

**Community
Health Needs
Assessment**



**Logan
County Illinois
2024**



CONTENTS

Executive Summary 3

Introduction to Memorial Health..... 4

Commitment to Addressing Community Health Factors & Health Equity..... 5

Introduction to Lincoln Memorial Hospital 7

Our Community 8

 Demographics 8

 Education and Health Resources..... 9

 Economics..... 9

 Social Vulnerability Index..... 10

 Health Equity Index..... 10

 Food Insecurity Index..... 10

 Residential Segregation 11

Assessing the Needs of the Community..... 12

 Feedback from the Last CHNA/CHIP 12

 Oversight..... 12

 Timeline..... 12

 Prioritization Criteria 13

 CHNA Process 13

Addressing the Needs of the Community 17

 Selected Priorities 17

 Health Needs Not Selected..... 23

 Community Resources Available to Address Significant Health Needs..... 25

 Impact of the 2021 CHNA and the FY22-24 CHIP..... 26

EXECUTIVE SUMMARY

In 2024, Lincoln Memorial Hospital (LMH) completed a Community Health Needs Assessment (CHNA) for Logan County, Illinois, as required of nonprofit hospitals by the Affordable Care Act of 2010. As an affiliate of Memorial Health (MH), LMH worked with four other affiliate hospitals on the overall timeline and process for the CHNA but completed its Logan County assessment independently from those hospitals in collaboration with local community partners. The same defining criteria were used throughout the CHNA process at all affiliate hospitals. These defining criteria are: 1. Magnitude, 2. Seriousness, 3. Feasibility, 4. Equity and 5. Potential to Collaborate.

Lincoln Memorial Hospital collaborated with the Logan County Department of Public Health to complete the 2024 CHNA. Community health needs were prioritized based on reviews of secondary community data, as well as primary data gathered from an External Advisory Committee (EAC), a public community health survey and community focus groups that sought input from the community and those who are minoritized and underserved.

LMH then convened an Internal Advisory Committee (IAC), which approved the final priorities selected by LMH, as listed below.

- 1. Cancer**
- 2. Mental Health**
- 3. Healthy Weight**

Additionally, Memorial Health leaders agreed on a health system priority of Mental Health. The Memorial Health Board of Directors Community Benefit Committee approved the 2024 Community Health Needs Assessment report and final priorities on Sept. 16, 2024. Approval was also received from the Lincoln Memorial Hospital Board of Directors. This report is available online at [memorial.health/about-us/community/community-health-needs-assessment](https://www.memorial.health/about-us/community/community-health-needs-assessment) or by contacting MH Community Health at CommunityHealth@mhsil.com. An implementation plan is being developed to address the identified needs, which LMH will implement FY25-27. The plan will be posted at the same website upon its completion no later than Feb. 15, 2025.


INTRODUCTION

MEMORIAL HEALTH

Memorial Health of Springfield, one of the leading healthcare organizations in Illinois, is a community-based, not-for-profit corporation dedicated to our mission to improve lives and strengthen communities through better health. 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 includes five hospitals: Decatur Memorial Hospital in Macon County, Jacksonville Memorial Hospital in Morgan County, Lincoln Memorial Hospital in Logan County, Taylorville Memorial Hospital in Christian County and Springfield Memorial Hospital in Sangamon County.

Memorial Health also includes primary care, home care and behavioral health services. Our more than 9,000 colleagues, partnering physicians and hundreds of volunteers are dedicated to improving the health of the communities we have served since the late nineteenth century. The Memorial Health Board of Directors Community Benefit Committee is made up of board members, community health leaders, community representatives and senior leadership who approve and oversee all aspects of the MH community benefit programs, CHNAs and CHIPs.

Strategy 3 of the FY22–25 MH Strategic Plan is to “build diverse community partnerships for better health” by building trusting relationships with those who have been marginalized, partnering to improve targeted community health inequities and outcomes and partnering to support economic development and growth of our communities. These objectives and strategy are most closely aligned with the MH goal of being a Great Partner, where we grow and sustain partnerships that improve health. CHNAs are available for each of the counties where our hospitals are located— Christian, Logan, Macon, Morgan and Sangamon counties. These assessments and the accompanying CHIPs can be found at [memorial.health/about-us/community/community-health-needsassessment](https://www.memorial.health/about-us/community/community-health-needsassessment). Final priorities for Memorial Health are listed in the graphic below.



Memorial Health

Our Mission
Why we exist:
To improve lives and build stronger communities through better health

Our Vision
What we aspire to be:
To be the health partner of choice

FY25–27 FINAL PRIORITIES

<p>DMH</p> <p>MENTAL HEALTH RACISM CANCER AND UNEMPLOYMENT</p>	<p>JMH</p> <p>MENTAL HEALTH HEART DISEASE CANCER AND HEALTHY EATING</p>	<p>LMH</p> <p>MENTAL HEALTH HEALTHY WEIGHT CANCER</p>
<p>SMH</p> <p>MENTAL HEALTH CHRONIC DISEASES HOMELESSNESS AND SUBSTANCE USE</p>	<p>TMH</p> <p>MENTAL HEALTH HEART DISEASE ACCESS TO PRIMARY CARE</p>	

COMMITMENT TO ADDRESSING COMMUNITY HEALTH FACTORS AND HEALTHY EQUITY

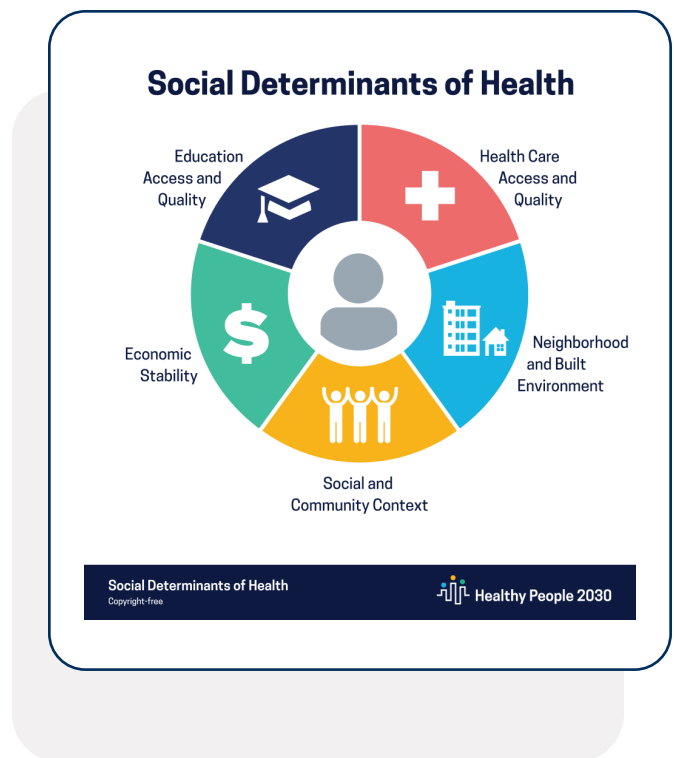
Health equity is when everyone has a fair and just opportunity to attain their highest level of health (CDC). Across many health measures, we know that not everyone gets this fair chance. Historical and present-day systems of inequality continue to undermine the opportunities for wellbeing for particular groups of people. Memorial Health is committed to moving toward greater health equity both within our health system and in our broader communities.

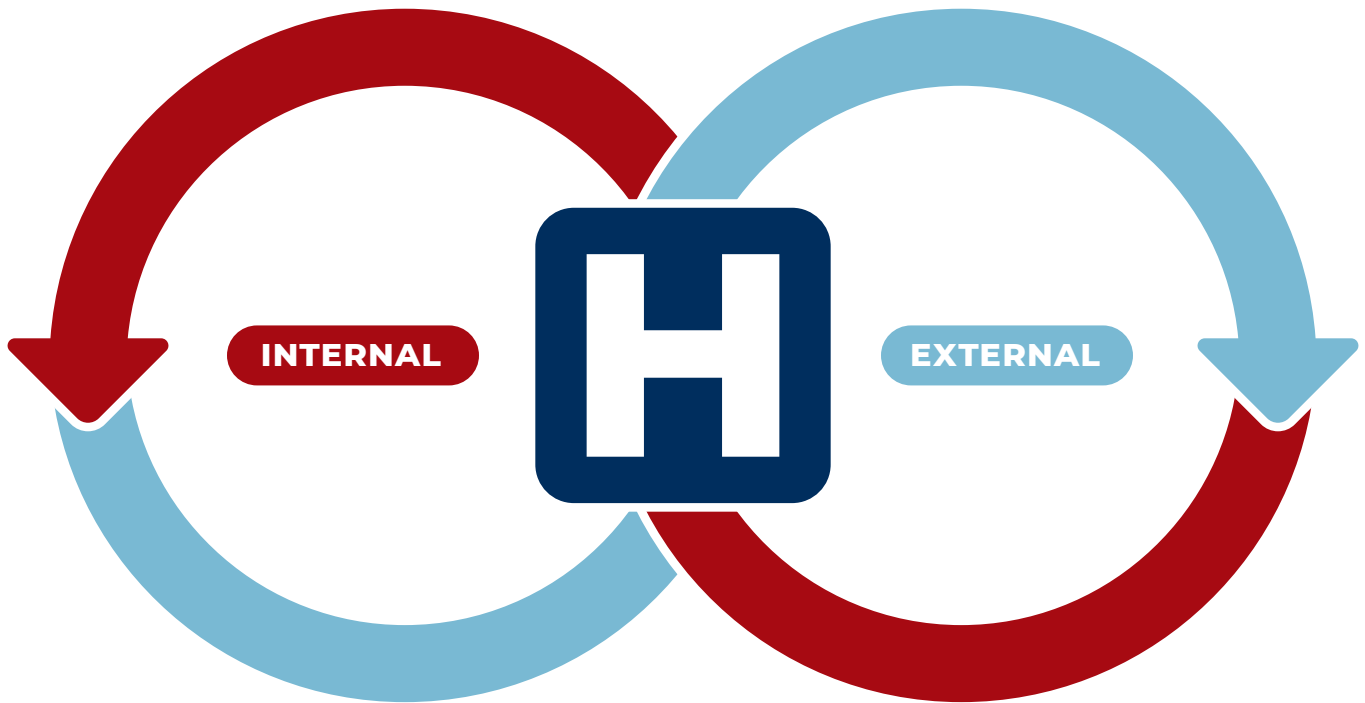
Social and structural factors are key drivers of health, often called “social determinants of health.” The American Health Association (AHA) estimates that 40% of a person’s health comes from socioeconomic factors like income, education, and community safety. Other structural factors like discrimination and exclusion due to a person’s race, gender, sexuality, age, veteran status, disability, immigration status, and more can be included here, too. The AHA then attributes 10% of a person’s health to the physical environment, like shelter, air and water quality. Another 30% comes from health behaviors like diet, exercise, and drug and alcohol use, leaving the final 20% to come from access to and quality of healthcare.

The social and structural elements drive health at these other levels, too. Exercise outdoors is difficult if pollution and community safety are problems, and racism and economic marginalization shapes who has access to safe neighborhood spaces. Drug and alcohol use can result from the trauma that comes through exposure to community violence and the impact of various forms of marginalization. Access to healthcare can be limited by socioeconomic factors like transportation and insurance as well as by past experiences of discrimination leading to medical distrust.

Committing to health equity requires a collaborative and multifaceted approach. Within our health system, we provide education and support to colleagues to ensure we are offering culturally competent and inclusive care. All hospitals have “health equity projects” that work to identify and resolve particular health disparities in our patient outcomes. We also partner with groups like the Illinois Health and Hospital Association, the American Health Association, Vizient, Press Ganey, and others to measure our progress and identify actionable goals.

Given that the driving health factors happen outside of the healthcare system, Memorial Health makes a strong investment in community health, including having a community health coordinator assigned at each affiliate hospital to initiate and coordinate community partnerships. Careful attention is paid to these social, structural, environment, and behavioral aspects of health, and this focus guides the CHNA process at all points. We can visualize some key efforts to address these social and structural determinants of health both inside and outside the walls of our hospitals in the following way:





INTERNAL

- Screening patients for social determinants
- Connecting patients to community resources
- Equity analysis in quality improvement projects
- Updating electronic health records for accurate information on LGBTQ+ patients
- Participating in the Illinois Health Association Equity in Healthcare Progress Report
- Stratifying patient satisfaction scores to identify and address trends or patterns
- Annual colleague trainings regarding culturally sensitive data and unconscious bias in medicine

EXTERNAL

- Engaging with community through volunteerism
- Partnering with local homelessness, recreation opportunities and education initiatives
- Investing in the community including economic development and youth initiatives



INTRODUCTION TO LINCOLN MEMORIAL HOSPITAL

LMH is a 25-bed, not-for-profit, community-based rural critical access hospital affiliated with Memorial Health. LMH is located in Lincoln, approximately 30 miles northeast of the state capital of Springfield. LMH serves the people and communities of Logan and eastern Mason counties. LMH offers a full range of general (secondary) hospital inpatient and outpatient care on-site, including general acute care, observation, swing bed services, surgical services, emergency medicine and special procedures. Ancillary and support services offered at LMH include laboratory, radiology, pharmacy, clinical dietetics, diabetes self-management education, cardiology, sleep studies, physical therapy, speech-language pathology, occupational therapy, respiratory therapy and cardiopulmonary rehabilitation. Tertiary care, including psychiatric services, when appropriate and required, is provided through affiliation agreements with other providers, including other Memorial Health affiliate hospitals. In 2023, The American Nurses Credentialing Center (ANCC) announced the second consecutive designation of LMH as a Pathway to Excellence® hospital, making it one of only 201 nursing teams across the nation and only two in Illinois to earn the status. The award recognizes LMH as a hospital that demonstrates a commitment to establishing a healthy workplace for colleagues. LMH 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, Lincoln Memorial Hospital provides millions of dollars in community support each year, both for its patients and in support of community partnerships.

Lincoln Memorial Hospital has been involved in community health improvement efforts since 1996, when the Healthy Communities Partnership was established in partnership with the local health department and the Chamber of Commerce. Throughout the years, LMH has remained committed to coordinating community-wide efforts to create a healthier community by addressing social determinants of health. LMH leads the LMH Community Health Collaborative network, which brings together representatives for the community to address identified needs and leverage community resources for maximum impact.

OUR COMMUNITY

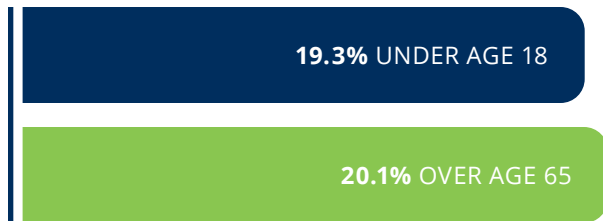
DEMOGRAPHIC OVERVIEW

LMH is located near the center of the state. Logan County is largely rural and agricultural, with healthcare and small businesses being the largest employers. The majority of patients served by LMH come from Lincoln and surrounding areas. Lincoln is where the hospital focuses most of its community engagement and community health initiatives, due to its population density and resources for collaborative partnerships.

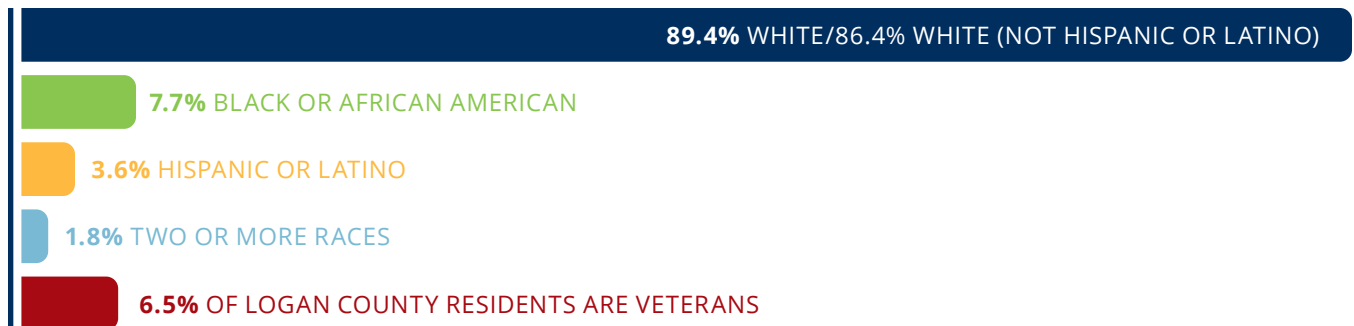
In 2023, the U.S. Census Bureau Populations and Housing Unit Estimates reported that Logan County has a population of 27,590. Lincoln is the county seat with the highest population of 13,072.



Population Age



Race and Hispanic Origin and Population Characteristics



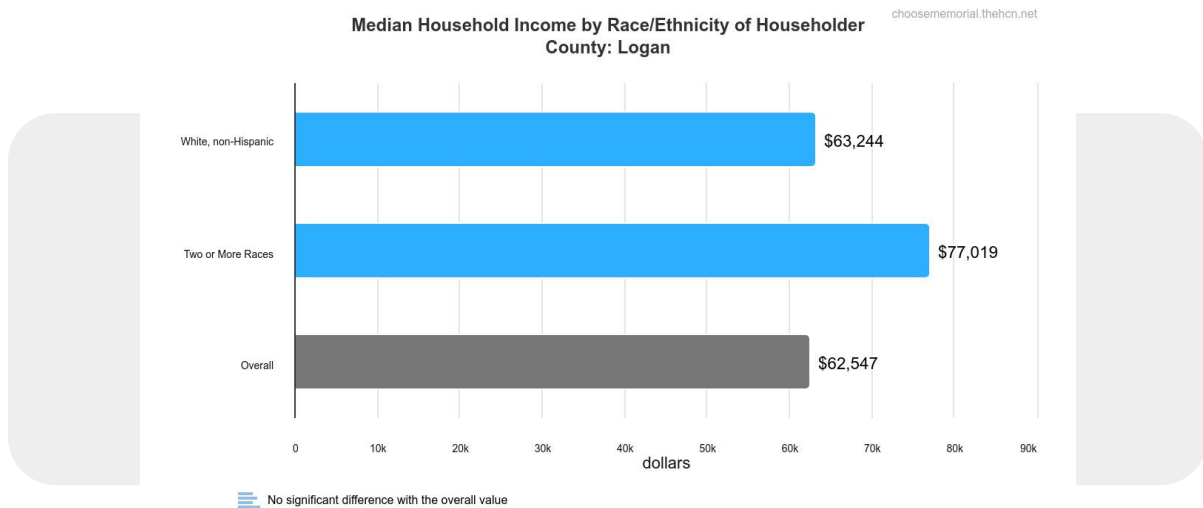
EDUCATION AND HEALTHCARE RESOURCES

LMH is the only hospital located in the primary service area of Logan County. Lincoln is home to a community college based 38 miles away in Normal, Illinois, which offers classes locally. Many patients come to LMH annually for quality specialty care and surgery that is not available in their community. In addition to LMH, other Logan County healthcare resources include:

- Hospice care
- Logan County Department of Public Health
- Memorial Home Services Medical Equipment
- Memorial Care Lincoln, Primary Care Practice
- SIU Center for Family Medicine, FQHC – Federally Qualified Health Center
- Springfield Clinic

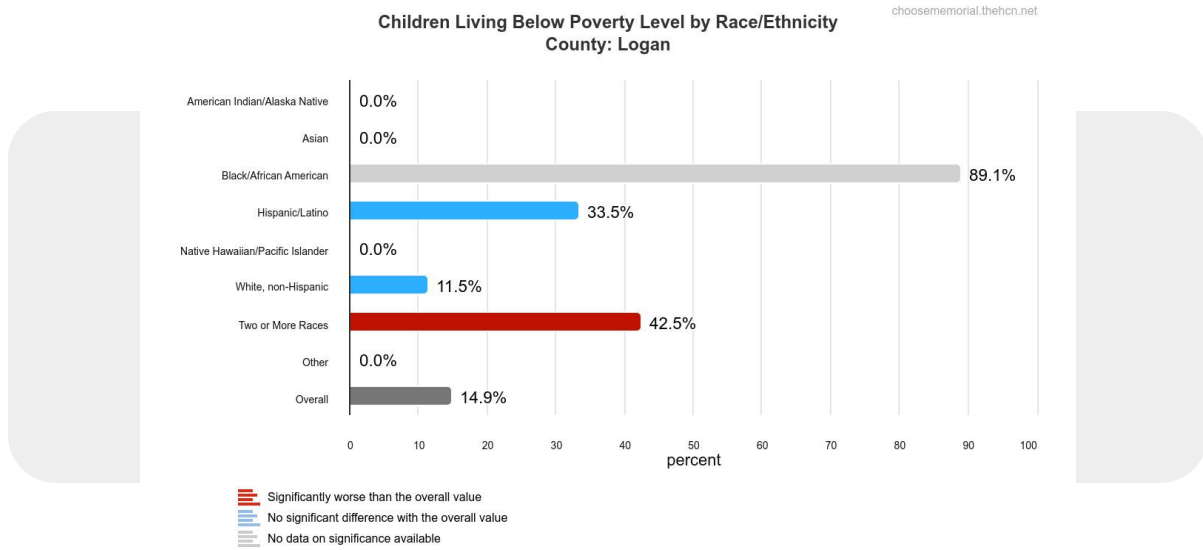
ECONOMICS

The American Community Survey reports that the median household income in Logan County is \$62,547, lower than both the Illinois and US value.



Source: American Community Survey 5-Year (2018-2022)

ALICE (Asset Limited, Income Constrained, Employed) is a way of defining and understanding financial hardship faced by working households that earn above the federal poverty line (FPL), but not enough to afford a “bare bones” household budget. According to United for ALICE in 2022, 39 percent of households in Logan County are considered at the ALICE threshold or lower, which means they do not have enough to afford the basics in the communities where they live.



Source: American Community Survey 5-Year (2018-2022)

SOCIAL VULNERABILITY INDEX

Natural disasters and infectious disease outbreaks can also pose a threat to a community’s health. Socially vulnerable populations are especially at risk during public health emergencies because of factors like socioeconomic status, household composition, minority status or housing type and transportation. The Social Vulnerability Index (SVI) ranks census tracts on 15 social factors, such as unemployment, minority status, and disability. Possible scores range from 0 (lowest vulnerability) to 1 (highest vulnerability). Logan County’s 2020 overall SVI score is 0.2, indicating a low to moderate level of vulnerability.

HEALTH EQUITY INDEX

The 2024 Health Equity Index created by Healthy Communities Institute is a measure of socioeconomic need that is correlated with poor health outcomes. An index value 0 (low need) to 100 (high need) shows the greatest need by zip code. Logan County has a score of 49.7. The two highest need areas in Logan County are Latham with a score of 88.8 and Chestnut with a score of 85.

FOOD INSECURITY INDEX

The 2023 Food Insecurity Index also created by Healthy Communities Institute measures economic and household hardship correlated with poor food access. An index value from 1 (low need) to 100 (high need) is assigned to each zip code. Logan County has a score of 28.4. In Logan County, the zip codes of Atlanta (57.1) and Lincoln (54.1) showed the highest need.

RESIDENTIAL SEGREGATION

Racial/ethnic residential segregation refers to the degree to which two or more groups live separately from one another in a geographic area. Although most overt discriminatory policies and practices, such as separate schools or seating on public transportation based on race, have been illegal for decades, segregation caused by structural, institutional and individual racism still exists in many parts of the country. The removal of discriminatory policies and practices has impacted institutional and individual acts of overt racism, but has had little effect on structural racism, like residential segregation, resulting in lingering structural inequalities.

Residential segregation is a key determinant of racial differences in socioeconomic mobility and, additionally, can create social and physical risks in residential environments that adversely affect health. The residential segregation index ranges from 0 (complete integration) to 100 (complete segregation). The index score can be interpreted as the percentage of either Black or white residents that would have to move to different geographic areas in order to produce a distribution that matches that of the larger area. Logan County has a Residential Segregation—Black/white score of 63.7. In other words, 64 percent of either Black or white residents would have to move to different geographic areas in order to produce a de-segregated residential distribution. Illinois has an overall score of 71.5.

ASSESSING THE NEEDS OF THE COMMUNITY

ALL HOSPITAL AFFILIATES OF MEMORIAL HEALTH CONDUCTED THE 2024 CHNA USING THE SAME TIMELINE, PROCESS AND METHODOLOGY.

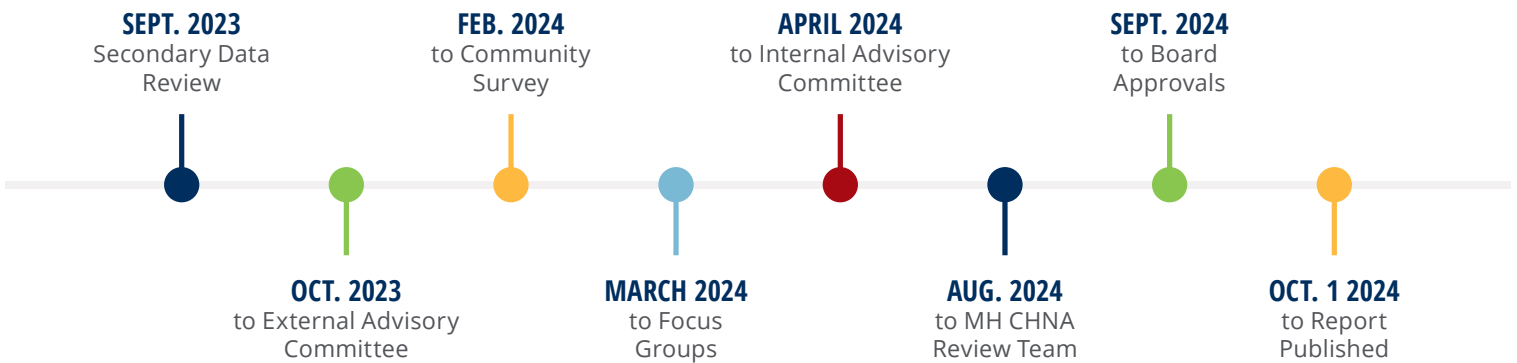
FEEDBACK FROM THE LAST COMMUNITY HEALTH NEEDS ASSESSMENT

To inform the CHNA process, written or verbal comments for the last CHNA and Community Health Implementation Plan (CHIP) are reviewed and considered. There were no comments received from the public regarding the 2021 CHNA or the FY22-24 CHIP.

OVERSIGHT

The CHNA process for Lincoln Memorial Hospital was led by the LMH Community Health Coordinator, Molly McCain. The process was also supported by the LMH President and Chief Executive Officer, Dolan Dalpoas, and the Memorial Health Director of Community Health, Angela Stoltzenburg.

TIMELINE



PRIORITIZATION CRITERIA

The following criteria were referenced throughout the process. Final priorities were selected by ranking identified issues with these criteria, weighted to reduce individual bias and subjectivity resulting in a more objective and rational decision-making process.



- 20% MAGNITUDE** - What is the number of people impacted by this problem or is this a trending health concern for the community?
- 20% SEVERITY** - How severe is this problem or is a root cause of other problems?
- 30% FEASIBILITY** - Ability to have a measurable impact, availability of resources, and evidence-based interventions available.
- 20% EQUITY** - Does the issue have the greatest impact on people who are marginalized, vulnerable or living in poverty?
- 10% POTENTIAL TO COLLABORATE** - Is this issue important to the community? Is there a willingness to act on the issue?

PROCESS

STEP 1: SECONDARY DATA COLLECTION

Primary and secondary qualitative and quantitative data was collected as the first step to identifying local community health needs. A variety of data was reviewed to assess key indicators of the social determinants of health including economic stability, education access/quality, health care access/quality, neighborhood/built environment and social/community context. As mentioned earlier in the report, these non-medical factors influence the health outcomes of the community and represent the conditions in which people are born, grow, live, work and age.

Memorial Health engages Conduent Healthy Communities Institute to provide a significant source of secondary data and makes it publicly available online as a free resource to the public. The HCI site provides local, state and national data to one accessible, user-friendly dashboard reporting more than 100 community indicators reflecting health topics, social determinants of health and quality of life. When available, specific county indicators are compared to other communities, state-wide data, national measures, and Healthy People 2030. Many indicators also track change over time or identify disparities. The data can be found here: <https://memorial.health/about-us/community-health/healthy-communities-data>.

Additional secondary data and partner reports were reviewed for a nuanced understanding of community health indicators including:

- 500 Cities and PLACES Data Portal
- 2023 ALICE in the Crosscurrents: COVID and Financial Hardship in Illinois
- 211 Reports provided by United Way of Logan County
- Centers for Disease Control and Prevention Places
- Centers for Disease Control and Prevention (WONDER)
- Centers for Medicare & Medicaid Services
- Community Action Partnership of Central Illinois Community Needs Assessment
- Environmental Protection Agency
- Illinois Health Data Portal
- Illinois Violent Death Reporting System
- Illinois Kids Count Report
- Illinois Public Health Community Map
- Illinois Report Card
- Illinois Youth Survey
- Logan County Department of Public Health
- National Cancer Institute
- Robert Wood Johnson Foundation County Health Rankings
- State Health Improvement Plan: SHIP
- State Unintentional Drug Overdose Death Reporting System
- United States Census
- USDA Food Map—Food Deserts

STEP 2: PRIMARY DATA COLLECTION

Primary data was collected directly from the community in three ways: an external advisory committee, interviews and focus groups. Participants included those who represent, serve or have lived experience with local low-income, minoritized, or at-risk populations. These methods provided an opportunity to engage community stakeholders and hear their reactions to the secondary data and provide their experiences in the community.

External Advisory Committee

The EAC consisted of 24 participants and was asked to review the secondary data collected to identify significant health needs in the community based on both the data as presented and their experience in the community. The following organizations were represented:

- Brightpoint
- Chestnut Health System
- Heartland Community College - Lincoln
- Lincoln Daily News
- Lincoln Junior High School
- Lincoln Park District
- Logan County Board
- Logan County Democrats
- Logan County Department of Public Health
- Memorial Behavioral Health
- Mount Pulaski Police Department
- Mount Pulaski School District
- New Holland-Middletown School District
- Oxford House, Recovery Home

Community Survey

Q: *How do you rate your health?*

Q: *Why don't local residents access healthcare when they need it?*

A survey in both online and paper format was distributed throughout the county to gather feedback. The survey was available in English and Spanish. Several community partners helped distribute the survey including local schools, human service agencies and the Logan County Department of Public Health. The survey was also distributed at local events. The survey asked several demographic questions to identify basic characteristics of respondents. The questions centered around age, gender, race, ethnicity, income and education. Participants were asked how they rate their health and the health of the community in addition to assessing adverse childhood experiences experienced in the home, exposure to racism and local challenges to maintaining a healthy lifestyle. The survey also provided an opportunity to write in the biggest health problem in the community. In Logan County, 428 surveys were completed. A copy of the survey can be found in Appendix I. A summary of who took the survey and the findings are below:

- 75% identified as female
- 20% reported at least some college
- 14% reported a household income of less than \$40,000
- 95% identified as white (compared to 89.4% population)

- 1.87% identified as Black or African American (compared to 7.7% population)
- More than 50% reported that healthcare is not accessed when needed due to financial barriers (inability to pay out-of-pocket expenses, lack of health insurance coverage and inability to pay for prescriptions)
- 11% reported safety and crime as a challenge to maintaining a healthy lifestyle
- 62% reported lack of motivation/education as a challenge to maintaining a healthy lifestyle
- 46% reported they had witnessed someone being treated differently because of their race sometimes or frequently
- 29% reported they agreed or strongly agreed that racism was a problem
- 54% had experienced emotional abuse in their household
- 50% reported mental illness in the household

Focus Groups

Ten focus groups and interviews were conducted with community members, representing diverse identities throughout the county. Representation included those of diverse age, race, ethnicity, education, socioeconomic status and more. The following organizations participated in focus groups:

- Christian Village
- Land of Lincoln CEO
- Logan County High School students
- Lincoln Community High School students
- Lincoln Fire Department
- Lincoln Police Department
- Memorial Health nursing colleagues
- Mount Pulaski residents
- New Holland-Middletown Residents
- Oasis Senior Center
- Oxford House – Recovery Residence
- “Rebuilding Lincoln” forum
- Silver Fox Fitness

Three consistent themes emerged from the focus groups held in Logan County: access to health services, substance use and community activities. The need for health services spanned from mental health to dental care. Substance use was a prominent concern across all focus groups, with participants noting its widespread impact. Lastly, the lack of free and affordable community activities was highlighted, with many recognizing that greater access to such activities could foster a sense of community, connection and belonging.

STEP 3: INTERNAL ADVISORY COMMITTEE

The Internal Advisory Committee reviewed both primary and secondary data collected and recommended final priorities for board approval based on the selected criteria. Each potential need was force ranked by the criteria category. The IAC consisted of members of the LMH Community Health Collaborative Advisory Board as listed below:

- Board President, Lincoln Area YMCA
- CEO, Community Action Partnership of Central Illinois
- CEO, Lincoln Economic Advancement and Development
- Director of Nursing, Logan County Department of Public Health
- Executive Director, Lincoln Park District
- Executive Director, Logan County Department of Public Health
- Manager, Memorial Behavioral Health
- President/CEO, Lincoln Memorial Hospital
- Principal, Lincoln Elementary School District #27
- Representative, Logan County Regional Planning Commission
- Superintendent, Lincoln Community High School

STEP 4: MEMORIAL HEALTH CHNA/CHIP REVIEW COMMITTEE

A Memorial Health CHNA/CHIP Review Committee was added to the CHNA process for 2024. The purpose of this team was to review the CHNA findings for all affiliate MH hospitals and identify a shared priority. Sharing these regional needs provided an opportunity to discuss potential strategies to create a regional impact or inform health system strategy. The review committee included Memorial Health colleagues in the following roles: MH Chief Administrative Officer; MH Vice President of Equity, Diversity and Inclusion; MH Vice President and Chief Quality Officer; Hospital Presidents/CEOs; Director of Community Health and Community Health Coordinators. Mental Health was identified as a priority in every hospital CHNA, and therefore was chosen as the system-wide priority.

ADDRESSING THE NEEDS OF THE COMMUNITY

The sections below provide deeper insight into the priorities selected. These priorities will be featured in the FY25-27 community health implementation plan. An explanation of additional identified health needs that were not chosen as final priorities is also included below. MH is committed to meeting the needs of our communities and will continue to collaborate with community partners to address priorities outside those identified in the CHNA as resources allow.

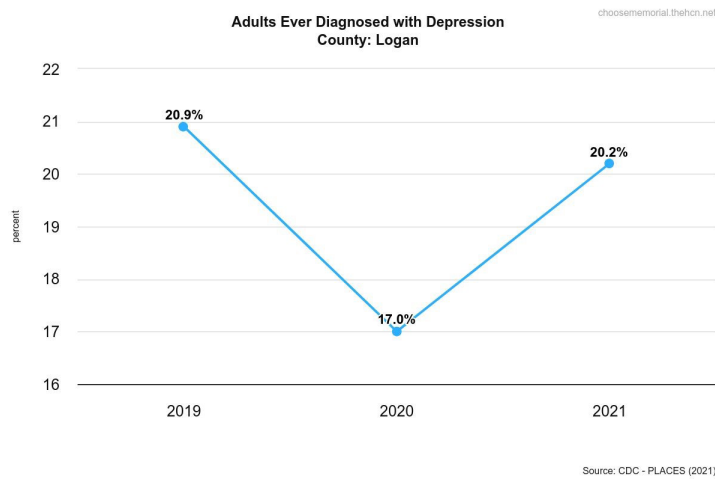
SELECTED PRIORITIES

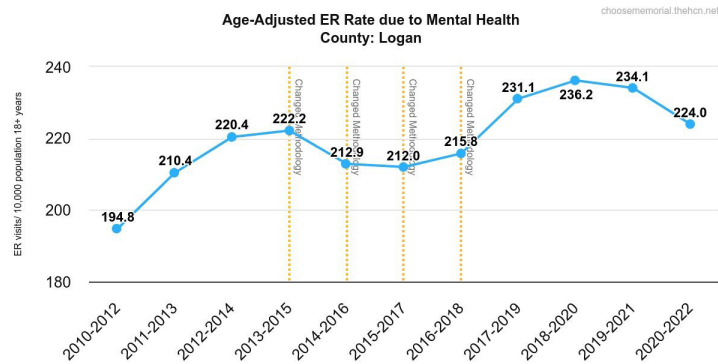
The final priorities selected by LMH include:

1. Mental Health (adult 3.7 and youth 3.9)
2. Cancer (4.5)
3. Healthy Weight (4.5)

MENTAL HEALTH

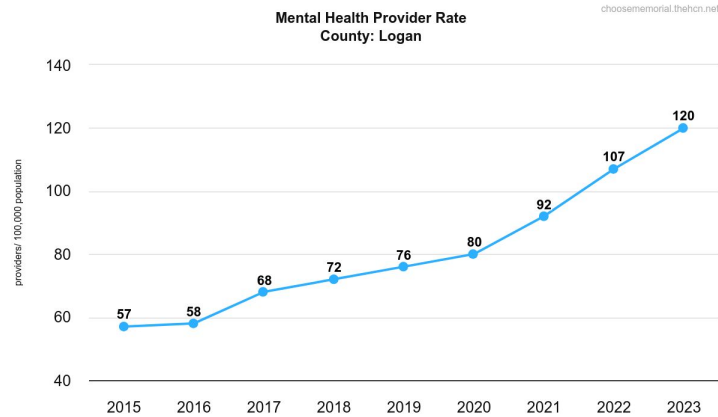
Mental health emerged as a significant focus in the community health needs assessment due to alarming data reflecting the mental health challenges faced by both youth and adults in Logan County. The Illinois Youth Survey revealed that a substantial percentage of students reported symptoms of depression, with nearly half of 10th graders and over half of 12th graders affected. Additionally, 22 percent of 10th graders and 27 percent of 12th graders in Logan County reported that in the past year they had considered suicide. The rate of disconnected youth (not involved in school or work) in Logan County (11 percent) is nearly double the state and national averages. This could lead to isolation, loneliness and a lost sense of purpose for young people in Logan County. Pediatric mental health hospitalizations are also higher in Logan County compared to Illinois as a whole. For adults, particularly those over the age of 65, 14 percent have been diagnosed with depression. Overall, the age-adjusted ER rate due to mental health for adults is 224 visits for Logan County as compared to 169 for the state of Illinois. In 2021, 20.2 percent of Logan County adults were diagnosed with depression.





When presented with the top ten potential priorities, all focus groups emphasized the importance of improving mental health care access in Logan County. Participants frequently voiced concerns about the mental health crises affecting their children’s schools, with many advocating for the teaching of coping skills at an earlier age. Bullying was identified as a significant root cause of youth mental health issues. These discussions underscored the community’s recognition of mental wellness as a vital issue needing attention.

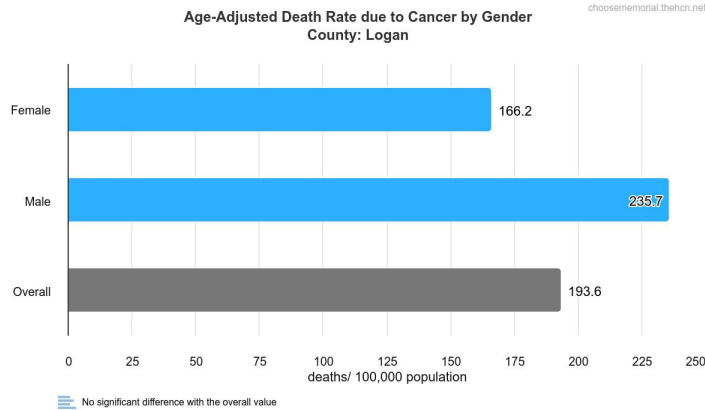
Survey responses indicated that half of households have someone struggling with mental illness, and there was a strong demand for more mental health providers and equitable access to care. Even with a consistent increase in mental health providers since 2016, the Logan County provider rate is 120 as compared to the state value of 315. Focus groups revealed that the waiting list for mental health services is a significant barrier to treatment. These factors underscore the urgency of addressing mental health as a priority in the community.



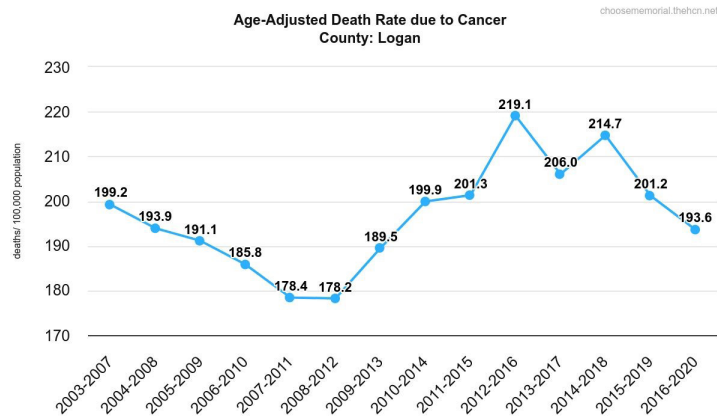
The internal advisory committee reviewed youth and adult mental wellness as separate priorities to explore tailored strategies for each group. During the prioritization process, it became clear that while mental health was already a focus in the previous needs assessment, there was a need to broaden the scope to include adults. The scores for both youth and adult mental wellness were similar, with feasibility and equity ranked three out of five. Although typically the highest-scoring priorities receive the most focus, the committee recognized a strong connection between mental health and substance use, which had a higher score. It was also recognized that mental health is a root cause for domestic violence, emotional abuse and physical abuse. After extensive discussion, the committee concluded that by prioritizing mental health, the community could also see a reduction in substance use issues, ultimately deciding to make mental health a top priority.

CANCER

According to the National Cancer Institute, Logan County also has a high cancer incidence rate of 554 per 100,000, which is higher than both the Illinois average of 459 and the national average of 442. The Logan County death rate for the 2016-2020 reporting period was 193 as compared to 155 for Illinois and 149 for the nation.

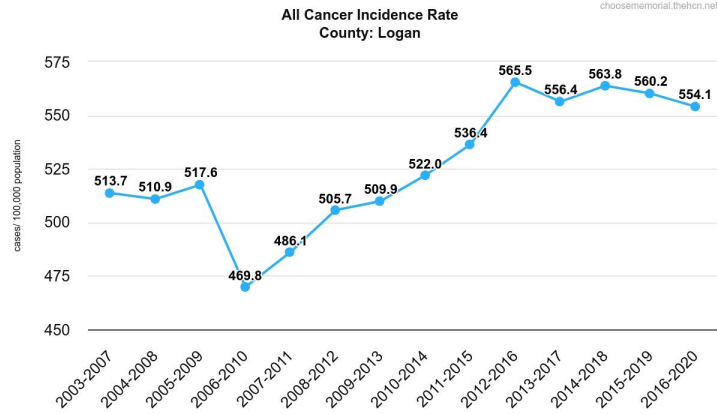


Source: National Cancer Institute (2016-2020)



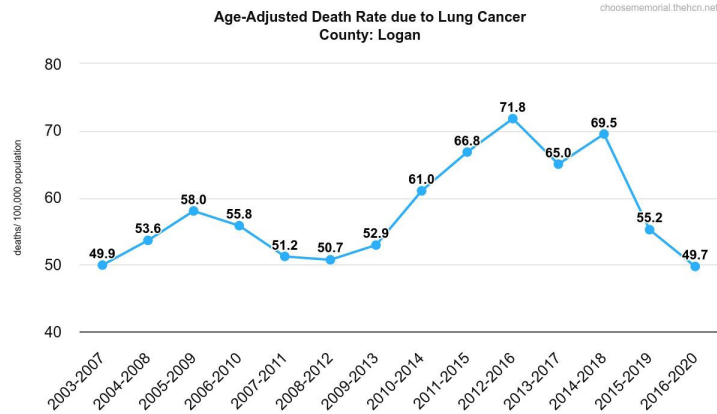
Source: National Cancer Institute (2016-2020)

When reviewing this data, including data on specific cancers, the external advisory committee agreed that the findings indicate a need that should be addressed at LMH.

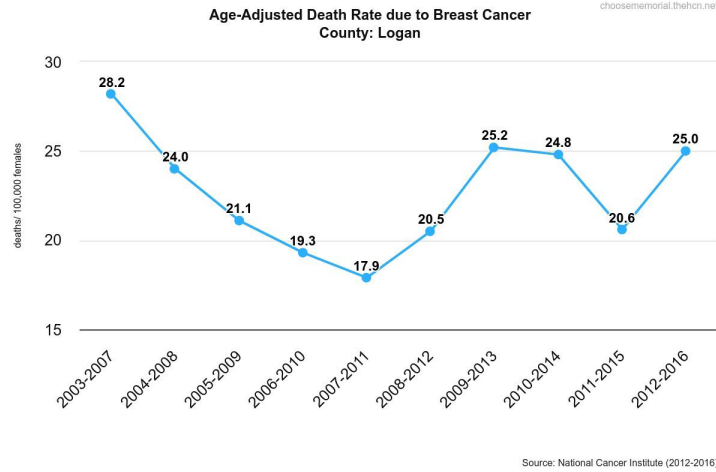


Source: National Cancer Institute (2016-2020)

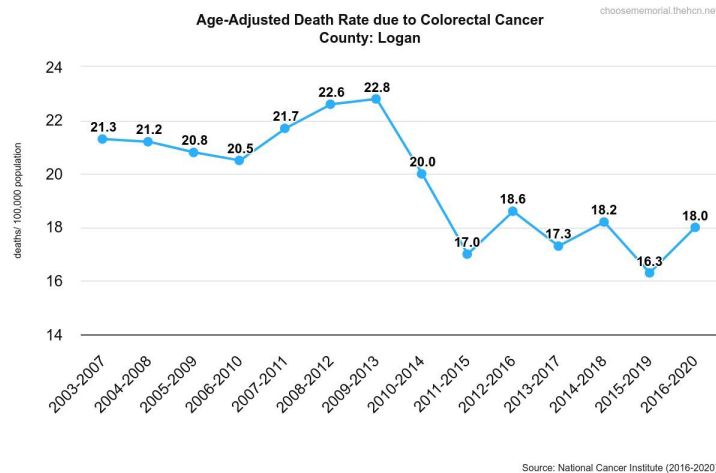
The focus groups agreed that cancer should be a priority, though there was no detailed discussion on how to address it. Despite this, the data clearly shows a high need, warranting further review by the internal advisory committee to determine their perspective on the issue. The committee was presented with high-level cancer statistics as well as specific data on the cancers with the highest incidence and death rates in Logan County: breast, lung and colorectal. In Logan County, lung cancer has the highest death rate at 49.7, well above the Illinois rate of 37.3 and the US average of 35. For breast cancer, Logan County has the highest incidence rate at 129.9, though its death rate is 25 compared to 21.8 in Illinois and 20.6 nationwide. Colorectal cancer incidence in Logan County is 59.8, higher than Illinois at 41.3 and the US average of 37.7.



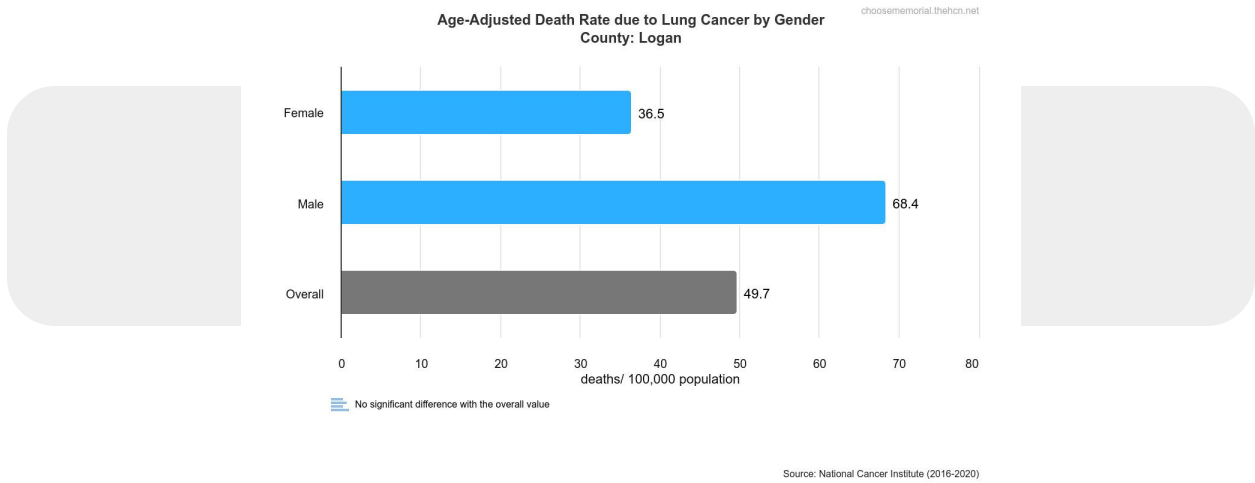
Source: National Cancer Institute (2016-2020)



Based on the data, the committee concluded that a broader approach to cancer interventions would be wise, with strategies to address colorectal, breast and lung cancers.

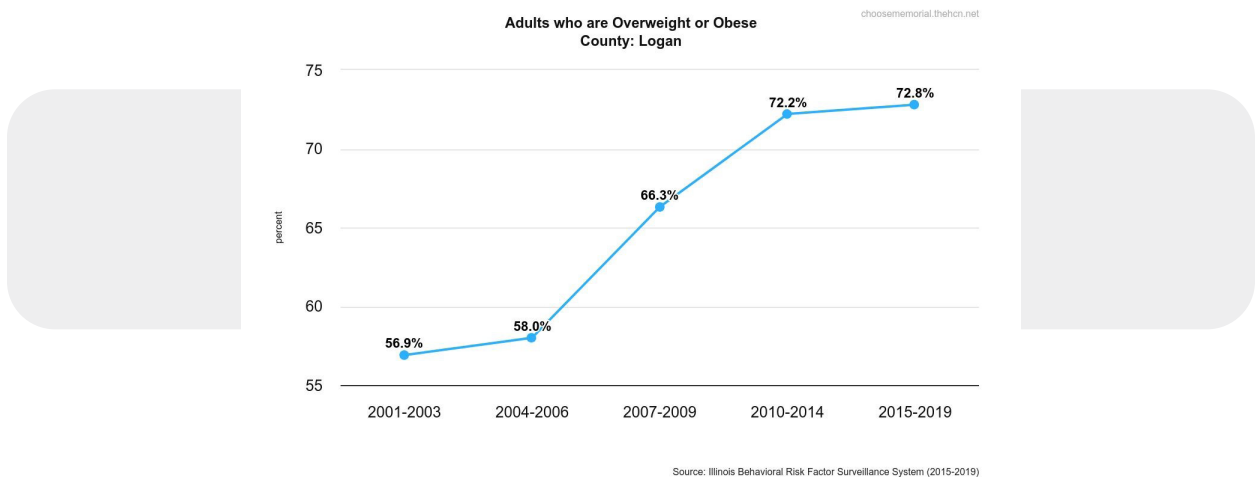


And while there isn't data available to identify race disparities for overall cancer incidence, they are evident within death rates and specific cancers. Males in Logan County are more impacted by cancer, with a rate 42 points higher than the overall average. The age-adjusted death rate for cancer in Logan County is notably higher for men, with 235 deaths per 100,000 population, compared to 166 deaths per 100,000 for women. Lung cancer impacts Logan County men more than women.



HEALTHY WEIGHT

Unhealthy weight continues to be a topic of concern in Logan County. In the 2015-2019 reporting period, the Illinois Behavioral Risk Factor Surveillance System reported that 72.8 percent of Logan County adults are considered overweight or obese by the Body Mass Index. Obesity has been on the CHIP the last three years and has been a topic of conversation from the external advisory forward. When presented with the data in the external advisory, the group ranked their top 10 priorities out of 33 priorities, with obesity ranking as number four only after student mental wellness, poverty level and child abuse.



When moving into the surveys, there was a great amount of confidence that obesity would stay as a priority even before the final reports were back. The community health need surveys confirmed this prediction. Eighty-eight percent of survey respondents believe that Logan County is somewhat or not very healthy. Many survey respondents stated that the high number of fast-food chains in the area was of concern and that they would like a health food store or healthy meal options. Other suggestions include walkable streets, bike trails and free physical activities.

The Robert Wood Johnson County Health Rankings reported that 27 percent of Logan County adults reported no leisure-time physical activity. Only 31-35 percent Logan County eighth, tenth and 12th graders self-reported on the Illinois Youth Survey that they had at least 60 minutes of physical activity in the past seven days. The same group reported that they were not eating fruits and vegetables according to current dietary recommendations. No more than 12 percent reported eating at least one vegetable per day. No more than 6 percent reported eating vegetables at least three times per day.

The community survey found several challenges to Logan County residents maintaining a healthy lifestyle.

- 62% reported a lack of motivation/effort/concern
- 55% reported a lack of education/knowledge
- 44% reported a lack of access to healthy foods
- 42% cited lack of time/convenience
- 38% reported a lack of recreation opportunities

When presented with the secondary data, survey results and focus group feedback, the internal advisory committee agreed that healthy weight should be a continued priority for Logan County. With a high population of those at risk of obesity or being overweight, the magnitude score was a 5 showing the trend of this issue as well as the number of people affected by it. The seriousness score was also rated a 5 due to the high population of adults affected as well as the acknowledgement that obesity is a root cause of several other chronic conditions and disease. The feasibility score was rated a 4, as LMH has the resources and interventions available to make a substantial impact. The equity score was also rated a 4 as this priority has a significant impact on marginalized populations and those living in poverty. The final score to be included is the potential to collaborate, which was rated a 5 because we have many partnerships that we could collaborate with on this work.

The shift from obesity prevention to promoting healthy weight reflects the hospital's broader approach to addressing this priority. Potential interventions will not only target those who are currently overweight, but also include education and activities designed to foster healthy habits across all ages and demographic group.

HEALTH NEEDS NOT SELECTED

Often, organizational capacity prohibits LMH from implementing programs to address all significant health needs identified during the CHNA process. LMH chose to focus efforts and resources on a few key issues to develop a meaningful CHIP and demonstrated impact that could be replicated with other priorities in the future:

Substance Use - Substance use is a significant concern in Logan County; however, it was not selected as a priority because the hospital has strong partnerships with existing services and organizations who are already addressing the concern. The advisory committee also agreed that enhancing mental health services could help address substance use trends due to their comorbidity. Focus groups and surveys highlighted needs that LMH cannot fully address, but we will continue to support the effective interventions already in place.

School Safety - School safety emerged as a concern in many focus groups but was not selected as a priority due to the hospital's lack of expertise in this area. Instead, our partnership with local law enforcement and emergency services will enable us to support the creation of safe learning environments for students in our community.

Homelessness and Housing - Homelessness and affordable housing were not selected as priorities because LMH has not identified specific interventions to address these needs. However, a new shelter project is being developed to address these issues, and LMH will continue to provide support for this initiative.

Dental Care - Affordability and access to dental care were frequently highlighted in the surveys. Although LMH does not have the resources to address this priority directly, the organization recognizes the need and will promote the resources available through community partners, including the Logan County Department of Public Health, which offers dental services on-site.

Poverty/Ability to Afford Healthcare - Most Logan County residents have some type of health insurance. The U.S. Census Bureau reported that in 2021, 91.3% of adults ages 18-64 had some type of insurance. Most children under the age of 19 were also covered by insurance, with 97.2% reported in 2021. LMH does its best to provide care for those who cannot afford it, when possible, but recognizes that the need far exceeds our capacity and that there are many root causes that can only be addressed with collaboration.

The biggest concern is those who have insurance but still can't afford medications and out-of-pocket costs. This was mentioned throughout the focus groups and community survey. LMH acknowledges this concern but is unable to implement effective strategies to have a measurable impact on inability to pay for prescriptions, co-pays, high deductibles, etc.

Transportation - Transportation was a prominent concern in the surveys and focus groups. While LMH recognizes that there are existing community resources, we also acknowledge that more work is needed and we will continue to support the agencies addressing this issue. LMH is not able to have a measurable impact on this need due to resource constraints and lack of expertise.

Domestic Violence - Secondary data and community health surveys reveal that domestic violence is a concern in Logan County. While LMH acknowledges this is serious safety issue, the organization lacks the resources to address it directly. LMH will continue to direct community members to law enforcement and appropriate agencies until further support can be arranged. Addressing mental health is also thought to have a potential impact on domestic violence.

Access to Alcohol and Gambling - A common topic during focus groups and throughout surveys is the number of establishments selling alcohol and providing gambling in the county. This was not selected as a priority as LMH does not have the resources or appropriate interventions to address this concern.

OB/GYN Services - A common concern raised in surveys and focus groups is the lack of OB/GYN services in the community since LMH ceased providing these services. Although LMH does not have the resources to offer these services directly, the hospital will support and collaborate with the agencies in our community that provide comprehensive care during pregnancy and postpartum.

Safe Sidewalks and Bike Paths - Safe sidewalks and more bike paths were noted as important for creating a healthier Logan County. Although this was not selected as a priority, LMH will continue to collaborate with organizations that recognize this need and work together to address it where possible.

COMMUNITY RESOURCES AVAILABLE TO ADDRESS SIGNIFICANT NEEDS

Gaps, assets, collaborative partnerships and existing work for each of the final priorities will be explored with existing partners and community stakeholders. Members of the organizations who participated in the external advisory committee and focus groups will provide important feedback to the development of the FY25-27 CHIP.

Below are some examples of existing or potential partnerships that can be leveraged to address the final priorities selected.

Brightpoint - LMH partners with Brightpoint to facilitate a Youth Mental Health Coalition, which aims to enhance protective factors, expand youth mental health resources and promote healing through community and collaborative efforts. As mental health remains a priority, LMH will continue to support and collaborate with the coalition.

Chestnut Health Systems - LMH partners with Chestnut Health Systems to facilitate a Substance Use Prevention Coalition, which focuses on raising awareness of substance use disorders, preventing youth substance use and improving access to resources. Chestnut undertakes many valuable projects that support the health and well-being of Logan County, and LMH will continue to promote and collaborate on these efforts to address community needs.

Girls on the Run of Central Illinois - Girls on the Run is a program designed to help young girls process emotions, build lifelong skills and create lasting impact on their communities. As two of the priorities are healthy weight and mental health, Girls on the Run is a great partner to address the emotional, mental and physical health of young girls in Logan County.

Hope on 5th - Given the known need for housing, veterans' services and recovery resources, Hope on 5th is a developing project and will serve as an asset to our community.

Lincoln Area YMCA - The Lincoln Area YMCA offers excellent programs for children and promotes health and wellness for all ages. LMH recently partnered with the YMCA to host the LMH Trailblazers walking program during the winter, providing a safe space for walking in inclement weather. With mental health and healthy weight as priorities, there are many opportunities for further collaboration.

Local Schools and Preschools - Lincoln Elementary School District #27 has actively participated in numerous community health initiatives. These include Beyond 27, which focuses on from-scratch school lunches. Several schools in the county partnered with LMH and Memorial Behavioral Health to offer behavioral health counseling in schools and vaping prevention education. All county schools, except Atlanta Elementary School, partnered with LMH to implement the CATCH program for preschool to eighth graders, focusing on whole child wellness and promoting activity and healthy eating. With priorities on mental health and healthy weight, the districts will continue its partnership to support the health and well-being of children in Logan County.

Lincoln Community High School has been a long-standing partner, invested in the physical and mental wellness of its students. Past initiatives have included heart rate monitoring in physical education classes. This school year, LMH is partnering to launch a text message campaign to provide mental health, substance use and other community resources directly to teens.

Lincoln Park District - As a pillar of health, wellness and community education, LMH looks forward to continuing its partnership with Lincoln Park District. Past collaborations have included fitness classes and access to the indoor track during inclement weather for walking programs. Future initiatives may include joint fitness and nutrition programs.

Lincoln Police Department - The Lincoln Police Department is one of the law enforcement agencies in Logan County. Recognizing that behavioral health crises are a common aspect of emergency response, the goal is to align law enforcement with mental health professionals to best care for our community.

Logan County Department of Public Health - Logan County Department of Public Health is an integral resource for community health, education and services in Logan County. LCDPH collaborates with LMH on the CHNA and CHIP, aligning our priorities to best serve the community together.

Memorial Behavioral Health - As a branch of Memorial Health, Memorial Behavioral Health offers valuable resources and services to Logan County, including behavioral services for children and adults, as well as mobile crisis response. With mental health as a priority, LMH's partnership with Memorial Behavioral Health will continue to strengthen as we work together to address this issue in Logan County.

United Way of Logan County - United Way has partnered with LMH in various capacities, providing crucial resources to Logan County. One key service they fund is 211, a direct phone line for accessing local resources. As LMH continues to address the needs of Logan County, our partnership with United Way enhances our ability to tackle the most pressing issues.

University of Illinois Extension - The University of Illinois Extension for Logan, Menard and Sangamon counties is a valuable resource for many of our planned future projects. LMH has partnered with them to offer cooking and nutrition classes at The LMH Market, story walks at the LMH Wellness Trail and The LMH Market and provide tools for nutrition and horticulture education, all of which support our priority of promoting healthy weights.

IMPACT OF 2021 CHNA AND THE FY22-24 CHIP

In 2021, Lincoln Memorial Hospital completed a previous Community Health Needs Assessment for Logan County. As an affiliate of Memorial Health, LMH worked with four other affiliate hospitals on the overall timeline and process for the CHNA but completed its Logan County assessment independently from those hospitals in collaboration with local community partners.

Lincoln Memorial Hospital collaborated with the Logan County Department of Public Health to complete the 2021 CHNA. Community health needs were prioritized based on reviews of secondary community data, as well as primary data gathered from a Community Advisory Committee (CAC), community focus groups and a community health survey that sought input from the community and those who are minoritized and underserved. Access to health, the social determinants of health and racial inequities and inequalities were considered in all parts of the process. The final priorities selected were youth mental health, obesity and substance use. MH Community Health leaders additionally agreed on a health system priority of Mental Health to be addressed in our Community Health Implementation Plans.

Recognizing that initiatives often address multiple priorities, the following broad goals were established:

Obesity - To reduce rates of overweight and obesity.

Substance Use - To provide substance use prevention activities, reduce substance use disorder, improve harm reduction efforts and increase opportunity for treatment and recovery.

Youth Mental Health - To encourage and increase protective factors and health behaviors that help prevent the onset of a diagnosable mental health disorder and reduce risk factors that can lead to the development of a mental disorder.

Mental Health (system priority) - To improve mental health in Christian, Logan, Macon, Morgan and Sangamon counties.

STRATEGIES WERE EMPLOYED AS FOLLOWS:

Trauma-Informed Care Trainings – Eight free trauma-informed care trainings were held for the communities throughout the Memorial Health service area, including one in-person class in Christian County. These were provided in partnership with Memorial Behavioral Health. Continuing education units were made available. In addition, we partnered with community-based organizations to promote 988 and other mental health services via posters, presentations, and promotional materials.

Youth Mental Health – Free trauma-informed care trainings were held throughout the Memorial Health service area. Trainings were held both in-person and virtually to increase access. LMH partnered with schools and other community-based organizations to promote 988, mobile crisis teams and other mental health services via posters, presentations and promotional materials. Additionally, a youth mental health coalition was created in partnership with Brightpoint. The coalition has participated in tabletop case studies to improve resource coordination and is developing a text messaging campaign to local teenagers to promote self-care, resiliency skills and resource awareness.

Obesity – The LMH Trailblazers program was established in FY22. An average of 44 walkers were observed weekly. The program evolved from informal gatherings to challenges taking place in fall 2023. More than 220 participants registered for the challenge, with more than 150 completing the challenge of 25 laps on the LMH Wellness Trail. A second challenge was held in May 2024, with 148 participants completing laps equaling 13 miles during the month. More than 100 participants completed the challenge and reported increased physical activity as a result of the challenge.

Lincoln Memorial Hospital earned a bronze designation as a Bicycle Friendly Business with the League of American Cyclists. The efforts leading to this designation included promoting cycling through bicycle rodeos, bike month activities and supporting local efforts including a mid-century ride and a bicycle grant submission in partnership with the City of Lincoln.

Substance Use and Youth Mental Health – LMH facilitated a coalition for youth mental health in partnership with Brightpoint and a coalition for substance use with Chestnut Health Systems. A parent resource guide for youth mental health and substance use prevention was developed and shared on school websites and social media to offer resources for parents.

LoganCountyResources.org was developed to promote awareness of resources which are difficult to navigate in a rural setting. In addition, LMH colleague education took place throughout FY22-24 to increase knowledge of local mental health, substance use disorder services and harm reduction opportunities to increase referrals and community awareness. Catch My Breath anti-vaping education was implemented at local schools, with 92 percent of the student participants reporting they were less likely to vape after completing the program.



Lincoln
Memorial
Hospital