

Morgan County—Illinois Community Health Needs Assessment



A Memorial Health System Affiliate

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This report was completed in September 2018 and posted online at
ChooseMemorial.org/MHS-Community-Needs-Assessment



A Memorial Health System Affiliate

Executive Summary

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

As an affiliate of Memorial Health System (MHS), Passavant Area Hospital (PAH) worked with three other affiliate hospitals on the overall timeline and process steps for the CHNA, but completed its Morgan 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

PAH collaborated with the Morgan County Health Department. Community health needs were prioritized based on reviews of secondary community data, as well as primary data gathered by a Community Advisory Committee comprised of 15 representatives from community organizations. Social determinants of health were included in all data reviews. A community health survey was conducted for Morgan 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 issues and which community organizations were best situated to address the issues. PAH then convened an Internal Advisory Committee, which approved the final priorities selected by PAH. These are:

1. Access to Care
2. Mental Health
3. Substance Abuse

The Passavant Area 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 PAH community benefit department at 217-479-5800.

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



mission

our mission:
to improve the health of **the people**
and communities **we serve.**

vision

our vision:
to be a national **leader for**
excellence in **patient care.**

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 Passavant Area Hospital

As a nonprofit community hospital, Passavant Area Hospital (PAH) has been providing healthcare services to the residents of Morgan, Cass, Greene, Scott, Brown, Pike and Macoupin counties in west central Illinois since 1875. Passavant, a 131-bed nonprofit community hospital, is staffed by 1,000 full- and part-time employees and an active medical staff of 70 physicians. Not only is Passavant the largest employer in Morgan County, providing jobs and dollars that directly impact our local economy, it also provides additional community benefits through capital improvement projects and support of other local nonprofit organizations, all working together for the good of the community. Community benefits total \$43.5 million for the fiscal years 2015, 2016 and 2017.

PASSAVANT AREA HOSPITAL COMMUNITY BENEFIT

	FY2015	FY2016	FY2017
Patient Financial Assistance	\$1 million	\$1.2 million	\$1.7 million
Unpaid Medicaid	\$9 million	\$10.3 million	\$9.5 million
Other Community Programs	\$2.7 million	\$3.7 million	\$4.4 million
TOTAL COMMUNITY BENEFIT	\$12.7 million	\$15.2 million	\$15.6 million

In April 2014, PAH became an affiliate of Memorial Health System of Springfield, Illinois. PAH is a Magnet® Hospital as recognized by the American Nurses Credentialing Center. The hospital is accredited by the Joint Commission and is a member of the Illinois Hospital Association and Vizient. Passavant is designated an Acute Stroke Ready Hospital by Illinois Department of Public Health. It also is a Region III-SANE Hospital (Sexual Assault Nurse Educator). Passavant offers the following services:

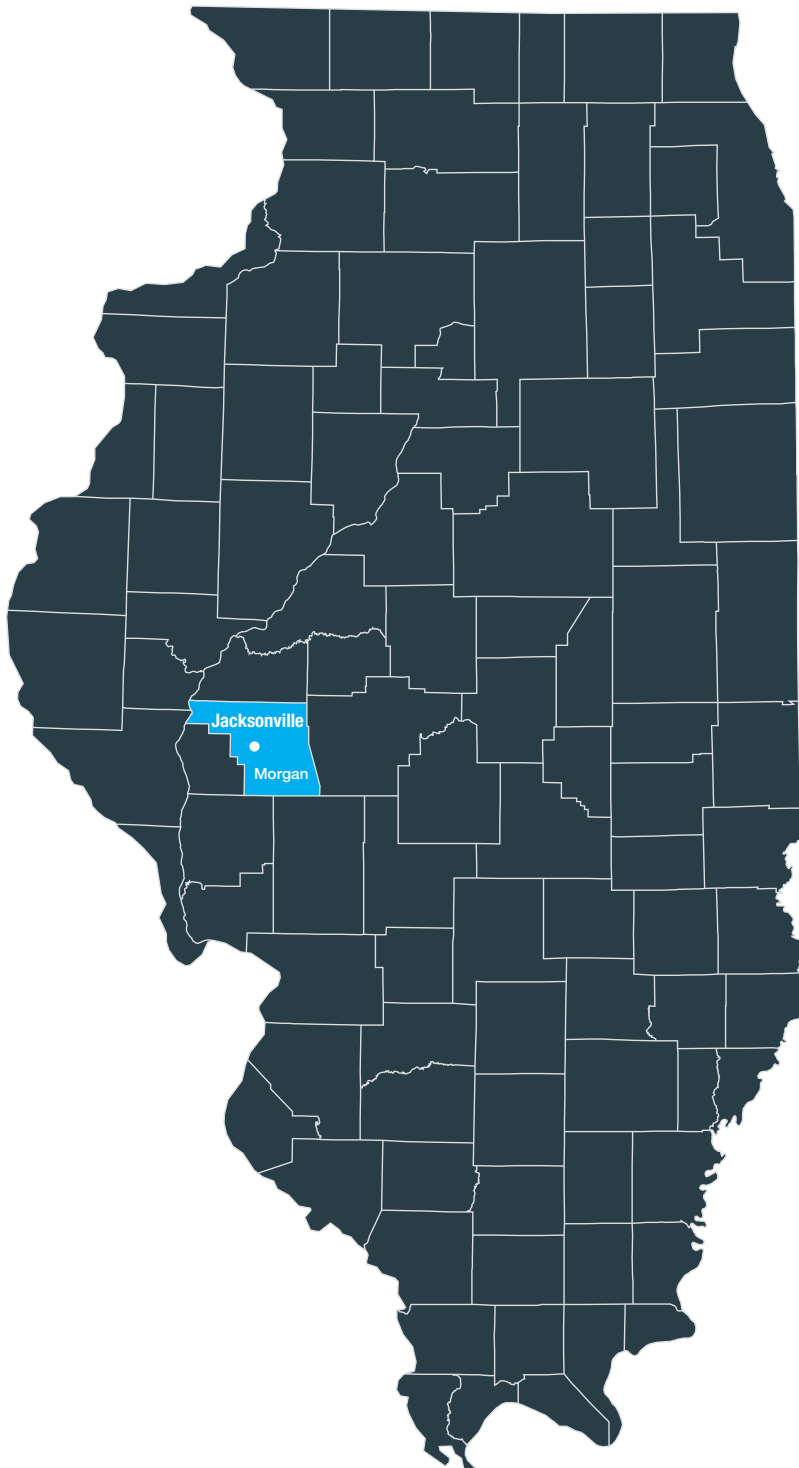
- ▶ Behavioral Health Unit
- ▶ Center for Psychiatric Health
- ▶ Cardiopulmonary Services
- ▶ Diabetes Services
- ▶ Emergency Department
- ▶ Family Maternity Suites

- ▶ Heart Failure Clinic
- ▶ Hospitalist Program
- ▶ Inpatient Dialysis
- ▶ Intensive Care Unit
- ▶ Lab Services
- ▶ Lifeline
- ▶ Medical Imaging Services
- ▶ Oncology Services
- ▶ Orthopedic Services
- ▶ Pain Management Clinic
- ▶ Radiation Oncology
- ▶ Rehab Services
- ▶ Sleep Clinic
- ▶ Specialty Provider Clinic
- ▶ Surgical Services
- ▶ Telehealth
- ▶ Transitional Care Unit
- ▶ Weight Loss & Wellness Center
- ▶ Wound Healing Center
- ▶ Women's Health Center

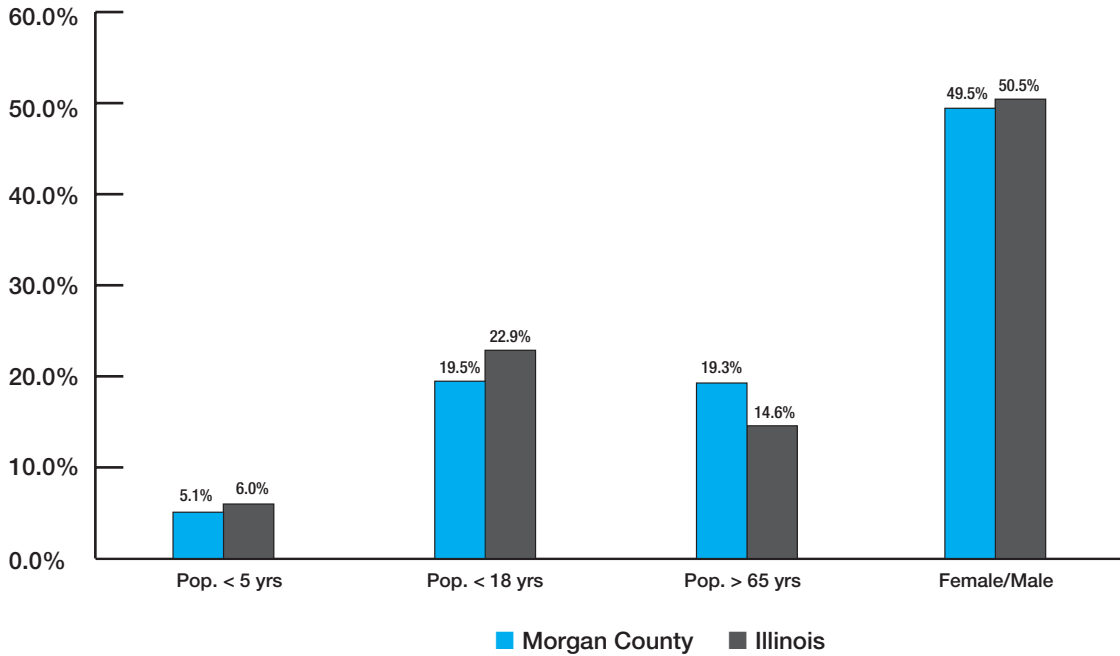
In FY17, Passavant Area Hospital provided the following care to the community:

- ▶ Patient Days of Care: 13,323
- ▶ Discharges: 3,782
- ▶ Outpatient Visits: 80,826

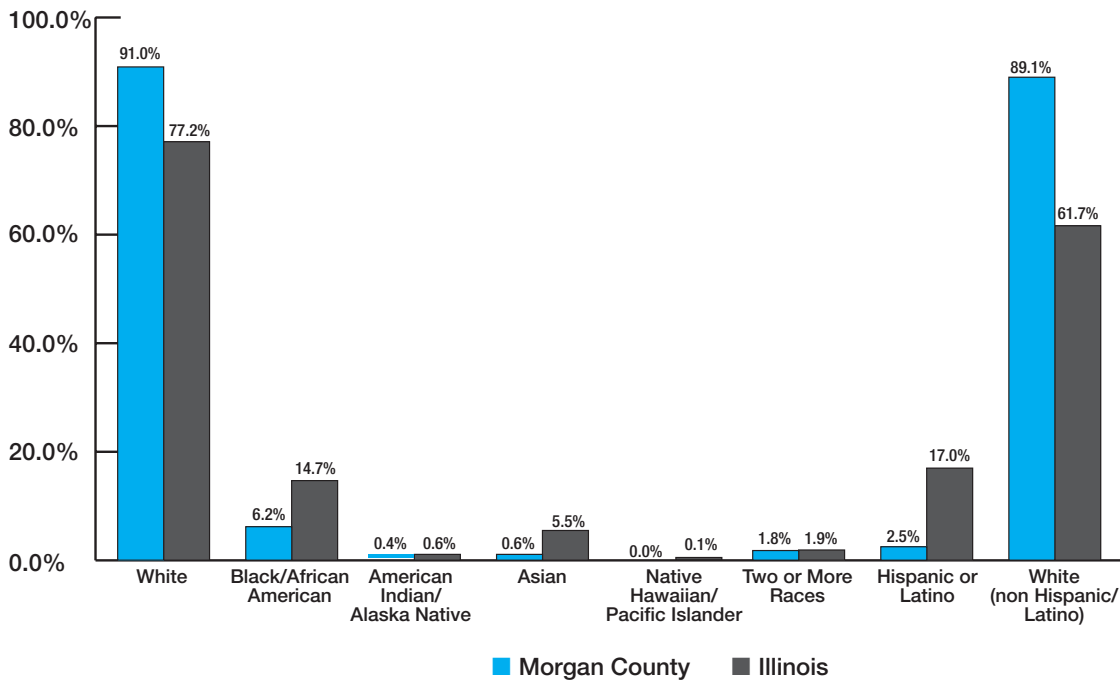
Introduction to Morgan County, Illinois



MORGAN COUNTY: POPULATION BY AGE AND GENDER



MORGAN COUNTY: RACE AND HISPANIC ORIGIN

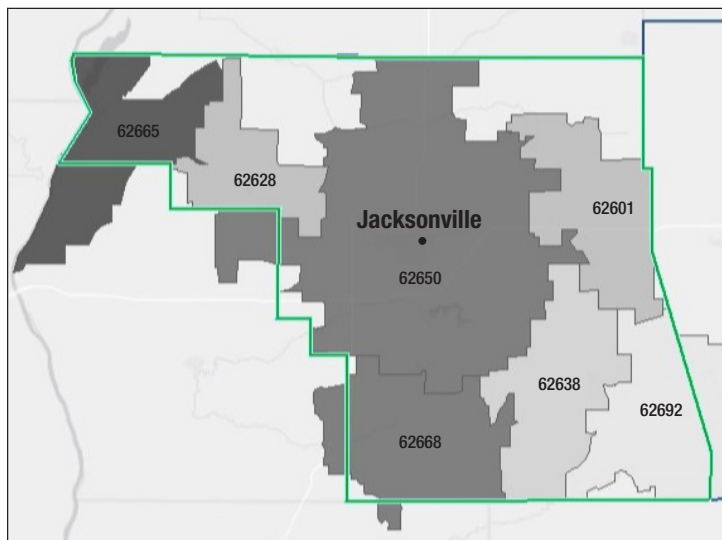


Passavant is located in Jacksonville, a community of 18,729 located 30 miles west of Springfield, Illinois. Jacksonville is the county seat of Morgan County and is a largely agricultural community. Corn and soybeans are the major agricultural products. Jacksonville is also home to the Illinois School for the Deaf and the Illinois School for the Visually Impaired, as well as two private liberal arts colleges, a community college and several industrial factories.

In 2016, the estimated population of Morgan County was 34,277. Race and ethnic breakouts are 91 percent white, 6.2 percent black, 2.4 percent Latino or Hispanic, 0.4 percent American Indian and Alaska Native, 0.6 percent Asian and 1.8 percent are two or more races. In Morgan County, 2.9 percent of the population speaks a language other than English at home. Age groups within the population include 19.5 percent under the age of 18 and 19.3 percent over age 65, while 49.5 percent of the population is female, and 50.5 percent is male. High school graduates make up 90.6 percent of the population (2.7 percent higher than the Illinois average), and 22.3 percent hold bachelor’s degrees. There are 2,997 United States veterans living in Morgan County.

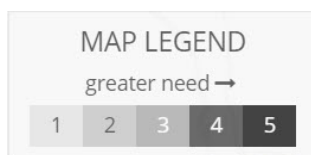
The median household income in Morgan County is \$47,760. Data shows that 14.8 percent of people live below the poverty line (1 percent higher than the Illinois average of 14 percent). Rural residents account for 36 percent of the county’s population.

Areas of Morgan County with High Socioeconomic Need



Zip Code	Index	Rank	City
62665	68.8	5	Meredosia
62650	55.0	4	Jacksonville
62668	51.1	4	Murrayville
62628	45.3	3	Chapin
62601	45.2	3	Alexander
62638	43.3	2	Franklin
62692	32.5	1	Waverly

Source: Healthy Communities Institute. Retrieved Aug. 8, 2018. Retrieved from <https://www.choosememorial.org/Community-Health-Needs-Assessment/HCI?hcn=ocioneds>



The 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 Morgan County, the selected locations are ranked from 1 (low need) to 5 (high need) based on their Index Value.

In Morgan County, the zip codes estimated with the highest socioeconomic need are 62650, 62665 and 62668, which include the communities of Meredosia, Murrayville, Jacksonville and Waverly. Residents living in these areas of the county are at greater risk of being hospitalized for preventable illness or premature death. Chapin, Franklin and Alexander rank lowest, with less socioeconomic need and better health outcomes than other areas of Morgan County.

Other Healthcare Resources in Morgan County

Morgan County has a number of healthcare resources, including the Morgan County Health Department; two federally qualified health centers, SIU Center for Family Medicine and Central Counties Health Center; Memorial Behavioral Health; Memorial Home Services, which includes home health, hospice and medical equipment; Memorial Physician Services; SIU Medicine; Springfield Clinic (prompt care and physician offices); Orthopedic Centers of Illinois; and HSHS Medical Group.

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

The primary chronic diseases and health issues in zip codes 62650, 62665, 62668 and 62692, which are ranked as the areas of highest socioeconomic need in Morgan County, include pediatric mental health, which was ranked highest in three of the four zip codes. Diabetes, while not as high in incidence, still has higher-than-average occurrence compared to other Illinois counties. Adult and pediatric asthma, along with COPD, have higher-than-average levels of incidence in zip code 62665, a community which is largely rural and sits on the banks of the Illinois River. Heart failure ranks higher than other Illinois counties in two of the four zip codes.

Evaluation of Progress Since the 2015 Community Health Needs Assessment

Priority Topics of 2015 Community Health Needs Assessment

Passavant Area Hospital conducted the Community Health Needs Assessment (CHNA) in 2015. Passavant partnered on the assessment with officials from the Morgan County Health Department, Morgan County Probation, local law enforcement, substance abuse counselors, college health officials, high school administrators, school nurses, teens and our own hospital personnel, as well as 12 community organizations. Priorities selected by Passavant Area Hospital were:

- ▶ Mental Health
- ▶ Obesity
- ▶ Access to Care

The implementation strategy developed for FY2016 was updated annually in FY2017 and FY2018, and approved by the Community Benefit Committee of the Memorial Health System board as well as 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. The reports are also online at ChooseMemorial.org/HealthyCommunities.

Access to Care

To address access to care and mental health, Passant Area Hospital completed a \$6 million, inpatient behavioral health unit in 2016. The addition provided 10 beds in a dedicated space to provide around-the-clock medical care for patients.

Access to care was also addressed through financial support for the Walk-In Sexually Transmitted Disease program at the Morgan County Health Department. Without Passavant's financial support, the clinic would not be able to offer these services. Access to care was further addressed in partnership with the Morgan County Health Department and SIU Medicine to open the Center for Family Medicine, a new federally qualified health center in Jacksonville.

Mental Health

To address the priority of mental health, the four MHS hospitals (Memorial Medical Center, Abraham Lincoln Memorial Hospital, Passavant Area Hospital and Taylorville Memorial Hospital) offered Mental Health First Aid training for community members in Sangamon, Logan, Morgan and Christian counties. A total of 1227 people in central Illinois have been trained in Mental Health First Aid through Memorial Health System-sponsored events from Sept. 2016 through June 2018.

Obesity

Obesity was addressed through the adoption of Memorial Weight Loss & Wellness Center at Passavant. In its first year, 87 new patients were enrolled. Medical weight-loss patients have lost an average of 8 percent of their total body weight within 12 months. Passavant also led a healthy lifestyles program with fifth-grade students using the evidence-based 5210 curriculum. Passavant also coordinated the Walking for Wellness program with local partners Jacksonville School District 117 and the First Christian Church to provide safe, dry and comfortable places to walk throughout the year. The final strategy addressing obesity was financial support of the Girls on the Run program.

Two of these priorities, access to care and mental health, have again been identified as priorities in the 2018 CHNA, and the implementation strategy for FY2019-FY2021 will build upon work begun in FY2016-FY2018.

Community Feedback Regarding the 2015 CHNA and Implementation Strategy

Passavant Area Hospital made the 2015 CHNA report available on its website at ChooseMemorial.org/HealthyCommunities. The collaborative CHNA process received broad approval from community members, hospital board members and the media. No direct written feedback was received, other than several articles in the newspaper commending the collaboration. The programs have received good verbal feedback from the community, as patients have shown appreciation for their access to additional services.

Surveys from walkers in the Walking for Wellness program show an overwhelming satisfaction with the program and requests for times to be extended. They also state that the program improves their quality of life and improves their overall health.

For the Girls on the Run program, 89 percent of families reported that the program or 5K event positively affected their girl and/or their family's attitude toward exercise.

Methodology

2018 Morgan County Community Health Needs Assessment

Passavant Area Hospital and the Morgan County Health Department (MCHD) formed a partnership to conduct a comprehensive 2018 community health needs assessment. Passavant used the study to develop implementation strategies for FY2019-FY2021. The Morgan County Health Department completed their Illinois Project for Local Assessment of Needs with results of the study. Both entities worked collaboratively with social service agencies in the county to develop a comprehensive plan for addressing community health needs identified in the study.

TIMELINE FOR THE 2018 MORGAN COUNTY COMMUNITY HEALTH NEED ASSESSMENT

Timeline	Activity	Outcomes
May 2017	<ul style="list-style-type: none"> PAH and MCHD meet 	<ul style="list-style-type: none"> Discuss CHNA partnership and define core group
May-July 2017	<ul style="list-style-type: none"> Investigate and collect available data sources for Morgan County ID whom to invite to participate in Community Advisory Council 	<ul style="list-style-type: none"> PAH and MCHD identify data resources in addition to Healthy Communities on PAH website
Sept. 2017	<ul style="list-style-type: none"> PAH project leaders meet with MCHD to review statistical data and to map the process for execution of the study 	<ul style="list-style-type: none"> ID significant health issues for Morgan County Narrow down priorities to present to Community Advisory Committee ID a detailed plan for completing the CHNA community survey, including preparation and communication plan
Oct. 2017	<ul style="list-style-type: none"> Convene Core Advisory to review secondary data 	<ul style="list-style-type: none"> The Core Group met in October to develop a common list of the top six community needs

Nov. 2017	<ul style="list-style-type: none"> ▪ Convene first Community Advisory Committee to review CHNA process ▪ Obtain primary data/input from Community Advisory Committee on health needs 	<ul style="list-style-type: none"> ▪ Obtain Committee understanding/support of the CHNA process ▪ Gain input from members to further understand priority health issues
Nov.-Dec. 2017	<ul style="list-style-type: none"> ▪ Convene second Community Advisory Committee early November; obtain primary data ▪ Finalize survey questions 	<ul style="list-style-type: none"> ▪ Get Advisory Committee input into health priorities to include in the community survey; obtain their support to help promote the survey ▪ With UIS, finalize survey tool ▪ Using the communication plan, begin promotion of upcoming community survey
Jan. 2018	<ul style="list-style-type: none"> ▪ Conduct community survey ▪ UIS analysis 	<ul style="list-style-type: none"> ▪ Obtain outcomes from survey ▪ Core Team reviews
Feb.-March 2018	<ul style="list-style-type: none"> ▪ Convene Community Advisory Committee to share outcomes of community survey ▪ PAH, MCHD identify final priorities 	<ul style="list-style-type: none"> ▪ Hospitals and health department will identify priorities ▪ Determine joint priority/collaborative
April-May 2018	<ul style="list-style-type: none"> ▪ With UIS, conduct focus groups around key priorities 	<ul style="list-style-type: none"> ▪ Increase understanding of issues and identify implementation strategies
Aug. 2018	<ul style="list-style-type: none"> ▪ PAH presents to PAH Board process outcomes and priorities 	<ul style="list-style-type: none"> ▪ PAH Board approves
Sept. 2018	<ul style="list-style-type: none"> ▪ PAH presents to MHS Community Benefit Committee the 2018 CHNA report on process/outcomes/priorities 	<ul style="list-style-type: none"> ▪ MHS Board approves ▪ Post CHNA report on website
Sept. 2018	<ul style="list-style-type: none"> ▪ MCHD completes IPLAN report for Morgan County 	<ul style="list-style-type: none"> ▪ Submit to Illinois Department of Public Health for approval

Nov. 2018	<ul style="list-style-type: none"> PAH finalizes CHNA implementation strategy for FY2019-2021 	<ul style="list-style-type: none"> PAH Board approves Post implementation strategy on PAH website
Dec. 2018	<ul style="list-style-type: none"> Public announcement of Morgan County Community Health Needs Assessment outcomes 	<ul style="list-style-type: none"> Make information widely available to the public

Morgan County Community Health Needs Assessment Core Team Members

PASSAVANT AREA HOSPITAL

- ▶ Harry Schmidt, President and CEO
- ▶ Leanna Wynn, Affiliate Vice President and CNO
- ▶ Christina Rollins, Affiliate Vice President, Operations, Quality and Safety
- ▶ Paul Eddington, Chief Financial Officer
- ▶ Robert Ellison, Director of Business Development and Community Engagement
- ▶ Lori Hartz, Director of Community Relations
- ▶ Jessica Ford, Director of Clinical Services
- ▶ Michelle Keefer, Patient Experience Manager
- ▶ Jerrod Wilson, Nurse Manager, ED
- ▶ Sarah Karraker, Supervisor of Social Services and Case Coordination

MORGAN COUNTY HEALTH DEPARTMENT

- ▶ Dale Bainter, Administrator
- ▶ Linda Evans, Director of Nursing
- ▶ Meredith Vogel-Thomas, Office Manager
- ▶ Jacquie Barringer, Communicable Disease Coordinator
- ▶ Pat Simmons, Case Manager

Review of Secondary Data Sources and Analysis

Core Team members Lori Hartz and Robert Ellison (PAH) and Dale Bainter (MCHD) met on the following dates to review available secondary data pertaining to Morgan County: July 13, 2017;

Aug. 8, 2017 and Sept. 13, 2017.

Numerous secondary data sources were consulted. These included:

1. Conduent Healthy Communities Institute data on Memorial website: health & socioeconomic indicators specific to Morgan County ChooseMemorial.org/HealthyCommunities
2. Morgan County Community Survey
3. County Health Rankings
4. Illinois Hospital Association
5. National Center for HIV Aids Viral Hepatitis
6. STD and TB Prevention
7. Centers for Disease Control
8. National Cancer Institute
9. Healthy People 2020
10. Community Commons

See Appendices page 39 for more information on the secondary data sources consulted.

Conduent Healthy Communities Institute Data

The most significant source of secondary data was collected and analyzed through ChooseMemorial.org/HealthyCommunities, a web-based community health data platform developed by Conduent Healthy Communities Institute and sponsored by Memorial Health System. The site brings non-biased data and reporting tools to one accessible, user-friendly location. The site includes a comprehensive dashboard of more than 100 community indicators covering more than 20 topics in the areas of health, determinants of health and quality of life. That data is primarily derived from state and national public secondary data sources. Specific Morgan County indicators are compared to other communities, state-wide data, national measures and Healthy People 2020. Many indicators also track change over time or identify disparities.

During the 2018 CHNA, Healthy Communities Institutes data scoring tool for Morgan County Indicators was used to summarize and compare multiple indicators across the community dashboard and to rank these indicators based on highest need. Comparison scores ranged from 0 (best) to 3 (worst). These indicators were grouped into various topic areas. In July and August 2017, members of the CHNA Core Team carefully reviewed all indicators ranked 1.5 or higher, and additionally noted disparities in specific indicators and changes over time to identify community health needs.

Method for Analysis

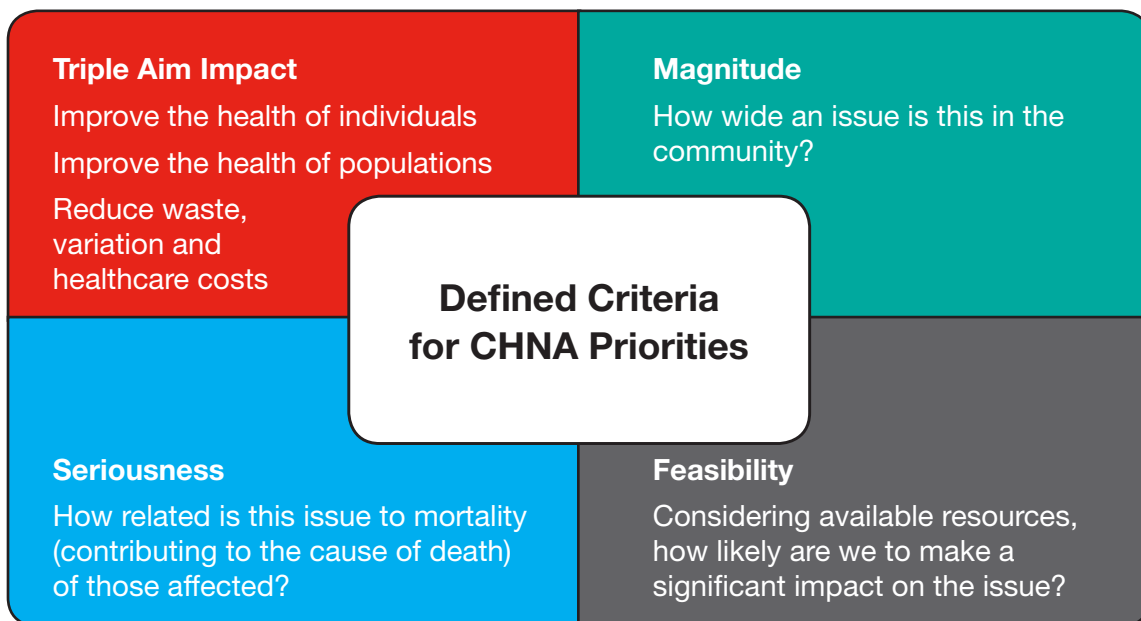
Indicators were analyzed on the following criteria:

- ▶ Is the indicator in the red?
- ▶ Is it failing to meet the national HP2020 or local target?
- ▶ Is it trending in the wrong direction?
- ▶ Is there an apparent disparity?

If the answer to any of these questions was “yes,” the indicator was identified as a need. Once indicators were identified, they were grouped and examined by topic area. These topic areas were identified as community needs.

Criteria for Determining Need

The following criteria were successfully used during the 2015 CHNA process for determining significant need, and were used again during the 2018 CHNA.



Passavant Care Team met to review data and begin developing a priority list. In addition to the primary research, additional needs were identified based on anecdotal opinions from the group. Access to care is limited in three areas of specialty care.

- ▶ **Psychiatry:** Since the opening of the Passavant inpatient psychiatric unit in 2016, higher demand has become more evident. Expanded services are available at Memorial Behavioral Health and the Passavant Center for Psychiatric Medicine. However, additional access is in high demand.
- ▶ **Substance Abuse (Medical Detox):** The Wells Center closed in 2017, leaving a gap in substance abuse services. No inpatient detox services are available in Morgan County at this time. This has also put strain on the behavioral health network, since substance abuse and mental health are related.
- ▶ **Cancer care** needs are overflowing available capacity. Passavant opened the Center for Radiation Oncology in 2017 and has been operating at near capacity. Additional access is needed in infusion services.

The Core Team reviewed the Healthy Communities Institute Data Scoring Tool and discussed each need that scored 1.5 or higher, and also included a review of any disparities noted for those issues. They then discussed all the issues on the basis of Triple Aim, magnitude, seriousness and feasibility. They identified five categories of need to investigate further.

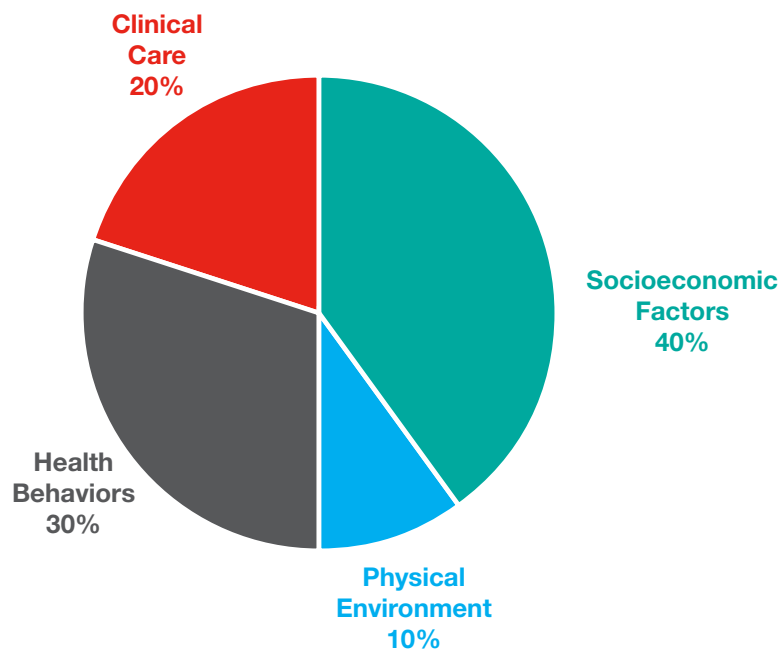
1. Sexually transmitted infections
 - a. Chlamydia and gonorrhea
2. Smoking and substance abuse
 - a. Low birth weight and preterm births
 - b. Cancer
 - c. Heart failure
 - d. Asthma
3. Access to care
 - a. Primary and specialty care
 - b. Substance abuse
4. Mental health
 - a. Substance abuse
 - b. Depression
 - c. Cancer
5. Obesity
 - a. Asthma
 - b. Kidney disease
 - c. Diabetes
 - d. Heart failure
 - e. Preterm births

Social Determinants of Health

Evaluation of the research included a discussion about common themes and root causes of health conditions. Many of the health conditions can be linked to social issues. For example, diabetes, heart failure, hypertension and asthma can all be linked to obesity. Cancer, low birth weight in infants and asthma can be linked to smoking. Kidney and urinary infections, depression and mental illness can all be linked to substance abuse.

Consideration of the impact of social determinants of health were taken into account during the data review process for Morgan County. Throughout the CHNA, the following information from County Health Rankings was used when considering the impacts of clinical care vs. other social determinants factors.

WHAT IMPACTS INDIVIDUAL AND COMMUNITY HEALTH



In November 2017, the Passavant Advisory Group met with the Advisory Group from Morgan County Health Department to review data and combine thoughts on unmet needs in the community. The groups reviewed the data from the Healthy Communities Institute Community Dashboard along with the County Health Rankings. The County Health Ranking data divides community health issues into two broad categories: health outcomes (length of life and quality of life) and health factors (health behaviors, clinical care, social and economic factors and physical environment).

The categories are weighted based on their impact on community health. Health behaviors, weighted 30 percent, includes tobacco use, diet and exercise; alcohol and drug use; and sexual activity. Clinical care, weighted 20 percent, includes access to care and quality of care. Social and economic factors, weighted at 40 percent, includes education, employment, income, family and social support and community safety. Physical environment, weighted 10 percent, includes air and water quality and housing and transit. The model suggests that by addressing identified health factors, overall health outcomes will be improved.

This model helps stakeholders evaluate how the areas of control span the entire community and how factors that seem unrelated to health outcomes actually do have an effect on community health.

The group looked further into the data to start to see how priorities might be given to items that have more weight (healthy behaviors and social and economic factors) and thus can have a greater impact on community health.

Other areas identified by MCHD to be considered for further study are:

- Early sexual health
- Pediatric care
- Identifying the community that needs care
- Convenient hours
- Wait lists
- Availability to the community
- Hip fractures in the elderly and vitamin D deficiencies
- Health and cancer (HPV and oral cancers)
- Metabolic syndrome
- Increase in tuberculosis cases in the county

The group then developed the list of stakeholders that should be invited to participate in the needs identification forum. In addition to the original list that was developed by the Passavant Advisory Group, the MCHD staff identified the following representatives that should be included: Central Counties Health Center, faith-based organizations, Morgan County Probation, Jacksonville Fire Department, rural community representatives, long-term care, teachers from elementary schools and the homeless community. This group was named the Community Advisory Committee.

Further discussion was held about the format of the Community Advisory Committee meetings.

Primary Data Collection and Analysis

Community Advisory Committee

Primary data was gathered by convening a Community Advisory Committee made up of representatives from organizations that serve low-income, minority and at-risk populations in Morgan County.

CHARTER: The Advisory Committee of the Morgan County 2018 Community Health Needs Assessment exists to help Passavant Area Hospital and the Morgan County Health Department review existing data and offer insights into community issues affecting that data. The Committee will help identify local community assets and gaps in the priority areas, and will offer advice on which issues are the highest priority.

Fifteen organizations participated on the Community Advisory Committee.

Organization	Organization Description	Organization Serves
Jacksonville School District 117/Early Years	Public preschool, primary, middle school and high school	Children ages 3-18
Prairie Council on Aging	Prairie Council on Aging provides services to persons 60 and over, with emphasis on those persons who have greatest social need or greatest economic need, to help them stay in their homes.	Seniors 60 and older
SIU Center for Family Medicine	Federally qualified health center which provides the underserved access to primary medical care, healthcare for the homeless and a low-cost pharmacy program.	Underserved and uninsured
Memorial Behavioral Health	Offering a wide range of mental health services to children, adolescents and adults with mental health challenges.	All ages, under and uninsured

Central Counties Health Center	Federally qualified health center which provides the underserved access to primary medical care, general dentistry, healthcare for the homeless and a low-cost pharmacy program.	Underserved regardless of ability to pay
Jacksonville Police Department	The JPD serves to prevent and detect crime, protect life and property and to achieve a peaceful community free from the fear of crime and disorder.	Citizens in city of Jacksonville
Morgan County Sheriff	Provides all statutory services required by the State of Illinois and the County of Morgan and protects citizens from harm.	Citizens in Morgan County
Morgan County Probation	Strives to ensure public safety through the reduction of recidivism by enforcing court orders and rehabilitating clients.	Citizens in Morgan County who have encountered the judicial system
Morgan County Emergency Services	Provide information on emergency management, preparedness, medical response, public safety, fire prevention and medical treatment.	Citizens in Morgan County
Salvation Army	Assists with education, the relief of poverty and other charitable objects beneficial to society or the community.	At-risk populations in Morgan County
Illinois Department of Human Services	The code department of the Illinois state government responsible for providing a wide variety of safety net services to Illinois residents in poverty, who are facing other economic challenges or who have any of a variety of disabilities or health challenges.	At-risk populations in Illinois

Midwest Youth Services	Our mission is to deter youth from the juvenile justice and child welfare systems while strengthening families.	At-risk, runaway and homeless youth, ages 9-18
Elm City Center	Providing work, vocational, residential and social services to people with disabilities.	Citizens in Morgan County with disabilities
Locust Street Resource Center	A not-for-profit comprehensive behavioral health center providing a wide range of services in multiple counties in central Illinois.	People needing behavioral health services
Home Instead Senior Care	Personalized senior care in the comfort of home.	Seniors

November 2017 — Two Community Advisory meetings were held. The format of the meetings included a short introduction of the study, a summary of the outcomes from the 2015 study and an explanation of the 2018 process. This was followed by an engaging session in which attendees were asked to identify three of the county’s highest unmet needs. The exercise gave us a comprehensive snapshot of the needs in our community according to our service providers. These results were combined and categorized according to the County Health Ranking Model into four categories: health behaviors, clinical care, social and economic factors and physical environment.

The Community Advisory was reconvened to review health factors and start to prioritize them based on their collective opinions of the greatest need. The group was asked to identify a top-down list of the five highest-need priorities. They identified youth services, mental health, drug/alcohol treatment, STDs/early sexual health and obesity. Common themes were access to care, information and affordability.

The Core Advisory then reviewed data derived from task force meetings, and finalized questions for the community survey.

Morgan County Community Survey—Jan. 12–Feb. 12, 2018

Memorial Health System contracted with the University of Illinois at Springfield Survey Research Department to conduct the Morgan County Community Health Needs Assessment Survey. The survey took place online. Because everyone does not have computer access, paper copies of the survey were made available to various community organizations and were also available at the Morgan County Health Department.

The communications teams from Memorial Health System and Passavant Area Hospital worked together to create a communication plan and promote the survey. The survey was promoted through press releases to all media outlets throughout the county, as well as email and personal contacts with a wide range of community and social service organizations. The Jacksonville Journal Courier newspaper had a feature story on the survey, which encouraged community members to participate. Interviews were conducted by local television and radio stations, as well as public service announcements on the radio. Promotion was also included on hospital social media outreach, as well as internal communications for employees of the hospitals and health department.

We want **YOUR feedback.**

Participate in the 2018 Morgan County
Community Health Needs Assessment

The survey can be found at
go.uis.edu/chna
Jan. 12–Feb. 12, 2018

Printed surveys are available at the Morgan County Health Department.

For more information,
please call 217-479-5800.

Participants will help identify priority
health issues in our community.

Passavant
AREA HOSPITAL
A Memorial Health System Affiliate

Public Health

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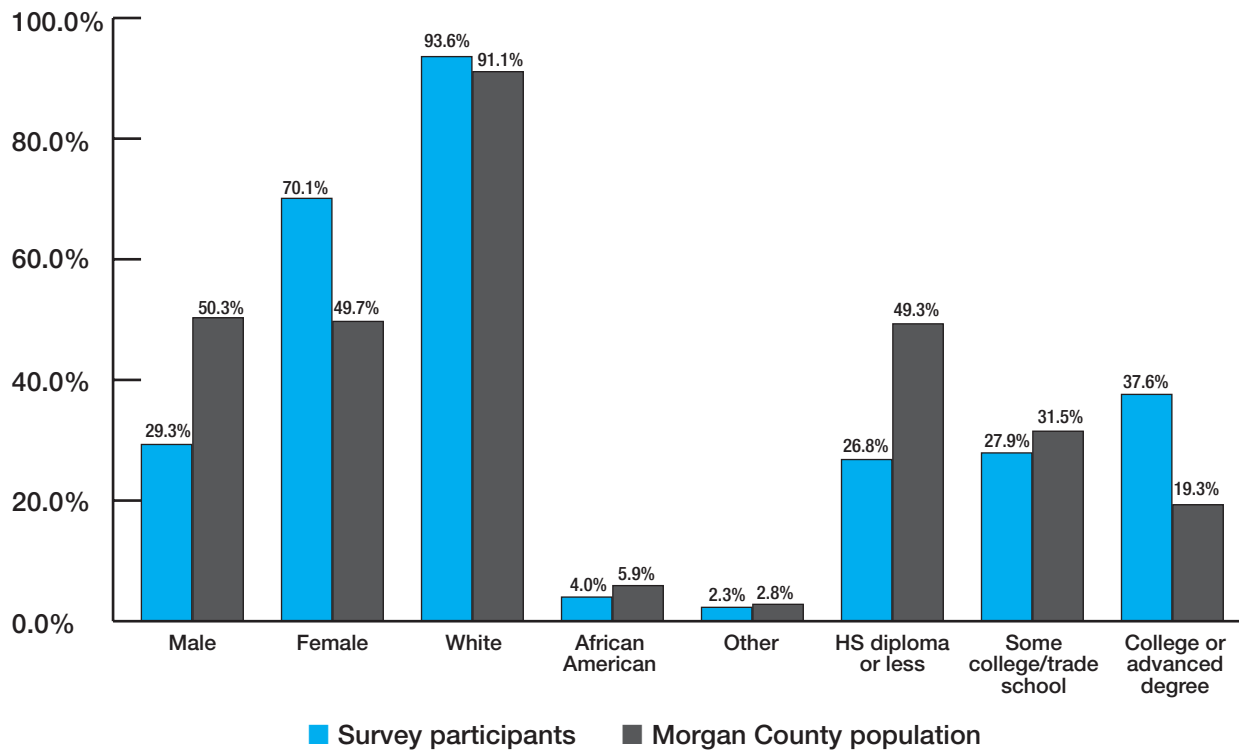
Survey Results

Overall, 707 individuals completed the survey: 378 printed surveys were returned to the SRO, and 329 individuals completed the survey online. The survey was available to Morgan County community members from Jan. 11 to Feb. 12, 2018.

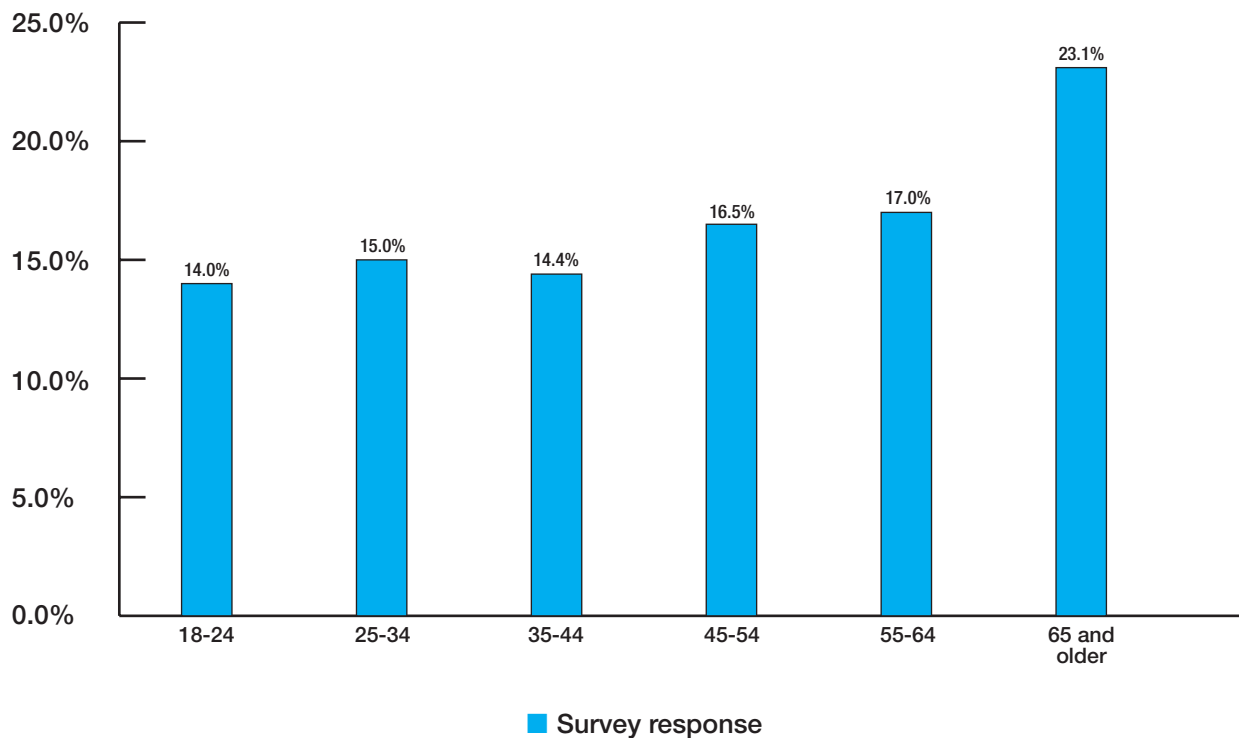
Surveys were submitted from throughout the county. The city of Jacksonville had 522 completed surveys; of note, 59 were submitted from zip codes 62665, 62668 and 62692, which are the areas of Morgan County ranked with highest need on the socio-needs index. There were 185 surveys submitted by residents living outside of Jacksonville.

See Appendices page 45 for a copy of the survey and the topline report from UIS Survey Research.

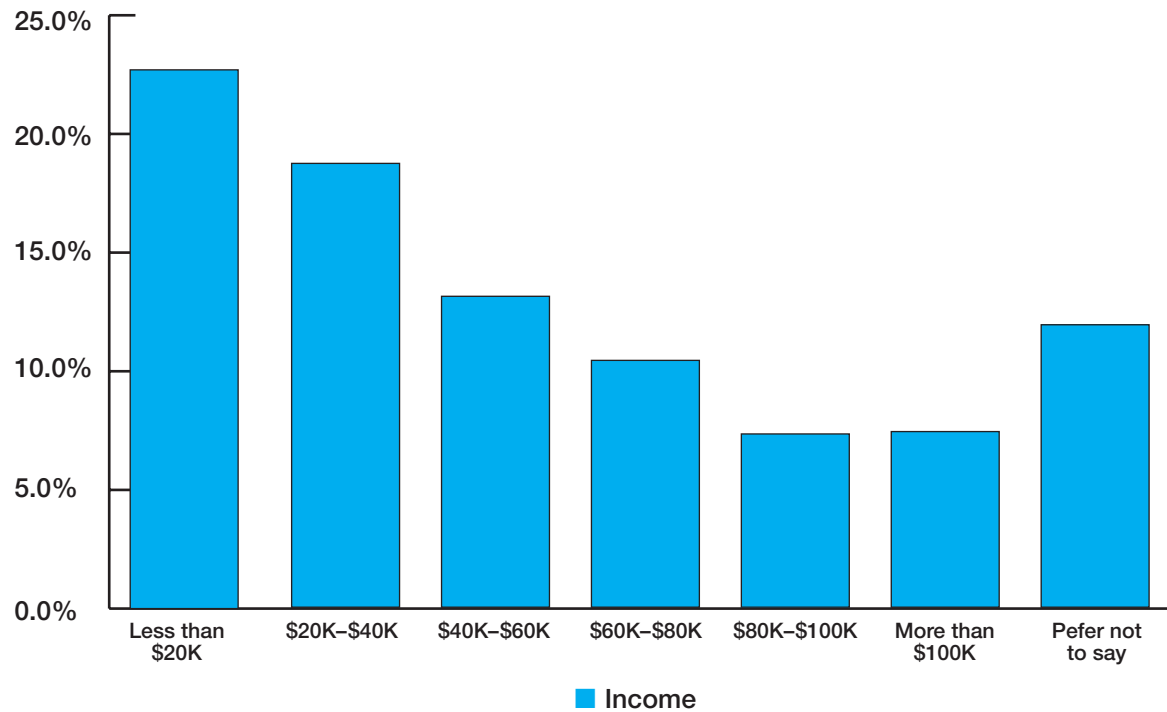
FIGURE 1: SURVEY SAMPLE COMPARED TO POPULATION



AGES OF PARTICIPANTS

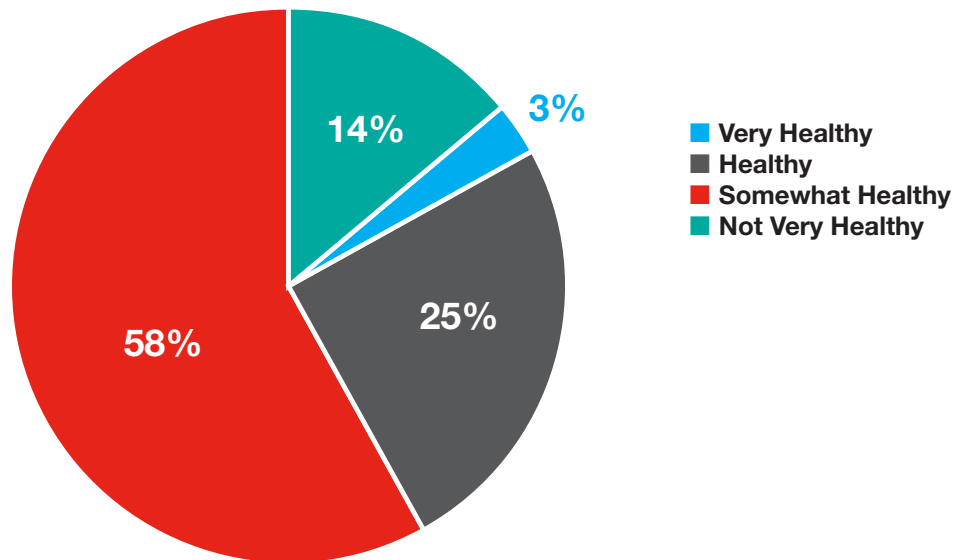


INCOME



Note: Median family income for Morgan County is \$45,978.

HOW WOULD YOU RATE THE HEALTH OF MORGAN COUNTY?



OVERALL PRIORITY RANKING – ALL RESPONDENTS

Top Health Priorities	Percentage Ranking in Top 5
Substance abuse	63.4%
Mental health	60%
Obesity	32%
STD/STI	14.7%
Service to non-English speaking adults	7.3%

A list of obstacles were given and respondents were asked to check all of the factors they feel make it difficult to receive medical care.

Obstacles to Medical Care	Percentage Ranking in Top 5
No insurance/underinsured	17.6%
Unable to pay copay/deductibles	18.3%
No doctor or provider available	9.7%
No alternative schedule available (i.e., evening/Saturday)	12.5%
Language barrier	6.3%
Other	5.7%

During community advisory meetings, the issue of services for youth surfaced repeatedly. We added a question specifically related to youth services to the survey. Respondents were given a list of issues and asked to identify the issues they felt were health problems for the youth of Morgan County.

Adolescent Health Problems	Percentage
Obesity	17.8%
Mental health	17.6%
Alcohol abuse	18.3%
Tobacco use	9.7%
Drug abuse	12.3%
STDs/STIs	12.5%
Unplanned pregnancy	6.3%
Other	5.7%

Highlights from the Survey Comments

The following chart categorizes Morgan County survey comments into the County Health Ranking Model. The top row represents indicators by category as defined by the model; the bottom row represents Morgan County’s comments by category.

30%	20%	40%	10%
Health Behaviors	Clinical Care	Social and Economic Factors	Physical Environment
<ul style="list-style-type: none"> • Drug/Alcohol Treatment • STDs/Early Sexual Health • Obesity 	<ul style="list-style-type: none"> • Access to Care • Quality of Care 	<ul style="list-style-type: none"> • Education • Employment • Income • Family and Social Support • Community Safety 	<ul style="list-style-type: none"> • Air and Water Quality • Housing and Transit
Barriers			
<ul style="list-style-type: none"> • Substance abuse • Obesity • STD’s • Unplanned pregnancy • Tobacco use • Drug use 	<ul style="list-style-type: none"> • Mental health • Services to non-English speaking adults • No doctor available • Lack of timely appt. available • Lack of reliable care • Need more prompt care • Need more walk-in clinics • No local residential drug program • Prompt care won’t accept medical card unless you are established • Local health dept/FQHC doesn’t have hours suitable for community • Lack of specialists • Wait time is too long • Youth counseling • Youth dental care • Youth depression • Geriatric and dying services 	<ul style="list-style-type: none"> • Lack of transportation • No insurance • Unable to pay copays/deductibles • Language barrier • Affordable health insurance • Can’t read or write • Car broke down • Deaf • Difficulty communicating • Lack of education • Lack of health services knowledge • Large caseloads • Medical card recipients go to ED because they can’t get a doctor • No insurance/no doctor visits • Insurance is complex • Affordability • Bad parenting • Dysfunctional home environment • Education • Gang affiliation/trafficking • Guns • Lack of communication 	<ul style="list-style-type: none"> • Lice and bed bugs • Homelessness

Determining Significant Health Needs in Morgan County

The Morgan County Community Advisory Committee convened for its final meeting on March 22, 2018. The committee received a detailed review of the outcomes of the community survey as listed above.

Committee members reviewed the survey results and engaged in an exercise to begin mapping available community resources in the areas of unmet need. The approach was to identify resources that are proactive/preventative (designed to prevent or hinder a particular behavior or outcome) or reactive (serving to treat or address a particular behavior after it has occurred).

Next, the committee revisited the County Health Ranking Model. Understanding that by improving health factors, we can improve health outcomes of the community, we used this model to apply our research and explore how health factors unique to Morgan County could be addressed in our implementation strategy. The priorities, along with health factors identified by community members who took the survey, were charted in the model. Agency leaders were asked to evaluate each factor on whether their organization has existing proactive or reactive programs. This exercise created a snapshot of existing resources as they apply to our health needs, and also identified gaps that exist in services.

Identified Available Community Resources

Agencies were grouped into the County Health Ranking model based on their services that address health factors.

COMMUNITY RESOURCE MAP FOR ADDRESSING COMMUNITY HEALTH NEEDS

- ▶ **Red headings**—priorities *Access to Care
- ▶ **Black headings**—additional needs being addressed in plan
- ▶ **Purple headings**—community partners

30%	20%	40%	10%
Health Behaviors	Clinical Care	Social and Economic Factors	Physical Environment
<p>Substance Abuse</p> <ul style="list-style-type: none"> • Morgan County Health Dept. • Midwest Youth Services • Jacksonville Police Dept. • Elm City Center • Salvation Army • JSD 117/Early Years • Passavant Area Hospital <p>Obesity</p> <ul style="list-style-type: none"> • Elm City Center • Prairie Council on Aging • JSD 117/Early Years • Central Counties Health Center • Morgan County Health Dept. (WICS) • Midwest Youth Services • Passavant Area Hospital <p>STDs/Early Sexual Health</p> <ul style="list-style-type: none"> • Morgan County Health Dept. • JSD 117/Early Years • Central Counties Health Center • Midwest Youth Services 	<p>*Youth Services (counseling, dental)</p> <ul style="list-style-type: none"> • Memorial Behavioral Health • Central Counties Health Center <p>Mental Health</p> <ul style="list-style-type: none"> • Passavant Area Hospital • Memorial Behavioral Health <p>*No doctor available/lack of specialists</p> <ul style="list-style-type: none"> • Passavant Area Hospital • SIU Center for Family Medicine • Central Counties Health Center <p>Lack of timely appt./ hours not suitable/wait times too long</p> <ul style="list-style-type: none"> • SIU Center for Family Medicine • Central Counties Health Center <p>Need more prompt care/ walk-in clinics</p> <ul style="list-style-type: none"> • Passavant Area Hospital • SIU Center for Family Medicine • Central Counties Health Center 	<p>*Lack of Transportation</p> <ul style="list-style-type: none"> • Memorial Behavioral Health • Central Counties Health Center <p>*No insurance/unable to pay copays/deductibles</p> <ul style="list-style-type: none"> • SIU Center for Family Medicine • PAH patient financial assistance • Central Counties Health Center <p>Language Barrier/Deaf</p> <ul style="list-style-type: none"> • Passavant Area Hospital • Midwest Youth Services <p>Illiteracy/Education</p> <ul style="list-style-type: none"> • JSD 117 <p>Lack of health services knowledge/insurance is complex</p> <ul style="list-style-type: none"> • Passavant Area Hospital • Home Instead <p>Medical card recipients use ED because they can't get a doctor</p> <ul style="list-style-type: none"> • SIU Center for Family Medicine • Central Counties Health Center <p>Bad parenting/ dysfunctional home environment</p> <ul style="list-style-type: none"> • Locust St. Resource Center • Morgan County Health Dept. • JSD 117/Early Years • Jacksonville Police Dept. <p>Gang/drug affiliation/ trafficking/guns</p> <ul style="list-style-type: none"> • Jacksonville Police Dept. • Morgan County Sheriff 	<p>Lice and Bed Bugs</p> <ul style="list-style-type: none"> • Elm City Center • Prairie Council on Aging • Morgan County Health Dept. • JSD 117/Early Years <p>Homelessness</p> <ul style="list-style-type: none"> • Elm City Center • New Directions • Jacksonville Police Dept. <p>Transit</p> <ul style="list-style-type: none"> • West Central Mass Transit

The Memorial Health System CHNA leadership team met to discuss progress to date. Each affiliate stated the identified priorities resulting from their study. The group discussed whether any common priorities existed. It was determined that substance abuse ranked high among all four MHS affiliates and that a common system-wide strategy would be developed to address this priority.

Passavant Area Hospital Final Prioritized Significant Health Needs for Morgan County

Upon final review of the research and feedback provided by community resources, Passavant identified three priorities to be addressed in the FY2019 implementation strategy: access to care, substance abuse and mental health.

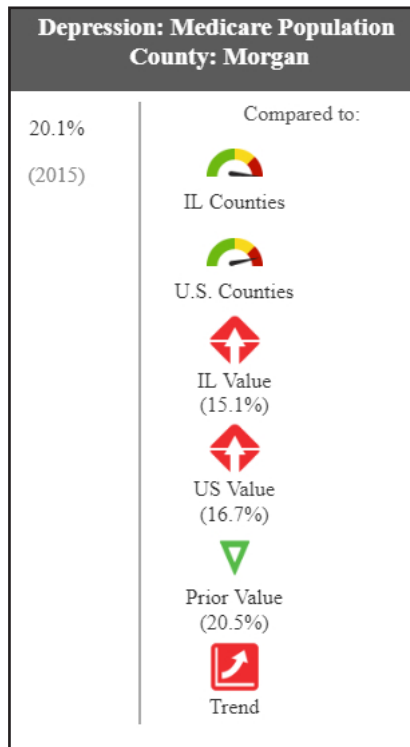
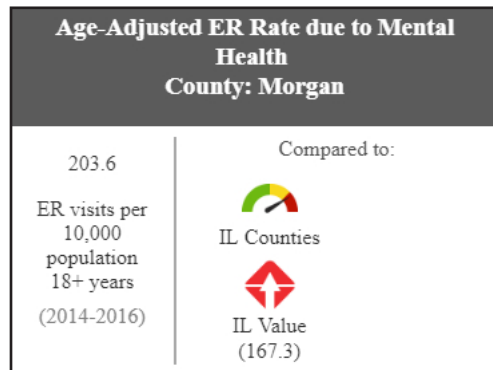
Access to Care

Passavant will address the priority of access to care through development of a healthy communities initiative modeled after the Springfield (Illinois) Enos Park Access to Care Collaborative. The program will be developed in collaboration with SIU Medicine and MacMurray College, as well as a number of service providers throughout the community. The program will place community health workers within a vulnerable neighborhood to work with families facing individual challenges, addressing both health and social determinants of health.

Mental Health

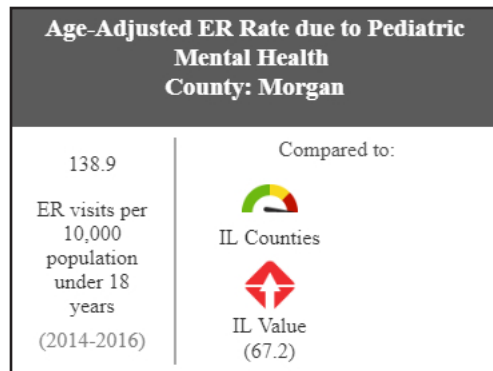
The demand for mental health services continues to outpace the supply of providers and services. Statistics show all subsets of the population in Morgan County rank higher than the state average for their emergent mental healthcare needs. Three out of five respondents on the community survey ranked mental health as having a significant impact on the health of the county. For these reasons, Passavant will develop programs to meet individual mental health issues head-on and at a preventative stage to try to deter people from presenting at the ED with a mental health condition.

MENTAL HEALTH INDICATORS FROM 2017 HEALTHY COMMUNITIES INSTITUTE



- Red represents the “worst” quartile.
- The current value is higher than the comparison value.
- There has been a significant decrease over time.
- The current value is lower is lower than the previously measured value.

Source: Healthy Communities Institute. Retrieved Aug. 8, 2018. Retrieved from [ChooseMemorial.org/Community-Health-Needs-Assessment/HCI?hcn=CommunityDashboard](http://ChooseMemorial.org/Community-Health-Needs-Assessment/HCI?hcn=CommunityDashboard&HCI?hcn=CommunityDashboard)



Total: 17,983 visits

Source: Illinois COMPdata Calendar Year 2017

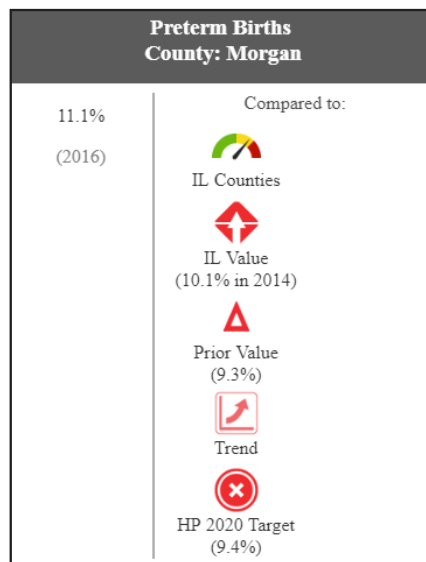
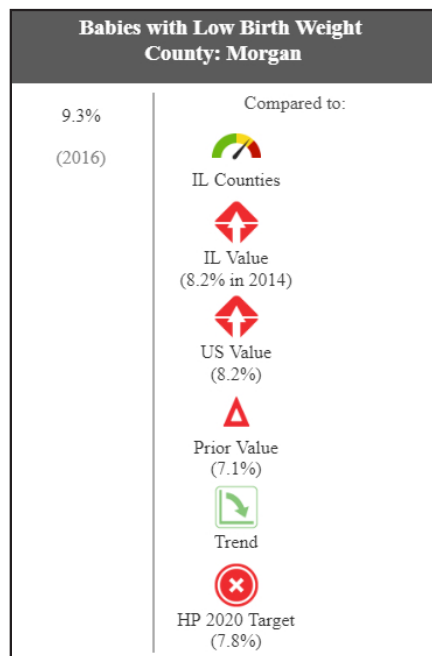
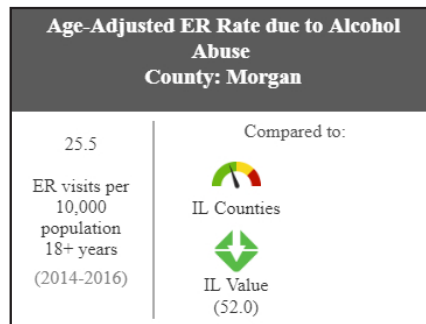
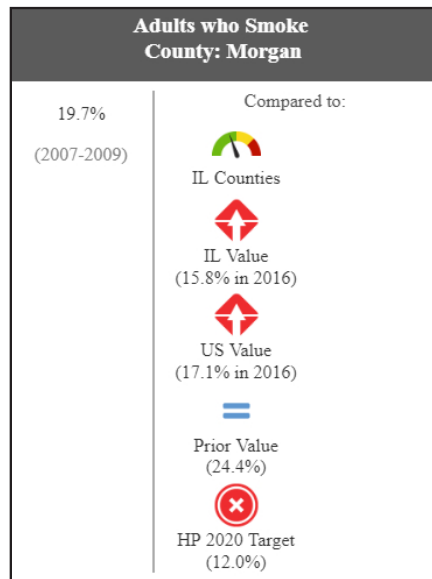
The following chart represents patients who presented to the Passavant Emergency Department with mental health diagnoses:

CONDITIONS	MORGAN
Depressive Disorder	165
Anxiety State	152
Drug/Others	146
Alcohol	47
Dementia	29
Bipolar	18
Schizophrenia	15
Depressive Affective Disorder	5
Mood Disorder	2
Grand Total	579

TOTAL ALL AGES	
0-17	121
18-59	357
60+	101
Grand Total	579

Substance Abuse

Two-thirds of respondents from the community survey ranked substance abuse as the most significant issue impacting the health of the county. Jacksonville lost much of its access to substance abuse services with the closing of the Wells Center in 2016. At the same time, the opioid epidemic has exploded. Many factors play a role in why someone uses or overuses drugs or alcohol. Many of those social determinants of health are referenced and addressed in the access to health initiative.



Source: Healthy Communities Institute. Retrieved Aug. 8, 2018. Retrieved from Choosememorial.org/Community-Health-Needs-Assessment/HCI?hcn=CommunityDashboard

Non-Prioritized Significant Health Needs

Obesity—Passavant will continue offering the Weight Loss & Wellness program along with the Walking for Wellness partnership with Jacksonville High School and First Christian Church. However, the hospital does not have competencies to address this issue as a whole.

Illiteracy/Education—Passavant will work with community partners to provide education related to improving health. The hospital does not have expertise/competencies to address the issue as a whole.

Lice and Bed Bugs—The Morgan County Health Department and Morgan County Housing Association have a plan to address the issue effectively.

Homelessness—New Directions Warming & Cooling Center is working with organizations across the community to address the issue.

Gang/Drug Affiliation/Trafficking/Guns—The Morgan County Sheriff's Department, Jacksonville Police Department and Morgan County probation have a solid plan to address these issues in the community.

New Community Health Needs Assessment Implementation Strategy

Passavant Area Hospital is developing a new CHNA implementation strategy that it will implement in FY2019-2021. This strategy was approved by the PAH Board in August 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.

Overview of Implementation Strategies

Access to Care

Morgan County has a high number of service providers and social service programs to assist community members. However, the community survey identified access to care as a problem. Access is defined in broad terms, and may include access to physicians or other health services or barriers that prevent people from getting the care they need.

There is high utilization of the Passavant Emergency Department for low acuity conditions. Diagnosis codes indicate that 20.8 percent of the visits are non-emergent by expert medical opinion and would be more appropriately cared for in a primary care, express or virtual care setting. Review of the Emergency Department data shows higher than average utilization from residents of the northeast quadrant of Jacksonville. Patients may be utilizing the Emergency Department due to a number of factors listed above.

To improve access to health in Jacksonville's northeast neighborhood, Passavant will collaborate with SIU Medicine and MacMurray College to create a Community Health Worker program. The program will work with individuals to address access and health on a holistic basis.

Substance Abuse

Limited community resources for substance abuse treatment have led to a high demand for this service across the Memorial Health System region. Therefore, the health system is developing a system-wide plan to explore full integration and coordination of care.

Furthermore, Memorial Health System is also developing a task force to address use of opioids. Its goals are to limit the supply, raise awareness of the risk of addiction, identify and manage the opioid-dependent population and treat addicted individuals.

Passavant will work with Memorial Behavioral Health to deliver a substance abuse prevention program in the community. The multi-faceted program has a prescription drop-off component in addition to prevention programs geared towards middle-school- and high-school-aged children.

Mental Health

Passavant will partner with Memorial Behavioral Health to expand the MOSAIC program in Jacksonville School District 117. This screening and counseling program will be available to 750 students at Jacksonville Middle School.

Passavant will also expand psychiatric services in Memorial Physician Services appointments.

Passavant will open partial hospitalization for psychiatric patients in October 2018. This bridge daytime program serves as a step down for patients leaving the inpatient unit who may still need higher-level mental health services in a daytime setting. Additionally, the program is of benefit to counseling patients who need more intensive attention.

Memorial Health System will continue offering Mental Health First Aid, a research-based training program that teaches members of the public how to help a person developing a mental health problem, experiencing a worsening of an existing mental health problem or in a mental health crisis. Like traditional first aid, Mental Health First Aid does not teach people to treat or diagnose mental health or substance use conditions. Instead, the training teaches people how to offer initial support until appropriate professional help is received or until the crisis resolves.

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 FY2018. The Communications department at Passavant Area Hospital will issue a press release announcing the completion of the assessment and location of the report. They will also post the link on social media.

Additionally, the MHS Board's Community Benefit Committee will receive annual updates on the success in meeting the measures of the CHNA implementation strategy, and will subsequently approve implementation strategies to address access to care, substance abuse and mental health for FY2019-2021.

Questions about the Morgan County 2018 Community Health Needs Assessment or implementation strategies may be directed to:

Lori Hartz, Director of Community Relations, Passavant Area Hospital
hartz.lori@mhsil.com | 217-479-5800

2018 Morgan County Community Health Needs Assessment

Appendix

Research URLs

- ▶ Conduent Healthy Communities Institute: <https://www.choosememorial.org/Community-Health-Needs-Assessment/HCI?hcn=CommunityDashboard>
- ▶ IDPH Sexually Transmitted Diseases in Illinois 2016 Epidemiologic Summary and Yearly Trends Data for 2007-2016 <http://www.dph.illinois.gov/sites/default/files/publications/publicationsohp2016-std-surveillance-report.pdf>
- ▶ 2018 County Health Rankings – <http://www.countyhealthrankings.org>
- ▶ <https://www.communitycommons.org/>
- ▶ <https://www.compdatainfo.com/Home.aspx>
- ▶ <https://www.healthypeople.gov/>
- ▶ CDC National Center for HIV Aids Viral Hepatitis, STD and TB Prevention <https://www.cdc.gov/nchhstp/default.htm>
- ▶ National Cancer Institute - <https://www.cancer.gov/research/areas/disparities>
- ▶ <https://www.census.gov/quickfacts/fact/table/morgancountyillinois/PST045217>

Attachments

- ▶ Strategy Outcomes from FY2016-FY2018 in Appendices and at [ChooseMemorial.org/HealthyCommunities](https://www.choosememorial.org/HealthyCommunities)
- ▶ Walking for Wellness Survey Results 2018
- ▶ Morgan County Community Survey
- ▶ Morgan County Focus Group report

MacMurray

Founded 1846

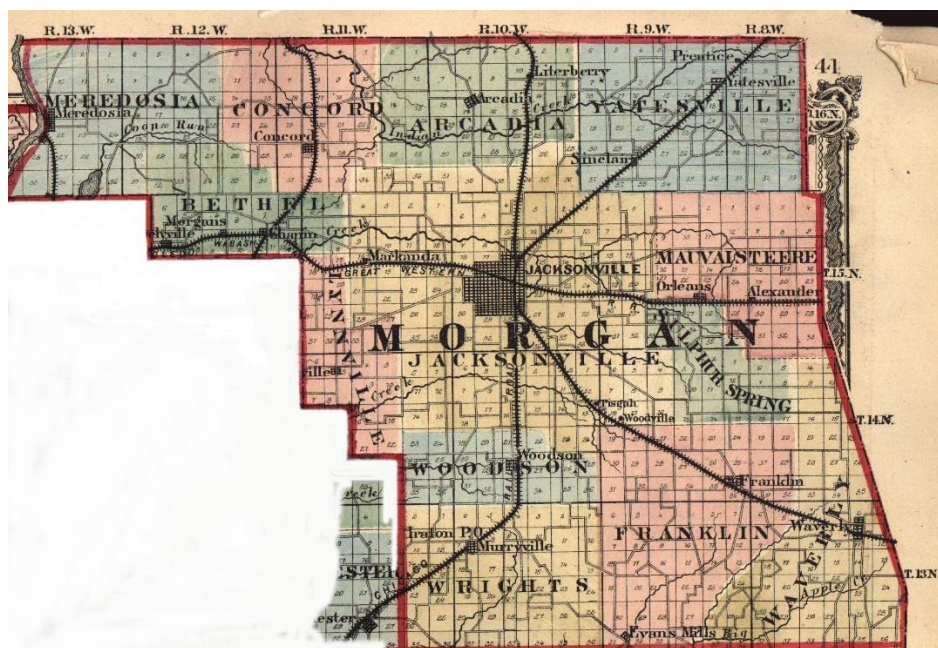
COLLEGE

Morgan County Needs Assessment Executive Summary

Research conducted by:

Dr. Joe Squillace, MSW, and the MacMurray College student research team of
Megan Burtle, Mackenzie Kelly, Samantha Knox, Chelsie Owen, and Jasmine Warren

December 2016



Knowledge, Faith, Service

The MacMurray College Division of Social Sciences is proud to present the Morgan County, Illinois, Community Needs Assessment to the Jacksonville, IL, Commission on Disabilities and Human Relations.

This needs assessment analyzes key issues from the perspective of Morgan County citizens relating to employment, education, transportation, health care, housing, food & nutrition, and access to local government services. This report includes the Executive Summary, and the full report may be requested from the Commission or the MacMurray Division of Social Sciences.

We hope this to be an informative tool for public discussion, and an informative tool for the local municipal government, local organizations and businesses. We do not take any official positions at the conclusion of this study; our hope is to provide an objective assessment of the data from respondent citizens of the survey to help inform public discussion and action. Our goal is the continued improvement of the community and the services it offers to the disability and other minority communities.

I would like to express my personal thanks to the Jacksonville Commission on Disabilities and Human Relations for the opportunity to conduct this research study, and the support and encouragement of the student research team. MacMurray College is dedicated to the Jacksonville community, and hope this report provides a resource that has lasting impact.

Respectfully submitted,



Dr. Joe Squillace, MSW
Chair, Division of Social and Behavioral Sciences

Executive Summary

Access Concerns of All Respondents

- The issue areas that received a majority of respondents expressing access concerns about the topic were Employment (81%), Transportation (70%), and Housing (55%).
- “Lack of full time Employment with benefits” was found to be the most important with 93% of respondents marking this as important. Second most important with 87% of respondents was “Wages not increasing to meet the cost of living.” Many individuals expressed there was an overabundance of part-time minimum-wage jobs with no benefits, while mourning the loss of manufacturing/industrial jobs in the region.
- The statement of most concern for the respondents in the Transportation section was “Cost of car repairs” with 78% of respondents marking “important”. The second statement of most concern (77%) is “Cost of car insurance.”
- The major concern of housing for Morgan County residents is “Affordable housing not being in a safe neighborhood” with 89% of respondents marking “important.” The next greatest concern of housing in Jacksonville is “Cost of rent/house payments” (88%).
- Other primary concerns identified by the respondents in the general population include: high cost of utilities; lack of healthy food options in Jacksonville, and lack of access to dentists that accept Medicaid.

Do you think access to the following services or opportunities are a problem in the Jacksonville area?

<i>CONCERN</i>	<i>N</i>	<i>YES</i>	<i>NO</i>
<i>Employment</i>	451	81%	19%
<i>Transportation</i>	420	70%	30%
<i>Housing</i>	431	55%	45%
<i>Local government services</i>	415	39%	61%
<i>Food & Nutrition</i>	426	35%	65%
<i>Healthcare</i>	417	35%	65%
<i>Education</i>	435	33%	67%

Access Concerns of Disabled and Minority Respondents

- The concerns of the disability population mirrored the concerns of the general population, with Employment, Transportation and Housing being primary access problems.
- However, the respondents with disabilities weighted particular subquestions differently than the general population, in the aggregate. [See table below, which shows percentage difference in key issue areas]

CONCERN	Non-Disabled	Disabled	Percent Difference (from General)
<i>Not enough vocational programs</i>	17%	40%	+23
<i>Cost of utilities</i>	35%	55%	+20
<i>Cost of security deposits</i>	34%	54%	+20
<i>Not able to access transportation to grocery stores or it's too far away</i>	18%	38%	+20
<i>Accessibility to assistance for municipal utilities</i>	25%	44%	+19
<i>Not enough Section 8-HUD subsidized housing</i>	25%	43%	+18
<i>Have to rely on family for transportation needs</i>	28%	46%	+18
<i>Difficulty in obtaining tuition money</i>	20%	37%	+17
<i>Cost of driver's license and vehicle registration</i>	32%	48%	+16
<i>Affordability of municipal utilities</i>	27%	43%	+16
<i>Lack of education or experience to get a good job</i>	46%	60%	+14
<i>Transportation to doctor appointments</i>	18%	32%	+14
<i>Lack of or cost of transportation</i>	53%	66%	+13
<i>Specialty medical services do not accept Medicaid or my insurance (dental, MH, etc)</i>	22%	32%	+10

- Discrimination against the deaf community was identified, in that there is a lack of effort by employers to create effective communication. Another form of discrimination that was identified was that lack of job applications available to individuals who do not have access to the internet only applications.
- The high cost of both taxi services and Illinois fees charged for car ownership, due to the lack of other forms of public transportation within Jacksonville, has two results: 1) less money to pay other necessities, and 2) an over-reliance of asking for friends or family for rides to work or doctor appointments, for example.
- 43% of the minority population reported education opportunities being a concern, whereas only 32% of the general populations reporting it as a concern (a 12% difference between the two populations)

Recommendations for Community Improvements

- Disabled respondents who were Deaf expressed concern that businesses in Jacksonville do not know how to interact with deaf people, whether that be as customers or as employees. The Commission should discuss with the City ways for the community to reach out to Morgan County businesses and help teach them how to appropriately recognize and handle the needs of deaf people in the workplace setting and as customers. The City of Jacksonville could partner with MacMurray College’s American Sign Language-Interpreting program to do some basic sign language classes for employers and to help bridge the gap in communication, or to make signage for businesses. They could also teach them how to appropriately handle certain situations with the deaf population like taking orders or in case of an emergency.
- The Deaf community in Jacksonville also stressed a safety risk for them in Jacksonville. They pointed out the need for a mass texting system or some type of special device for those who are deaf or hard of hearing to notify them of severe weather warnings because they cannot hear tornado sirens going off.
- Ensure that public transportation is a priority for state and local funding because a lot of people, not just disabled people, depend on it for all aspects of life.
- Many respondents stated that current youth activities in Jacksonville are too costly for most people of lower incomes. The development of additional activities for youth typically revolve around the concerns of liability and adequate supervision. The city of Jacksonville could conduct a feasibility analysis for having a public-private partnership funded community center location, with cost estimates to include liability and supervision. In addition, the city could partner with the local colleges to discuss greater opportunities for youth engagement, such as sports camps, science fairs, life skills classes, and other educational activities.
- Some respondents mentioned that Jacksonville is not a very welcoming community, or could be more welcoming to “outsiders” and for minorities. We recommend the Commission, City Council, and the Jacksonville Area Convention & Visitors Bureau discuss ways to improve community relations, such as providing some type of welcoming package to residents who are new to Jacksonville, or more community contact by police officers.
- Respondents stated the need for better and healthier food options, which included specialty foods (defined as anything affordable that’s not “fast food”) and foods for people with special food needs (defined as food allergies, foods to address health concerns, etc). Our recommendation is to provide business incentives for businesses that focus on healthier food options. Mobile food pantries delivering fresh foods are becoming more popular in communities throughout the nation. Furthermore, Jacksonville could even talk to businesses and give them some type of tax incentive for setting up their business, or a farmer’s market, in the North East corner of town (similar to an Enterprise zone) where there isn’t a large amount of access to healthy food options (commonly referred to as a food desert).
- There is growing popularity in community gardens, and the Commission and City could partner with the colleges and nonprofits to develop vacant lots in the northeast sector into community gardens, which would also provide opportunities for youth from the community.

MORGAN COUNTY COMMUNITY HEALTH NEEDS ASSESSMENT

Analysis of Public Input from Community Survey

Conducted by UIS Survey Research Office



March 12, 2018

Introduction

This report was completed by the UIS Survey Research Office as part of the Morgan County Community Health Needs Assessment conducted by Passavant Area Hospital. This report provides the findings from the results of the public survey, which allowed members of the Morgan County community to provide input on the health priority areas in the region. This report was written by SRO Visiting Research Manager Cindy Jones with the assistance from Tonda Reece, Elyssa Smith, and Kendall Smith (UIS Survey Research Office).

If you have any questions about this report, please contact the UIS Survey Research Office at (217-206-6591) or sro@uis.edu

Executive Summary

The Survey Research Office was asked by Passavant Area Hospital to collect, record, and analyze public input for the 2018 Morgan County Community Health Needs Assessment. This was done through survey responses completed by Morgan County residents. The survey was available to residents online, while paper surveys were made available at various locations throughout the county. The following report includes detailed information on both of these data sources.

Overall, Morgan County residents have a variety of health concerns ranging from specific illnesses affecting neighbors and family members to concerns about mental health and substance abuse. The survey listed five major health problems - obesity, mental health, substance abuse/drugs, services to the non-English speaking, and STDs/STIs – and asked residents in Morgan County to rank them according to their impact upon the health of the community. The results were as follows: substance abuse, mental health, obesity, diabetes, STDs/STIs, and services to non-English speaking adults.

Substance Abuse

Nearly two thirds (63.4 percent) of respondents ranked substance abuse as having the most significant impact on the health of the county, marking it as one of the top two of five choices.

Mental Health

Three out of five respondents ranked mental health as having a significant impact on the health of the county, marking it as one of the top two of five choices.

Obesity

Thirty-two percent of Morgan County residents rank obesity as having a significant impact (choosing it as a one or two) on the health of Morgan County, while over half (57.7 percent) rank it in their top three.

STDs/STIs

Nearly 15 percent (14.7 percent) rank STDs/STIs as having a significant impact on the health of Morgan County. One-third of the respondents (32.8 percent) rank STDs/STIs in their top three of health priorities.

Survey Results

As part of the community health needs assessment, a survey was available (online and printed copies) to members of the public. Copies of the survey were available at specific locations throughout Morgan County, and the link to the online survey was widely distributed via media and the partnering organizations.

Overall, 707 individuals completed the survey, 378 printed surveys were returned to the SRO, and 329 individuals completed the survey online. The survey was available to Morgan County community members from January 11 to February 12, 2018.

Table 1 presents the demographic characteristics of the community survey participants compared to the most recent population estimates according to the 2016 American Community Survey. As you can see in the table, a higher percentage of females participated in the community survey compared to the overall population estimates. Two out of every three responses in the community survey are from female respondents while they only comprise 49.7 percent of the Morgan County population. In addition, we find that a higher percent of those who participated in the survey reported having either a college or an advanced degrees compared to population estimate. Over 37 percent of the respondents report having an advanced degree. This compares to 19.3 percent of Morgan County’s population that has an advanced degree (see figure 1).

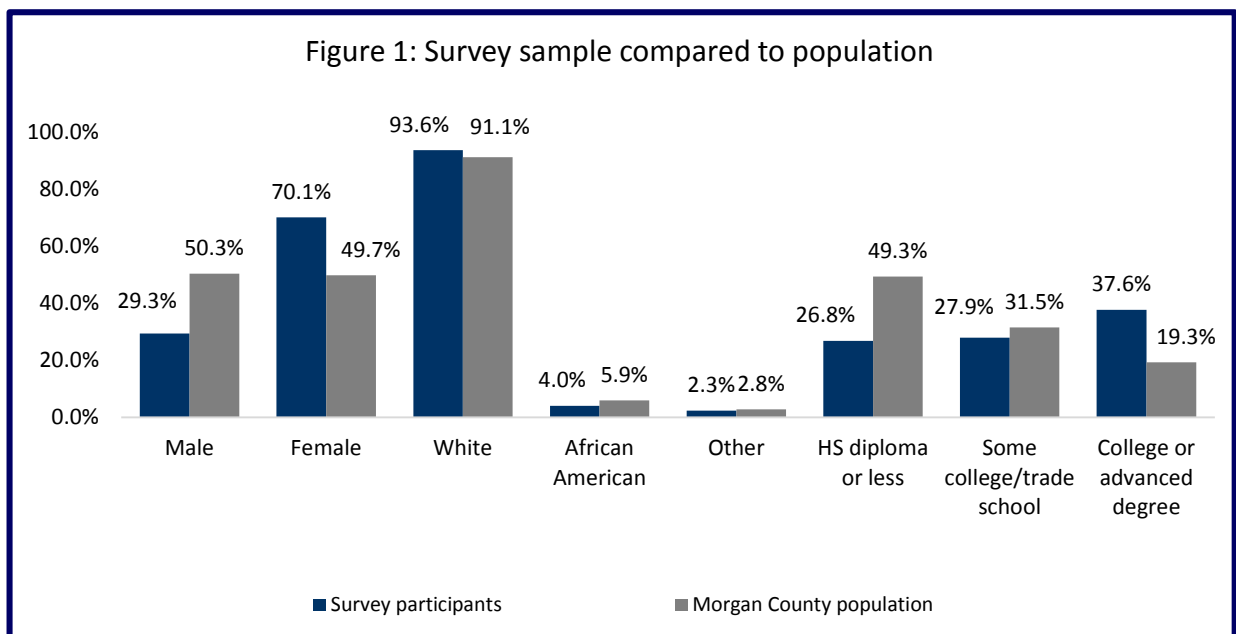


Table 1. Demographic characteristics of focus group participants and community participants compared to population

	Morgan County Population (2016 ACS estimates)		Community participants (online and paper surveys) N=707
Gender			
Female	49.7%		70.1%
Male	50.3%		29.3%
Race			
White	91.1%		93.6%
African-American	5.9%		4.0%
Asian	0.6%		-
Native American	0.1%		0.4%
Other/Mixed Race	2.1%		1.9%
Ethnicity			
Hispanic/Latino(a)	2.3%		2.1%
Non-Hispanic/Latino(a)	97.7%		97.9%
Age			
18-24 years old	14.0%		12.1%
25-34 years old	15.0%		22.0%
35-44 years old	14.4%		14.8%
45-54 years old	16.5%		16.3%
55-64 years old	17.0%		16.6%
65 and older	23.1%		18.3%
Education			
Less than high school diploma	9.2%		1.8%
HS diploma	40.1%		25.0%
Some college/trade school	31.5%		27.9%
College degree	11.7%		19.2%
Advanced degree	7.6%		18.4%
Disability Status			
Have a disability	14.5%		14.4%
Do not have a disability	85.5%		85.6%
Income			
Less than \$20,000	-		22.7%
\$20,000-\$40,000	-		18.7%

\$40,001-\$60,000	-		13.1%
\$60,001-\$80,000	-		10.4%
\$80,001-\$100,000	-		7.3%
More than \$100,000	23.9%		7.4%
Retired			8.6%
Prefer not the say	-		11.9%

The first section of the survey lists five health issues- obesity, mental health, substance abuse/drugs, services to the non-English speaking adults, and STDs/STIs – and asks respondents to rank them in order of the impact each has upon the health of Morgan County residents, with one being most impactful and five being least. The results were as follows: substance abuse, mental health, obesity, diabetes, STDs/STIs, and services to non-English speaking adults. Table two, below, shows a breakdown of the results, with the column labeled biggest impact combining the results of the “ones” and “twos”, the column labeled “somewhat of an impact” showing the “three” responses, and least impact combining the “fours” and “fives”.

Table 2. The top health priority in the area

	Biggest impact (1 or2)	Somewhat of an impact (3)	Least impact (4 or 5)
Substance abuse/drugs	63.4% (448)	17.0% (101)	7.2% (43)
Mental Health	60.0% (424)	23.7% (148)	8.1% (51)
Obesity	32.1% (227)	25.6% (150)	29.6% (209)
STDs/STIs	14.7% (104)	18.1% (105)	52.1% (368)
Services to non-English speaking adults	7.3% (42)	11.8% (67)	64.9% (459)

Substance Abuse

Nearly two thirds (63.4 percent) of survey respondents ranked substance abuse as having the most significant impact on the health of the county, marking it as a one or two out of the five choices. In fact, three out of every four respondents chose substance abuse/drugs as one of their top three health concerns.

When we examine this choice by demographic groups, we see male respondents are much more likely to choose substance abuse as their top health problem – 50 percent versus 38.8 percent for females. It is also interesting to note that when looking at responses to substance abuse by race, 71 percent of African American respondents chose it as their top health problem, while for Whites the rate is 41.5 percent.

Mental Health

Three out of every five (60.0 percent) respondents ranked mental health as having a significant impact (one or two) on the county, with over 80 percent of respondents ranking it as a top three choice. There were no significant differences across demographic groups.

Obesity

Nearly one third of Morgan County residents rank obesity as having a significant impact on the overall health of the county, while just under half 53.3 percent rank obesity in their top three. Whites were much more likely to rank obesity as a high priority, with 22.6% ranking it as their top priority and 39.7% ranking it in their top two. Conversely, only 7.7% of African American respondents ranked obesity as their top priority and 15.8% chose it as one of their top two health problems.

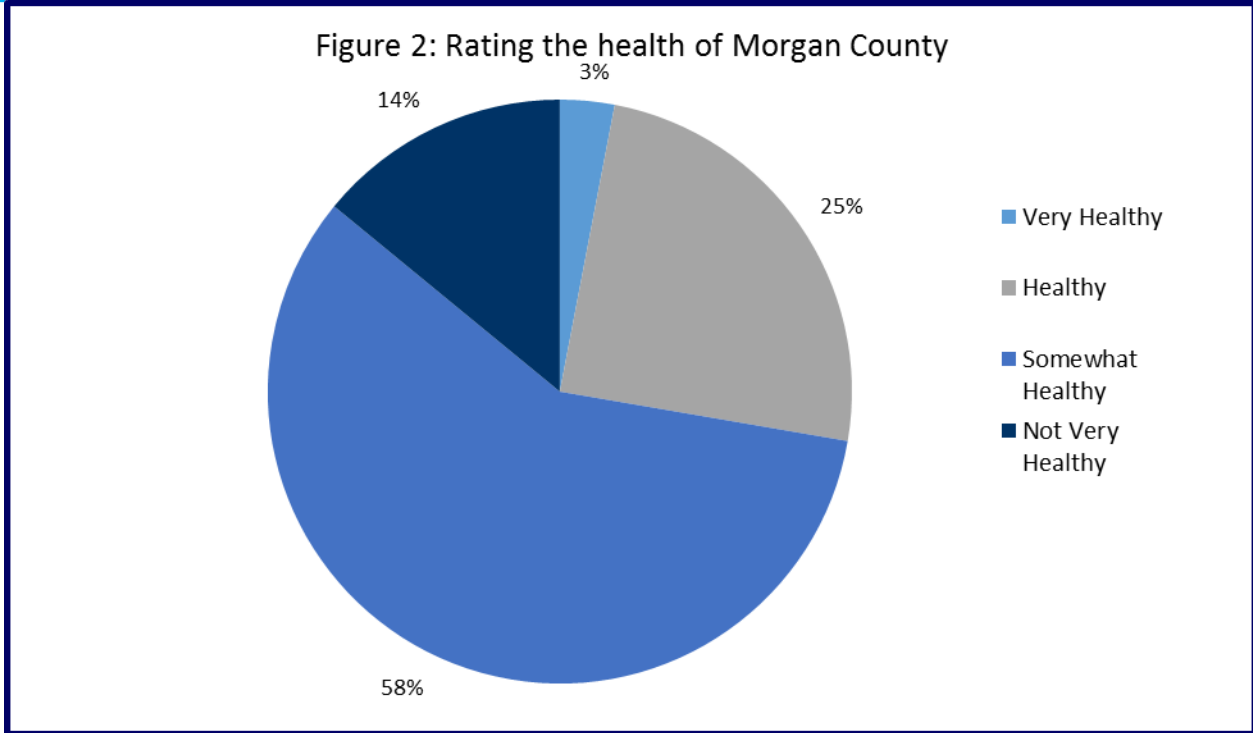
Sexually transmitted diseases/infections (STDs/STIs)

Just over fourteen percent of respondents rank STDs/STIs as having a significant impact (choosing it as a one or two) on the health of Morgan County residents while 29.6 percent rank STDs/STIs in their top three.

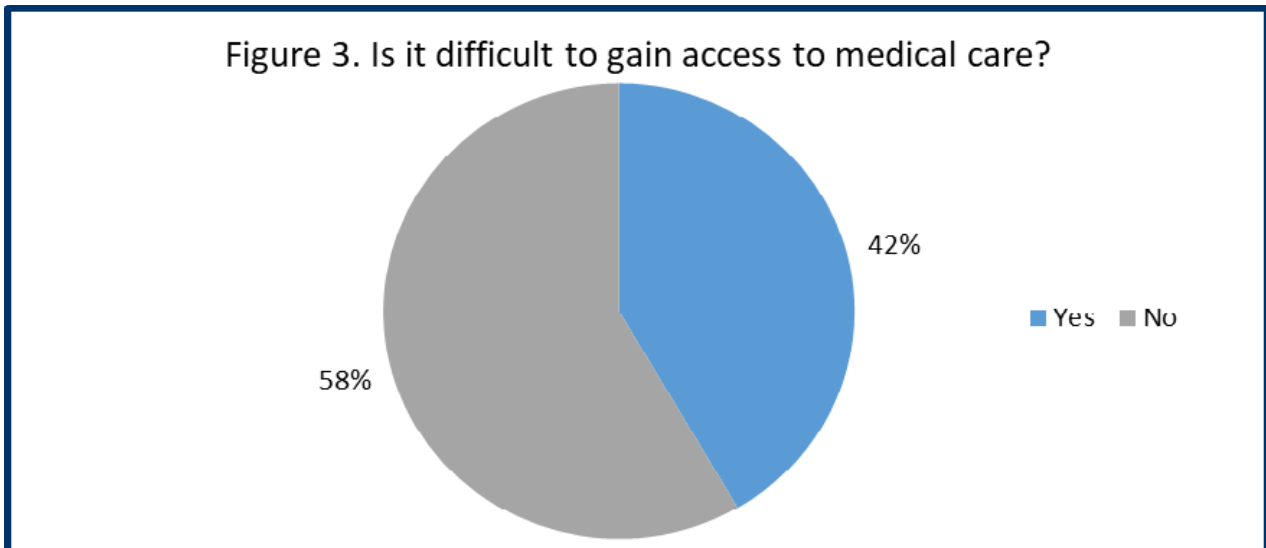
Services to non-English speaking adults

Just over seven percent of respondents ranked this issue as having a significant impact upon the county, while 65 percent of respondents stated that of the issues listed in the survey, this one has the least impact upon the health of the county. However, with the Illinois School for the Deaf located in Jacksonville, language is often an obstacle for individuals who are non-English speaking. In fact, in the open-ended question on obstacles, there were a few comments that as a deaf individual it is difficult to schedule appointments and obtain medical care.

The next section of the survey asks respondents to rank the health of Morgan County as very healthy, healthy, somewhat healthy, or not very healthy. As seen below in figure two, the majority (58 percent) chose somewhat healthy, while only three percent felt Morgan County was very healthy. When we examine whether demographic groups rated this differently, there were no significant differences.



Respondents were also asked if they felt residents of Morgan County have difficulty gaining access to medical care. As seen below in figure three, 59 percent said no while 41 percent said “yes”. When breaking this question down by demographic groups, males are less likely to respond “yes” – 36.4 percent versus 43 percent for females. Conversely, African American respondents are much more likely to respond “yes” – 48.1 percent versus 40.6 percent for their white respondents.



Next, a list of six obstacles were given and respondents were asked to check all of the ones they feel make it difficult to receive medical care. As seen in table three, 18.3 percent of respondents report an inability to pay co-pay or deductibles as the biggest obstacle while 17.8 percent reported lack of transportation followed by no insurance or underinsured at 17.6 percent.

Table 3. Obstacles to medical care	Percentage ranking in top five
Lack of transportation	17.8% (182)
No insurance/underinsured	17.6% (180)
Unable to pay co-pays/deductibles	18.3% (187)
No doctor or provider available	9.7% (99)
Lack of timely appointment availability	12.3% (126)
No alternative schedule available, i.e. evening/Saturday	12.5% (128)
Language barrier	6.3% (64)
Other	5.7% (58)

Respondents were then given a list of seven issues and asked to identify the issues they felt were health problems for the youth of Morgan County. Just over 18 percent of respondents report they feel alcohol abuse is an issue among Morgan County adolescents, followed by obesity at 17.8 percent and mental health at 17.6 percent. The data for the other health problems are seen in table four.

Table 4. Adolescent health problems	Percentage
Obesity	17.8% (182)
Mental health	17.6% (180)
Alcohol abuse	18.3% (187)
Tobacco use	9.7% (99)
Drug abuse	12.3% (126)
STDs/STIs	12.5% (128)
Unplanned pregnancy	6.3% (64)
Other	5.7% (58)

Finally, the survey ended by asking respondents to name three healthy behaviors that helped them or their family stay healthy. The most common responses are listed in table five. Overall, making healthy lifestyle choices was the most frequent response, while some were more specific by citing healthy eating, exercising, and maintain mental and spiritual health.

Table 5. Healthy behaviors	Percentage
Healthy eating, exercising, mental activities or sleep	8.1% (54)

Healthy eating and exercising	11.6% (71)
Fellowship/family time and healthy habits	8.1% (54)
Spiritual health and healthy habits	2.5% (17)
Hygiene and healthy habits	10.6% (71)
Accountability and positivity	5.8% (39)
Lifestyle choices	14.9% (100)
Medical care and healthy habits	13.1% (88)
No substances (drugs and alcohol) and healthy habits	6.0% (40)
Other	2.2% (15)
Refuse	18.1% (121)

Morgan County Community Health Need Assessment Survey Topline**N=707****How would you rate the health of Morgan County?**

Very healthy	2.8%(20)
Somewhat healthy	58.4%(411)
Healthy	24.6%(173)
Not very healthy	14.2%(100)
Refused	(4)

Rank the top 5 health problems that impact Morgan County with 1 being the most important.**Mental Health**

1	37.0% (231)
2	30.9%(193)
3	23.7%(148)
4	5.9%(37)
5	2.2%(14)
Refused	(84)

Obesity

1	21.7%(127)
2	17.1%(100)
3	25.6% (150)
4	24.4%(143)
5	11.3%(66)
Refused	(121)

Services to non-English speaking adults

1	3.3%(19)
2	4.0%(23)

3	11.8%(67)
4	27.8%(158)
5	52.9%(301)
Refused	(139)

Substance Abuse-Drugs

1	42.3%(251)
2	33.2%(197)
3	17.0%(101)
4	5.2%(31)
5	2.0%(12)
Refused	(115)

STDs/STIs

1	6.2%(36)
2	11.7%(68)
3	18.1%(105)
4	34.0%(197)
5	29.5%(171)
Refused	(130)

Do you think residents of Morgan County have difficulty gaining access to medical care?

Yes	41.6%(288)
No	58.4%(404)
Refused	(4)

If yes, please select from the list below what obstacles make it difficult to receive medical care.

Lack of transportation	17.8%(182)
No insurance/underinsured	17.6%(180)
Unable to pay co-pays/deductibles	18.3%(187)
No doctor or provider available	9.7%(99)
Lack of timely appointment availability	12.3%(126)
No alternative schedule available, i.e. evening/Saturday	12.5%(128)
Language barriers	6.3%(64)
Other	5.7%(58)

Other, please specify: Affordable health insurance – need a public option to keep insurance companies honest. Can't read or write. Car broke down. Conservative views on emerging treatments. Deaf. Difficulty communicating. I'm shy and bad at talking on the phone or to people. It takes six months to get at the center for psychiatric health. Lack of available specialist in many categories (i.e., ENT, ortho, urology, and general physician on an everyday basis). Lack of education. Lack of health services knowledge. Lack of knowledge of available care. Lack of knowledge of resources that are available. Lack of qualified personnel. Lack of reliable care. Large caseloads. Medical card recipients go to emergency room because they can't get a primary doctor. Need more prompt care. Need more walk in clinics. No doctors will see a person if there is no insurance, it is the first question that is asked when you call to see if a doctor or a facility will accept you as a patient, without insurance – the answer is no. For some, even with the ACA, insurance is complex. No local residential drug treatment programs. Our prompt care does not take a medical card unless you are an established patient; our local health department/SIU FQHC does not have hours that are suitable for our community. Physician specialist – very few live-practice here – internal needs, ENT, ortho, skilled care. Prices of medical care. Resources not available locally. School. Services available to uninsured; if you have private insurance, service not available. Inflexible policies, inattention to detail by staff physicians. Wait time to get in too long. We are a fortunate family that qualifies for the assistance we need for health care. Women's health is abysmal at the Passavant ER- anything other than delivering a baby.

Which do you think identify health problems for youth of Morgan County?

Obesity	12.7%(320)
Mental Health	16.3%(413)

Alcohol abuse	14.5%(367)
Tobacco use	12.3%(312)
Drug abuse	19.9%(504)
STDs/STIs	8.5%(215)
Unplanned pregnancy	13.7%(346)
Other, please specify:	2.0%(50)

Other, please specify: Alcohol and tobacco are drugs too; any mind altering substance is a drug. All of the above. Although it is not considered health problems, lice and bed bugs are a problem; people can't afford treatment; child suffers with itching, bites lack of sleep. Bad parenting. Cancer. Chronic. Counseling. Dangerous driving. Dental care. Depression. Don't know youth. Dysfunctional home environment. Education. Gang/drug affiliation/trafficking. Geriatric & dying services. Good family structure – love and support. Guns. Head lice and bed bugs. Homelessness. I don't work closely enough with youth to know the extent of substance abuse, or unplanned pregnancy – don't feel qualified to respond to this question. Lack of communication/isolation/family breakdown. Lack of dental health needs. Lack of education on health issues. Liberalism. Need more family planning/education. Not among youth. Nutrition and proper hygiene. Parenting/guidance. Personal communicable disease. Poor diets. Psych care. Psychiatry. Self – esteem/bully.

Please list three behaviors that help you and your household remain healthy.

Healthy eating, exercising, mental activities or sleep	8.1%(54)
Healthy eating and exercising	10.6%(71)
Fellowship/family time and healthy habits	8.1%(54)
Spiritual health and healthy habits	2.5%(17)
Hygiene and healthy habits	10.6%(71)
Accountability and positivity	5.8%(39)
Lifestyle choices	14.9%(100)
Medical care and healthy habits	13.1%(88)
No substances (drugs and alcohol) and healthy habits	6.0%(40)

Other	2.2%(15)
Refuse	18.1% (121)

Demographic Section

What year were you born?

18-24	12.1%(80)
25-34	22.0%(146)
35-44	14.8%(98)
45-54	16.3%(108)
55-64	16.6%(110)
65 or older	18.3%(121)
Refused	(45)

Do you consider yourself Hispanic or Latino/a?

Yes	2.1%(14)
No	97.9% (663)
Refused	(31)

Do you consider yourself...

White	93.6% (634)
Black or African American	4.0% (27)
Asian	-
Native Hawaiian or Pacific Islander	-
American Indian or Alaska Native	0.4% (3)
Other, please specify:	1.9%(13)
Refused	(31)

What is your gender?

Male	29.3%(198)
Female	70.1%(473)
Prefer not to say	0.6%(4)
Refused	(33)

What is your disability status?

Do not have a disability	85.6%(570)
Have a disability	14.4%(96)
Refused	(42)

What is your highest level of education?

Less than high school	1.8%(12)
Some high school	7.7%(52)
High school diploma or equivalent	25.0%(168)
Trade or technical school beyond high school	7.1%(48)
Some college	20.8%(140)
4 year college degree	19.2%(129)
More than 4 year college degree	18.4%(124)
Refused	(35)

What is your zip code?

62021	0.1%(1)
62044	0.1%(1)
62082	0.1%(1)
62092	0.6%(4)
62650	0.1%(1)
62601	1.0%(7)
62605	0.1%(1)

62610	0.1%(1)
62611	0.4%(3)
62612	0.6%(4)
62615	0.1%(1)
62618	1.4%(10)
62621	0.6%(4)
62628	1.8%(13)
62631	0.3%(2)
62638	2.1%(15)
62650	73.7%(522)
62665	1.1%(8)
62667	0.3%(2)
62668	2.4%(17)
62691	0.1%(1)
62692	4.8%(34)
62694	1.1%(8)
62695	0.6%(4)
62711	0.1%(1)
63401	0.1%(1)
65616	0.1%(1)
65692	0.1%(1)
69692	0.2%(2)
Refuse	0.5%(4)

How many people live in your household?

0	0.3% (2)
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1	13.8%(98)
2	17.8%(126)
3	7.5%(53)
4	6.4%(45)
5	4.1%(29)
6	1.1%(8)
7	0.4%(8)
8	0.8%(6)
9	0.3%(2)
10	-
11	0.4%(3)
Other	0.1%(1)

What is the primary language spoken in your household?

American	0.4%(3)
American – English	0.1%(1)
ASL	0.4%(3)
Broken English	0.1%(1)
English	50.4%(357)
English and ASL	0.1%(1)
English and German	0.1%(1)
Spanish	0.1%(1)
Refuse	0.2%(2)

What is your household income last year before taxes?

Less than \$20,000	22.7%(153)
\$20,000-\$40,000	18.7%(126)
\$40,001-\$60,000	13.1%(88)

\$60,001-\$80,000	10.4%(70)
\$80,001-\$100,000	7.3%(49)
More than \$100,000	7.4%(50)
Retired	8.6%(58)
Prefer not to say	11.9%(80)
Refused	(34)

Passavant Area Hospital Walking for Wellness Survey Results 2018

1. In your opinion, did the WFW program have a postitive effect on your health?

1	2	3	4	5
		xxxxxxx	xxxxxxxxxxxxx	xxxxxxxxxxxxxxxxxxxxxxxxxxxxx

2. Do you exercise outside of the WFW program?

1	2	3	4	5
	xxxxx	xxxxxxxxx	xxxxxxxxxxx	xxxxxxxxxxxxxxxxxxxxxxxxxxxxx

3. How many years have you been participating in WFW?

First	2-5	5-8	8-10	more than 10
xxxxxxxxxxx	xxxxxxxxxxxxx	xxxxxxxxxxx	xxxxxxxxxxx	xxxxxxx

4. How often did you participate in WFW this year?

Rarely		Occasionally		Every day
1	2	3	4	5
		xxxxxxxxxxx	xxxxxxxxxxxxxxxxxxxxx	xxxxxxxxxxxxxxxxxxxxx

5. Would your recommend WFW to a friend?

Never				Certainly
1	2	3	4	5
			x	xxx

6. How often did you find the tally tabs useful?

Never				Always
1	2	3	4	5
xxxxxxxxxxxxxxxxxxxxx	xxx	xxxxx	x	xxxxxxxxxxxxxxxxxxxxx

7. What could be done to make the program better?

**PASSAVANT AREA HOSPITAL COMMUNITY HEALTH NEEDS
ASSESSMENT**

**Analysis of Public Input from Jacksonville, IL Focus Groups
Conducted by UIS Survey Research Office**



Report submitted on July 27, 2018

Project Methodology

The Survey Research Office was contacted by Passavant Area Hospital, SIU Center for Family Medicine, and the Morgan County Health Department to collect, record, and analyze public input for the FY 2018-2021 Passavant Area Hospital Community Health Needs Assessment. Based, in part, on the results of an SRO survey and report (issued on March 12, 2018), Passavant Area Hospital and the Morgan County Health Department chose Access to Care as their joint collaborative for the 2018 Community Health Needs Assessment.

The topic of Access to Care is broad and has many different dimensions. The goal of this step in the process is to identify the obstacles that prevent people and their families in Jacksonville from getting the health care services they need as well as the obstacles that prevent them from being healthy. It is also vital to identify the neighborhood in Jacksonville that most struggles with access to care.

In an effort to answer these questions, the SRO conducted three focus groups in Jacksonville. The CHNA Core Group developed a list of topics to be discussed at the focus groups and the final scripts were developed by the SRO staff. The topics discussed at the focus groups include the following:

- Points of access to health care
- Trust of medical community
- Transportation
- Health literacy
- Health insurance
- Prescription medication
- Other needed services

The thirty-three 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 Jacksonville Stakeholders (June 14, 2018)

A list of possible stakeholders who currently serve Jacksonville residents was provided by Passavant Area Hospital. These individuals were first contacted by the hospital (May 18, 2018) via email to announce that the hospital would be conducting their CHNA focus groups in June and their participation would be appreciated. Formal email invitations with the date and time were sent by the SRO on June 4, 2018. Reminder emails were sent June 12, 2018, with follow-up phone calls beginning on June 12, 2018. Lunch was provided. Seven individuals participated in this focus group representing the following agencies: Central Counties Health Centers, Morgan County Health Department, Jacksonville Police Department, Morgan County DHS, Passavant Area Hospital, and Jacksonville School District/Early Years. A representative of Spirit of Faith Church could not attend the group but was interviewed over the phone. This focus group was held at Passavant Area Hospital in Meeting room four.

Focus Group of Jacksonville Parents with Young Children (June 15, 2018)

This focus group consisted of individuals who are connected to the Jacksonville School District Early Years program. The mission of The Early Years Program is to “provide a nurturing, quality learning experience for children aged birth to 5, emphasizing developmentally appropriate practices.”

The principal and parent educator recruited nine individuals to attend this focus group. Each received a \$50 financial incentive and a light breakfast for their participation. The focus group was held at the downtown plaza park in Jacksonville.

Focus Group of Jacksonville Adults (June 20, 2018)

This focus group consisted of individuals who are connected to the Spirit of Faith Faith Center. The mission of Spirit of Faith has grown from feeding those who do not have sufficient food to offering after-school activities for children and providing an atmosphere of community and family involvement. The pastor recruited sixteen individuals to attend this focus group. Each received a \$50 financial incentive. The focus group was held at Spirit of Faith Faith Center in Jacksonville.

Summary of Findings

Executive Summary

The summary report is based on the key findings that were discussed in the three focus groups. There were consistencies among all three groups. In deciding which neighborhoods in Jacksonville should be the area of focus, the decision was unanimous that Northeast Jacksonville, defined as east of Main Street and north of the railroad tracks, is by far the area most in need. When discussing the various points of access to health care in Jacksonville, residents have a basic knowledge of what services exist but not necessarily how to successfully access them. With the exception of a couple who is new to Jacksonville, the majority of residents seemed aware of the support services in the community. While the majority of the community participants understand the various health care entities available, many report still accessing health care through the hospitals' Emergency Department, either out of habit, convenience, or both. Several reported they receive services from SIU Center for Family Medicine and are extremely happy with the care they receive. Conversely, many of the participants reported mistrust of the hospital. Transportation issues loom large for nearly all the participants. The residents in this part of Jacksonville are low income and the majority of the community members who participated in these focus groups are eligible for Medicaid/Medicare. However, much confusion exists surrounding their benefits and the choices in policies that are now available with public insurance.

Points of access to health care

There are a few points of access to health care for the Jacksonville residents. Individuals report they either access health care through SIU Center for Family Medicine, through one of the primary care providers, or through the hospitals' emergency department. Very few reported using an urgent care/prompt care facility due to cost. The majority of the participants reported they have a basic understanding of the health care system and the various providers such as Memorial Physician Services, Springfield Clinic, SIU, HSHS, and the Orthopedic Center of Central Illinois. However, some reported that while they have been assigned a primary care provider, due to transportation issues and a general disconnect between some of the providers and northeast Jacksonville, they are still more likely to go to the ED.

This continued overuse of the ED is one of the primary problems that emerged concerning health care access. While the participants understand they have many options for health care, some still forego seeing a PCP and use the emergency room as their primary care provider. As a stakeholder reported, residents of northeast Jacksonville produce "the highest volumes of ED patients, perpetual ED patients, the repeaters who come into the ED for non-emergent care." She added this is because there is a misconception that prompt cares are expensive because Medicaid recipients do not understand that their insurance coverage has changed.

And they are still going to think that if I go there, it is still going to cost me a lot of money. It's that trusting piece of it because for so long, they have been burnt. So, they can't get into their doctor. They can't go to prompt care, so that's where they come, the ER. And it's their only access to care. With nurse practitioners and PAs, I don't know why they can't be seen by their doctor. Do you see what I mean? Like the issue is not with prompt care, it's the actual beginning,

which is calling their doctor for care. And they have no access, so they end up at the ER. And we call them cabs to get here because we don't know what else to do.

This statement was supported by numerous comments from the residents that they avoid prompt cares because they do think they are expensive. Additionally, several participants shared they do not understand the choices involved with the new Medicaid coverage. Several reported that members of their family might all have different insurance coverage, and that they do not understand how to or that they need to choose a plan. Therefore, some are finding that they have been assigned to insurance companies that are not widely accepted in Jacksonville.

Social service agencies are valuable partners to hospitals, serving as liaisons between the patients and care providers and assisting individuals with access to transportation, understanding insurance and prescriptions, and providing basic health needs (like food, clothing, etc.) Some of the important social service entities for residents of northeast Jacksonville are the Morgan County Health Department, the Early Years program located within the Morgan County Housing Authority at Walnut Court, Spirit of Faith, and Bethel AME (African Methodist Episcopal). Some of the agencies have a similar vision as the hospital and are making plans to embed a community health worker into the poorest neighborhoods of Jacksonville. This provides a wonderful opportunity for collaboration among the community partners, especially those that have an established trust with northeast Jacksonville residents. As one stakeholder stated, "That relationship [with the residents] is the key to developing this model and make it work to be successful."

Possible solutions:

- Educate residents on the importance of maintaining a primary care provider and work with primary care providers on being more available to northeast Jacksonville residents.
- Create a prompt care through the hospital that anyone can use regardless of which entity their doctor belonged to.
- Create an educational campaign to inform residents on how to navigate the changing Medicaid system.
- Encourage continued collaboration among social service agencies currently providing services to Jacksonville residents.

Trust of medical community

The trust of the medical community in Jacksonville is divided. While a great deal of negativity was directed at the hospital, with a few referring to it by the derogatory pass away, the opinions for the other entities providing health services in Jacksonville were more neutral. The exception to this was the SIU Center for Family Medicine, which was highly praised by those who receive services there. Shared one, "SIU is lovely. I love it. I love Jody herself." The participants that go to SIU shared that they feel respected and that the staff is attentive and caring.

The complaints concerning the hospital were varied, but it seemed that for many participants their only encounter with the hospital was through the ED. Some reported that they had gone to the ED and had received the wrong diagnosis. Said one, "Sometimes they diagnose you with the wrong stuff "at which

point another participant added, “All the time, all the time.” One participant shared, “they diagnosed my mother with carpal tunnel and she was having a stroke.” Another participant reported “I had a hernia the size of a gold ball – I couldn’t even walk – they told me nothing was wrong. I had to go to Springfield to have surgery.” Another shared that she had been given the wrong medication. Stated another about the ED staff, “I just feel like they don’t care because they don’t actually work in the hospital.” When the group was asked if they felt like they were treated with respect, one stated, “Not in the emergency room at Passavant.” Another added, “They are rude and have an attitude problem.” A mother in the parent group shared, “I feel as though walking into a place like that...they look at me like I’m dumb and uneducated...I have college and I majored in early childhood. Don’t judge me because I’m walking in as a young black mom.”

Others complained that the ED was dirty. Several added, “It’s just nasty.” Added one participant, “Walk into any room in the emergency room and you will find dirt and filth. They don’t clean. It is nasty – in any corner you will find dirt.” The one positive comment concerning Passavant ED came from a participant who had been given a recommendation from the ED to go to SIU to get a medical provider. She followed through and was very satisfied.”

The danger of this distrust is that it leads to residents not receiving the medical care they need. If individuals do not trust their doctor they are much less likely to go for well care visits or to be compliant with their prescriptions. This way of thinking was present with several of the community participants who reported they avoided seeking medical care at all. Said one mother, “I think Passavant sucks, their service sucks.” In discussing her husband’s broken foot, “it’s even worse than what it was when he went in. So like I said, we are all about the self-healing thing now because we can’t even look to the hospitals or the doctors because no one really cares.” Many of the other participants agreed with her, even though many suffered from diabetes, asthma, or high blood pressure and had young children, some with special needs.

Possible solutions:

- Training for hospital staff on how to effectively communicate with low-income families.
- Increase communication between the hospital and perpetual ED patients to educate them on other options
- Widen the scope of contact with Passavant besides the ED by bringing the hospital into the neighborhood in the form of an office and/or community health worker.
- Collaborate with more trusted entities to improve and repair relationship with residents of NE Jacksonville.

Transportation

Aside from the complaints above, another element in the poor relationship with Passavant and northeast Jacksonville is that for the residents, the hospital seems so far removed from the neighborhood. Many of the residents in northeast Jacksonville live in poverty and thus are unable to afford their own transportation, therefore getting to the hospital can be difficult. Said one, “I got all the way out there and had no way to get home – I didn’t have money for a cab and they wouldn’t pay for it.” When asked if the participants had a ride when they needed to get to the doctor, many said no and

many shared that they often walked. Added one, “the ambulance bill is too high.” Others shared that they had had to go to Springfield three times a week for specialists but their insurance no longer covered it so they had to quit going to the specialists.

The public transportation system in Jacksonville is minimal. West Central mass Transit has limited routes and hours of operation. Furthermore, some have shared they do not have the money to ride; the fare is \$3 one way. Additionally, there are only two cabs for all of Morgan County. A representative for Passavant Area Hospital stated that the hospital has been limited as to the type of transportation services they can offer due to enticement laws but is hoping transportation can be incorporated into the “Healthy Jacksonville” initiative.

Possible solutions:

- Travel vouchers to pay for cab services to/from doctors and emergency rooms.
- Increasing public transportation options as part of Healthy Jacksonville.

Health insurance, health literacy, & prescription medication

Health literacy is closely intertwined with discussions of health insurance and prescription medication. Much of the discussion surrounding health insurance dealt with confusion surrounding changes in Medicaid. Individuals are confused about the enrollment process and a large number of them were assigned a plan because they did not know that they could choose their own. This has led to dissatisfaction with the system because individuals were denied service, forced to go see different doctors or pay an increased co-pay for their visit. Others shared that everyone in their family had been assigned to a different company. One parent stated, “With this new stuff they got going on I’m a little bit confused because they got them with the cards – my kids got two separate cards. They put them with doctors I don’t even know.” Another added, “A lot of doctors don’t take the new companies.”

All of the community participants were insured through Medicaid and many were very upset by their requirements to now pay co-pays. Most shared the extra expense is quite a burden to them. In the parent groups, part of the confusion over co-pays came from the fact that many women had recently been pregnant, during which time co-pays had not been required. Shared one participant, “When I lived in Chicago, my insurance covered everything, but here I can’t go to the dentist, I can’t go to Passavant, get nothing to help with the condition I have [asthma]. My new meds costs \$69 and \$75.” He added that due to the cost he was having to go without. Several shared that the cost had become so great that many could no longer seek medical care.

This confusion also extends to prescription coverage and co-pays. Shared one, “They give me four prescriptions and you got to pay all of those different copays for each one. Why do they give us medical cards and still got to pay?” Many shared that because of the co-pay they had trouble purchasing their prescriptions. Shared one, “We got to pay a copayment to see the doctor and a co pay on the medicine.” One participant added that her kids insurance was very limited on the medicine it would pay for. Added another, “If you can’t afford the co-payment trying to get meds why even waste your time getting the meds when you know you can’t afford it.” Most did not know where to find information to help clarify

their insurance though a couple shared they had gotten help with SIU. Another added, “I don’t have any knowledge of this. I’m forced to figure this out on my own.”

Possible solutions:

- Embed an office and community health worker into the neighborhood to serve as a hub
- Create patient advocate positions to help individuals understand both their health insurance as well how to be compliant with their prescription medications.
- Develop hospital-led community workshops to help address some of the main questions surrounding health insurance programs.
- Combine resources with more trusted non-for-profits to help increase both medical literacy as well as the community’s trust in Passavant.

Other needed services

Mental health services- Several shared that it is nearly impossible to get an appointment at Memorial Behavioral Health in Jacksonville

Access to healthy food- There are several social service agencies that are currently working on improving the access to healthy food for Jacksonville residents. One of these, *Take it to the Streets*, provides summer lunches. These efforts could be benefited by increasing collaboration and financial support.

Appendix A: Stakeholder Participants

NAME	ORGANIZATION
Donna Reeves	Central Counties Health Centers
Linda Evans	Morgan County Health Department
Alan Bradish	Jacksonville Police Department
Chris Bacon	Morgan County DHS
Lori Hartz	Passavant Area Hospital
Sarah English	Jacksonville School District/Early Years
Polly Pulley	Spirit of Faith

For full transcripts of the focus group report, please contact Lori Hartz, Passavant Area Hospital Director of Community Relations, at Hartz.Lori@mhsil.com or 217-479-5800.