. Child Abuse/Domestic Violence</td>
<td>31.9%</td>
</tr>
<tr>
<td>8. Cancer</td>
<td>27.1%</td>
</tr>
<tr>
<td>9. Housing</td>
<td>21.1%</td>
</tr>
<tr>
<td>10. Mother/Infant Health</td>
<td>11.9%</td>
</tr>
</tbody>
</table>

Analysis of the community survey showed similar results for the top 10 areas of community concern. The top 10 priorities of both the ALMH Community Health Collaborative and the community survey were presented to the ALMH Community Health Collaborative Advisory Board for review. Once again, the four areas of defined criteria for Community Health Needs Assessment priorities were taken into consideration when choosing from the existing 10 priorities.

### Identification of Priorities

The final list of priorities was chosen by the CHC Advisory Board based on secondary data, feedback from the external advisory board and primary data collected by the community survey.

First, the CHC Advisory Board used a group polling method to rank the 12 potential priorities anonymously and to allow for group discussion.
Finally, the Logan County Department of Public Health and Abraham Lincoln Memorial Hospital evaluated the priorities using a scoring system. Each priority was assigned a numerical value for each criteria area (triple aim, magnitude, reach and feasibility). The group discussed the concerns and frequently revisited the original data and points from the Community Advisory Committee and Internal Advisory Board meeting. Each entity has unique resources and ability to address the issues identified. The collaborative effort resulted in a much more informed and efficient use of resources and had a greater impact for the communities we serve.

Based on the final scores, the top four needs for ALMH were identified as areas to develop in the implementation plan. These priorities were also assigned to the ALMH Community Health Collaborative to develop an implementation plan to be overseen and funded by the ALMH Foundation. The Logan County Department of Public Health also used the final rankings to determine the priorities they would address in future goals and objectives for the short- to long-term future.

With input from the external advisory group, including representatives from public health, social services organizations and those offering care to underserved populations, four final priorities were selected by Abraham Lincoln Memorial Hospital:

1. Obesity
2. Mental Health
3. Cancer
4. Substance Abuse
OBESITY

The current value is lower than the previously measured value.
The current value is higher than the previously measured value.
The current value is higher than the previously measured value.
The current value is lower than the previously measured value.
There has been a significant decrease over time.
There has been a non-significant increase over time.
There has been a non-significant decrease over time.

LOW-INCOME PRESCHOOL OBESITY - CHANGE OVER TIME

ADULTS WHO ARE OVERWEIGHT OR OBESE - CHANGE OVER TIME

ADULTS WHO ARE OBESE - CHANGE OVER TIME

County: Logan

43.3%

Source: Illinois Behavioral Risk Factor Surveillance System
Measurement period: 2010-2014
Maintained by: Healthy Communities Institute
Last update: April 2016

Compared to:
- IL Counties
  - IL Value (29.5% in 2014)
- HP 2020 Target (30.5%)
- US Value (29.6% in 2014)

The percentage of obese adults is an indicator of the overall health and lifestyle of a community. Obesity increases the risk of many diseases and health conditions, including heart disease, Type 2 diabetes, cancer, hypertension, stroke, liver and gallbladder disease, respiratory problems and osteoarthritis. Losing weight and maintaining a healthy weight help to prevent and control these diseases. Being obese also carries significant economic costs due to increased healthcare spending and lost earnings.

Mental Health

Currently, there are 17 mental health providers in Logan County, which represents a ratio of 1,735 residents to 1 provider. The average ratio of providers to residents in Illinois is 580 to 1.

The Illinois Youth Survey shows an increase between eighth grade and twelfth grade in the number of youth feeling sad or hopeless for two weeks or more in a row.

<table>
<thead>
<tr>
<th>In the past 12 months did you ever:</th>
<th>8th</th>
<th>State</th>
<th>10th</th>
<th>State</th>
<th>12th</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider suicide?</td>
<td>NA</td>
<td>NA</td>
<td>16</td>
<td>16</td>
<td>22</td>
<td>14</td>
</tr>
<tr>
<td>Feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?</td>
<td>33</td>
<td>28</td>
<td>30</td>
<td>33</td>
<td>37</td>
<td>31</td>
</tr>
</tbody>
</table>

Logan County eighth- and twelfth-graders reported depression at a higher rate than students statewide.
Senior citizens also experience depression at a higher level than their cohorts in Illinois.

**DEPRESSION: MEDICARE POPULATION - CHANGE OVER TIME**

The number of suicides has also increased significantly.

<table>
<thead>
<tr>
<th>SUICIDE</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
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<td>1</td>
<td>2</td>
<td>5</td>
<td>3</td>
<td>4</td>
<td>8</td>
</tr>
</tbody>
</table>

Healthy People: 2020

Baseline- 11.3 suicides per 100,000 population occurred in 2007

Target - 10.2 suicides per 100,000 population

http://www.idph.state.il.us/health/statshome.htm

CANCER

It is no surprise that with Logan County obesity rates increasing, we have also experienced an increased prevalence of cancers.

Source: https://www.cdc.gov/media/releases/2017/p1003-vs-cancer-obesity.html
**ALL CANCER INCIDENCE RATE - CHANGE OVER TIME**

**County: Logan**

522.0 cases/100,000 population

Source: National Cancer Institute
Measurement period: 2010-2014
Maintained by: Healthy Communities Institute
Last update: July 2017

Graph Selections

**INDICATOR VALUES**

☑ Change over Time

**VIEW BY SUBGROUP**

☑ Gender
☐ Race/Ethnicity

**AGE-ADJUSTED DEATH RATE DUE TO CANCER - CHANGE OVER TIME**

**County: Logan**

199.9 deaths/100,000 population

Source: National Cancer Institute
Measurement period: 2010-2014
Maintained by: Healthy Communities Institute
Last update: November 2017

Graph Selections

**INDICATOR VALUES**

☑ Change over Time

BREAST CANCER INCIDENCE RATE - CHANGE OVER TIME

County: Logan

146.1
cases/ 100,000 females

Source: National Cancer Institute
Measurement period: 2010-2014
Maintained by: Healthy Communities Institute
Last update: November 2017

Graph Selections

INDICATOR VALUES
☑ Change over Time

AGE-ADJUSTED DEATH RATE DUE TO BREAST CANCER - CHANGE OVER TIME

County: Logan

24.8
deaths/ 100,000 females

MAMMOGRAM HISTORY - CHANGE OVER TIME

County: Logan

66.6%

Source: Illinois Behavioral Risk Factor Surveillance System
Measurement period: 2007-2009
Maintained by: Healthy Communities Institute
Last update: September 2013

AGE-ADJUSTED DEATH RATE DUE TO LUNG CANCER - CHANGE OVER TIME

County: Logan

61.0 deaths/100,000 population

Source: National Cancer Institute
Measurement period: 2010-2014
Maintained by: Healthy Communities Institute
Last update: November 2017

**COLORECTAL CANCER INCIDENCE RATE - CHANGE OVER TIME**

**County: Logan**

52.0 cases/100,000 population

**Source:** National Cancer Institute

**Measurement period:** 2010-2014

**Maintained by:** Healthy Communities Institute

**Last update:** November 2017

**Graph Selections**

**INDICATOR VALUES**

- Change over Time

**VIEW BY SUBGROUP**

- Gender

---

**COLORECTAL CANCER INCIDENCE RATE - Change over Time**

PROSTATE CANCER AGE-ADJUSTED DEATH RATE

County: Logan

19.5
deaths/100,000 males

Source: National Cancer Institute
Measurement period: 2010-2014
Maintained by: Healthy Communities Institute
Last update: November 2017

PROSTATE CANCER AGE-ADJUSTED DEATH RATE

Comparison with:
- IL Counties (2006-2010): 21.8
- U.S. Counties: 20.9
- IL Value (2019): 20.9
- US Value (2019): 20.1

AGE-ADJUSTED DEATH RATE DUE TO COLORECTAL CANCER - CHANGE OVER TIME

County: Logan

20.0
deaths/100,000 population

Source: National Cancer Institute
Measurement period: 2010-2014
Maintained by: Healthy Communities Institute
Last update: November 2017

Graph Selections

INDICATOR VALUES
- Change over Time

Graph: Age-Adjusted Death Rate due to Colorectal Cancer – Change over Time

COLON CANCER SCREENING - CHANGE OVER TIME

County: Logan
59.8%

Source: Illinois Behavioral Risk Factor Surveillance System
Measurement period: 2010-2014
Maintained by: Healthy Communities Institute
Last update: April 2016

Substance Abuse

**ILLINOIS YOUTH SURVEY**

<table>
<thead>
<tr>
<th>Binge Drinking*</th>
<th>6th</th>
<th>8th</th>
<th>8th State</th>
<th>10th</th>
<th>10th State</th>
<th>12th</th>
<th>12th State</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 or more times</td>
<td>3%</td>
<td>10%</td>
<td>7%</td>
<td>11%</td>
<td>17%</td>
<td>28%</td>
<td>30%</td>
</tr>
</tbody>
</table>

*In the past two weeks, had five or more alcoholic drinks in a row.

<table>
<thead>
<tr>
<th>DUI*</th>
<th>10th</th>
<th>10th State</th>
<th>12th</th>
<th>12th State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drinking alcohol</td>
<td>4%</td>
<td>7%</td>
<td>26%</td>
<td>18%</td>
</tr>
<tr>
<td>Using marijuana or other illegal drugs</td>
<td>7%</td>
<td>11%</td>
<td>24%</td>
<td>21%</td>
</tr>
</tbody>
</table>

*Students were asked in the past 12 months how many times did you drive a car or other vehicle when: chart shows students reporting one or more times.

Illinois Department of Public Health, Opioid Data Dashboard – shows Logan County with a crude rate of 13.55 non-fatal opioid overdoses (state average of 10.45).

Additional CHNA Priorities

THE ALMH COMMUNITY HEALTH COLLABORATIVE SELECTED ADDITIONAL PRIORITIES TO ADDRESS:

- Substance abuse
- Poverty
- Mental health
- Obesity

THE FINAL PRIORITIES SELECTED BY THE LOGAN COUNTY DEPARTMENT OF PUBLIC HEALTH WERE:

- Substance abuse
- Mental health
- Cancer
- Chronic disease

To learn more about these priorities, UIS survey research conducted 3 focus groups during May 21-24. Outcomes are informing work on the CHNA Implementation Strategy for FY2019-21.

PRIORITIES NOT SELECTED BY ABRAHAM LINCOLN MEMORIAL HOSPITAL:

1. Substance abuse
2. Child abuse/Domestic violence
3. Chronic disease management
4. Poverty
5. Mother/Infant health
6. Education
7. Disconnected youth

Organizational capacity prohibits ALMH from implementing programs to address all significant health needs. ALMH chose to focus efforts and resources on a few key issues in order to develop a meaningful evaluation plan and demonstrated impact that could be replicated with other priorities in the future.

Child abuse/Domestic violence is often a result of poverty and mental health issues. ALMH does not have the expertise/competencies to address the issue effectively. ALMH has chosen to address mental health. The ALMH Community Health Collaborative will be addressing both mental health and poverty.
**Chronic disease management** was not chosen as a priority this year because other needs were deemed a higher priority and the issue was chosen as a focus for the Logan County Department of Public Health.

**Mother/Infant health** was not chosen as a priority this year because other needs were deemed a higher priority and it was not a priority issue for community members.

**Education and disconnected youth** were not chosen because ALMH does not have the expertise/competencies to address the issue effectively. However, interventions to address **poverty** and **mental health** may overlap into these areas.

The CHNA also identified community assets and gaps.

**Existing Assets:**

- ALMH Community Health Collaborative. The coalition promotes networking among service providers and the best use of local resources.
- Local parks and green space in our county are an asset.
- The Logan County Department of Public Health is a great asset to the community that provides much-needed care to residents.

**Progress on Past Health Priorities**

The implementation strategy developed for FY2016 was updated annually in FY2017 and FY2018, approved by the Memorial Health System board’s Community Benefit Committee and the hospital board. The MHS Community Benefit Committee also annually reviewed the outcomes of each MHS hospital’s CHNA implementation strategy toward meeting the strategic plan goal to achieve 100 percent of approved Community Benefit targets. Complete implementation strategy outcomes for FY2016-FY2018 are included in Appendices 42. The reports are also online at ChooseMemorial.org/HealthyCommunities.

**To address obesity, Abraham Lincoln Memorial Hospital successfully implemented six goals:**

1. Expanded access to the Memorial Weight Loss & Wellness Center program in Logan County and eastern Mason County.
2. Offered every school in Logan County an opportunity to become a CATCH (Coordinated Approach to Child Health) school, including purchase of the equipment, curriculum and on-site support.
3. Promoted and supported an increase in the number of mothers in Logan and eastern Mason County who breastfeed their infants.
4. Improved access to outdoor trails or physical activity, including an on-site wellness trail at the ALMH campus and city trail signage throughout Lincoln and the city of Atlanta.

5. Supported Girls on the Run of Central Illinois, including funding support and local site recruitment.

6. Implementation of The ALMH Market, a producer-only farmers market, to increase access to fresh and local produce.

To address the priority of mental health, the four MHS hospitals (Memorial Medical Center, Taylorville Memorial Hospital, Passavant Area Hospital and Abraham Lincoln Memorial Hospital) began offering Mental Health First Aid training for community members in Sangamon, Logan, Morgan and Christian counties. Additionally, the Meaningful Opportunities for Success and Achievement through Service Integration for Children (MOSAIC) program was established at Lincoln Junior High School. The program represents a collaborative effort between Memorial Behavioral Health, Abraham Lincoln Memorial Hospital, Tri-County Special Education Association and Lincoln District 27.

To address access to care, Abraham Lincoln Memorial Hospital worked with SIU School of Medicine to establish a Federally Qualified Health Center (FQHC) in Logan County. The Family Health Center opened a FQHC in Lincoln in April 2017. ALMH collaborated with them to help educate the community about their services. In an effort to promote future local healthcare providers, ALMH also served as a clinical site for healthcare education programs. Lastly, free baseline screenings were provided to all athletes ages 10 and up to provide better knowledge for physicians when making a decision to return a concussed player to sport.

Abraham Lincoln Memorial Hospital also addressed the needs of chronic disease management. Community education and free health screenings were provided in a variety of settings and methods to reach a diverse population.

**Community Feedback Regarding the 2015 CHNA and Implementation Strategy**

Abraham Lincoln Memorial Hospital made the 2015 CHNA report available on its website at ChooseMemorial.org/HealthyCommunities.

The collaborative CHNA process received broad approval from community members and hospital board members. No direct written feedback was received. The programs have received good verbal feedback from the community.
New Community Health Needs Assessment Implementation Strategy

Abraham Lincoln Memorial Hospital is developing a new CHNA implementation strategy that it will implement in FY2019-2021. This strategy will be approved by the ALMH Board in October 2018 and will be posted to its website. Because the strategy will be approved after this CHNA report is completed and posted to our website, the new implementation strategy is not included in this document. However, it will be available on the website by Nov. 30, 2018, at ChooseMemorial.org/HealthyCommunities.

Sharing Community Health Needs Assessment Outcomes with the Community

This CHNA report, following approval by the Memorial Health System Board, will be posted online at ChooseMemorial.org/HealthyCommunities by Sept. 30, 2018, prior to the completion of FY18. Press releases and social media will also report this information to the public. The public will be aware that the complete 2018 CHNA report, as well as the CHNA FY2019 implementation strategy for Abraham Lincoln Memorial Hospital, are available at ChooseMemorial.org/HealthyCommunities.

Additionally, the MHS Board’s Community Benefit Committee will receive annual updates on success in meeting the measures of the CHNA implementation strategy, and will subsequently approve implementation strategies to address these needs in FY2020 and FY2021.

Questions about Abraham Lincoln Memorial Hospital’s 2018 Community Health Needs Assessment or implementation strategies may be directed to:

Angela Stoltzenburg, Community Health Collaborative,
Director, Abraham Lincoln Memorial Hospital

Stoltzenburg.Angela@mhsil.com | 217–605–5008
Secondary Data Sources

- County Health Rankings and Roadmaps [http://www.countyhealthrankings.org/](http://www.countyhealthrankings.org/)
- Illinois Youth Surveys (2014 and 2016) [https://iys.cprd.illinois.edu/results](https://iys.cprd.illinois.edu/results)
- Conduent Healthy Communities Institute data on Memorial website: health & socioeconomic indicators specific to Logan County [ChooseMemorial.org/HealthyCommunities](http://ChooseMemorial.org/HealthyCommunities)
- Illinois Behavioral Risk Factor Surveillance System [http://www.idph.state.il.us/brfss/](http://www.idph.state.il.us/brfss/)
- National Cancer Institute [https://www.cancer.gov/](https://www.cancer.gov/)
- Illinois Hospital Association
- Centers for Medicare & Medicaid Services
- Illinois Alliance to Prevent Obesity
- Logan County Department of Public Health Statistics
ABRAHAM LINCOLN MEMORIAL HOSPITAL
Community Health Need Assessment Implementation Strategy
FY18 October 1, 2017 – September 30, 2018

Introduction
Memorial Health System is a not-for-profit healthcare organization located in central Illinois. It includes four hospitals: Memorial Medical Center in Sangamon County, Abraham Lincoln Memorial Hospital in Logan County, Taylorville Memorial Hospital in Christian County, and Passavant Area Hospital in Morgan County. Memorial Health System also includes Mental Health Centers of Central Illinois, Memorial Physician Services and Memorial Home Services.

Community health need assessments were completed in 2015 in each of the counties where the hospitals are located. These needs assessments meet the federal health reform’s Section 9007 of the Patient Protection and Affordable Care Act of March 2010 and requirements of the IRS 990 Schedule H report.

Abraham Lincoln Memorial Hospital – Logan County, Illinois
Abraham Lincoln Memorial Hospital (ALMH) is a 25-bed rural critical access hospital located in Lincoln, Ill., approximately 30 miles northeast of the state capitol of Springfield. ALMH serves the people and communities of Logan and eastern Mason counties and is largely rural, agricultural area. ALMH is the only hospital in the primary service area of Logan County (pop. 30,013). Race/ethnicity includes 89.7% white, 7.9% black and 2.4% other backgrounds. The median household income is $46,647. Persons age 65 and older make up 16.4% of Logan County’s population. 13.2% of all residents live below the federal poverty level, including 17.8% of all children and 5.6% of seniors. There is one Medically Underserved Area (MUA) in Logan County.

Healthy Communities Partnership (HCP) is a community health coalition that was established in 1996. HCP is one of ALMH’s initiatives to encourage a broad-based, community approach to addressing a variety of health needs throughout the ALMH service area. Over 30 organizations, churches, private individuals, and businesses are represented in the partnership. The ALMH Foundation employs a manager to lead and oversee HCP efforts. ALMH also funds activities carried out by HCP task forces that have been created to address specific community needs. HCP agency members include: Logan County Department of Public Health, Lincoln Park District, Department of Human Services, Logan County Housing Authority, Parish Nurses, Logan County Emergency Management Association, Community Action, and the University of Illinois Extension office. Additionally, healthcare providers including Memorial Physician Services, Springfield Clinic, Mental Health Centers of Central Illinois, Safe Haven Hospice, Chestnut Health System, and Illinois Institute for Addiction and Recovery are part of the Healthy Communities Partnership.
Identified Priority Health Needs: Logan County

The community health need assessment was carried out in conjunction with Logan County Health Department’s IPLAN (Illinois Project for Local Assessment of Needs). IPLAN is required of public health departments by the Illinois Department of Public Health. During the 2015 community health need assessment process, the community identified the following priority health needs:

1. Chronic Disease Management (Diabetes/Cardiovascular Disease)
2. Obesity
3. Increased Drug Use in Teens
4. Pregnant Women Smoking
5. Access to Healthcare
6. Increasing Child Abuse Rate
7. Mental Health
8. Drug Addiction/Heroin Use
9. Teen Birth Rate

Memorial Health System hospitals used the following defined criteria to select final CHNA priorities:

- Triple Aim – improve individual or population health or reduce health care costs
- Magnitude – how many people are affected
- Seriousness – whether the issue contributes to death, disability
- Feasibility – whether we can do something about it

The PEARL “test” was used when scoring feasibility to screen out health problems based on the following feasibility factors:

PEARL
P – Propriety – Is a program for the health problem suitable?
E – Economics – Does it make economic sense to address the problem? Are there economic consequences if a program is not carried out?
A – Acceptability – Will the community accept a program? Is it wanted?
R – Resources – Is funding available or potentially available for a program?
L – Legality – Do current laws allow program activities to be implemented?

Priorities Not Selected: Logan County

- Teen Birth Rate was eliminated from further consideration because it does not have as great an overall impact on population health as some of the other needs.
- Increased drug use and increasing child abuse rates are great concerns for our communities, but as a hospital, ALMH is not best equipped to meet that need. However, our local health coalition, Healthy Communities Partnership, will be supporting efforts of our partner organizations, including the promotion of substance-free lifestyles and child abuse awareness.
- The high rate of Logan County women who smoke during pregnancy is alarming. The issue is being addressed by the Logan County Department of Public Health. ALMH will support its efforts through the Healthy Communities Partnership.

Final Selected Priorities: Logan County

The external advisory group, including representatives from public health, social services organizations and those offering care to underserved populations, as well as recommendations from the Memorial Health System Internal Advisory Team, four final priorities were selected:
1. Obesity
2. Chronic Disease Management (Cardiovascular Disease/Diabetes)
3. Access to Healthcare
4. Mental Health

Implementation Strategy Changes from FY17 to FY18
The efforts to promote healthy behaviors using the 5210 campaign have been replaced by a CATCH language message throughout the community. This effort will help reinforce the messaging to parents and families outside of school. Therefore goal 3 of the obesity priority has been removed. Additional community promotions have been incorporated into goal 2. Furthermore, goal 2 has been refocused from providing the opportunity for all Logan County schools to be CATCH schools towards a maintenance and support role. An FQHC was successfully opened in FY17 therefore, goal 4 under Access to Care has been removed.

FY18 IMPLEMENTATION STRATEGY

<table>
<thead>
<tr>
<th>PRIORITY:</th>
<th>OBESITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason for priority selection</td>
<td>Abraham Lincoln Memorial Hospital’s 2015 community health need assessment identified obesity as a top priority through its data collection and analysis, and community advisory group.</td>
</tr>
<tr>
<td></td>
<td>30.4 percent of Logan County adults are obese. Source: Illinois Behavioral Risk Factor Surveillance System. The percentage has increased from 19.5 percent in 2001.</td>
</tr>
<tr>
<td></td>
<td>Healthy People 2020 reports a current percentage of 33.9 percent of persons aged 20 years and older were obese in 2005-2008. The Healthy People 2020 target is 30.5%. Low-income preschool children are also increasingly becoming obese from 13.4 percent in 2008 to 15.4 percent in 2011.</td>
</tr>
</tbody>
</table>

Goal 1: Expand access to the Memorial Weight Loss and Wellness Center (MWLWC) program in Logan County and eastern Mason County

<table>
<thead>
<tr>
<th>Target Population</th>
<th>Adults who are overweight who live in Logan County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective</td>
<td>Expand access to the Memorial Weight Loss and Wellness Center by developing strategy to implement the program at Abraham Lincoln Memorial Hospital in Logan County.</td>
</tr>
</tbody>
</table>

Strategy Selected:
Healthy People 2020 objectives highlight the need for increased intervention by physicians with patients in the areas of nutrition and weight status (NWS).

- NWS-6.1: Increase the proportion of physician office visits made by patients with a diagnosis of cardiovascular disease, diabetes, or hyperlipidemia that include counseling or education related to diet and nutrition. (Baseline: 20.8 percent of physician visits in 2007; Target = 22.9 percent/10 percent improvement)
- NWS-6.2: Increase the proportion of physician office visits made by adult patients who are obese that include counseling or education related to weight reduction, nutrition or physical activity.
Memorial’s Weight Loss and Wellness Center is based on the nationally recognized, evidence-based model of Geisinger Health System. Memorial’s program includes a medical (non-surgical) weight loss program; accredited bariatric surgery program; diabetes services; outpatient nutrition services; and fitness. It provides physicians a comprehensive resource to refer their patients to for individualized counseling and education. There is no other program offering this specialized approach in central Illinois.

**Programs/resources hospital will commit**
Abraham Lincoln Memorial Hospital will provide leadership to assess expansion of the program, the facility for the program, staffing, training and financial support.

**Collaborative partners**
Memorial Medical Center, Memorial Physician Services, Springfield Clinic, SIU School of Medicine, Healthy Communities Partnership.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. ALMH will continue to serve patients</td>
<td>FY18</td>
<td>• MWLWC at ALMH will average 30 active patients per month.</td>
</tr>
<tr>
<td>2. ALMH will collaborate with MWLWC to execute a communication plan</td>
<td>FY18</td>
<td>• ALMH will achieve 40 physician referrals in year three of the program (FY18). Increase awareness of the new service to residents of Logan County.</td>
</tr>
<tr>
<td>3. ALMH will collaborate with MWLWC to collect outcome variables on enrolled patients.</td>
<td>FY18</td>
<td>• Medical weight loss patients at ALMH will achieve, on average, 3% weight loss after 6 months in the program.</td>
</tr>
</tbody>
</table>

**Short term indicators & source**
Program implemented and begins seeing patients.

**Long term indicators & source**
• MWLWC at ALMH will achieve 40 patient referrals in year 3 (FY18).
• ALMH will average 30 active pts/month
• Medical weight loss patients who complete at least 6 months of programming, on average, will achieve 5% weight loss.
• Bariatric surgical patients will achieve, on average, 45% excess weight loss at one year post-op.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. MWLWC at ALMH will average 20 active patients/mo</td>
<td>FY2018</td>
<td>• Patients enrolled</td>
</tr>
<tr>
<td>2. MWLWC will collaborate with ALMH to execute a marketing and communication plan</td>
<td>FY18</td>
<td>• Increase community and provider awareness of treatment options for patients in Logan county</td>
</tr>
<tr>
<td>3. MWLWC will collaborate with ALMH to collect outcome variables on patients enrolled</td>
<td>FY2018</td>
<td>• Data collected</td>
</tr>
</tbody>
</table>

**MEASURES:** What will we measure to know the program is making a difference?
Goal 2: Provide every CATCH school in the ALMH service support to best implement the CATCH (Coordinated Approach to Child Health) program.

**Target Population**
School-aged children (K-8) in Logan and eastern Mason County.

**Objective**
Create a healthy school environment where the healthy choice is the easy choice.

**Strategy Selected:**
The CATCH program is an evidence-based program to prevent childhood obesity and launch kids and communities toward healthier lifestyles. CATCH impacts a child’s nutrition, level of physical activity and classroom environment and community. CATCH has the largest evidence base of any obesity prevention program. CATCH is based on the Center for Disease Control’s Whole Child model in which health education, school environment, and family/community involvement work together to support youth in a healthy lifestyle.

**Programs/resources hospital will commit:**
Abraham Lincoln Memorial Hospital will provide leadership through the management of Healthy Communities Partnership to recruit and implement the program with participating schools. ALMH will also purchase the necessary curriculum, including physical education equipment, to all schools willing to implement CATCH.

**Collaborative partners:**
Local schools and members of Healthy Communities Partnership, a local community coalition that includes the Logan County Department of Public Health.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. School staff will be trained in CATCH as needed. 2. CATCH schools will continue to incorporate CATCH language, classroom lessons, and CATCH PE practices into daily practices. 3. ALMH will provide support to CATCH schools to ensure the program works toward best practices. 4. The CATCH message will be taken community-wide to promote a CATCH community.</td>
<td>10/2017 FY18 FY18 FY18</td>
<td>• School staff, parents and students will be introduced to CATCH philosophy. • Students will participate in CATCH PE, learn the CATCH language, and participate in CATCH-sponsored activities that promote healthy choices. • ALMH staff will support schools to become self sufficient in their implementation of CATCH and support health promotion efforts on each campus. • The CATCH language will be incorporated into the Wellness Expo and other community events with an effort to “CATCHIFY” Logan County and make the healthy choice the easy choice throughout our service area.</td>
</tr>
</tbody>
</table>

**Short term indicators & source**
Maintain existing CATCH schools impacting over 3,000 students.
### Goal 3: Increase the number of mothers in Logan and eastern Mason Counties who breastfeed their infants

<table>
<thead>
<tr>
<th><strong>Target Population</strong></th>
<th>Newborns in Logan and eastern Mason County.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective</strong></td>
<td>To encourage new mothers to breastfeed children exclusively until the recommended 6 months of life.</td>
</tr>
</tbody>
</table>

**Strategy Selected: Breastfeeding Promotion Program:**

A mounting body of evidence suggests that breastfeeding may also play a role in programming noncommunicable disease risk later in life including protection against overweight and obesity in childhood.

**Programs/resources hospital will commit:**

Abraham Lincoln Memorial Hospital will provide the space, staff (certified lactation consultant), supplies and volunteers to offer a free, weekly breastfeeding support group to the community. ALMH will also provide management staff for Healthy Communities Partnership and funding to support breastfeeding promotion in Logan County.

**Collaborative partners:**

Members of the Healthy Communities Partnership (Logan County Department of Public Health (Women, Infants and Children program, YMCA, Community Action, and others), Springfield Clinic and Memorial Physician Services.

<table>
<thead>
<tr>
<th><strong>Activity</strong></th>
<th><strong>Timeline</strong></th>
<th><strong>Anticipated Results</strong></th>
</tr>
</thead>
</table>
| 1. Maintain certified lactation consultants on staff to facilitate the support group. | FY18 | • Support from healthcare providers in Logan County via referrals and education.  
• Increased breastfeeding rates.  
• Marketing campaign to promote breastfeeding/normalize breastfeeding. |
| 2. Market the program to the community. | | |

**Short term indicators & source**

- At least 5 mothers and their babies will attend the weekly support groups.
- Partners will refer new mothers to the group.

**Long term indicators & source**

- Increase in breastfeeding rates, as measured by community partners’ participation data.

### Goal 4: Improve access to outdoor trails for physical activity

<table>
<thead>
<tr>
<th><strong>Target Population</strong></th>
<th>Residents of Logan County.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Objective</strong></td>
<td>To support establishment of an outdoor trail system for non-motorized activity.</td>
</tr>
</tbody>
</table>

**Strategy Selected:**

Enhance access to places for physical activity through a change in our built environment through the establishment of walking trails and safe bike routes. Continue to provide support to local officials in order to encourage a county wide trail system for active transportation and safe recreational opportunities.

**Programs/resources hospital will commit:**

Abraham Lincoln Memorial Hospital will provide the staff, supplies and space via Healthy Communities Partnership to help lead the project and advocate within the community.
Collaborative partners:
Members of the Healthy Communities Partnership (Logan County Department of Public Health, YMCA, Community Action, Lincoln Park District), and local government leadership (Logan County Regional Planning Commission).

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
</table>
| 1. Promote the ALMH campus trail to the community. | FY18 | • Increased physical activity on the new trail to reach over 2000 miles walked annually.  
• Serve as a benchmark for future trail initiatives throughout the county and act as a trailhead/landmark. |

Short term indicators & source
- Electronic tracker will count public use of the trail monitored by ALMH staff with the anticipation that the general public will use the trail. Counts will be taken quarterly.

Long term indicators & source
- Increased physical activity level reported in Illinois Youth Survey.
- Increases in the number of people using the trail.

Goal 5: Support Girls on the Run of Central Illinois

Target Population
Girls in grades 3-8 and their families in Logan County

Objective
The goal of the program is to unleash confidence through accomplishment while establishing a lifetime appreciation of health and fitness.

Strategy Selected:
Childhood obesity has both immediate and long-term health impacts. Children and adolescents who are obese are at greater risk for bone and joint problems, sleep apnea, and are more likely than normal weight peers to be teased and stigmatized which can lead to poor self-esteem. Overweight and obese youth are more likely than normal weight peers to be overweight or obese adults and are therefore at risk for the associated adult health problems, including heart disease, type 2 diabetes, stroke, several types of cancer, and osteoarthritis. Childhood obesity has more than tripled in the past thirty years. Healthy eating and regular physical activity can lower the risk of becoming obese.

Abraham Lincoln Memorial Hospital will support the Girls on the Run program, a transformational, physical activity based youth development program for girls in grades 3-8. The goal of the program is to unleash confidence through accomplishment while establishing a lifetime appreciation of health and fitness.

Programs/resources hospital will commit:
Abraham Lincoln Memorial Hospital will provide staff, education of staff, community promotion of the program, and financial support.

Collaborative Partners:
Girls on the Run, Northwest School, Chester East Lincoln, Central Elementary School and other participating schools.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Monetary Donation</td>
<td>FY18</td>
<td>ALMH support will assist growth of Girls on the Run in Logan County.</td>
</tr>
</tbody>
</table>
2. Outreach to potential school and host sites in collaboration with Girls on the Run program representatives to identify new sites.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The Market will be open Saturdays May – September.</td>
<td>FY18</td>
<td>Weekly attendance of no less than 200 people at The Market.</td>
</tr>
<tr>
<td>2. Free health screenings including blood glucose, lipid profile, blood pressure and BMIs.</td>
<td>FY18</td>
<td>Screenings will be held monthly during The Market season (five times).</td>
</tr>
<tr>
<td>3. Power of Produce program will engage children in healthy eating.</td>
<td>FY18</td>
<td>At least 20 POP Club activities will be offered over the course of The Market season to provide education to children ages 5-12 about the food system and healthy eating.</td>
</tr>
</tbody>
</table>

**MEASURES:** What will we measure to know the program is making a difference?

**Short term indicators & source**
As a result of the Girls on the Run program season and 5k race event, 75% or more of GOTR participants and their families will report that the program positively impacted their attitude toward exercise. Measurement: Girls on the Run survey of participants and their families.

**Long term indicators & source**
Growth of the Girls on the Run program in Logan County to additional schools, as measured by Girls on the Run.

**Goal 6: Implementation of The ALMH Market**

<table>
<thead>
<tr>
<th>Target Population</th>
<th>Logan County residents and eastern Mason County residents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective</td>
<td>The goal of The ALMH Market is to increase access to fresh, local produce and promote healthy behaviors.</td>
</tr>
</tbody>
</table>

**Strategy Selected:**
Obesity has both immediate and long-term health impacts. With over 66% of the adult population in Logan County dealing with overweight and obesity rankings, it’s imperative that a variety of strategies are employed to decrease obesity rates. While opportunities for activity play a critical part in producing healthy outcomes, it is also vital to increase fruit and vegetable consumption. Farmers markets lead to healthier communities. Furthermore, The ALMH Market is a wellness destination that encourages healthy behaviors with programming that feature fitness classes, health screenings, cooking demonstrations and a children’s education program that encourages children to learn about the food system and try new produce.

**Programs/resources hospital will commit:**
Abraham Lincoln Memorial Hospital will provide staff, community promotion of the program, and financial support.

**Collaborative Partners:**
Logan County Fairgrounds, a variety of local fitness professionals, and local farmers.

<table>
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</tr>
</tbody>
</table>

**MEASURES:** What will we measure to know the program is making a difference?
### Short term indicators & source
- Attendance at The Market. Estimated pounds of produce sold.
- Market dollars earned by children participating in the Power of Produce Club. Market dollars provided as part of a SNAP matching program.

### Long term indicators & source
- Decreased BMIs and increased consumption of fruits and vegetables as reported on the Illinois Youth Survey.

### PRIORITY: MENTAL HEALTH

#### Reasons for priority selection
Mental Health was identified by the community as a top priority in the community health need assessment. Community data shows very high rates of emergency department utilization and hospitalization for both adult and pediatric populations.

According to the Illinois Department of Public Health, suicides in Logan County have increased from 1 in 2008 to 5 in 2011.

Healthy People 2020 objectives for Mental Health & Mental Disorders (MHMD)
- MDHD-6 Increase the proportion of children with mental health problems who receive treatment
- MDHD-9 Increase the proportion of adults with mental health disorders who receive treatment
- MDHD-10 Increase the proportion of persons with co-occurring substance abuse and mental disorders who receive treatment for both disorders

#### Goal 1: Implement Mental Health First Aid training in Logan County.

<table>
<thead>
<tr>
<th>Target Population</th>
<th>Community at large</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective</td>
<td>Step in early to stop the trajectory of issues that lead to mental health issues and the need for psychiatric intervention by providing community education to improve mental health literacy, early identification, peer intervention, and referral of community members to available resources if needed.</td>
</tr>
</tbody>
</table>

**Strategy Selected:**
Mental Health First Aid (MHFA) is an evidence-based program that offers a five-day intensive training session to community members to become certified MHFA trainers. These certified trainers in turn go out in the community to provide an eight-hour education session to community members such as teachers, police, first responders, churches, youth leaders and others to teach them how to identify mental health issues, how to refer people to resources, and encourage community support of those struggling with issues that may contribute to mental illness. The Substance Abuse and Mental Health Services Administration (SAMHSA), the federal agency that leads public health efforts to advance the behavioral health of the nation, endorses MHFA and recently established grant funding for MHFA as part of the President’s initiative to increase access to mental health services. MHFA is on the National Registry of Evidence Based Practices (NREPP). All interventions on the registry have been independently assessed and rated for quality of research and readiness for dissemination. MHFA has been shown to increase understanding of mental health disorders, knowledge of available resources, and confidence in and likelihood to help and individual in distress,
Commitment of Resources:
Memorial Medical Center will commit funding to bring a trainer from the national program to Springfield to train up to 30 local community members. Memorial will provide the conference center, promotion of the event, and provide funding for an ongoing program coordinator and tracking of results.

Collaboration:
Memorial will collaborate with Mental Health Centers of Central Illinois, Abraham Lincoln Memorial Hospital, Passavant Area Hospital, Taylorville Memorial Hospital, SIU School of Medicine, local school districts, area social service providers and the University of Illinois Springfield.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. MHFA Coordinator will maintain an ongoing list of community partners and agencies to receive training.</td>
<td>FY18</td>
<td>Certified MHFA instructors have a list of potential audiences in each community to teach a MHFA course.</td>
</tr>
<tr>
<td>2. Promote the program to service area community.</td>
<td>FY18</td>
<td>ALMH in collaboration with Memorial Behavioral Health have a localized communication plan to create awareness of and promote available MHFA courses.</td>
</tr>
<tr>
<td>4. Hold at minimum three MHFA community trainings by certified MHFA instructors in each county, for a total of 12 courses.</td>
<td>FY18</td>
<td>Increased number of individuals in each community trained as mental health first aiders.</td>
</tr>
</tbody>
</table>

MEASURES: What will we measure to know the program is making a difference?

Short term indicators & source
- Number of individuals becoming certified trainers from MHS sponsored certification training
- Number of MHS sponsored community training events
- Number of community members trained as mental health first aiders
- Source: MHFA data collection tool

Long term indicators & source
- Among instructors and first aiders, increases in: mental health literacy, awareness of available resources, and confidence in assisting individuals in distress
- Source: Survey of community members trained as instructors and first aiders.

Goal 2: Deploy Meaningful Opportunities for Success and Achievement through Service Integration for Children (MOSAIC) Program in Lincoln.

Target Population | School-aged children in Logan County.

Objective
To provide increased access to mental health screenings for children, earlier in their school experience, in order to lower the incidence of mental illness in children and decrease severity of difficulties faced in school and throughout their lives.

Strategy Selected:
Children’s mental health issues are common but often under-recognized and undertreated. Services are fragmented and families are often unaware of the wide range of community resources and how to link successfully to them. The result, all too often, is that children and families fall through the cracks, receiving services and support only after a crisis occurs.
Our focus will be to work comprehensively with Lincoln Junior High to support and expand mental health and school integration. Integration of community resources will occur with the many school-based initiatives that already exist to support healthy social development. Specifically, the teachers will complete the Social, Academic, and Emotional Behavior Risk Screener (SAEBRS), which is a universal screening to detect potential social, emotional and academic issues. The school social worker will contact the families of any students who show elevated scores. The school social worker will offer in-school MOSAIC services through the MBH Behavioral Health Consultant (BHC). The teachers, parents, students, school social worker, and other school staff can also refer students for MOSAIC services. In addition to the costs of the screening, it is anticipated that a BHC will be embedded two days each week within the Lincoln Junior High School to provide consultation, early intervention and crisis intervention services.

Commitment of Resources:
Abraham Lincoln Memorial Hospital Foundation (ALMHF) will fund the hiring of a Behavior Health Consultant two days per week during the school year. ALMHF will also purchase supplies and equipment for the BHC and the screening tools for LJHS students.

Collaboration:
The MOSAIC Project in Lincoln will consist of four primary partners; Tri-County Special Education Association, Lincoln School District 27, Abraham Lincoln Memorial Hospital, and Memorial Behavioral Health.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The ALMH Foundation will approve a grant to provide funding to Memorial Behavioral Health to fund MOSAIC in Lincoln upon request.</td>
<td>FY18</td>
<td>Funding will be secured by partners for project implementation.</td>
</tr>
<tr>
<td>2. Behavioral Health Consultant will be retained.</td>
<td>FY18</td>
<td>BHC will serve LJHS students upon identification.</td>
</tr>
<tr>
<td>3. Screening tools will be purchased.</td>
<td>11/2017</td>
<td>Teachers will begin screening students.</td>
</tr>
</tbody>
</table>

MEASURES: What will we measure to know the program is making a difference?

Short term indicators & source
- 75% of the students enrolled on the first day of school at LJHS will be screened.
- 100% of children with an extremely elevated screen will have the opportunity to receive a mental health assessment with the MOSAIC BHC.
- 100% of children who, based on the mental health assessment, warrant individual or family treatment, will be offered treatment with the MOSAIC clinician.

Long term indicators & source
- Families, children, and school personnel should experience a system of care that is easy to access and responsive to their particular needs.
- Greater collaboration and communication among those professionals who are educating and providing behavioral support will result in a decreased stigma associated with...
seeking mental health services, dramatically improve attendance at appointments, and result in better outcomes for children, families, teachers, and the community.

### PRIORITY: ACCESS TO HEALTHCARE

| Reasons for priority selection | Abraham Lincoln Memorial Hospital’s 2015 community health need assessment identified access to healthcare as a top priority through its data collection and analysis, and community advisory group. |

#### Goal 1: Provide access to pharmaceutical assistance

<table>
<thead>
<tr>
<th>Target Population</th>
<th>Low-income patients of the ALMH Emergency Department or Inpatient Care who cannot afford medications causing chronic problems.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective</td>
<td>Provide up to $10,000 in prescription assistance in order to prevent patients from needing to return to the hospital or doctor.</td>
</tr>
<tr>
<td>Strategy Selected:</td>
<td>To reduce the number of ER visits directly related to lack of medication, assistance will be provided to patients as deemed appropriate by ER staff.</td>
</tr>
<tr>
<td>Program/Resources hospital will commit:</td>
<td>Staff to assess the patient’s needs and work with local pharmacy to pay for medications.</td>
</tr>
</tbody>
</table>

| Collaborative Partners: | Local pharmacy. |

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Upon discharge, ALMH staff will provide approval for medication renewal at a local pharmacy.</td>
<td>FY18</td>
<td>Fewer return visits to the Emergency Department/Acute Care Department.</td>
</tr>
</tbody>
</table>

**MEASURES:** What will we measure to know the program is making a difference?

- **Short term indicators & source:** Provide at least $3,000 in assistance.
- **Long term indicators & source:** Meet needs of patients entering the emergency room to assist them in controlling health conditions that can cause readmission.

#### Goal 2: ALMH will serve as a clinical site for affiliated healthcare education programs as requested.

<table>
<thead>
<tr>
<th>Target Population</th>
<th>Future healthcare providers.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective</td>
<td>Host students requiring clinical experience for their educational requirements.</td>
</tr>
<tr>
<td>Strategy Selected:</td>
<td>Provide clinical education for nursing and allied health students in order to support completion of their degrees and increase the supply of healthcare professionals to provide care in the community.</td>
</tr>
<tr>
<td>Programs/resources hospital will commit:</td>
<td>Staff to oversee and facility to provide clinical experience to students.</td>
</tr>
<tr>
<td>Collaborating partners:</td>
<td></td>
</tr>
</tbody>
</table>

**2018 Community Health Needs Assessment Report**
### Heartland Community College

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Serve as a clinical site.</td>
<td>FY18</td>
<td>Students will observe and complete clinicals in areas of Radiology, Acute Care and Rehabilitation.</td>
</tr>
</tbody>
</table>

**MEASURES:** What will we measure to know the program is making a difference?

| Short term indicators & source | Hours completed. Source: Department Managers |
| Long term indicators & source | Hours completed. Source: Department Managers |

### Goal 3: Provide free baseline neurological testing to athletes in order to better treat concussions if one should occur while participating in a sport.

<table>
<thead>
<tr>
<th>Target Population</th>
<th>Athletes aged 10 and up.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective</td>
<td>Provide better knowledge for physicians when making a decision to return a concussed player to his/her sport.</td>
</tr>
</tbody>
</table>

**Strategy Selected:**

Head injuries are on the rise for athletes at all levels of play. An estimated 4 to 5 million concussions occur annually, with increases emerging among middle school athletes. Logan County is a very sports-driven community with several youth programs and school sports. The ImPACT test was developed by clinical experts who pioneered the field, ImPACT (Immediate Post-Concussion Assessment and Cognitive Testing) is the most-widely used and most scientifically validated computerized concussion evaluation system. ImPACT provides trained clinicians with neurocognitive assessment tools and services that have been medically accepted as state-of-the-art best practices -- as part of determining safe return to play decisions.

**Programs/resources hospital will commit:**

ALMH will provide staff and equipment to conduct the testing. ALMH will also offer education to increase awareness of concussion issues, and promote this free service to the community.

**Collaborative Partners:**

All Logan County and eastern Mason County schools serving children aged 10 and up, youth sports organizations, YMCA, local universities/colleges and Lincoln Park District. MHS graphics team to develop promotional materials.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Provide schools, teams, organizations and individuals baseline screening.</td>
<td>FY18</td>
<td>ALMH will continue its efforts to provide baseline screening to Logan County athletes ages 10 and up.</td>
</tr>
</tbody>
</table>

**MEASURES:** What will we measure to know the program is making a difference?

| Short term indicators & source | Number of athletes who have been screened; goal is 100 athletes screened. SOURCE: ALMH Athletic Trainers |
| Long term indicators & source | Number of athletes who have been screened. Long term goal will be 30% of all students participating in athletic programs at local schools and colleges. SOURCE: ALMH Trainers |
PRIORITY: CHRONIC DISEASE MANAGEMENT (DIABETES AND CARDIOVASCULAR DISEASE)

Reasons for priority selection
Abraham Lincoln Memorial Hospital’s 2015 community health need assessment identified chronic disease management as a top priority through its data collection and analysis and community advisory groups. In 2009, 9.9 percent of adults have been diagnosed with diabetes in Logan County, an increase of 2.3% since 2006. Logan County has eight new cases of diabetes per 1,000 population aged 18 to 84 years old in the past 12 months as reported in 2006-2008 (age adjusted to the year 2000 standard population). Healthy People 2020 has a target of 7.2 new cases per 1,000 population aged 18 to 84 years old. Hyperlipidemia leads to atherosclerosis, heart disease and acute pancreatitis. Since 2009, individuals receiving Medicare in Logan County have had an 8.6 percent increase in those being treated for hyperlipidemia. Also, since 2001, there has been a 5.5% increase in the percentage of Logan County adults who have been told they have high blood pressure. The number of Logan County Medicare individuals being treated for atrial fibrillation represents a higher rate than 75% of counties in the United States.

Goal 1: Provide diabetes education and support

Target Population | People with diabetes and caregivers.
Objective | Improve access to education for better control of diabetes through a support group that encourages diabetic lifestyle choices.

Strategy Selected:
Diabetes is a leading cause of death in the United States. Obesity increases the risk of diabetes. Losing weight and maintaining a healthy weight helps to prevent and control diabetes and other health conditions. According to the Centers for Disease Control and Prevention, more than 25 million people have diabetes, including both diagnosed and undiagnosed cases. This disease can have a harmful effect on most of the organ systems in the human body; it is a frequent cause of end-stage renal disease, non-traumatic lower-extremity amputation, and a leading cause of blindness among working age adults. Persons with diabetes are also at increased risk for ischemic heart disease, neuropathy, and stroke.

Programs/resources hospital will commit
Abraham Lincoln Memorial Hospital will provide the funding of the facilitator, space and supplies to hold the support group meetings. Additionally, ALMH will promote the meetings to the public.

Collaborative partners
Memorial Physician Services for referrals, Healthy Communities Partnership members for awareness and referrals.

<table>
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</tr>
</thead>
<tbody>
<tr>
<td>ALMH will collaborate with Memorial Physician Services and to discuss referrals to the support group and training</td>
<td>FY18</td>
<td>• Referring physicians in Logan County will refer patients to the support group.</td>
</tr>
</tbody>
</table>
2. CDE will determine schedule and topics. 10/2017 • Relevant topics will be developed for support groups.

3. ALMH will host monthly, free diabetes support groups FY18 • Participants will learn important skills to assist their control blood glucose levels.

**MEASURES:** What will we measure to know the program is making a difference?

<table>
<thead>
<tr>
<th>Short term indicators &amp; source</th>
<th>Support groups will be held monthly. Participation will increase through improved promotion, referrals.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Long term indicators &amp; source</td>
<td>Support groups attendance will increase by 25%. Source: Sign-in Sheets</td>
</tr>
</tbody>
</table>
• Provide health education to participants through community education by promoting and inspiring a culture of health in Logan County.
• Provide free cholesterol screenings to event attendees.

**Programs/resources hospital will commit:**
Abraham Lincoln Memorial Hospital will provide staff, meeting space, and supplies to coordinate the event. ALMH will also provide staff and funding to promote the event to the community. At the event, ALMH staff will provide expert advice regarding diabetes, cardiovascular health and obesity along with the supplies and staff to conduct free screenings.

**Collaborative Partners:**
Logan County Department of Public Health and the Lincoln Park District

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Reserve date and location for event.</td>
<td>10/2017</td>
<td>• Date established, facility reserved.</td>
</tr>
<tr>
<td>2. Obtain vendors, screeners and volunteers for event.</td>
<td>12/2017</td>
<td>• Vendors confirmed.</td>
</tr>
<tr>
<td>3. Create promotional materials and execute a marketing campaign.</td>
<td>12/2017</td>
<td>• Marketing materials created and distributed.</td>
</tr>
<tr>
<td>4. Hold the event.</td>
<td>2/2018</td>
<td>• Increase awareness of healthy behaviors for women.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• At least 400 individuals will attend the event.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• At least 50 individuals will have a cholesterol screening and receive diabetes education.</td>
</tr>
</tbody>
</table>

**MEASURES:** What will we measure to know the program is making a difference?
A survey will be taken at the event to identify the information gained by participants.

| Short term indicators & source                  | Number of individuals who attended the event, goal 400. |
| Long term indicators & source                  | Participants will follow up with attendance at diabetes support group or DSME classes. |

**Goal 4: Offer free blood pressure screenings to increase awareness of blood pressure results.**

<table>
<thead>
<tr>
<th>Target Population</th>
<th>Logan County and eastern Mason County residents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Objective</td>
<td>Increase awareness of blood pressure in residents and identify potential opportunities for early intervention.</td>
</tr>
</tbody>
</table>

**Strategy Selected:**
Provide free community blood pressure screenings at ALMH on a weekly basis so that individuals can easily monitor this important health indicator. Patients are educated about results and encouraged to provide monitored blood pressure results to their primary care physician when a need arises or as part of monitoring their health status.

**Programs/resources the hospital will commit:**
The screening takes place at ALMH and is promoted and conducted by ALMH staff and volunteers.

**Collaborative partners:** Local organizations that promote the service including Kiwanis and Rotary Clubs.
<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeline</th>
<th>Anticipated Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Reserve the room and secure the volunteer for the screenings</td>
<td>10/2017</td>
<td>Secure the room and screening staff.</td>
</tr>
<tr>
<td>2. Promote the screenings through local media</td>
<td>FY18</td>
<td>Community awareness of the free service. Average 10 screenings per week.</td>
</tr>
</tbody>
</table>

**MEASURES:** What will we measure to know the program is making a difference?

<table>
<thead>
<tr>
<th>Short term indicators &amp; source</th>
<th>Attendance at the screenings of at least 15 individuals per week (700 screenings per year). Source: Volunteer Sign-In Sheets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Long term indicators &amp; source</td>
<td>Attendance at the screenings. Source: Volunteer Sign-In Sheets</td>
</tr>
</tbody>
</table>

Approved by Abraham Lincoln Memorial Hospital Board on August 16, 2017
ABRAHAM LINCOLN MEMORIAL HOSPITAL COMMUNITY HEALTH NEEDS ASSESSMENT
Analysis of Public Input from Focus Groups - Logan County
Conducted by UIS Survey Research Office

Report submitted on July 13, 2018
Project Methodology

The Survey Research Office (SRO) was contacted by Abraham Lincoln Memorial Hospital, part of the Memorial Health System (MHS) to collect, record, and analyze public input for the FY2018-2021 Community Health Needs Assessment. After conducting a survey of Logan County residents, the results of the survey were detailed in a report issued to Abraham Lincoln Memorial Hospital (March 13, 2018). Based on the results of that report, the hospital’s CHNA Steering Committee determined the three greatest health needs in its service area are mental health, obesity, and cancer. The Steering Committee decided that they could not choose just one issue to focus on for the community discussion and that they wanted to get more public input on all three topics. Therefore, mental health, obesity, and cancer were chosen as the focus for the community discussion and the community benefits program to follow.

In the survey done for the hospital by the SRO, Logan County residents were asked, “What is the ONE thing you would do to improve the health of Logan County residents?” By far, the most common answer was to help citizens live a healthier lifestyle. Rates for both obesity and smoking are much higher than when compared to the state. Additionally, access to mental health care is particularly challenging. Out of a population of 29,746, there are 17 mental health providers (University of Wisconsin Public Health Institute, 2018), while deaths due to suicides are significantly higher in Logan County than compared to the state (17.6 per 100,000 vs. 4.4 per 100,000).

There were two goals we hoped to achieve in our group discussions: (1) to identify the reasons these issues exist in Logan County and what obstacles are present that would prevent progress and (2) to find solutions using the existing services in Logan County and to determine what services are still needed. To find these answers, the SRO conducted three focus groups in Lincoln. The CHNA Core Group developed a list of topics to be discussed at the focus groups; however, the final scripts were developed solely by the SRO staff. The topics discussed at the focus groups include the following:

- Causes leading to high rates of obesity, cancer, and mental health issues
- Barriers in treating obesity, cancer, and mental health issues
- Points of access to health care and mental health care
- What services are available and what are services are needed
- Solutions – What can the hospital do to make the greatest impact?
- Health education/literacy
- Correlations between the three issues

The thirty-five participants were involved in one of the three focus groups. They were recruited using a variety of methods. The following details the specific methodology for each of the focus groups.

Focus Group of Logan County Stakeholders (May 21, 2018)

Staff with Abraham Lincoln Memorial Hospital invited stakeholders who currently provide services for Logan County residents. These individuals were contacted via email (May 16, 2018) by the hospital, with the instructions to send their RSVP to the SRO. Reminder emails were sent May 18, 2018 by SRO staff. Possible participants had a choice of two times, May 21 or May 23. Snacks were provided. Ten individuals participated in this focus group representing the following agencies: Springfield Clinic,
Logan County Health Department, Community Connection Point, The Christian Village, Keith TEC, Memorial Health System, St. Clara’s Senior Care, Heartland Community College, and Relay for Life-Community Volunteers in Health. This focus group was held at Abraham Lincoln Memorial Hospital in the Wombacher room.

**Focus Group of Logan County Parents (May 23, 2018)**

Staff with Abraham Lincoln Memorial Hospital invited stakeholders who currently provide services for Logan County residents. These individuals were contacted via email (May 16, 2018) by the hospital, with the instructions to send their RSVP to the SRO. Reminder emails were sent May 18, 2018 by SRO staff. Possible participants had a choice of two times, May 21 or May 23. Lunch was provided. Twelve individuals participated in this focus group representing the following agencies: United Way of Logan County, City of Lincoln, LCHS #404, Tri-County Special Education Association, MBH-Lincoln, Chestnut Health Systems, SIU Center for Family Medicine, Logan County Probation, Regional Fresh Food Council, His Hands Outreach, First Presbyterian Church, and Lincoln Park District. This focus group was held at Abraham Lincoln Memorial Hospital in the Wombacher room.

**Focus Group of Logan County Adults (May 24, 2018)**

This focus group consisted of individuals who are connected to Community Action Partnership of Central Illinois. The mission of Community Action Partnership is to empower persons with low income and the aged by creating and implementing poverty-fighting initiatives for those in crisis and those that endeavor a life of lasting independence. The Client Management Services Director recruited thirteen individuals to attend this focus group. Each received a $50 financial incentive and lunch for their participation. The focus group was held at the Community Action Partnership of Central Illinois.

Full transcripts of the focus group discussions are included at the end of this report.
Summary of Findings

Executive Summary

The summary report is based on the key findings that were discussed in the three focus groups. With a few exceptions, the message was consistent among the groups. In mental health, there are too few providers in the county. Individuals can perhaps find counseling services, but if a prescription is needed there is no one to prescribe it since there are no psychiatrists in the county. Like other rural areas, the stakeholders report recruiting providers can be difficult. Poverty and lack of information play a key role in the county’s high rate of obesity, while environmental factors as well as poor lifestyle choices greatly affect the rates of cancer in the community. A lack of affordable transportation also limits access to services for many of the residents and negatively impacts all three areas.

Mental Health

There are only a few points of access to mental health care for the residents of Lincoln. Individuals with private insurance can receive counseling from the two private practice counselors in Lincoln, or through Memorial Behavioral Health or Tazwood Mental Health Center. Individuals with public insurance have more limited choices, though Lincoln Pastoral Counseling states on their website that they will always provide services regardless of one’s ability to pay. Regardless, the availability of counselors in the county is very low. According to information from the University of Wisconsin Public Health Institute (2018), out of a population of 29,746, there are 17 mental health providers, or one provider for every 1750 residents. Unsurprisingly, wait times for appointment can be several months. Said one provider, “We have a new social worker but she’s already booked out. Her first new patient appointment is two months out. And we try to keep her open enough so that if she does have an urgent need for someone we keep it open but we have to fill that.” Said another provider about the difficulty his agency is having in recruiting more providers, “I know they’re trying to bring more in, LCSW and psychiatry. They don’t get bites. I don’t know if people don’t want to come to rural areas anymore or what.”

With the difficulties in recruiting, it makes increasing the number of providers that much more challenging. Some agencies have turned to programs such as Mental Health First Aid and Trauma Informed Care, both of which provide very basic information about how to deal with an individual in crisis. Others are exploring telehealth, particularly telepsychiatry. Stated one participant, “I’d like to see tele psychiatry come here. I have a vet right now who’s with the VA. They gave him a tablet. We talked about that in the past but you’d think now that with the technology and the need.” Another added, “We’ve started some tele health at family medicine. Our first one was a psychiatry appointment.” However promising telehealth seems, some providers shared that the barrier to making the services more widely available is that it is poorly funded and not accepted by some insurance companies.

Many participants stated they would like to see the hospital work on reducing the stigma around seeking mental health services. One method MHS has been using to help with this is by embedding mental health providers into both primary care clinics as well as into the school. This allows someone to
receive counseling services in a more anonymous setting. Having mental health providers in the school could also aid with universal mental health screenings.

Additionally, many participants stated they would like to see more services available for the youth of the community, particularly in education and awareness. Several brought up the fact that when a child doesn’t receive treatment for Adverse Childhood Experiences (ACES), it can greatly impact a child’s behavior. In fact, research done by Kaiser-Permanente has shown that children who are exposed to adverse and traumatic events and do not receive appropriate and timely care can go on to suffer many consequences throughout their lifetime such as disrupted neurodevelopment; social, emotional, and cognitive impairment; adoption of risky behaviors; disease, disability and social problems; and too often an early death. As one stakeholder stated, untreated ACES can lead to the very problems being discussed: mental health, obesity and cancer.

It is also hoped that early education on good mental health self-care and increased and convenient availability of mental health providers will help to reduce the county’s suicide rate. Deaths due to suicides for those 18 and older are significantly higher in Logan County than compared to the state (17.6 per 100,000 vs. 4.4 per 100,000). Furthermore, in the 2016 Illinois Youth Survey, 22 percent of Logan County 12th graders reported that they had seriously considered suicide, while the rate for 12th graders statewide is only 14 percent. While some were surprised by the high rate, others stated that they were aware of suicides, but felt that the news was often covered up so no one would know it was a problem.

Finally, Logan County has a newly formed mental health advisory board. It is likely that the board is made up of individuals from many different agencies and backgrounds, with the goal of improving mental health care in Logan County. This should lead to increased collaboration among agencies, and possibly greater funding. If the hospital has not already done so, it should take advantage of this opportunity.

**Possible solutions:**
- Increase availability of psychiatrists through having outreach psychiatrists and telehealth
- Educate more of the providers on mental health by promoting mental health first aid/trauma informed care
- Reduce stigma of seeking treatment by through universal screening, embedding more clinicians into primary care practices as well as the school (MOSAIC)
- Provide counseling and psychiatric services for youths, with special emphasis on ACES screening
- Screen all students for ACES and introduce mental health self-care into school curriculum.
- Use newly formed mental health advisory board to increase funding and collaboration among agencies.
Obesity

Abraham Lincoln Memorial Hospital already works to promote healthy eating in its services area. According to the ALMH website, over 66 percent of Logan County, Illinois residents are either overweight or obese, so the hospital has long been working towards promoting a healthier lifestyle in its service area. The hospital currently sponsors the local farmer’s market as well as providing a matching program for SNAP benefits spent at the market, i.e., one dollar from a SNAP card is worth three dollars at the ALMH Market. The hospital promotes healthy lifestyles through the Power of Produce (POP) program which targets kids under 12, as well as offering screening and information on blood pressure, weight/BMI, blood sugar and lipid profile.

While many applaud what the hospital has so far been able to accomplish, many feel the hospital could do more to make healthy eating more “convenient.” Some participants feel a community garden could be beneficial, while one stated the hospital could collaborate with Regional Fresh Food Council to provide a fresh food truck to go to the lower income neighborhoods to deliver fresh fruits and vegetables, along with recipes and demonstrations of how to prepare the food. Because many families in the community do not have the time, money, or the ability to prepare healthier meals and instead rely upon the low price and ease of prepared foods, some participants feel it is important to educate the children of the community to break the generational cycle of poor eating habits. Said one participant about her kids, “I have two fatty patties. Well, I do, and I force them on the healthy, fresh vegetables and fruits. One hardly eats, and...They are just both big.” And unhealthy eating is not isolated with the low income residents. Shared one, “I have friends that have money and education and still don’t know how to prepare vegetables.”

As previously mentioned, the hospital already sponsors POP at their market. In addition, the local school offers the CATCH (Coordinated Approach to Child Health) program, which promotes healthy eating by having the kids categorize foods as “slow, go, or whoa.” Some participants stated that they see their children learning from this program and feel there is an opportunity there for the hospital to even further improve upon the experience. Said one of the CATCH program, “Then you’re teaching adults through kids. Because I mean my daughters know to eat healthy so they like that if it’s available. So I have a drawer my fridge of healthy and ready foods. But we didn’t have that as a kid.” Said another, “The kids ask their parents why they aren’t cooking like they learn to cook at schools.”

In addition to healthy eating, many partipants shared that there needs to be more opportunities for free exercise. Many pointed out that P.E. used to be a daily occurrence in schools and now is only offered in many schools once or twice a week. Recesses have even been eliminated in some schools. Another pointed out, “Although the walking tracks are being put up all over the place. I think there needs to be awareness...the exercise and healthy foods that needs to go together.” Shared another participant, “There’s a lot of kids’ programs. Some of them are financially prohibitive. I think adult programs are lacking.” The park district representative present in one group stated that, “the park district doesn’t turn people away... If there’s someone that can’t afford it, they usually won’t be turned away. And we have a ton of exercise programs and the park district is already affordable.” This seems like a possible opportunity for collaboration for the hospital.
Cancer

When told that incidences of nearly all cancers in Logan County are higher than compared to the state, participants were not surprised. All knew someone battling cancer and some had personally survived cancer. Many participants felt that the hospital could do more to educate and raise awareness about cancer in the community. Several stated that they feel not enough people in Logan County get the recommended cancer screenings such as mammographies, pap smears, colonoscopies, and prostrate exams because they do not understand the importance of the screenings or simply cannot afford them. Participants who had had cancer shared that they feel the service that would have been most beneficial for them is to have had a “one-on-one” sponsor - someone who had had the same diagnosis and had completed treatment- to talk to them about the treatments and what to expect. Though several cancer specific support groups exist, the survivors shared they just felt too vulnerable at the time of their diagnosis to participate in a group. Stated one participant:

    Something I would like to see is an outreach program when someone is diagnosed for them to be paired up with someone who has had that cancer for someone to call them because I know as a survivor, and I wasn’t going to go to a group but if someone called me just to tell me that they had it, I would have loved to have someone like that and I know a lot of others feel the same way but they just need someone to hook them up with someone that had the same one.

Others shared that because of the trauma associated with not only a cancer diagnosis but also with the treatment, they feel that it would be helpful to embed counselors into oncology departments as part of their treatment team.

possible solutions:

- Promote fresh food consumption among low-income population by providing education about healthy eating on a budget and through continuing support of 3X SNAP benefits at ALMH Market
- Promote youth exercise program/exercise in public schools
- Collaborate with the park district to increase free exercise opportunities for community and have “larger” people teach exercise classes
- Community gardens
- Collaborate with Regional Fresh Food Council to provide a fresh food truck to go to the lower income neighborhoods
- Sponsor kid’s cooking classes and nutrition education such as the CATCH program and expand it to include all ages.
Many participants speculated on the reasons for the high incidences of cancer in the county. Several felt that the overabundance of farm chemicals in their environment has led to increased rates, while another participant brought up that Logan County is an “EPA high zone for radon.” Added another, “central Illinois has high rates of radon and the scary thing is just because your neighbor gets tested and their house doesn’t have it doesn’t mean you don’t have it. You can have a high rate of radon from the basement...and most can’t afford to fix it.”

Others shared that the three topics being discussed -mental health, obesity, and cancer – are interrelated and just as was discussed in the mental health section, untreated ACES can lead to mental health issues as well as unhealthy lifestyle choices, which can in turn lead to increased risk of cancer. One such unhealthy choice is tobacco/nicotine addiction. Over a quarter (28.3 percent) of the county’s residents report they smoke cigarettes on a daily basis. Furthermore, this data does not include those who use smokeless tobacco or nicotine-delivery devices such as e-cigarettes or JUULs. Many of the participants expressed concern about the increased use of the latter, especially in the younger population. One participant shared:

Kids are focusing on JUULs. Have you heard of it? They call it the thumb drive smoke. Kids have it in their pocket and backpack. It’s like smoking 8 cigarettes at once. They got it to offset the no smoking laws, and when I brought it up when presenting to a class, 7 of the 11 kids do it and I had 2 adults in the whole community who knew what it was. So the education on smoking and telling dad to get a colonoscopy and the kids are forced to learn about this [but use JUUL]. I’m hoping the numbers go down.

Though the state sponsors a tobacco cessation program through the American Lung Association (Quitline), many of the current cessation programs still focus on quitting cigarette smoking and don’t always offer support for other kinds of nicotine addiction. Suggestions given to help decrease tobacco/nicotine use is to offer a cheap, more convenient, and local program to support those trying to quit nicotine. Additionally, many of the providers felt it was crucial that an awareness program be developed to take to the area schools to educate kids about the danger of JUULs, e-cigarettes, and vaping. Many kids know that using tobacco is harmful but do not understand the health problems that can occur from using a nicotine delivery device.

### Possible solutions:
- One-on-one support for those newly diagnosed with cancer
- Embedding counselors in oncology department
- Increase cancer screenings by providing free exams for low-income or under-insured.
- Increase education and awareness about cancer and its warning signs
- Coordinate with health department for nicotine awareness and nicotine cessation programs for adults as well as for middle school and high school students
Other Needs: Perceived disparity in care/ Transportation/Resource directory

The perception among several of the participants is that Logan County has one of the highest rates of poverty in the state. Yet, according to the 2017 US Census estimate, out of the 102 counties in Illinois, 51 have a higher rate of poverty. The rate for Logan County is 13.7 percent, just slightly higher than the state rate of 13 percent. However, when looking at the median family income, the rate for Logan County is $64,704, compared to the state average of $76,227. Additionally, 22.5 percent of the county’s population has Medicaid insurance, compared to the state rate of 21 percent (US Census Bureau, American Community Survey, 2012-2016). So, while Logan County is not among the poorest of Illinois counties, it does have some poor residents. Some participants shared that Lincoln is a divided community and that it is very class conscious. This likely adds to the perception that there is a significant disparity in the health care one receives based on income. While the ratio of PCPs to the population is lower than the state rate, there are several points of access to medical care for Logan County Residents. In addition to the hospital and its PCPs, the SIU Center for Family Medicine operates a FQHC at the county health department, while Springfield Clinic also offers PCP services as well as OB/GYN services, an LCSW, a dietician, and a host of other specialists who provide outreach services.

Logan County’s rural location in combination with residents living in poverty lead to issues with transportation. The thirteen participants in the community group all received public insurance and at least half shared they do not have their own transportation. Several shared that the transportation services they once relied on are now no longer available, thus limiting their access to care. Stated one mother:

My son just missed 85 days of school or more and we went through tons of hospital stays and tests. We went to St. Louis a couple of times, and we went to Springfield I don’t even know how gas, and my income is disability. We are selling our possessions to get to his doctor’s appointment. I feel that the things are absolutely necessary are just being erased. The people that can afford to do so are not even realizing what damaging effects that has. The mental health issues are going to grow. I have mental health issues, and if I can’t even provide for my child who has a serious illness, what is that going to do to my mental health? Everything is a chain reaction. We just found out that he has Crohn’s disease. That is a lifelong thing. How do you prepare for that?

In the community discussion, lack of transportation affected not just access to care but all facets of life. When discussing obesity and healthy eating, one resident stated:

But there we go again with the transportation. I have chosen not to drive because of my condition so I have to rely on my electric scooter... they had funds last year to provide transportation, but the grant money wasn’t there so here we go. Those who can go out the farmer’s market and use their Link to make more advantage of it by doubling it or tripling it, and if they don’t have the transportation to get the healthy food, then you are back at giving it to Walmart again.
One solution that could help with not only the aforementioned issues but also with improving public awareness of resources is to hire and embed a community health worker (as seen in Enos Park-Springfield) to serve as a liaison for the hospital as well as an advocate for the residents. The creation of such a position could be beneficial not only for Logan County residents but could lead to increased collaboration among Logan county providers. Providers pointed out that something Logan County is missing is a resource guide. A community health worker could take the lead in developing and maintaining the guide as part of his/her duties. As one provider stated, “It’s amazing how much comes down to education, knowledge, and communication. When you communicate about mental health, if we teach people where bike trails are and healthy eating is. If we can expose to getting screenings, it’s just getting the word out and erasing the stigmas and all three of them have that in common.”
Appendix A. Stakeholder participants

<table>
<thead>
<tr>
<th>NAME</th>
<th>ORGANIZATION</th>
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<tbody>
<tr>
<td>Erica Hostetter</td>
<td>Springfield Clinic</td>
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<tr>
<td>Lisa Mueller</td>
<td>Springfield Clinic</td>
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<tr>
<td>Don Cavi</td>
<td>Logan County Health Dept.</td>
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<tr>
<td>Ashley Earles</td>
<td>Community Connection Point</td>
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<tr>
<td>Julie Bobell</td>
<td>The Christian Village</td>
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<tr>
<td>Jennifer Keith</td>
<td>Keith TEC</td>
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<tr>
<td>Tamar Kutz</td>
<td>Memorial Health Systems</td>
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<tr>
<td>Janell Woolard</td>
<td>St. Clara’s Senior Care</td>
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<tr>
<td>Krisitin Powell</td>
<td>Heartland Community College</td>
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<tr>
<td>Tonia Riefsteck</td>
<td>St. Johns-RFL</td>
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<tr>
<td>Patti Becker</td>
<td>United Way of Logan County</td>
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<tr>
<td>Seth Goodman</td>
<td>City of Lincoln</td>
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<tr>
<td>Robert Bagby</td>
<td>LCHS #404</td>
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<tr>
<td>Donna Morris</td>
<td>Tri-County Spec. Ed. Association</td>
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<tr>
<td>Olivia Massena</td>
<td>MBH-Lincoln</td>
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<tr>
<td>Nadia Klekamp</td>
<td>Chestnut</td>
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<tr>
<td>Melinda Hoagland</td>
<td>SIU Center for Family Medicine</td>
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<tr>
<td>Kim Turner</td>
<td>Logan County Probation</td>
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<tr>
<td>Elizabeth Wrage</td>
<td>Regional Fresh Food Council</td>
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<td>Ed Tibbits</td>
<td>His Hands Outreach</td>
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<tr>
<td>Adam Quine</td>
<td>First Presbyterian Church</td>
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<tr>
<td>Jacki Pavlik</td>
<td>Lincoln Park District</td>
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For full transcripts of the focus group report, please contact Angela Stoltzenburg, Director, Community Health Collaborative, at Stoltzenburg.Angela@mhsil.com or 217–605–5008.