



OSF HEALTHCARE

Saint Elizabeth  
Medical Center



OSF HEALTHCARE

Saint Paul  
Medical Center



2022

# COMMUNITY HEALTH NEEDS ASSESSMENT

LaSalle County Health  
Department

Ottawa Regional Hospital  
& Healthcare Center

d/b/a OSF Saint Elizabeth Medical Center

Mendota Community Hospital

d/b/a OSF Saint Paul Medical Center

*LaSalle County*

EXECUTIVE SUMMARY .....	3
I. INTRODUCTION.....	4
II. METHODS.....	7
CHAPTER 1: DEMOGRAPHY AND SOCIAL DETERMINANTS.....	11
1.1 Population .....	11
1.2 Age, Gender and Race Distribution .....	12
1.3 Household/Family.....	14
1.4 Economic Information.....	15
1.5 Education.....	18
1.6 Internet Accessibility .....	18
1.7 Key Takeaways from Chapter 1.....	20
CHAPTER 2: PREVENTION BEHAVIORS.....	21
2.1 Accessibility.....	21
2.2 Wellness .....	28
2.3 Understanding Food Insecurity .....	36
2.4 Physical Environment.....	38
2.5 Health Status .....	39
2.6 Key Takeaways from Chapter 2.....	44
CHAPTER 3: SYMPTOMS AND PREDICTORS.....	45
3.1 Tobacco Use.....	45
3.2 Drug and Alcohol Abuse .....	46
3.3 Overweight and Obesity .....	50
3.4 Predictors of Heart Disease .....	51
3.5 Key Takeaways from Chapter 3.....	53
CHAPTER 4: MORBIDITY AND MORTALITY.....	54
4.1 Self-Identified Health Conditions.....	54
4.2 Healthy Babies.....	55
4.3 Cardiovascular Disease .....	56
4.4 Respiratory .....	60
4.5 Cancer.....	61
4.6 Diabetes.....	62
4.7 Infectious Diseases.....	64
4.8 Injuries.....	66
4.9 Mortality.....	68
4.10 Key Takeaways from Chapter 4.....	69
CHAPTER 5: PRIORITIZATION OF HEALTH-RELATED ISSUES .....	70
5.1 Perceptions of Health Issues .....	70
5.2 Perceptions of Unhealthy Behaviors .....	71
5.3 Perceptions of Issues Impacting Well Being.....	72
5.4 Summary of Community Health Issues.....	72

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5.5 Community Resources.....	73
5.6 Significant Needs Identified and Prioritized.....	74
III. APPENDICES .....	76
APPENDIX 1: MEMBERS OF COLLABORATIVE TEAM .....	77
APPENDIX 2: ACTIVITIES RELATED TO 2019 CHNA PRIORITIZED NEEDS .....	87
APPENDIX 3: SURVEY .....	91
APPENDIX 4: CHARACTERISTICS OF SURVEY RESPONDENTS.....	98
APPENDIX 5: RESOURCE MATRIX .....	103
APPENDIX 6: DESCRIPTION OF COMMUNITY RESOURCES.....	110
APPENDIX 7: PRIORITIZATION METHODOLOGY.....	119



# Community Health Needs Assessment

2022

*Collaboration for sustaining health equity*

## EXECUTIVE SUMMARY

The LaSalle County Community Health Needs Assessment is a collaborative undertaking by LaSalle County Health Department, OSF St. Elizabeth and St. Paul Medical Centers to highlight the health needs and well-being of residents in LaSalle County. Through this needs assessment, collaborative community partners have identified numerous health issues impacting individuals and families in the LaSalle County region. Several themes are prevalent in this health-needs assessment – the demographic composition of the LaSalle County region, the predictors for and prevalence of diseases, leading causes of mortality, accessibility to health services and healthy behaviors.

Results from this study can be used for strategic decision-making purposes as they directly relate to the health needs of the community. The study was designed to assess issues and trends impacting the communities served by the collaborative, as well as perceptions of targeted stakeholder groups.

This study includes a detailed analysis of secondary data to assess information regarding the health status of the community. In order to perform these analyses, information was collected from numerous secondary sources, including publicly available sources as well as private sources of data. Additionally,

primary data were collected for the general population and the at-risk or economically disadvantaged population. Areas of investigation included perceptions of the community health issues, unhealthy behaviors, issues with quality of life, healthy behaviors and access to medical care, dental care, prescription medications and mental-health counseling. Additionally, demographic characteristics of respondents were utilized to provide insights into why certain segments of the population responded differently.

Ultimately, the identification and prioritization of the most important health-related issues in the LaSalle County region were identified. The collaborative team considered health needs based on: (1) magnitude of the issue (i.e., what percentage of the population was impacted by the issue); (2) severity of the issue in terms of its relationship with morbidities and mortalities; (3) potential impact through collaboration. Using a modified version of the Hanlon Method, three significant health needs were identified and determined to have equal priority:

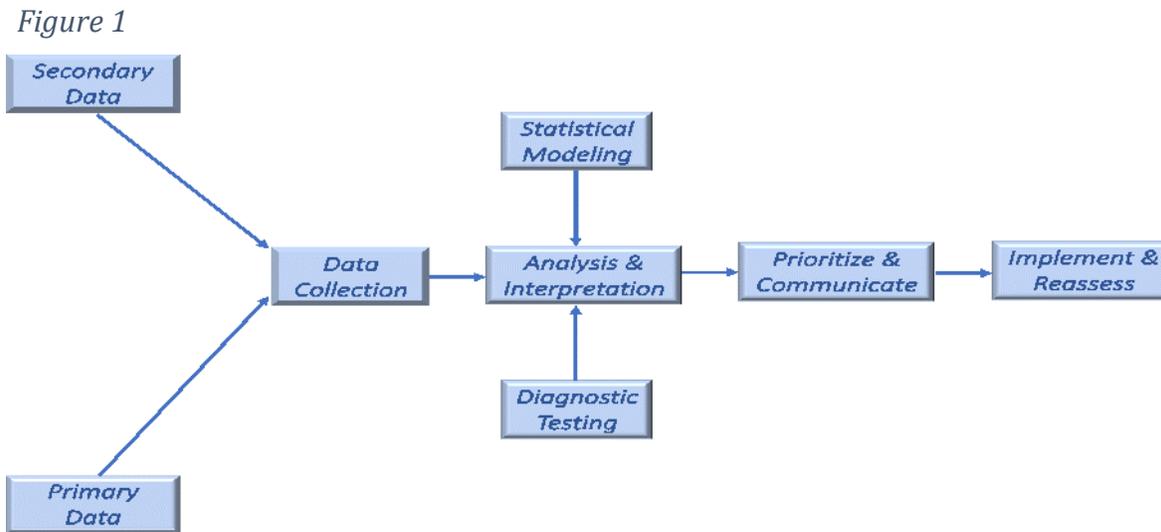
- **Healthy Behaviors – defined as active living and healthy eating, and their impact on obesity**
- **Behavioral Health – including mental health and substance abuse**
- **Healthy Aging**

## I. INTRODUCTION

### Background

The Patient Protection and Affordable Care Act (Affordable Care Act), enacted March 23, 2010, added new requirements for tax-exempt charitable hospital organizations to conduct community health needs assessments and to adopt implementation strategies to meet the community health needs identified through the assessments. This community health needs assessment (CHNA) takes into account input from specific individuals who represent the broad interests of the community served by LaSalle County Health Department and OSF St. Elizabeth and St. Paul Medical Centers including those with special knowledge of or expertise in public health. For this study, a community health-needs assessment is defined as a systematic process involving the community, to identify and analyze community health needs and assets in order to prioritize these needs, create a plan, and act upon unmet community health needs. Results from this assessment will be made widely available to the public. This CHNA Report was approved by the OSF HealthCare System's Board of Directors with respect to OSF St. Elizabeth and St. Paul Medical Centers on July 25, 2022.

The structure of the CHNA is based on standards used by the Internal Revenue Service to develop Form 990, Schedule H–Hospitals, designated solely for tax-exempt charitable hospital organizations. The fundamental areas of the community health needs assessment are illustrated in Figure 1.



## Collaborative Team and Community Engagement

In order to engage the entire community in the CHNA process, a collaborative team of health-professional experts and key community advocates was created. Members of the collaborative team were carefully selected to ensure representation of the broad interests of the community. Specifically, team members included representatives from OSF Saint Elizabeth and OSF Saint Paul Medical Centers, members of the LaSalle County Health Department, and administrators from key community partner organizations. Engagement occurred throughout the entire process, resulting in shared ownership of the assessment. The entire collaborative team met in the first and second quarter of 2022. Additionally, numerous meetings were held between the facilitators and specific individuals during the process.

Specifically, members of the **Collaborative Team** consisted of individuals with special knowledge of and expertise in the healthcare of the community. Note that the collaborative team provided input for all sections of the CHNA. Individuals, affiliations, titles and expertise can be found in APPENDIX 1: MEMBERS OF COLLABORATIVE TEAM.

## Definition of the Community

OSF Saint Elizabeth and OSF Saint Paul Medical Centers each define their community as constituting LaSalle County. In order to determine the geographic boundaries for OSF Saint Elizabeth and OSF Saint Paul Medical Centers, analyses were completed to identify what percentage of inpatient and outpatient activity was represented by LaSalle County. Data show that LaSalle County represent 88% of all patients for the hospitals.

## Purpose of the Community Health-Needs Assessment

In the initial meeting, the collaborative committee identified the purpose of this study. Specifically, this study has been designed to provide necessary information to health-care organizations, including hospitals, clinics and health departments, in order to create strategic plans in program design, access and delivery. Results of this study will act as a platform that allows health-care organizations to orchestrate

limited resources to improve management of high-priority challenges. By working together, hospitals, clinics, agencies and health departments will use this CHNA to improve the quality of healthcare in LaSalle County. When feasible, data are assessed longitudinally to identify trends and patterns by comparing with results from the 2019 CHNA and benchmarked with State of Illinois averages.

## Community Feedback from Previous Assessments

The OSF Saint Elizabeth and OSF Saint Paul Medical Center joint 2019 CHNA and implementation plan were made widely available to the community to allow for feedback. Specifically, the hospitals posted both a full version and a summary version of the 2019 CHNA on their websites. In order to encourage written feedback, the hospitals' websites specifically included a section labeled **Share Your Feedback** and provided instructions regarding how individuals from the community could provide comments to the CHNA. While no written feedback was received by individuals from the community via the available mechanism, verbal feedback regarding the joint CHNA and implementation plan was provided by key stakeholders from community-service organizations and incorporated as part of the collaborative process.

## 2019 CHNA Health Needs and Implementation Plans

The joint 2019 LaSalle County CHNA for both OSF St. Elizabeth and OSF St. Paul Medical Centers identified two significant health needs. These included: healthy behaviors, defined as active living and healthy eating, and their impact on obesity and behavioral health, including mental health and substance abuse. Specific actions were taken to address these needs. Detailed discussions of goals and strategies to improve these health needs can be seen in APPENDIX 2: ACTIVITIES RELATED TO 2019 CHNA PRIORITIZED NEEDS. Note that numerous challenges associated with the COVID-19 pandemic had significant impact on these activities.

## Social Determinants of Health

This CHNA incorporates important factors associated with Social Determinants of Health (SDOH). SDOH are important environmental factors, such as where people are born, live, work and play, that affect people's well-being, physical and mental health, and quality of life. According to research conducted by the U.S. Department of Health and Human Services, *Healthy People 2030* has identified five SDOH that should be included in assessing community health (Figure 2).

Figure 2



Social Determinants of Health  
Copyright-free

Healthy People 2030

Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved January 15, 2022, from <https://health.gov/healthypeople/objectives-and-data/social-determinants-health>

Assessment of SDOH is included in the CHNA, as social determinants help contribute to health inequities and disparities. Simply creating interventions without incorporating SDOH will have limited impact on improving community health for people living in underserved or at-risk areas.

## II. METHODS

To complete the comprehensive community health-needs assessment, multiple sources were examined. Secondary statistical data were used to assess the community profile, morbidity rates and causes of mortality. Additionally, a study was completed to examine perceptions of the community health-related issues, healthy behaviors, behavioral health, food security, social determinants of health and access to healthcare.

## Secondary Data Collection

Existing secondary statistical data were first used to develop an overall assessment of health-related issues in the community. Within each section of the report, there are definitions, importance of categories, data and interpretations. At the end of each chapter, there is a section on key takeaways.

Based on several retreats, a separate OSF Collaborative Team used COMPdata Informatics (affiliated with Illinois Health and Hospital Association (IHA)) to identify six primary categories of diseases, including: age related, cardiovascular, respiratory, cancer, diabetes and infections. In order to define each disease category, modified definitions developed by Sg2 were used. Sg2 specializes in consulting for health-care organizations. Their team of experts includes MDs, PhDs, RNs and health-care leaders with extensive strategic, operational, clinical, academic, technological and financial experience.

## Primary Data Collection

In addition to existing secondary data sources, primary survey data were also collected. This section describes the research methods used to collect, code, verify and analyze primary survey data. Specifically, the research design used for this study: survey design, data collection and data integrity.

## Survey Instrument Design

Initially, all publicly available health-needs assessments in the U.S. were assessed to identify common themes and approaches to collecting community health-needs data. By leveraging best practices from these surveys, a new survey in 2021 was designed for use with both the general population and the at-risk community. To ensure that all critical areas were being addressed, the entire collaborative team was involved in survey design/approval through several fact-finding sessions. Additionally, several focus groups were used to collect the qualitative information necessary to design survey items. Specifically, for the community health-needs assessment, eight specific sets of items were included:

- **Ratings of health issues in the community** – to assess the importance of various community health concerns. Survey items included assessments of topics such as cancer, diabetes and obesity.
- **Ratings of unhealthy behaviors in the community** – to assess the importance of various unhealthy behaviors. Survey items included assessments of topics such as violence, drug abuse and smoking.
- **Ratings of issues concerning well-being** – to assess the importance of various issues relating to well-being in the community. Survey items included assessments of topics such as access to healthcare, safer neighborhoods and effective public transportation.
- **Accessibility to healthcare** – to assess the degree to which residents could access healthcare when needed. Survey items included assessments of topics such as access to medical, dental and mental-healthcare, as well as access to prescription medication.
- **Healthy behaviors** – to assess the degree to which residents exhibited healthy behaviors. The survey items included assessments of topics such as exercise, healthy eating habits and cancer screenings.
- **Behavioral health** – to assess community issues related to areas such as anxiety and depression.
- **Food security** – to assess access to healthy food alternatives.
- **Social determinants of health** – to assess the impact that social determinants may have on the above-mentioned areas.

Finally, demographic information was collected to assess background information necessary to segment markets in terms of the eight categories discussed above. A copy of the final survey is included in APPENDIX 3: SURVEY

## Sample Size

In order to identify our potential population, we first identified the percentage of the LaSalle County population that was living in poverty. Specifically, we multiplied the population of the county by its respective poverty rate to identify the minimum sample size to study the at-risk population. The poverty rate for LaSalle County is 11.4 percent. The population used for the calculation was 107,689 yielding a total of 12,277 residents living in poverty in the LaSalle County area.

A normal approximation to the hypergeometric distribution was assumed given the targeted sample size.

$$n = (Nz^2pq)/(E^2 (N-1) + z^2 pq)$$

where:

n = the required sample size

N = the population size

z = the value that specified the confidence interval (use 95% CI)

pq = population proportions (set at .05)

E =desired accuracy of sample proportions (set at +/- .05)

To provide a representative profile when assessing the aggregated population for the LaSalle County region, the general population was combined with a portion of the at-risk population. To represent the at-risk population as a percentage of the aggregate population, a random-number generator was used to select at-risk cases to include in the general sample. Additionally, efforts were made to ensure that the demography of the sample was aligned with population demographics according to U.S. Census data. This provided a total usable sample of 729 respondents for analyzing the aggregate population. Sample characteristics can be seen in APPENDIX 4: CHARACTERISTICS OF SURVEY RESPONDENTS. Counties were then weighted based on population size.

## Data Collection

Survey data were collected in the 3rd and 4th quarter of 2021. To collect data in this study, two techniques were used. First, an online version of the survey was created. Second, a paper version of the survey was distributed. In order to be sensitive to the needs of respondents, surveys stressed assurance of complete anonymity. Note that versions of both the online survey and paper survey were translated into Spanish.

To specifically target the at-risk population, surveys were distributed at homeless shelters, food pantries and soup kitchens. Since the at-risk population was specifically targeted as part of the data collection effort, this became a stratified sample, as other groups were not specifically targeted based on their socio-economic status.

Note that use of electronic surveys to collect community-level data may create a potential for bias from convenience sampling error. To recognize for potential bias in the community sample, a second control sample of data was collected. Specifically, the control sample consisted of random patients surveyed at the hospital, assuming that patients receiving care represent an unbiased representation of the community. All questions on the patient version of the survey pertaining to access to healthcare were removed, as these questions were not relevant to current patients. Data from the community sample and the control sample were compared using t-tests and tetrachoric correlations when appropriate. Results show that the community sample did not exhibit any significance patterns of bias. If specific relationships exhibited a potential for bias between the community sample and the control sample, they are identified in the social-determinants sections of the analyses within each chapter.

## Data Integrity

Comprehensive analyses were performed to verify the integrity of the data for this research. Without proper validation of the raw data, any interpretation of results could be inaccurate and misleading if used for decision-making. Therefore, several tests were performed to ensure that the data were valid. These tests were performed before any analyses were undertaken. Data were checked for coding accuracy, using descriptive frequency statistics to verify that all data items were correct. This was followed by analyses of means and standard deviations and comparison of primary data statistics to existing secondary data.

## Analytic Techniques

To ensure statistical validity, several different analytic techniques were used. Specifically, frequencies and descriptive statistics were used for identifying patterns in residents' ratings of various health concerns. Additionally, appropriate statistical techniques were used for identification of existing relationships between perceptions, behaviors and demographic data. Specifically, Pearson correlations,  $X^2$  tests and tetrachoric correlations were used when appropriate, given characteristics of the specific data being analyzed.

CHAPTER 1 OUTLINE

- 1.1 Population
- 1.2 Age, Gender and Race Distribution
- 1.3 Household/Family
- 1.4 Economic Information
- 1.5 Education
- 1.6 Internet Accessibility
- 1.7 Key Takeaways from Chapter 1

# CHAPTER 1: DEMOGRAPHY AND SOCIAL DETERMINANTS

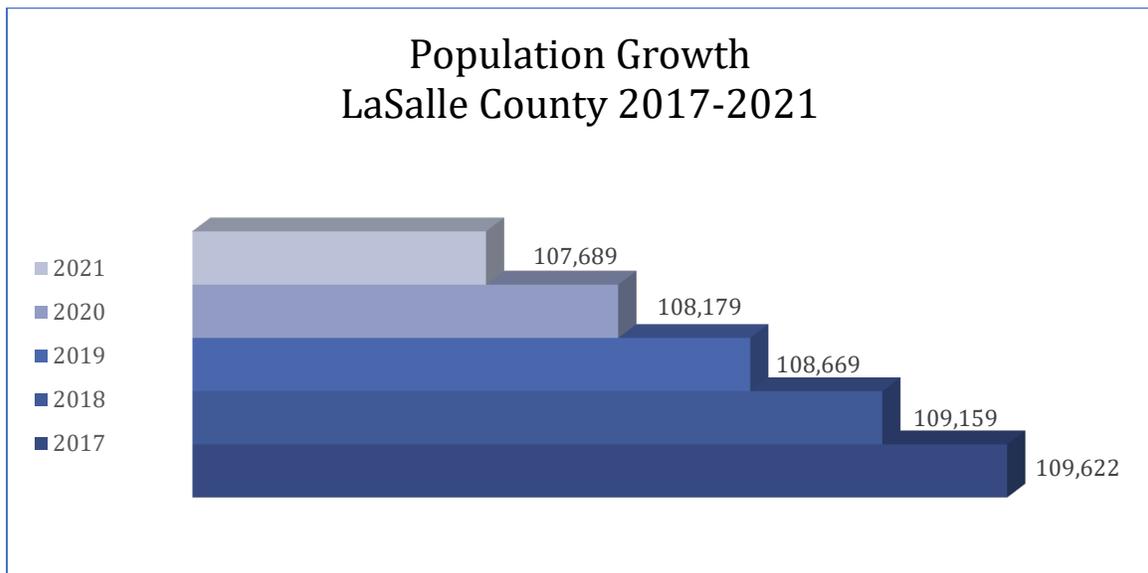
## 1.1 Population

*Importance of the measure:* Population data characterize individuals residing in LaSalle County. Population data provide an overview of population growth trends and build a foundation for additional analysis of data.

### Population Growth

Data from the last census indicate the population of LaSalle County has slightly decreased (1.8%) between 2017 and 2021 (Figure 3).

Figure 3



Source: US Census

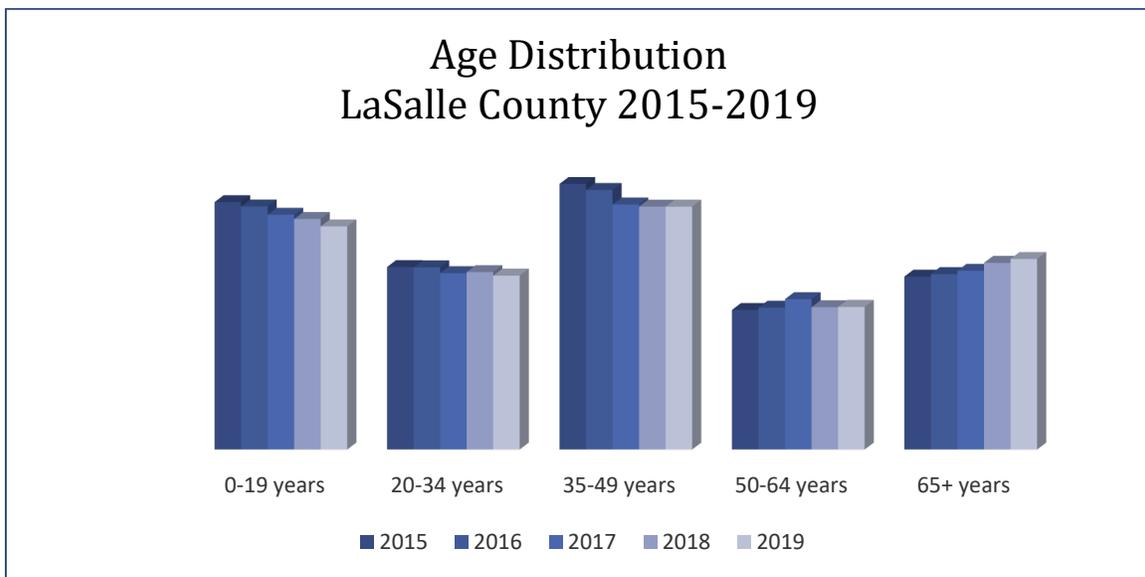
## 1.2 Age, Gender and Race Distribution

*Importance of the measure:* Population data broken down by age, gender, and race groups provide a foundation to analyze the issues and trends that impact demographic factors including economic growth and the distribution of healthcare services. Understanding the cultural diversity of communities is essential when considering health-care infrastructure and service delivery systems.

### Age

Figure 4 illustrates the percentage of individuals in LaSalle County in each age group. Of note, the elderly population (residents aged 65+ years) increased 10.2% between 2015 and 2019.

Figure 4

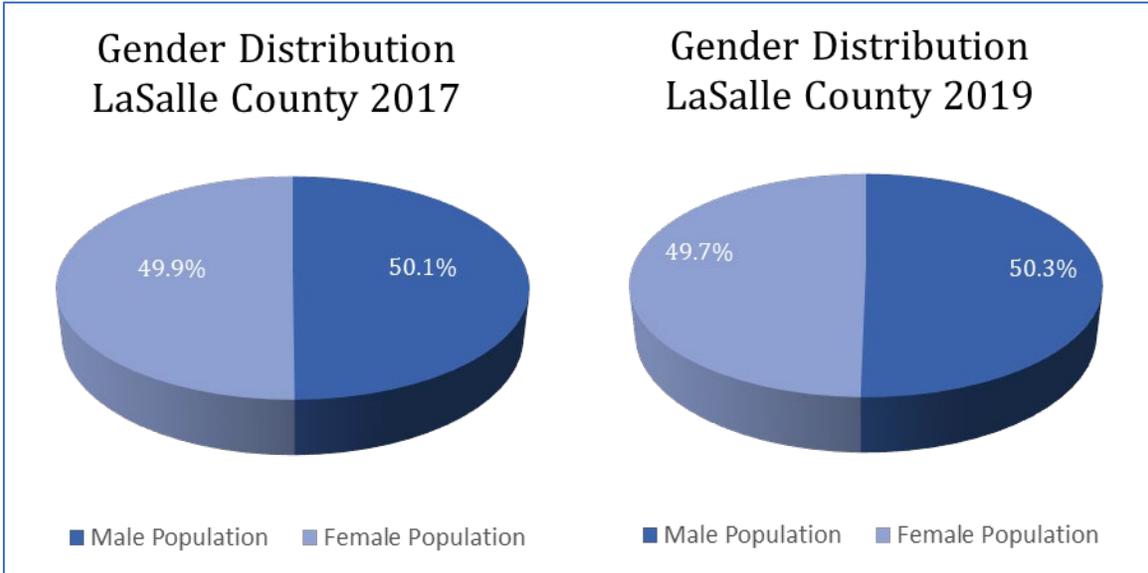


Source: US Census

### Gender

The gender distribution of LaSalle County (Figure 5) residents has remained relatively consistent between 2017 and 2019.

Figure 5

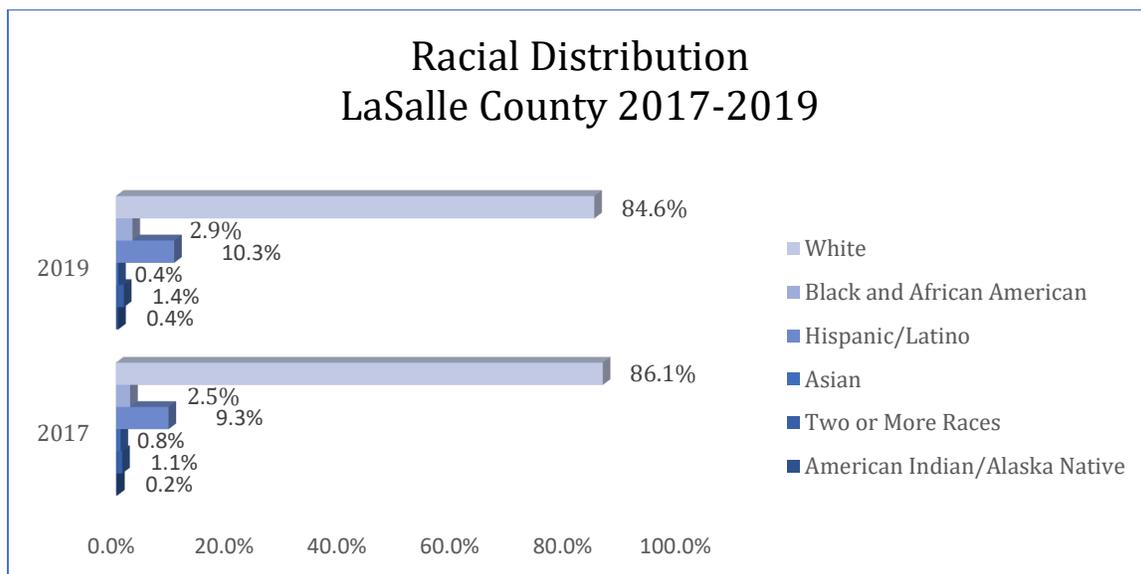


Source: US Census

## Race

With regard to race and ethnic background, LaSalle County is largely homogenous, yet in recent years, the county is becoming more diverse. Data from 2019 suggest that White ethnicity comprises 84.6% of the population in LaSalle County. However, the non-White population of LaSalle County has been increasing (from 13.9% in 2017 to 15.4% in 2019), with Black ethnicity comprising 2.9% of the population, multi-racial ethnicity comprising 1.4% of the population, and Hispanic/Latino (LatinX) ethnicity comprising 10.3% of the population (Figure 6).

Figure 6



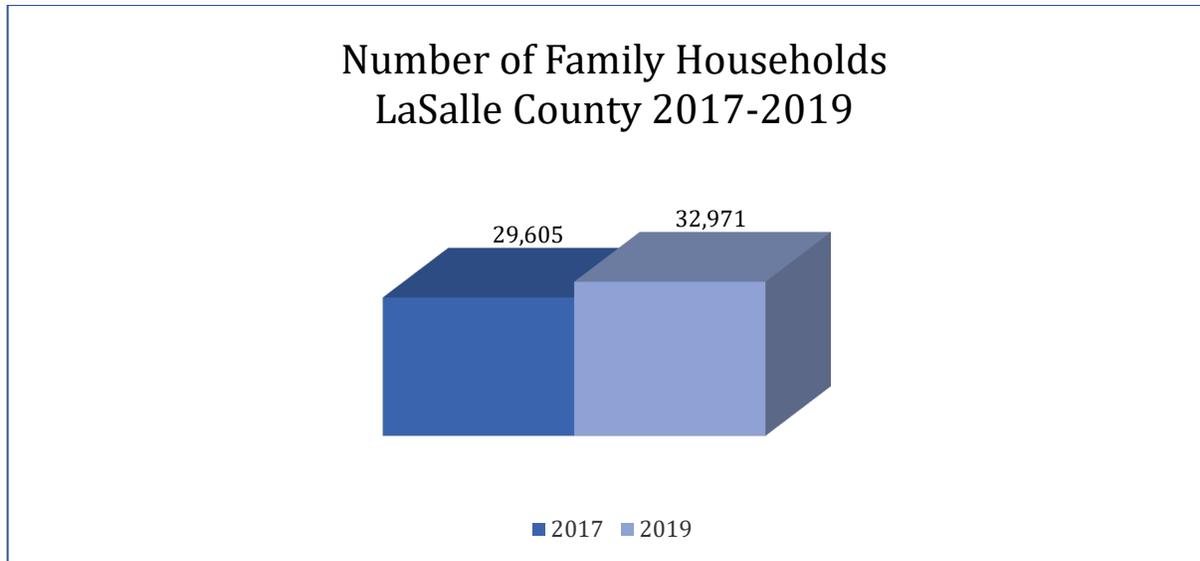
Source: US Census

## 1.3 Household/Family

*Importance of the measure:* Families are an important component of a robust society in LaSalle County, as they dramatically impact the health and development of children and provide support and well-being for older adults.

As indicated in Figure 7, the number of family households in LaSalle County increased from 2017 to 2019.

Figure 7

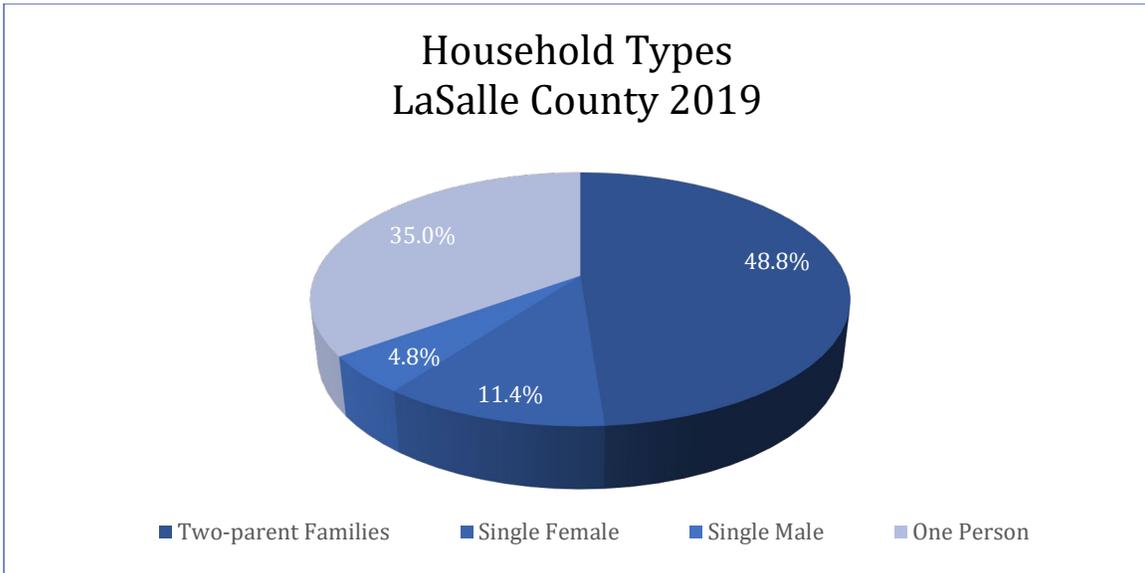


Source: US Census

### Family Composition

In LaSalle County, data from 2019 suggest the percentage of two-parent families in LaSalle County is 48.8%. One-person households represent 35% of the county population and single-female households represent 11.4% and single-male households represent 4.8% (Figure 8).

Figure 8

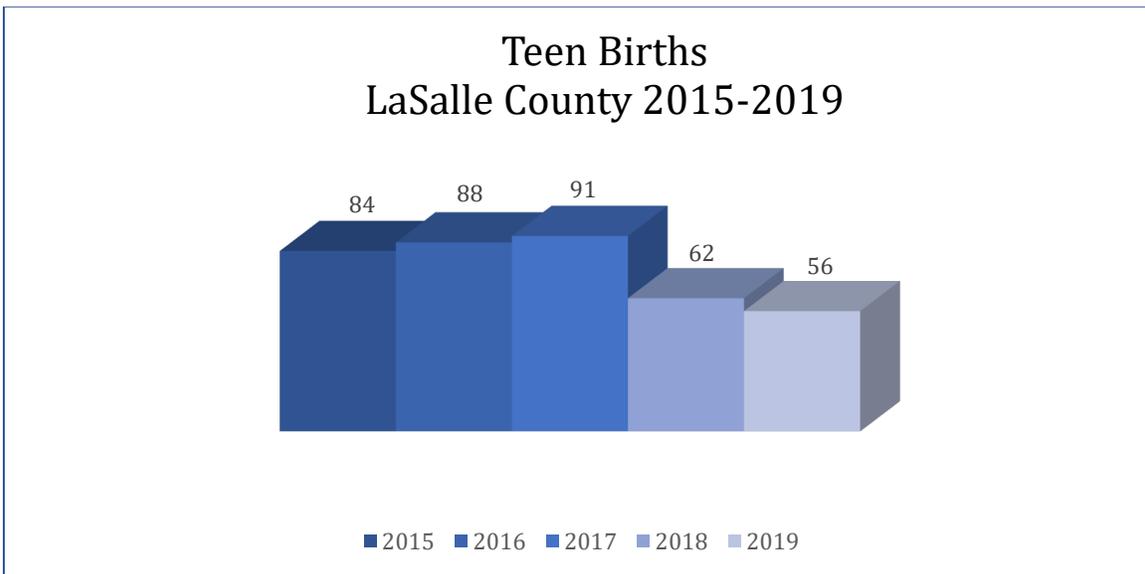


Source: US Census

## Early Sexual Activity Leading to Births from Teenage Mothers

LaSalle County has experienced a slight fluctuation in teenage birth count. The teen birth count steadily declined in 2018 and 2019 (Figure 9).

Figure 9



Source: Illinois Department of Public Health

## 1.4 Economic Information

*Importance of the measure:* Median income divides households into two segments with one-half of households earning more than the median income and the other half earning less. Because median

income is not significantly impacted by unusually high or low-income values, it is considered a more reliable indicator than average income. To live in poverty means to lack sufficient income to meet one's basic needs. Accordingly, poverty is associated with numerous chronic social, health, education and employment conditions.

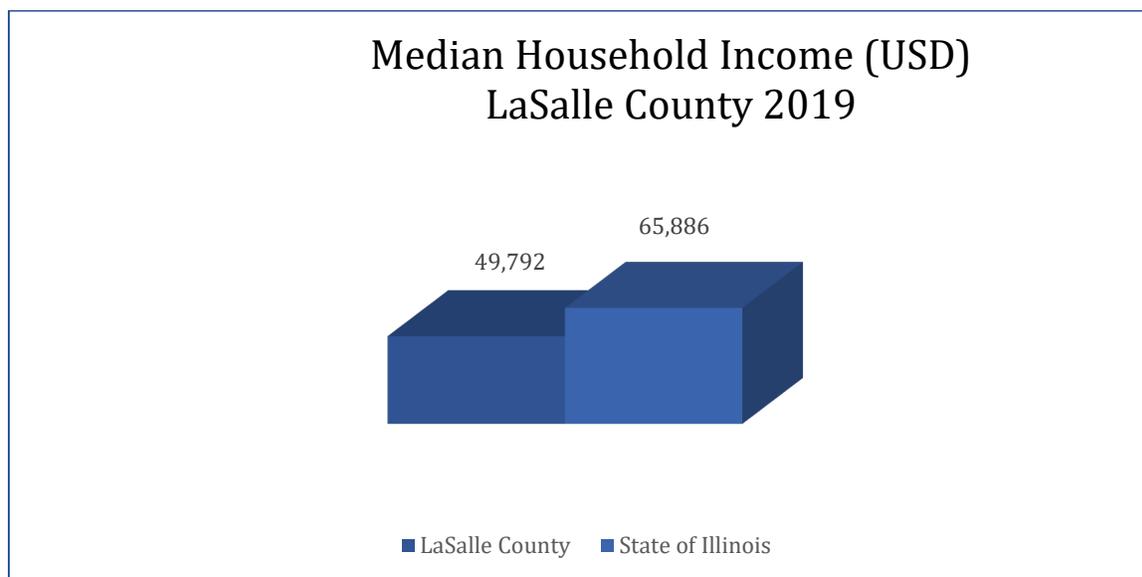
## Economic Climate

Economic climate is a measure of a community's financial resources and resiliency. Key risk influencers include income, cost of living and opportunity. For LaSalle County, 25% of the population is at elevated risk for economic climate. This is lower than the State of Illinois average of 35% (SocialScape® powered by SociallyDetermined®, 2022).

## Median Income Level

For 2019, the median household income in LaSalle County was lower than the State of Illinois (Figure 10).

Figure 10

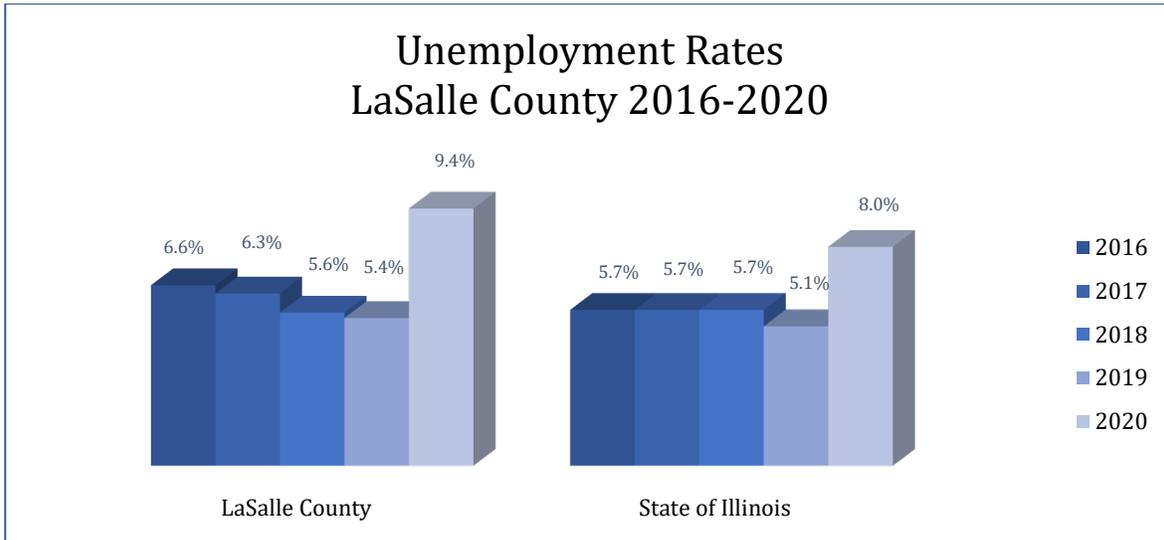


Source: US Census

## Unemployment

For the years 2016 to 2020, except 2018, the LaSalle County unemployment rate was higher than the State of Illinois unemployment rate. However, in 2020 the rate significantly increased higher than State of Illinois. Some of the increase in unemployment in 2020 may be attributed to the COVID-19 pandemic (Figure 11).

Figure 11

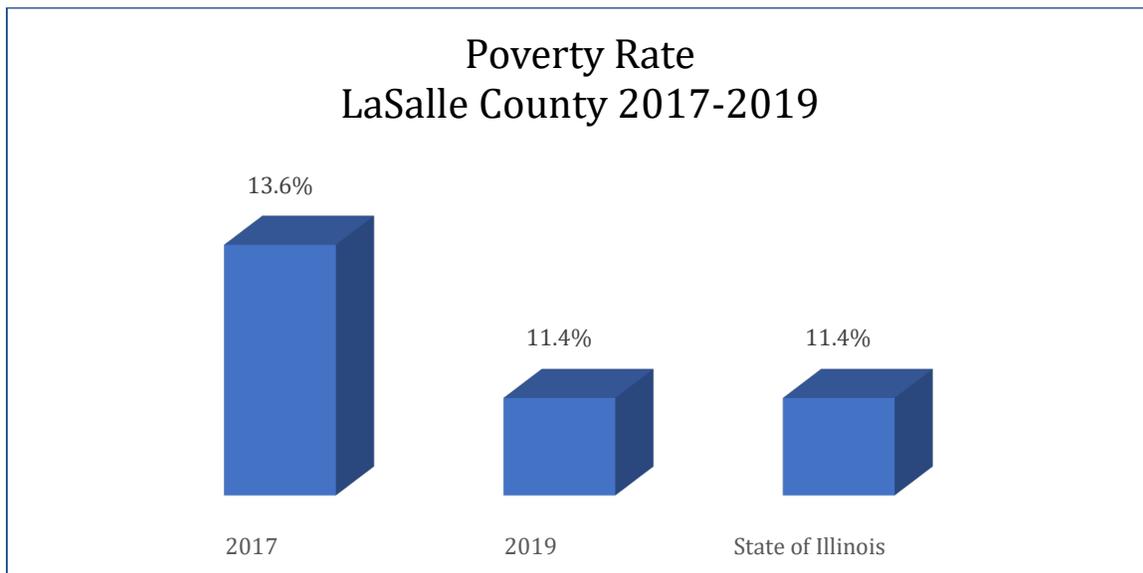


Source: Bureau of Labor Statistics

## Individuals in Poverty

In LaSalle County, the percentage of individuals living in poverty between 2017 and 2019 decreased by 2.2%. The poverty rate for individuals is 11.4%, which is equal to the State of Illinois individual poverty rate of 11.4%. Poverty has a significant impact on the development of children and youth. (Figure 12).

Figure 12



Source: US Census

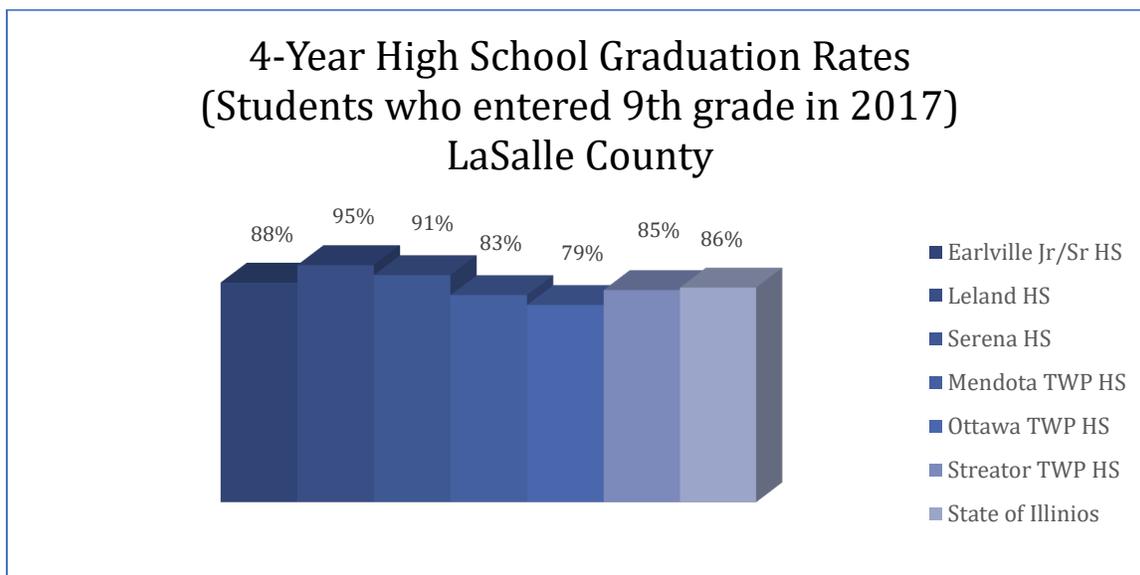
## 1.5 Education

*Importance of the measure:* According to the National Center for Educational Statistics<sup>1</sup>, “The better educated a person is, the more likely that person is to report being in ‘excellent’ or ‘very good’ health, regardless of income.” Research suggests that the higher the level of educational attainment and the more successful one is in school, the better one’s health will be and the greater likelihood of one selecting healthy lifestyle choices. Accordingly, years of education is strongly related to an individual’s propensity to earn a higher salary, gain better employment, and foster multifaceted success in life.

### High School Graduation Rates

Students who entered 9<sup>th</sup> grade in 2017 in LaSalle County school districts were at or above the State averages for graduation rates, except Mendota Township HS, Ottawa Township HS and Streator Township HS, which reported lower rates (Figure 13).

Figure 13



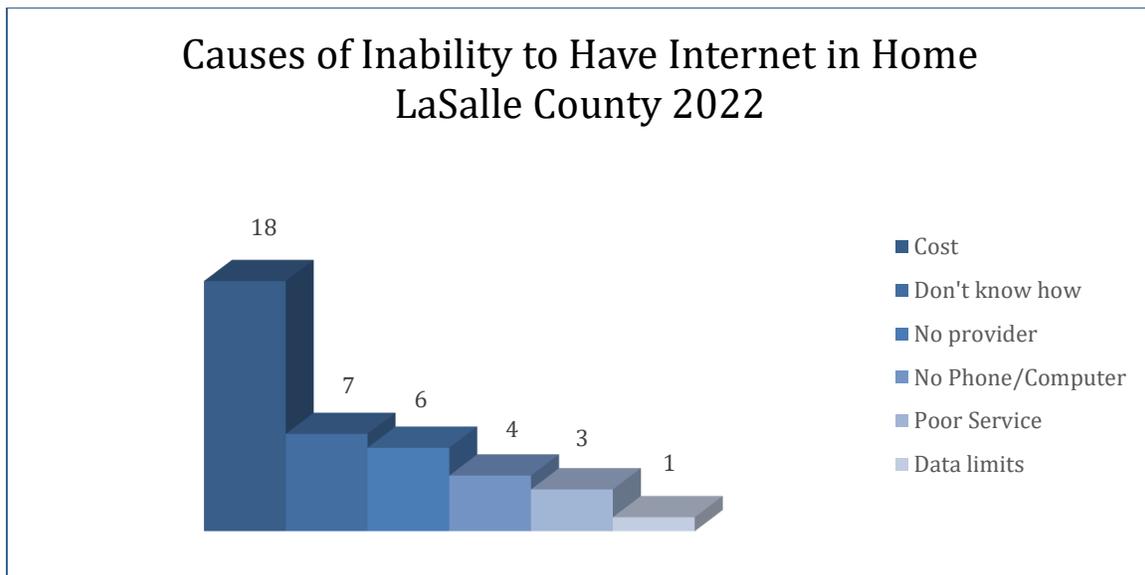
Source: Illinois Report Card

## 1.6 Internet Accessibility

Survey respondents were asked if they had Internet access. Of respondents, 95% indicated they had Internet in their homes. For those who did not have Internet in their home, cost was the most frequently cited reason (Figure 14). Note that these data are displayed in frequencies rather than percentages given the low number of responses.

<sup>1</sup> NCES 2005

Figure 14



Source: CHNA Survey

## Digital Landscape

Digital landscape is a community's access to digital tools and the digital literacy to use them. Key risk influencers include affordability, accessibility and digital literacy. For LaSalle County, 10% of the population is at elevated risk for digital landscape. This is similar to the State of Illinois average of 9% (SocialScape® powered by SociallyDetermined®, 2022).

## Social Determinants Related to Internet Access

Several factors show significant relationships with an individual's Internet access. The following relationships were found using correlational analyses:

- **Access to Internet** tends to be higher for younger people, White people, those with higher education, those with higher income. Internet access tends to be lower for people in an unstable (e.g., homeless) housing environment.

## 1.7 Key Takeaways from Chapter 1

- ✓ POPULATION DECREASED OVER THE LAST 5 YEARS.
- ✓ POPULATION OVER AGE 65 IS INCREASING.
- ✓ DECREASING WHITE POPULATION, INCREASING LATINX POPULATION.
- ✓ SINGLE FEMALE HEAD-OF-HOUSE-HOUSEHOLD REPRESENTS 11.4% OF THE POPULATION. HISTORICALLY, THIS DEMOGRAPHIC INCREASES THE LIKELIHOOD OF FAMILIES LIVING IN POVERTY.

**CHAPTER 2 OUTLINE**

- 2.1 Accessibility
- 2.2 Wellness
- 2.3 Access to Information
- 2.4 Physical Environment
- 2.5 Health Status
- 2.6 Key Takeaways from Chapter 2

## CHAPTER 2: PREVENTION BEHAVIORS

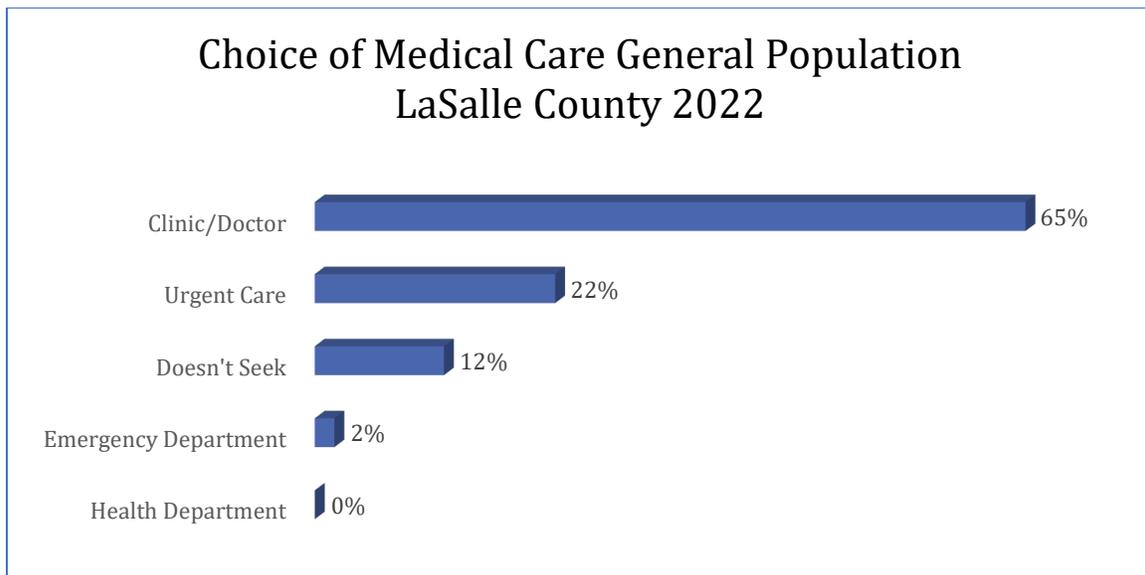
### 2.1 Accessibility

*Importance of the measure:* It is critical for health-care services to be accessible. Therefore, accessibility to healthcare must address both the associated financial costs and the supply and demand of medical services.

#### Choice of Medical Care

Survey respondents were asked to select the type of health-care facility used when sick. Six different alternatives were presented, including clinic or doctor's office, emergency department, urgent-care facility, health department, no medical treatment and other. The most common response for source of medical care was clinic/doctor's office, chosen by 65% of survey respondents. This was followed by urgent care (22%), not seeking medical attention (12%), the emergency department at a hospital (2%) and the health department (0%) (Figure 15).

Figure 15



Source: CHNA Survey

### Comparison to 2019 CHNA

*Clinic/doctor's office and urgent care facility usage has decreased slightly since 2019. Those that don't seek care have increase by 4%. Emergency department usage has remained unchanged.*

## Social Determinants Related to Choice of Medical Care

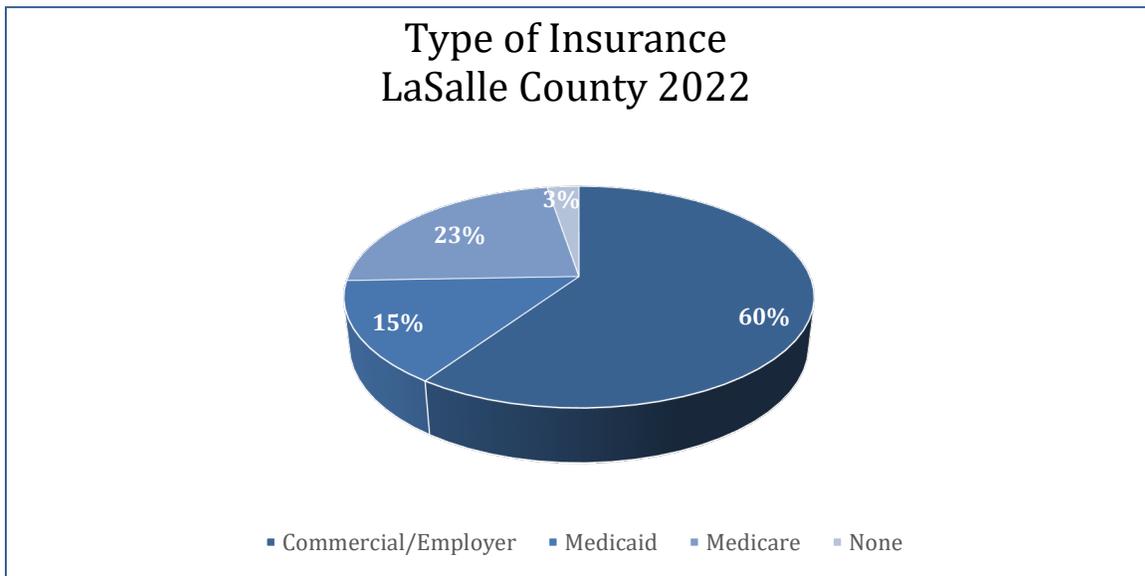
Several factors show significant relationships with an individual's choice of medical care. The following relationships were found using correlational analyses:

- **Clinic/Doctor's Office** tends to be used more often by women, older people, and White people. Clinics/doctor's office tend to be used less by people in an unstable (e.g., homeless) housing environment.
- **Urgent Care** tends to be used more by younger people, White people, those with higher education and higher income.
- **Emergency Department** tends to be used more by those with lower income and by people in an unstable (e.g., homeless) housing environment.
- **Do Not Seek Medical Care** tends to be used more by younger people, LatinX people, and those with lower income. Do not seek medical care tends to be lower for White people.
- **Health Department** did not have any significant correlates.

## Insurance Coverage

According to survey data, 60% of the residents are covered by commercial/employer insurance, followed by Medicare (23%), and Medicaid (15%). Only 3% of respondents indicated they did not have any health insurance (Figure 16).

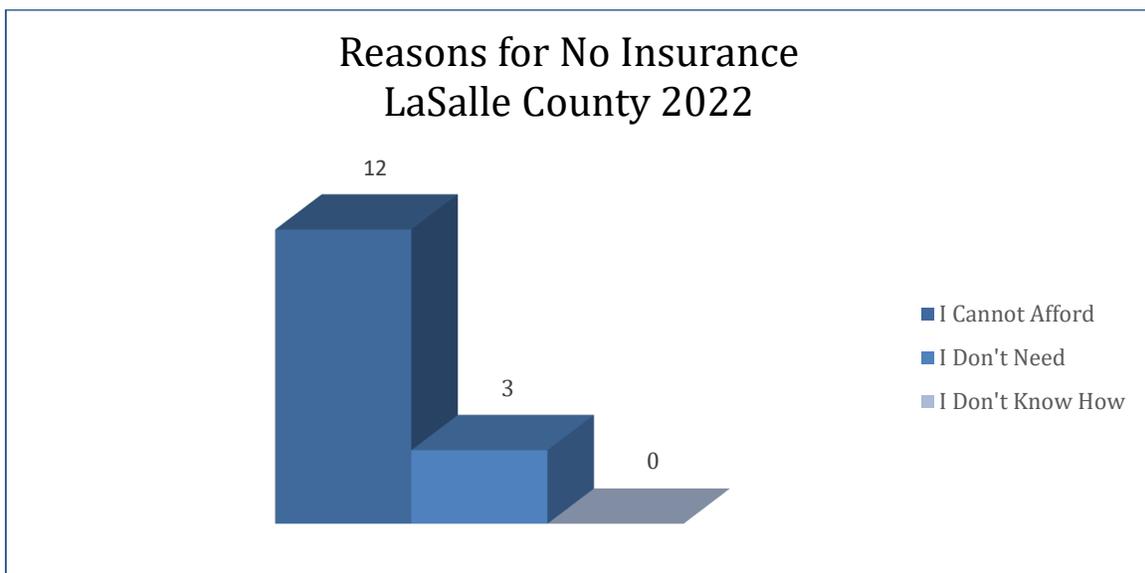
Figure 16



Source: CHNA Survey

Data from the survey show that for the 2% of individuals who do not have insurance, the most prevalent reason was cost (Figure 17). Note that these data are displayed in frequencies rather than percentages given the low number of responses.

Figure 17



Source: CHNA Survey

## Comparison to 2019 CHNA

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*Results are similar to the 2019 survey.*

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### Social Determinants Related to Type of Insurance

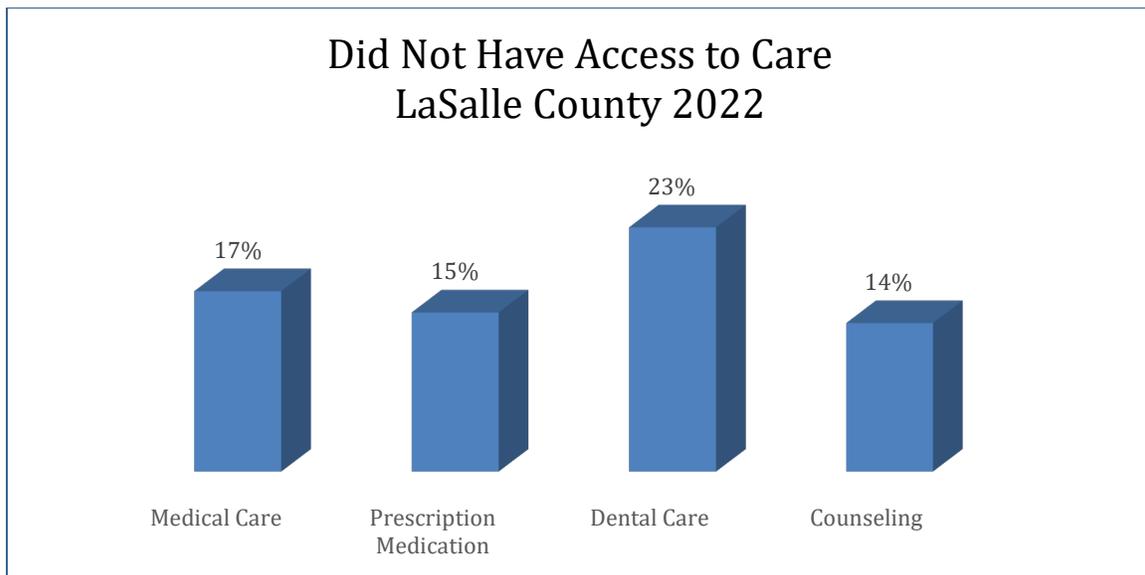
Several characteristics show significant relationships with an individual's type of insurance. The following relationships were found using correlational analyses:

- **Medicare** tends to be used more frequently by older people, White people and those with lower income. Medicare tends to be used less frequently by LatinX people.
- **Medicaid** tends to be used more frequently by younger people, those with lower income and people with an unstable (e.g., homeless) housing environment.
- **Commercial/employer insurance** is used more often by younger people, and those with higher education, those with higher income. Commercial/employer insurance is used less often by people with an unstable (e.g., homeless) housing environment.
- **No Insurance** tends to be reported more often by LatinX people and people with an unstable (e.g., homeless) housing environment. Given the low survey response rate for LatinX people, findings should be interpreted with caution.

## Access to Care

In the CHNA survey, respondents were asked, "Was there a time when you needed care but were not able to get it?" Access to four types of care were assessed: medical care, prescription medications, dental care and counseling. Survey results show that 17% of the population did not have access to medical care when needed; 15% of the population did not have access to prescription medication when needed; 23% of the population did not have access to dental care when needed; and 14% of the population did not have access to counseling when needed (Figure 18).

Figure 18



Source: CHNA Survey



## Social Determinants Related to Access to Care

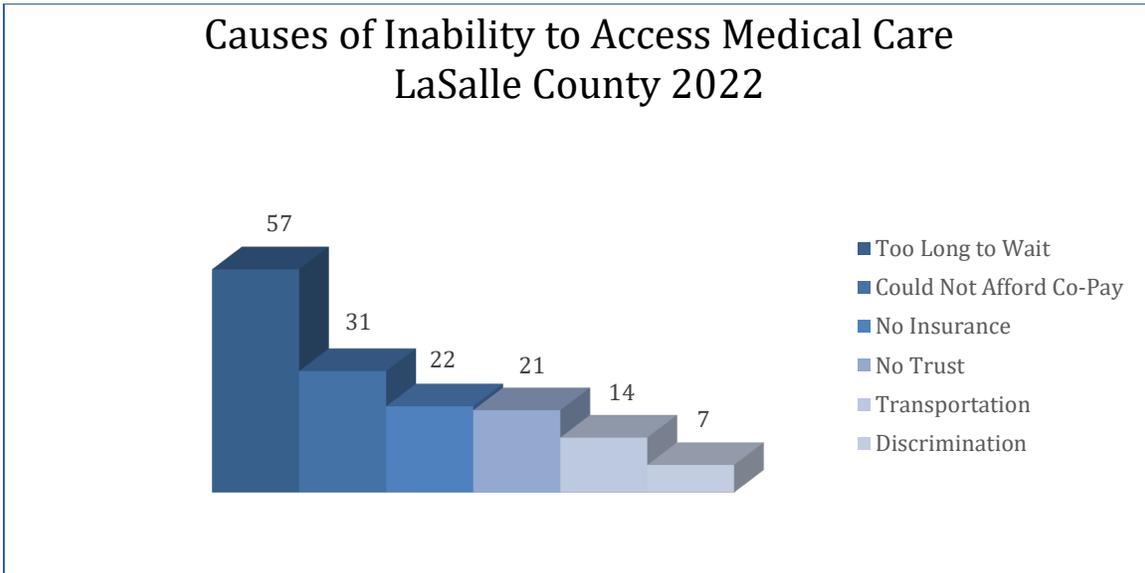
Several characteristics show a significant relationship with an individual's ability to access care when needed. The following relationships were found using correlational analyses:

- **Access to medical care** tends to be higher for older people, White people and those with those with higher income. LatinX people are less likely to have access to medical care.
- **Access to prescription medication** tends to be higher for White people, those with higher education and those with higher income. Access to prescription medication tends to be lower for Black people.
- **Access to dental care** tends to be higher for White people, those with higher education and those with higher income. Access to dental care tends to be lower for Black people.
- **Access to counseling** tends to be higher for older people, White people and those with higher income.

## Reasons for No Access – Medical Care

Survey respondents who reported they were not able to get medical care when needed were asked a follow-up question. The leading causes of the inability to gain access to medical care were too long to wait for an appointment (57), the inability to afford the copay (31) no insurance (22) and no trust (21). Note that these data are displayed in frequencies rather than percentages given the low number of responses (Figure 19).

Figure 19

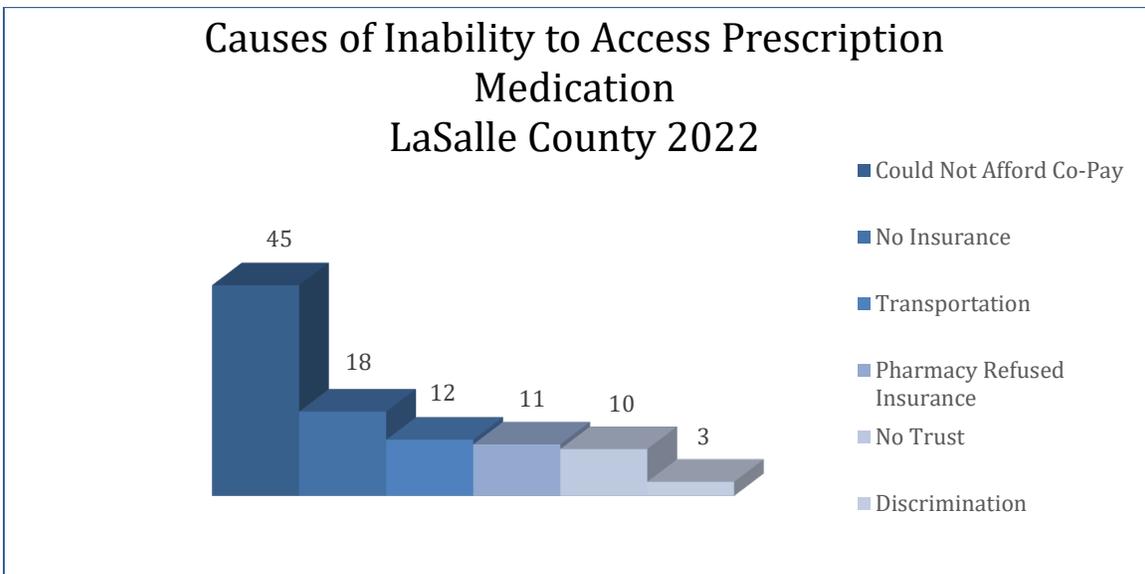


Source: CHNA Survey

## Reasons for No Access – Prescription Medication

Survey respondents who reported they were not able to get prescription medication when needed were asked a follow-up question. Based on frequencies, the leading cause of the inability to gain access to prescription medicine was the inability to afford copayments or deductibles (45) and no insurance (18) (Figure 20).

Figure 20

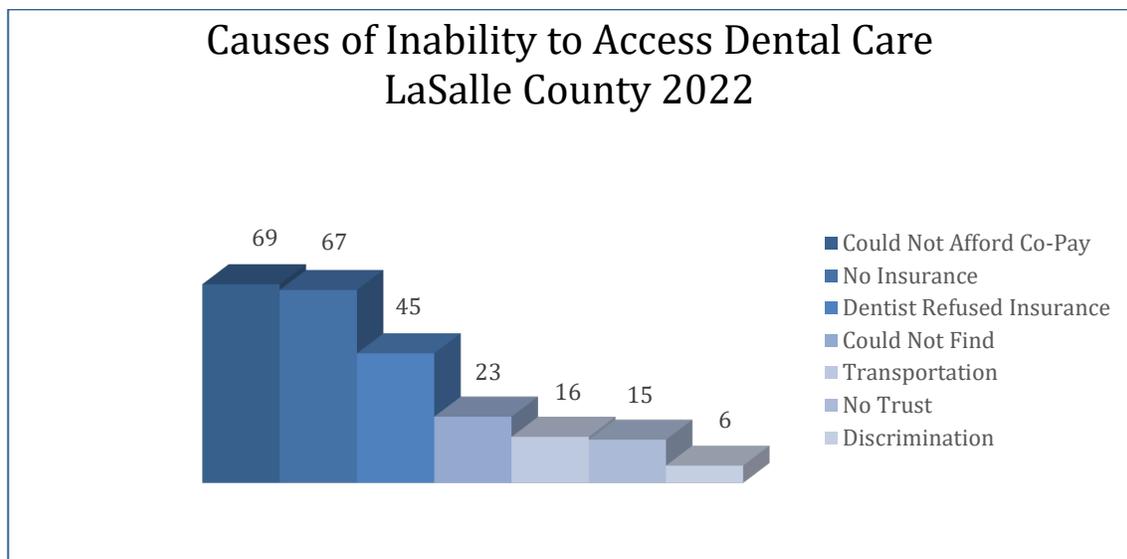


Source: CHNA Survey

## Reasons for No Access – Dental Care

Survey respondents who reported they were not able to get dental care when needed were asked a follow-up question. The leading cause was inability to afford copay or deductible (69), followed by no insurance (67), refusal of insurance (45) and could not find (23) (Figure 21). Note that these data are displayed in frequencies rather than percentages given the low number of responses.

Figure 21

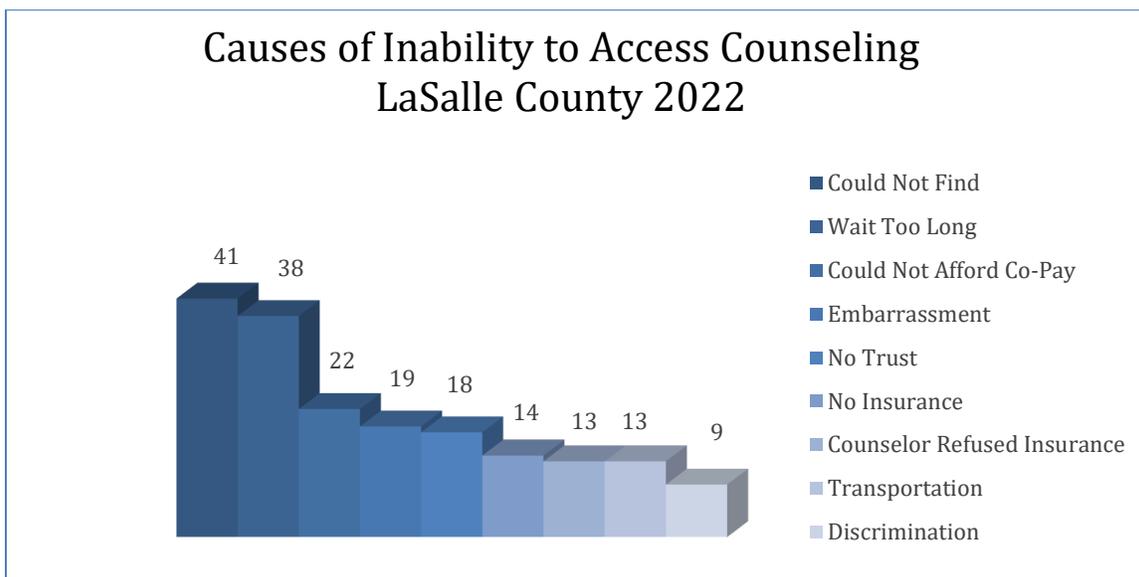


Source: CHNA Survey

## Reasons for No Access – Counseling

Survey respondents who reported they were not able to get counseling when needed were asked a follow-up question. The leading causes of the inability to gain access to counseling were could not find (41) and wait was too long (38). Note that these data are displayed in frequencies rather than percentages given the low number of responses (Figure 22).

Figure 22



Source: CHNA Survey

### Comparison to 2019 CHNA

*Access to Medical Care – showed an increase in access of 2%.*

*Access to Prescription Medications – showed an increase in access of 2%.*

*Access to Dental Care – showed a decrease in access of 2%.*

*Access to Counseling – showed a significant decrease of 5%.*

## Transportation Network

Transportation network is a measure of the adequacy of the transportation network to facilitate access to care. Key risk influencers include access and proximity to resources. While survey data indicate transportation was not a leading cause of inaccessibility, for LaSalle County, 17% of the population is at elevated risk for transportation network. This is higher than the State of Illinois average of 6% (SocialScape® powered by SociallyDetermined®, 2022).

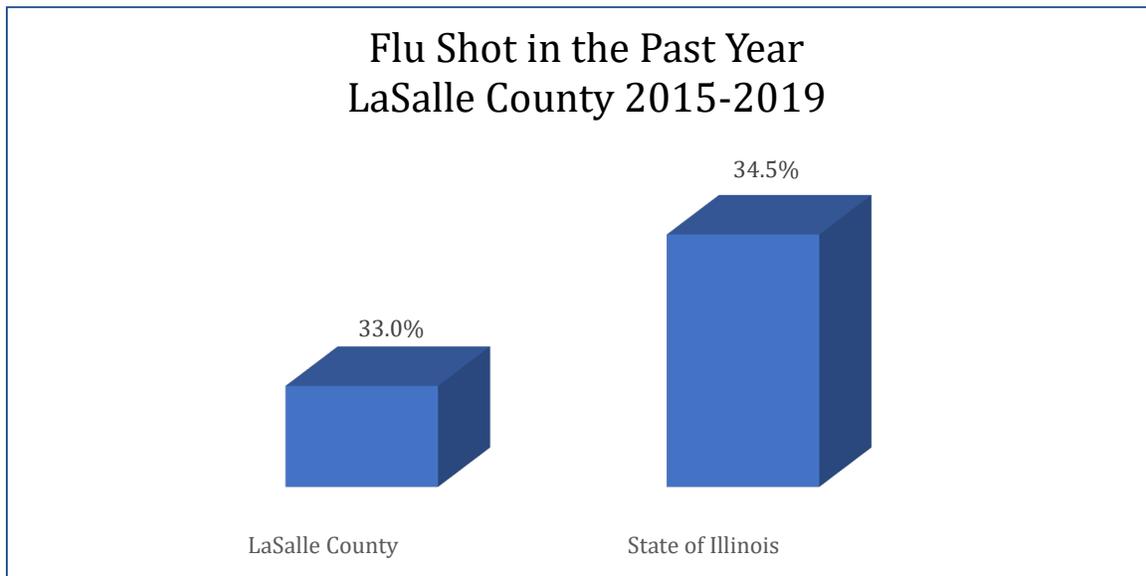
## 2.2 Wellness

*Importance of the measure:* Preventative health-care measures, including getting a flu shot, engaging in a healthy lifestyle and undertaking screenings for diseases are essential to combating morbidity and mortality while reducing health-care costs. The overall health of a community is impacted by preventative measures including immunizations and vaccinations.

## Frequency of Flu Shots

Figure 23 shows that the percentage of people who have had a flu shot in the past year is 33% for LaSalle County, which is slightly lower than the State of Illinois average (34.5%). Note that data have not been updated by the Illinois Department of Public Health.

Figure 23

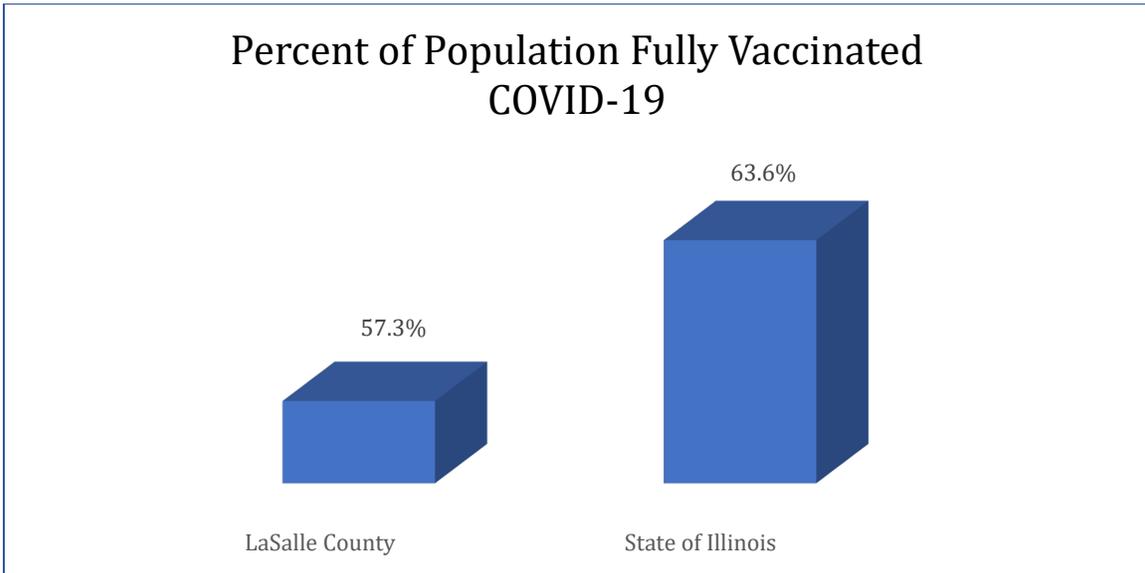


Source: CHNA Survey

## COVID-19 Vaccinations

Figure 24 shows the percentage of people who have been fully vaccinated from the COVID-19 virus as of February 27, 2022. Although LaSalle County remains above half at 57.3%, they remain under the rate for the State of Illinois at 63.6%. Additionally, given the recency of the COVID-19 virus, no historical comparisons are made at this time.

Figure 24

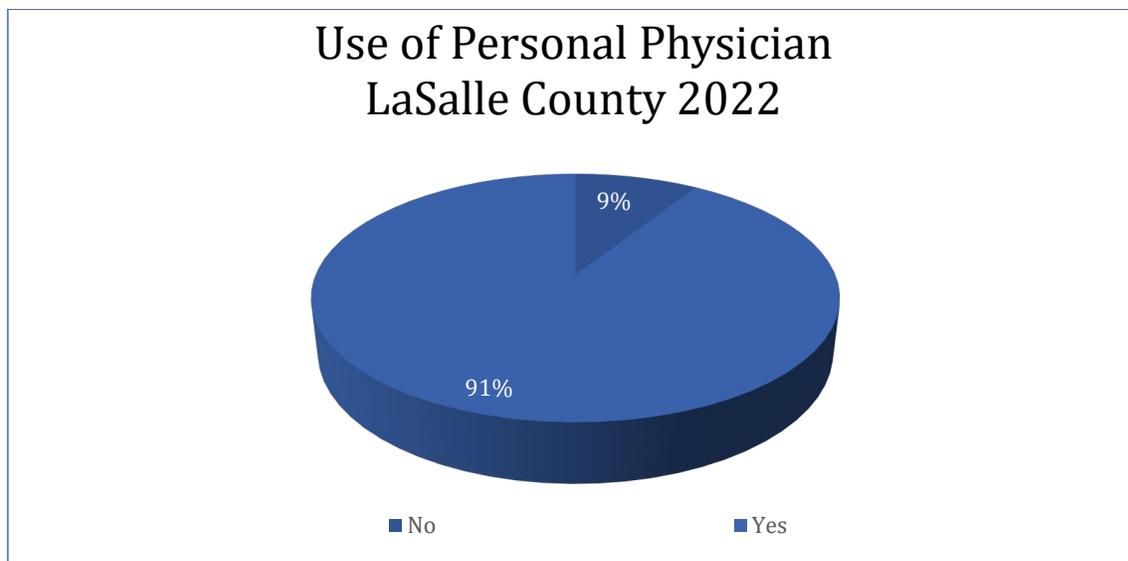


Source: Illinois Department of Public Health (02-27-22)

## Personal Physician

The CHNA survey asked respondents if they had a personal physician. Having a personal physician suggests that individuals are more likely to get wellness check-ups and less likely to use an emergency department as a primary healthcare service. According to survey data, 91% of residents have a personal physician (Figure 25).

Figure 25



Source: CHNA Survey

## Comparison to 2019 CHNA

*Survey results for having a personal physician were the same as the 2019 CHNA.*



## Social Determinants Related to Having a Personal Physician

The following characteristic shows a significant relationship with having a personal physician. The following relationship was found using correlational analyses:

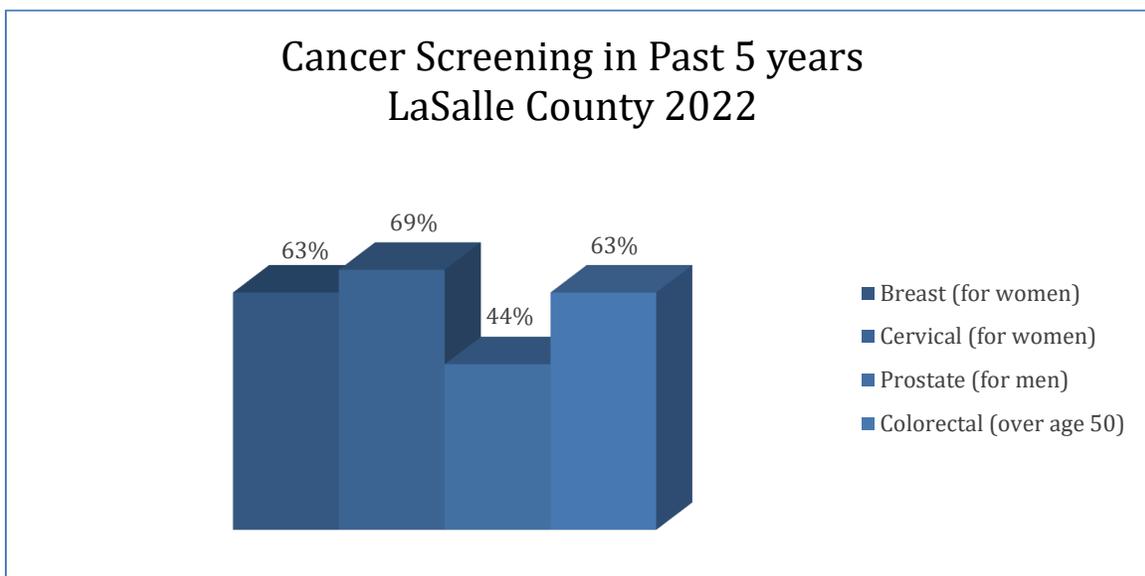
- **Having a personal physician** was higher for older people.

## Cancer Screening

Early detection of cancer may greatly improve the probability of successful treatment. In the case of colorectal cancer, early detection of precancerous polyps can prevent cancer. Specifically, four types of cancer screening were measured: breast, cervical, prostate and colorectal.

Results from the CHNA survey show that 63% of women had a breast screening in the past five years and 69% of women had a cervical screening. For men, 44% had a prostate screening in the past five years. For women and men over the age of 50, 63% had a colorectal screening in the last five years (Figure 26).

Figure 26



Source: CHNA Survey

## Comparison to 2019 CHNA

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*Survey results for having a breast screening (8%) decreased; however, there was an increase for prostate screening (15%) and colorectal screening (5%). This is the first year the CHNA collected data for cervical screening so no comparison was possible.*

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## Social Determinants Related to Cancer Screenings

Multiple characteristics show significant relationships with cancer screening. The following relationships were found using correlational analyses:

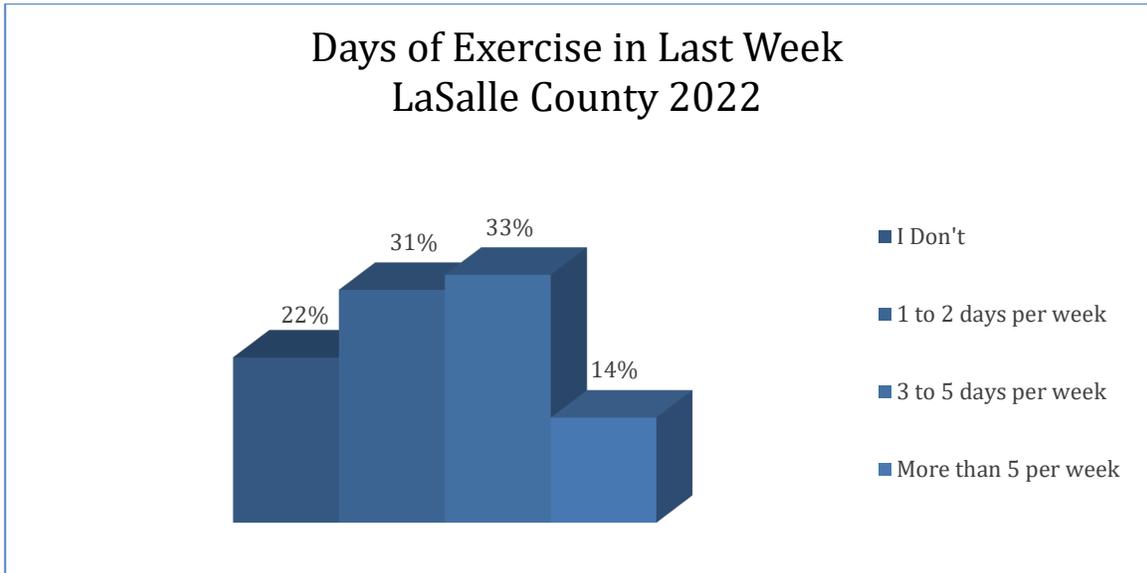
- **Breast screening** tends to be more likely for older women, those with a higher level of education and higher income. LatinX women, Black women and those in an unstable (e.g., homeless) housing environment are less likely to have a breast screening.
- **Cervical screening** tends to be more likely for White women, those with a higher level of education and higher income. LatinX women and those in an unstable (e.g., homeless) housing environment is less likely to have a cervical screening.
- **Prostate screening** tends to be rated higher by older men and those with higher income. Prostate screening was less likely for LatinX men.
- **Colorectal screening** tends to be more likely for men, older people and White people. Colorectal screening tends to be less likely for LatinX people.

## Physical Exercise

A healthy lifestyle, comprised of regular physical activity, has been shown to increase physical, mental, and emotional well-being.

Specifically, 22% of respondents indicated that they do not exercise at all, while the majority (64%) of residents exercise 1-5 times per week (Figure 27).

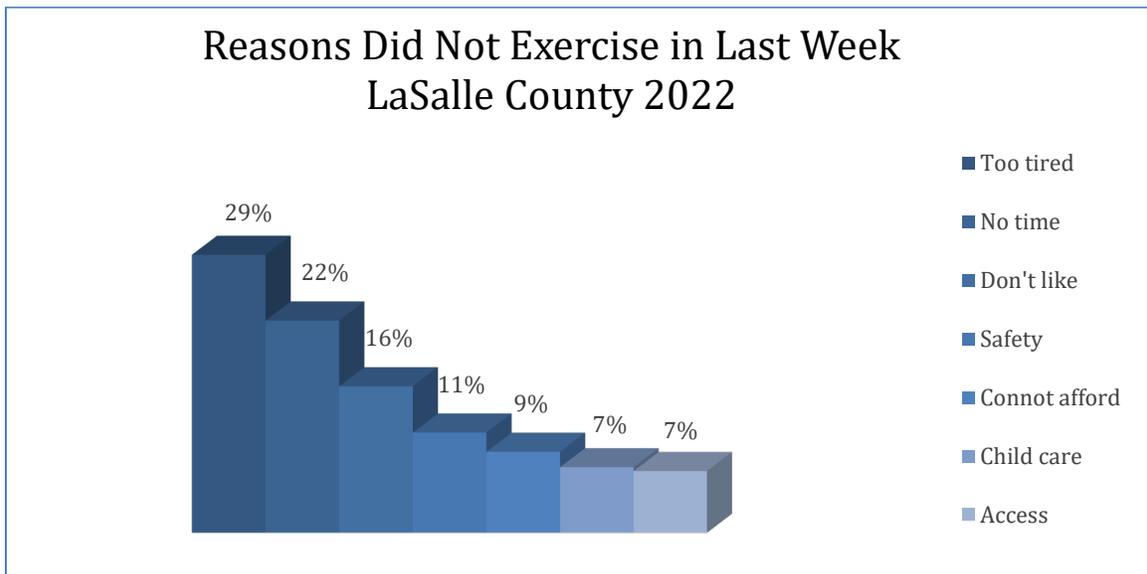
Figure 27



Source: CHNA Survey

To find out why some residents do not exercise at all, a follow up question was asked. Similar to the 2019 CHNA, the most common reasons for not exercising are not having enough energy (29%), not enough time (22%) and a dislike of exercise (16%) (Figure 28).

Figure 28



Source: CHNA Survey

## Comparison to 2019 CHNA

*There has been a slight increase in the number of people who exercise. In 2019, 28% of residents indicated they did not exercise at all and only 22% indicated they did not exercise in 2022.*



## Social Determinants Related to Exercise

Multiple characteristics show significant relationships with cancer screening. The following relationships were found using correlational analyses:

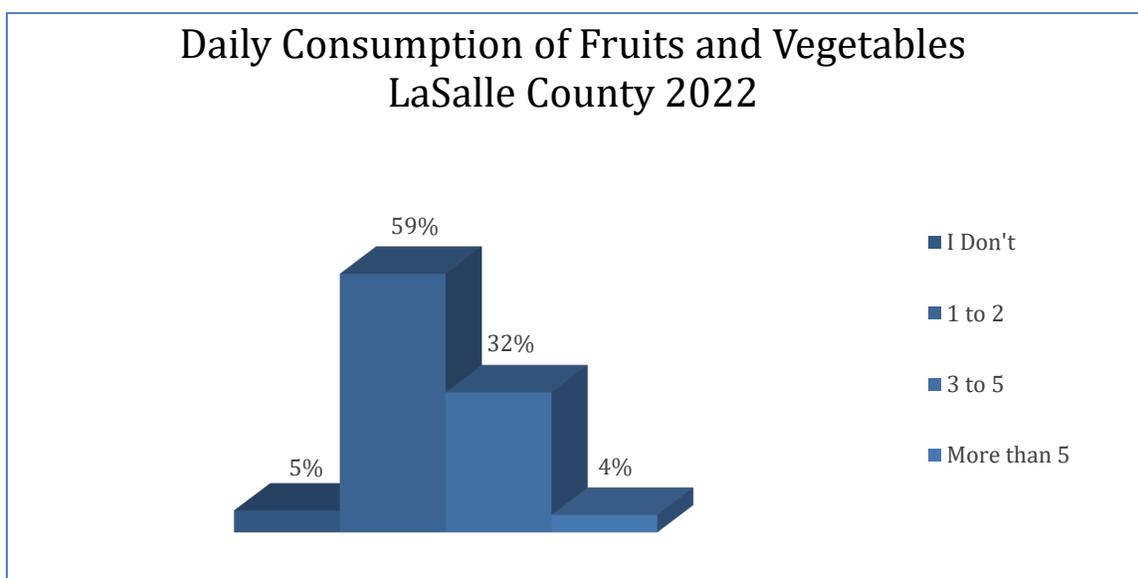
- **Frequency of exercise** was rated higher by men, older people, those with higher education and those with higher income.

## Healthy Eating

A healthy lifestyle, comprised of a proper diet, has been shown to increase physical, mental and emotional well-being. Consequently, nutrition and diet are critical to preventative care.

Almost two-thirds (64%) of residents report no consumption or low consumption (1-2 servings per day) of fruits and vegetables per day. Note that the percentage of residents who consume five or more servings per day is only 4% (Figure 29).

Figure 29

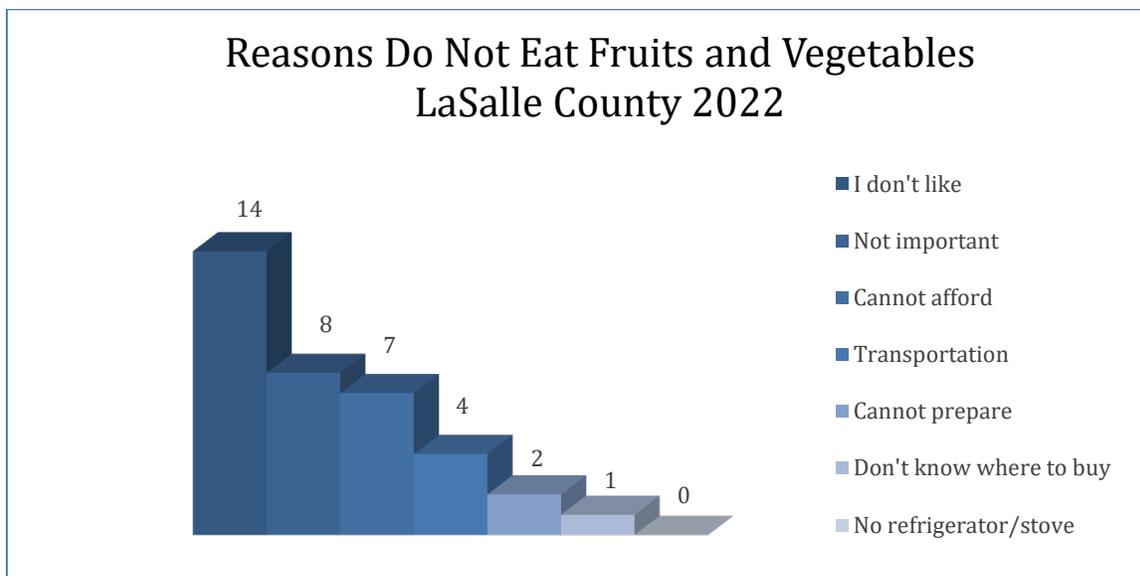


Source: CHNA Survey

Those individuals who indicated they do not eat any fruits or vegetables were asked a follow up question. The reasons most frequently given for failing to eat more fruits and vegetables is don't like fruits and

vegetables (14) (Figure 30). Note that these data are displayed in frequencies rather than percentages given the low number of responses.

Figure 30



Source: CHNA Survey

### Comparison to 2019 CHNA

*Results show a decline in eating fruits and vegetables, where 56% of respondents indicated they had two or fewer servings of fruits and vegetables per day in 2019 compared to 64% in 2022.*

## Social Determinants Related to Healthy Eating

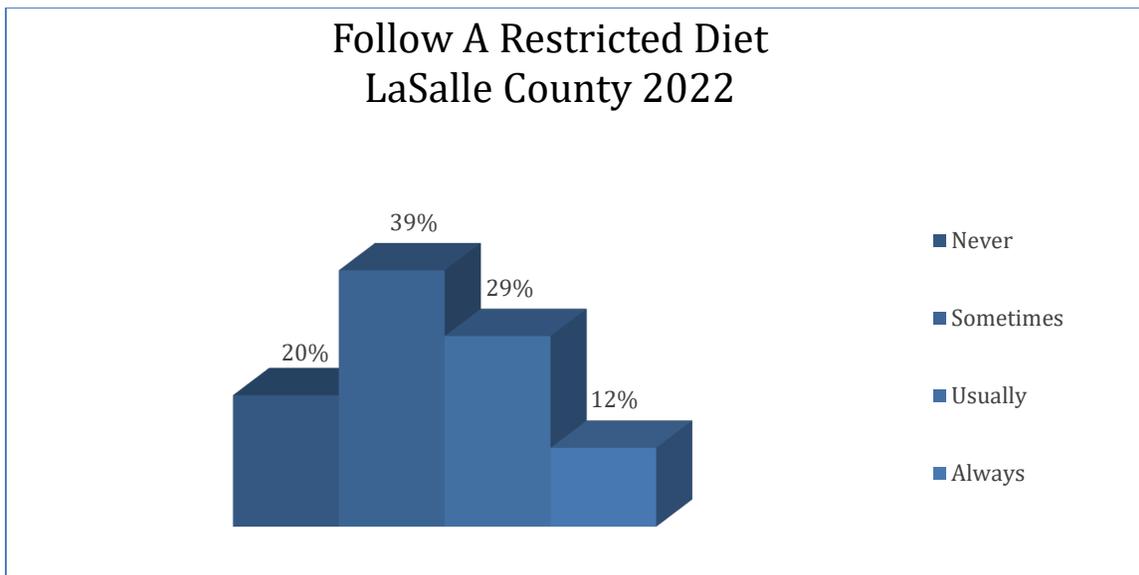
Multiple characteristics show significant relationships with healthy eating. The following relationships were found using correlational analyses:

- **Consumption of fruits and vegetables** tends to be more likely for older people, White people and those with a higher education. Consumption of fruits and vegetables tends to be less likely for Black people.

### Restricted Diet

Respondents were also asked if they followed a restricted diet if recently diagnosed with a morbidity. Of respondents, 41% usually or always follow a restricted diet (Figure 31).

Figure 31



Source: CHNA Survey

### Comparison to 2019 CHNA

*Results show no significant change compared to 2019 CHNA results.*

## Health Literacy

Health literacy is a measure of factors in the community that impact healthcare access, navigation and adherence. Key risk influencers include culture, demographics and education. For LaSalle County, 20% of the population is at elevated risk for health literacy. This is lower than the State of Illinois average of 34% (SocialScape® powered by SociallyDetermined®, 2022).

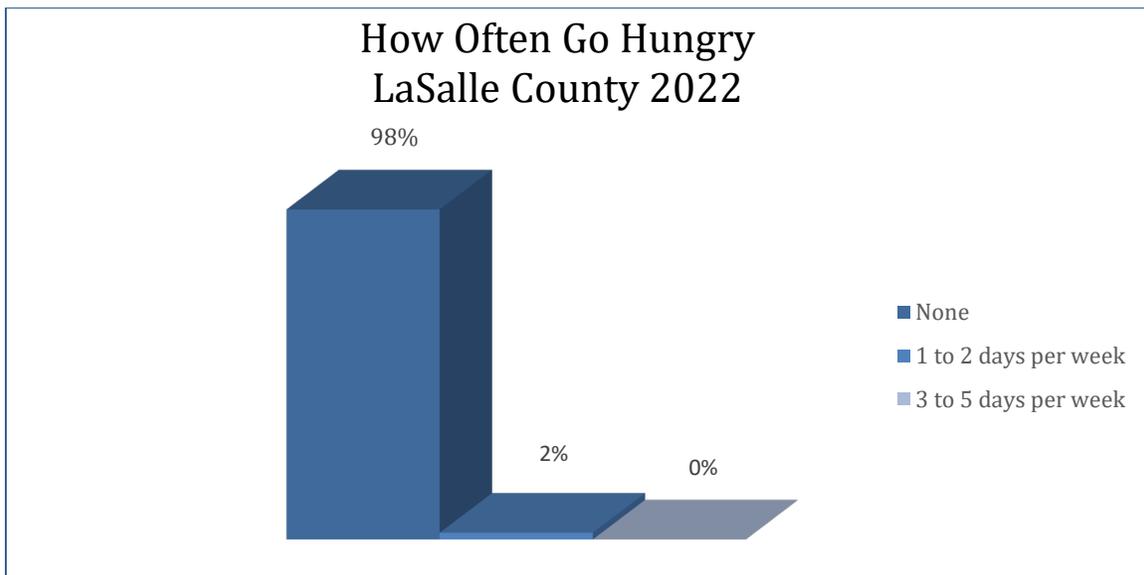
## 2.3 Understanding Food Insecurity

*Importance of the measure:* It is essential that everyone has access to food and drink necessary for living healthy lives. Food insecurity exists when people don't have physical and economic access to sufficient, safe and nutritious food that meets their dietary needs for a healthy life.

### Prevalence of Hunger

Respondents were asked, "How many days a week do you or your family members go hungry?" The vast majority of respondents indicated they do not go hungry, however, 2% indicated they go hungry 1 to 2 days per week (Figure 32).

Figure 32



Source: CHNA Survey

### Comparison to 2019 CHNA

*Results show a 3% decrease compared to 2019 CHNA results for those who go hungry.*



## Social Determinants Related to Prevalence of Hunger

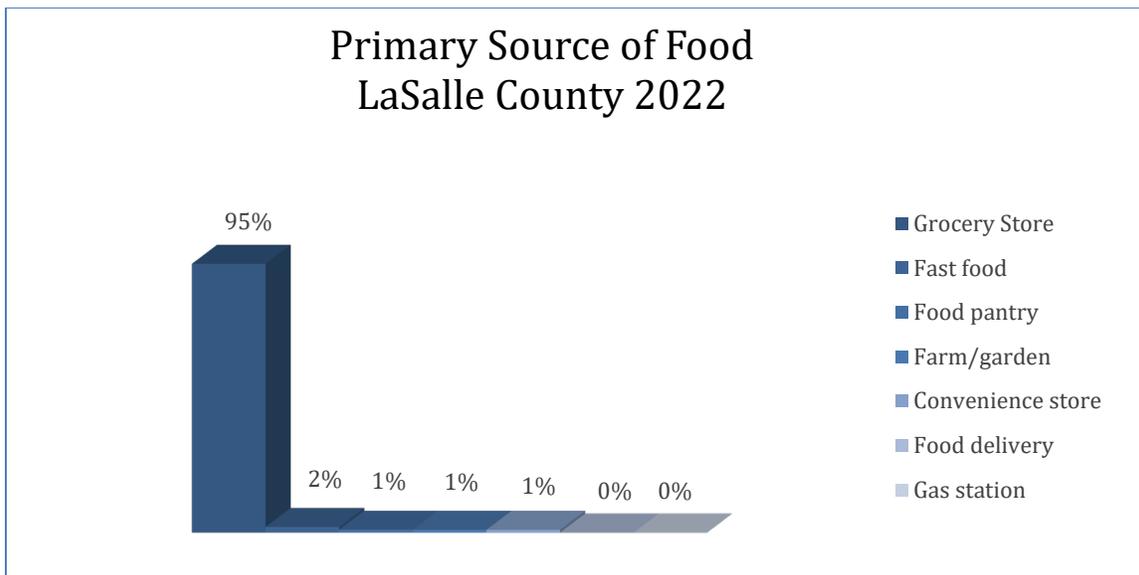
Multiple characteristics show significant relationships with hunger. The following relationships were found using correlational analyses:

- **Prevalence of Hunger** tends to be more likely for younger people, Black people, those with less education and those with less income.

## Primary Source of Food

Respondents were asked to identify their primary source of food. It can be seen that the majority (95%) identified a grocery store (Figure 33).

Figure 33



Source: CHNA Survey

## Food Landscape

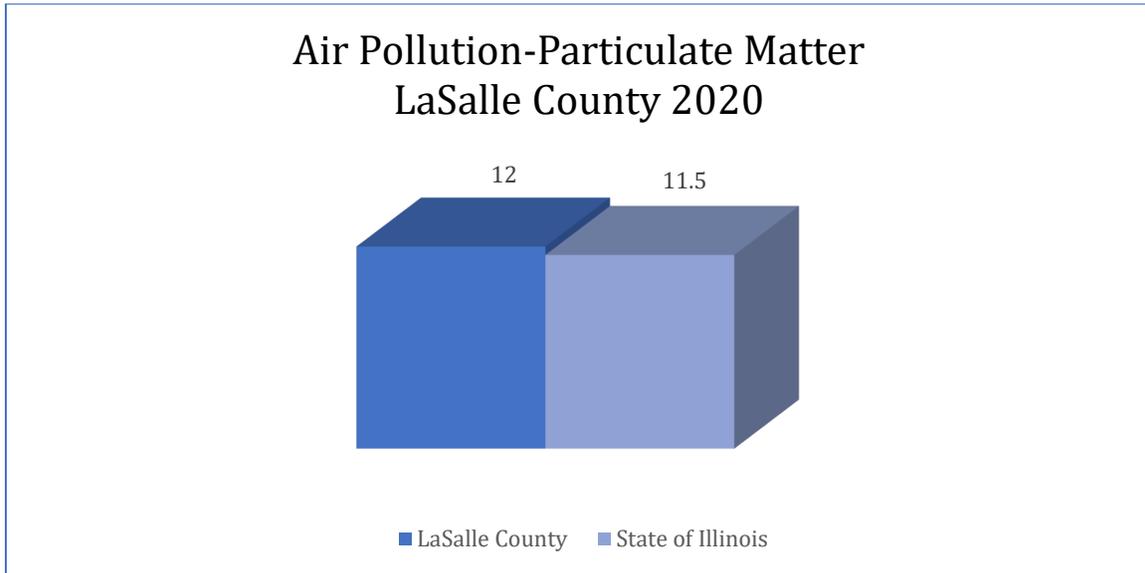
Food landscape is a measure of the conditions that affect the ability of residents to access healthy, affordable nutrition. Key risk influencers include accessibility, affordability and literacy. For LaSalle County, 25% of the population is at elevated risk for food landscape. This is the same as the State of Illinois average of 25%. (SocialScape® powered by SociallyDetermined®, 2022).

## 2.4 Physical Environment

*Importance of the measure:* According to the County Health Rankings, Air Pollution - Particulate Matter (APPM) is the average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) in a county. Fine particulate matter is defined as particles of air pollutants with an aerodynamic diameter less than 2.5 micrometers. These particles can be directly emitted from sources such as forest fires, or they can form when gases are emitted from power plants, manufacturing facilities and automobiles.

The relationship between elevated air pollution, particularly fine particulate matter and ozone, and compromised health has been well documented. Negative consequences of ambient air pollution include decreased lung function, chronic bronchitis, asthma and other adverse pulmonary effects. The APPM for LaSalle County (12) is slightly higher than the State average of 11.5 (Figure 34).

Figure 34



Source: County Health Rankings 2021

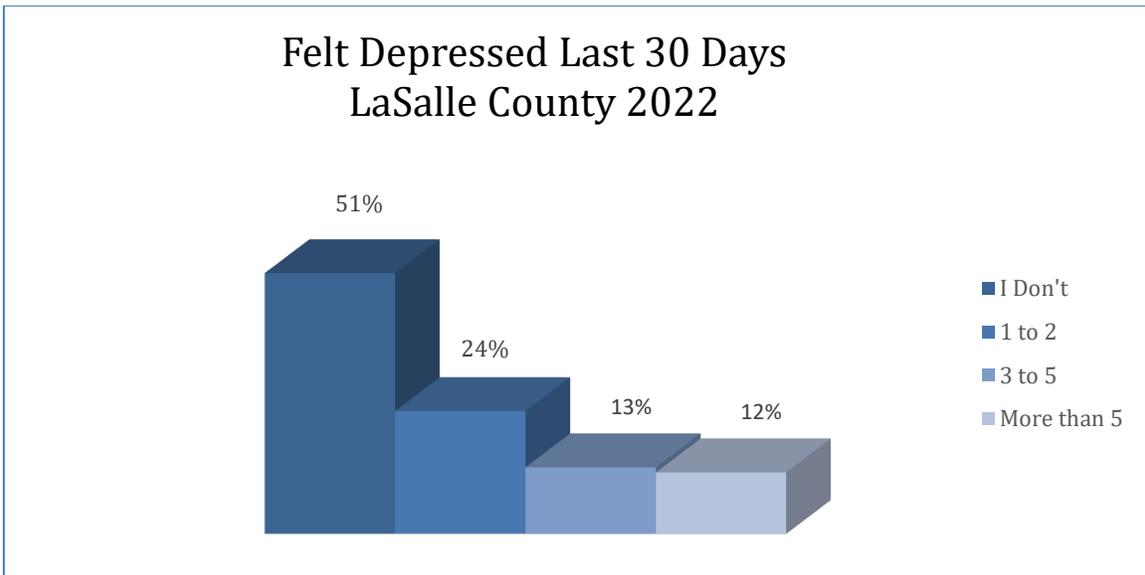
## 2.5 Health Status

*Importance of the measure:* Self-perceptions of health can provide important insights to help manage population health. Not only do self-perceptions provide benchmarks regarding health status, but they can also provide insights into how accurately people perceive their own health.

### Mental Health

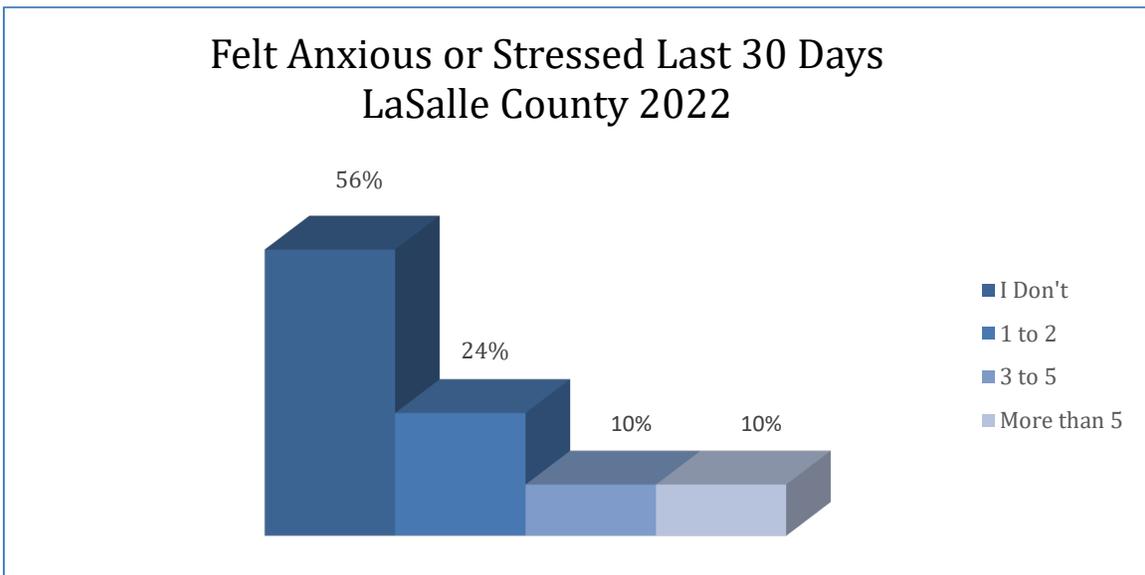
The survey asked respondents to indicate specific issues, such as depression and stress/anxiety. Of respondents, 51% indicated they did not feel depressed in the last 30 days (Figure 35) and 56% indicated they did not feel anxious or stressed (Figure 36).

Figure 35



Source: CHNA Survey

Figure 36



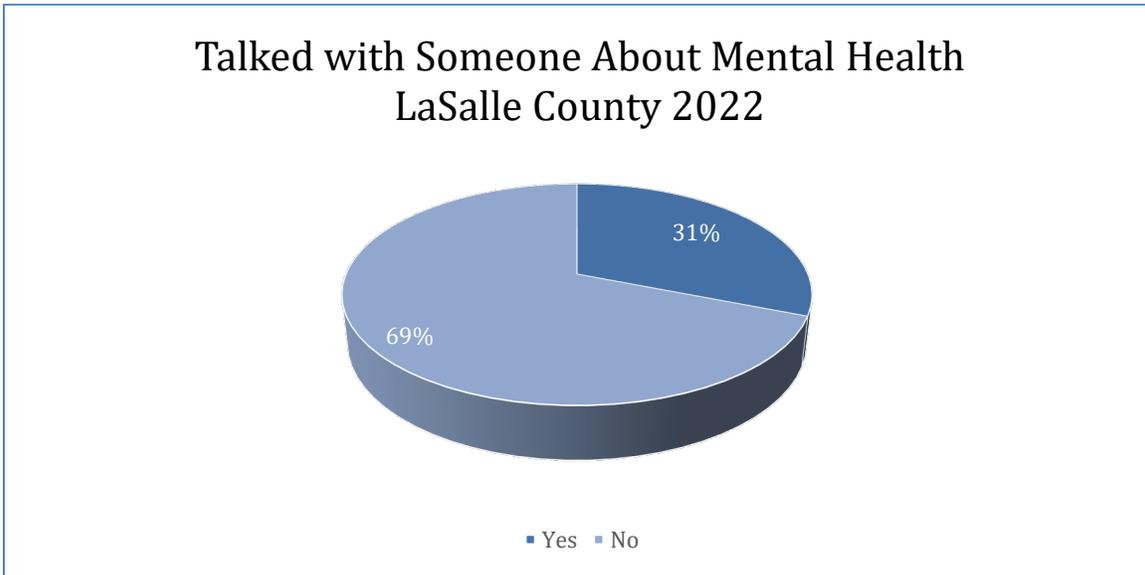
Source: CHNA Survey

### Comparison to 2019 CHNA

**Results show an increase (8%) in the number of people that have experienced depression in the last 30 days and an increase (5%) in the number of people that have experienced anxiety/stress in the last 30 days.**

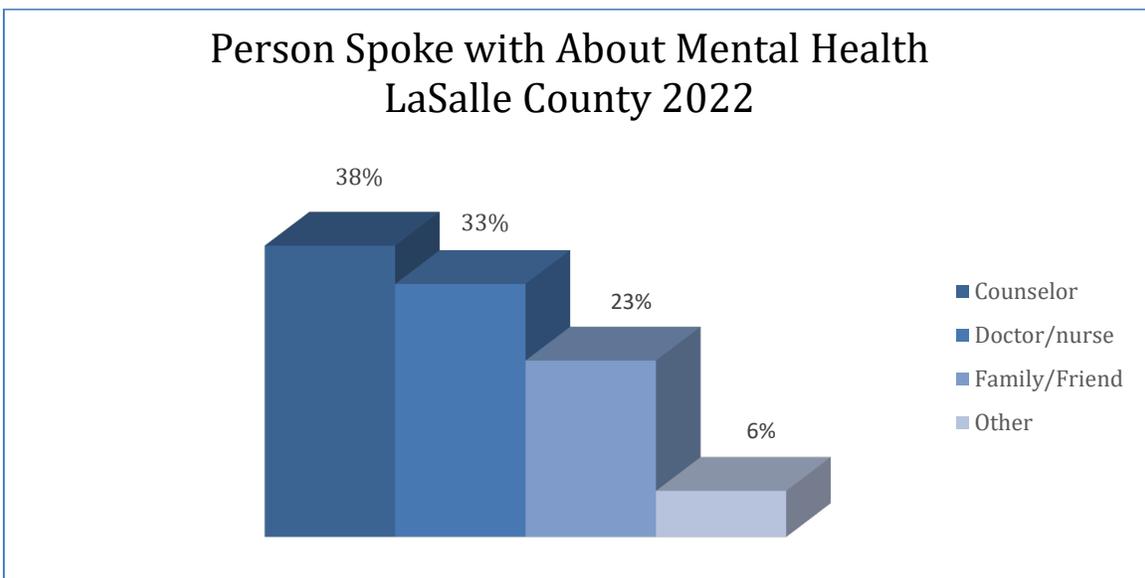
Respondents were also asked if they spoke with anyone about their mental health in the past year. Of respondents, 31% indicated that they spoke to someone (Figure 37). The most common response was a Counselor (38%) (Figure 38).

Figure 37



Source: CHNA Survey

Figure 38



Source: CHNA Survey



## Social Determinants Related to Behavioral Health

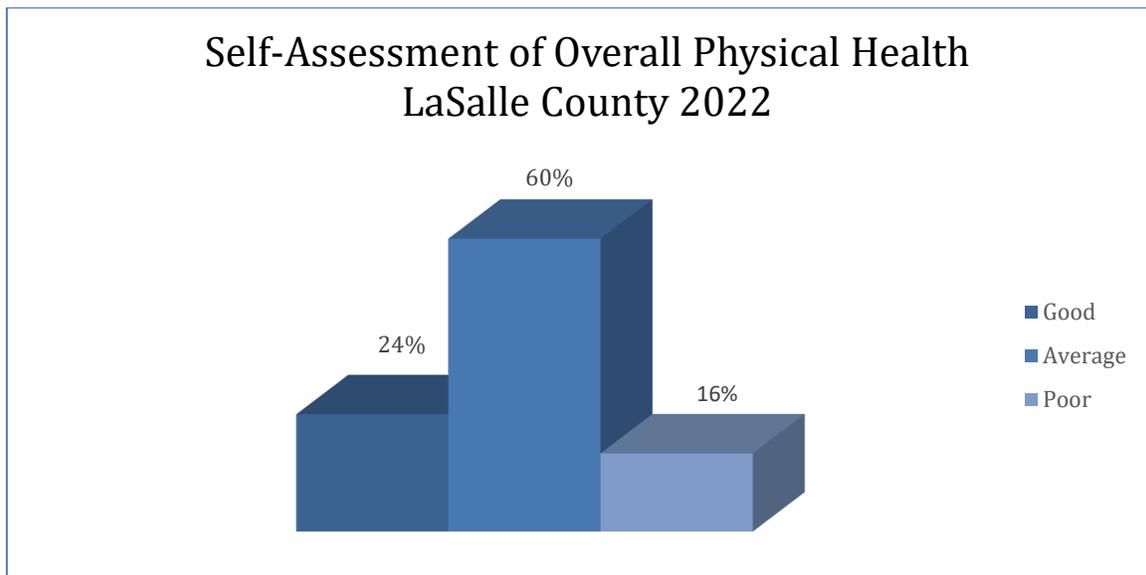
Multiple characteristics show significant relationships with behavioral health. The following relationships were found using correlational analyses:

- **Depression** tends to be rated higher for women, younger people, those with less education and those with less income.
- **Stress and anxiety** tends to be rated higher for women, younger people, those with less education and those with less income.

## Self-Perceptions of Overall Health

In regard to self-assessment of overall physical health, 16% of respondents reported having poor overall physical health (Figure 39).

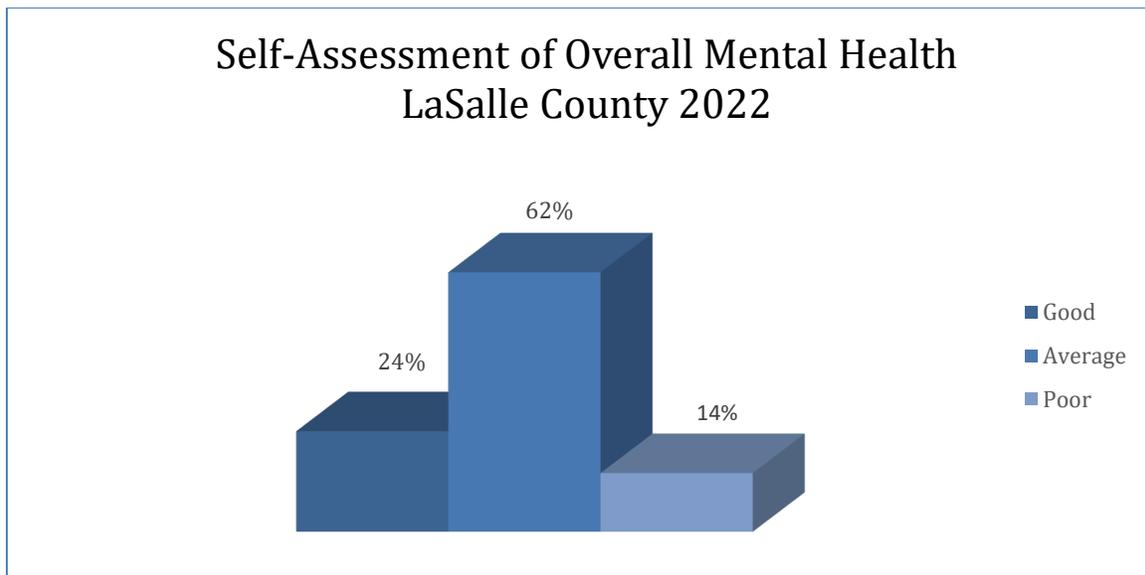
Figure 39



Source: CHNA Survey

In regard to self-assessment of overall mental health, 14% of respondents stated they have poor overall mental health (Figure 40).

Figure 40



Source: CHNA Survey

### Comparison to 2019 CHNA

*With regard to physical health, more people see themselves in poor health in 2022 (16%) than 2019 (14%). With regard to mental health, more people see themselves in poor health in 2022 (14%) than 2019 (12%).*



## Social Determinants Related to Self-Perceptions of Health

Multiple characteristics show significant relationships with self-perceptions of health. The following relationships were found using correlational analyses:

- **Perceptions of physical health** tend to be higher for men, older people, those with higher education and those with higher income.
- **Perceptions of mental health** tend to be higher for men, older people, those with higher education and those with higher income.

## 2.6 Key Takeaways from Chapter 2

- ✓ ACCESS TO HEALTHCARE WAS DOWN IN ALL FOUR CATEGORIES.
- ✓ COVID-19 VACCINATION RATES LOWER THAN STATE AVERAGES.
- ✓ PROSTATE SCREENING IS RELATIVELY LOW.
- ✓ THE MAJORITY OF PEOPLE EXERCISE LESS THAN 2 TIMES PER WEEK AND CONSUME 2 OR FEWER SERVINGS OF FRUITS/VEGETABLES PER DAY.
- ✓ ALMOST HALF OF RESPONDENTS EXPERIENCED DEPRESSION OR STRESS IN THE LAST 30 DAYS.

CHAPTER 3 OUTLINE

- 3.1 Tobacco Use
- 3.2 Drug and Alcohol Use
- 3.3 Overweight and Obesity
- 3.4 Predictors of Heart Disease
- 3.5 Key Takeaways from Chapter 3

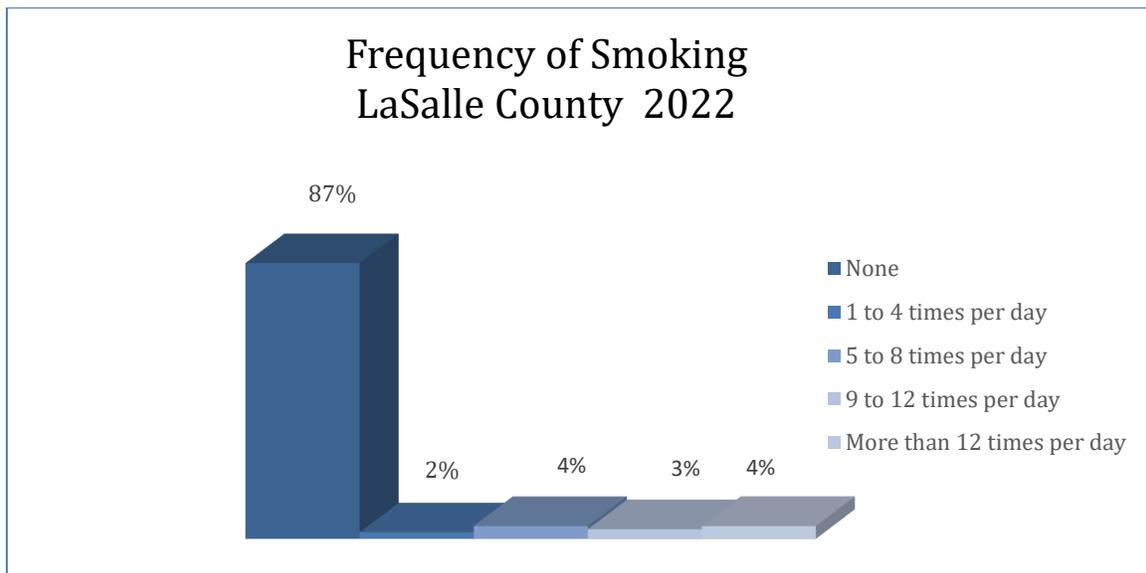
## CHAPTER 3: SYMPTOMS AND PREDICTORS

### 3.1 Tobacco Use

*Importance of the measure:* In order to appropriately allocate health-care resources, a thorough analysis of the leading indicators regarding morbidity and disease must be conducted. In this way, health-care organizations can target affected populations more effectively. Research suggests tobacco use facilitates a wide variety of adverse medical conditions.

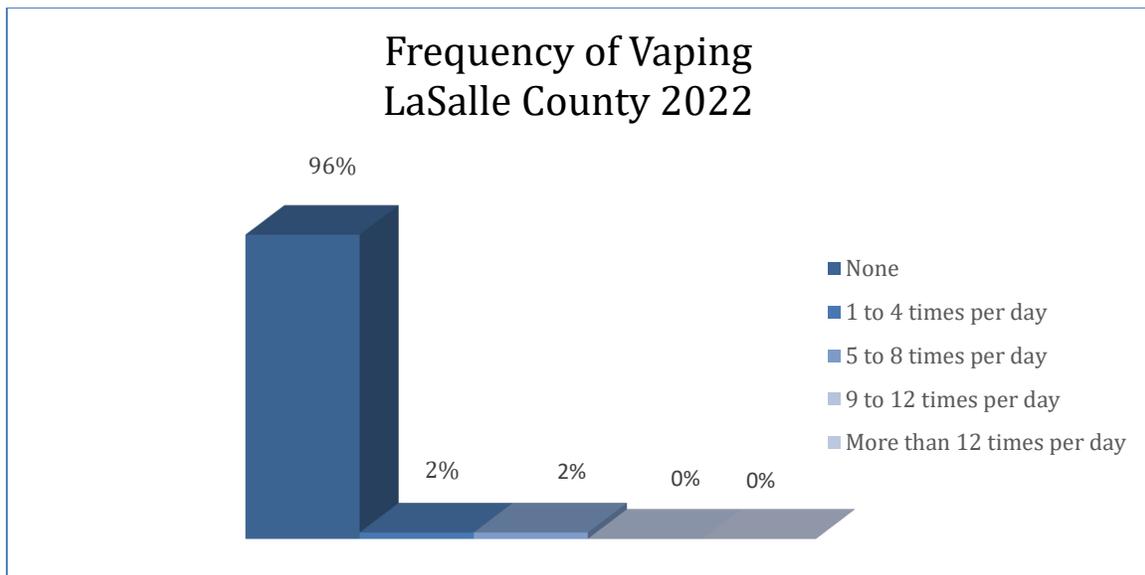
CHNA survey data show 87% of respondents do not smoke (Figure 41) and 96% of respondents do not vape (Figure 42). Only 4% smoke more than 12 times per day.

Figure 41



Source: CHNA Survey

Figure 42



Source: CHNA Survey

### Comparison to 2019 CHNA

*Results indicate smoking has decreased by 5% compared to 2019.*



## Social Determinants Related to Smoking or Vaping

Multiple characteristics show significant relationships with smoking or vaping. The following relationships were found using correlational analyses:

- **Smoking** tends to be rated higher by those with less education and a lower income and those in an unstable (e.g., homeless) housing environment.
- **Vaping** tends to be rated higher by younger people, those with less education and those with a lower income.

## 3.2 Drug and Alcohol Abuse

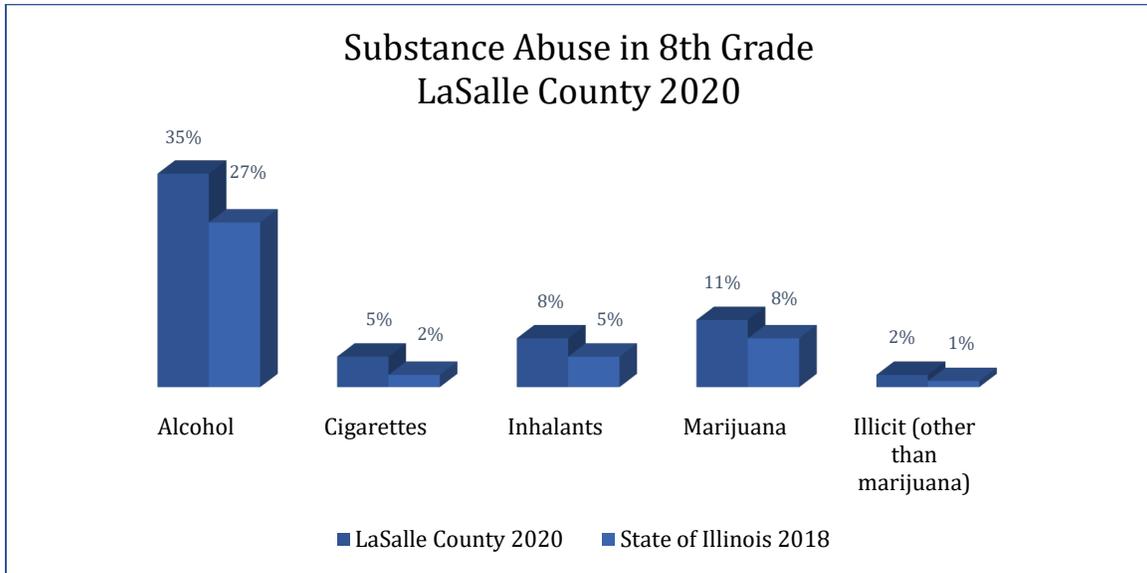
*Importance of the measure:* Alcohol and drugs impair decision-making, often leading to adverse consequences and outcomes. Research suggests that alcohol is a gateway drug for youth, leading to increased usage of controlled substances in adult years. Accordingly, the substance abuse values and behaviors of high school students is a leading indicator of adult substance abuse in later years.

### Youth Substance Abuse

Data from the 2020 Illinois Youth Survey measures illegal substance use (alcohol, tobacco, and other drugs – mainly marijuana) among adolescents. LaSalle County data reported for 2020, State of Illinois

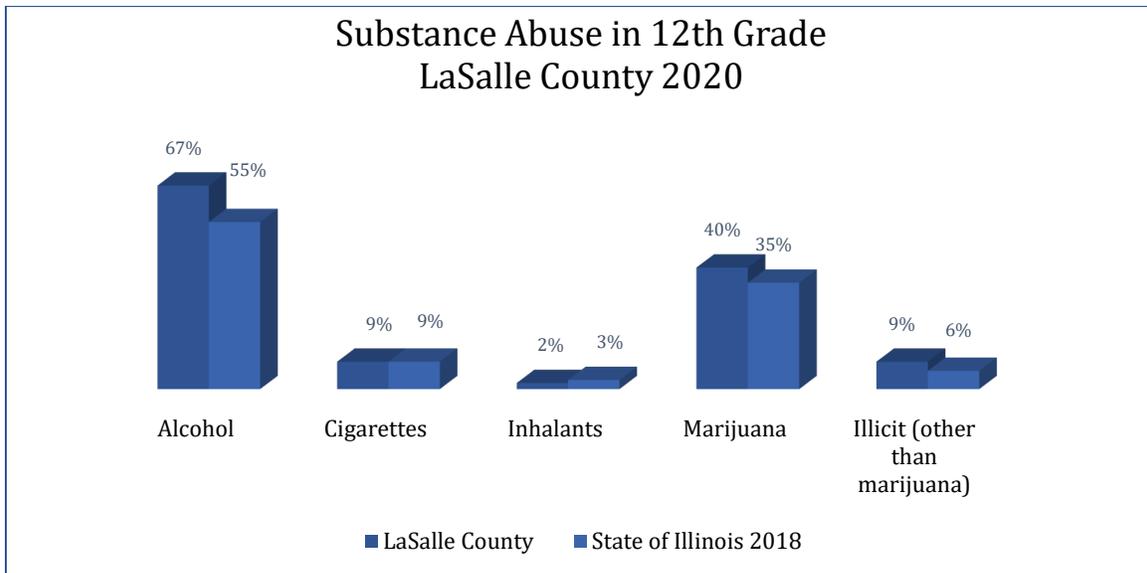
reporting 2018 data. LaSalle County is above State averages in all categories among 8<sup>th</sup> graders (Figure 43). Among 12<sup>th</sup> graders, LaSalle County is above all categories except inhalants (Figure 44).

Figure 43



Source: University of Illinois Center for Prevention Research and Development

Figure 44



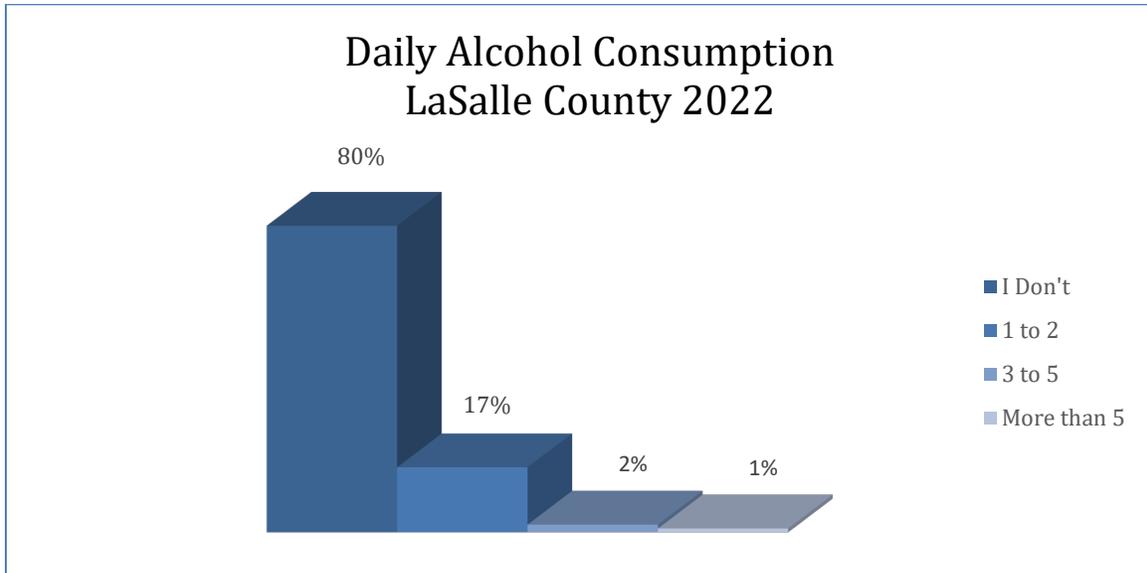
Source: University of Illinois Center for Prevention Research and Development

## Adult Substance Use

The CHNA survey asked respondents to indicate usage of several substances. Of respondents, 80% indicated they did not consume alcohol on a typical day, 94% indicated they do not take prescription medication improperly including opioids on a typical day, 93% indicated they do not use marijuana on a typical day and 99% indicated they do not use illegal substances on a typical day. Note this is the first

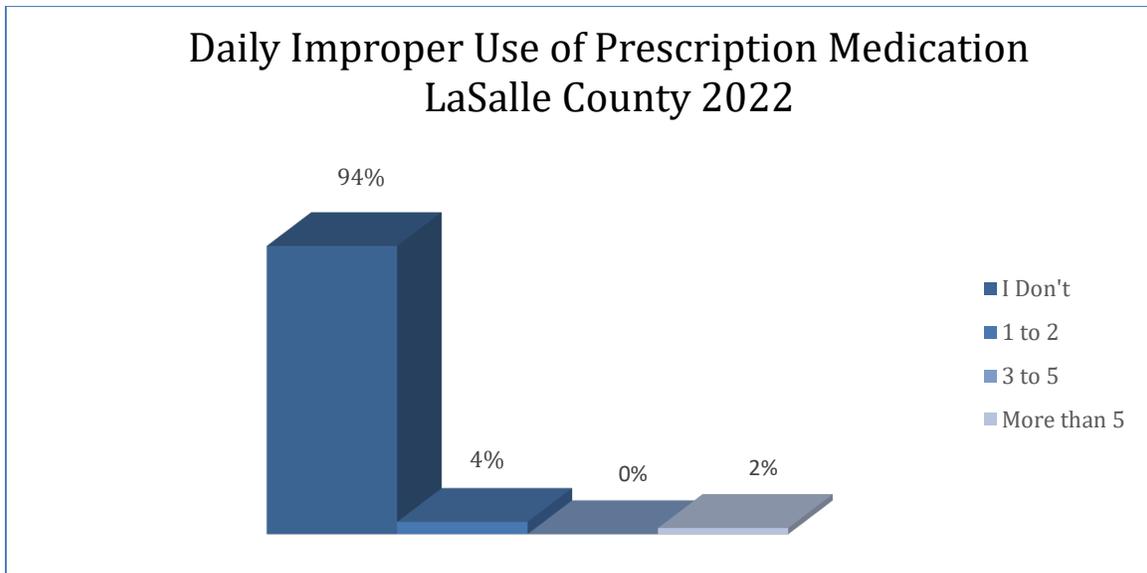
year that the CHNA has measured separated categories of substance use, so there is no comparison to the 2019 CHNA.

Figure 45



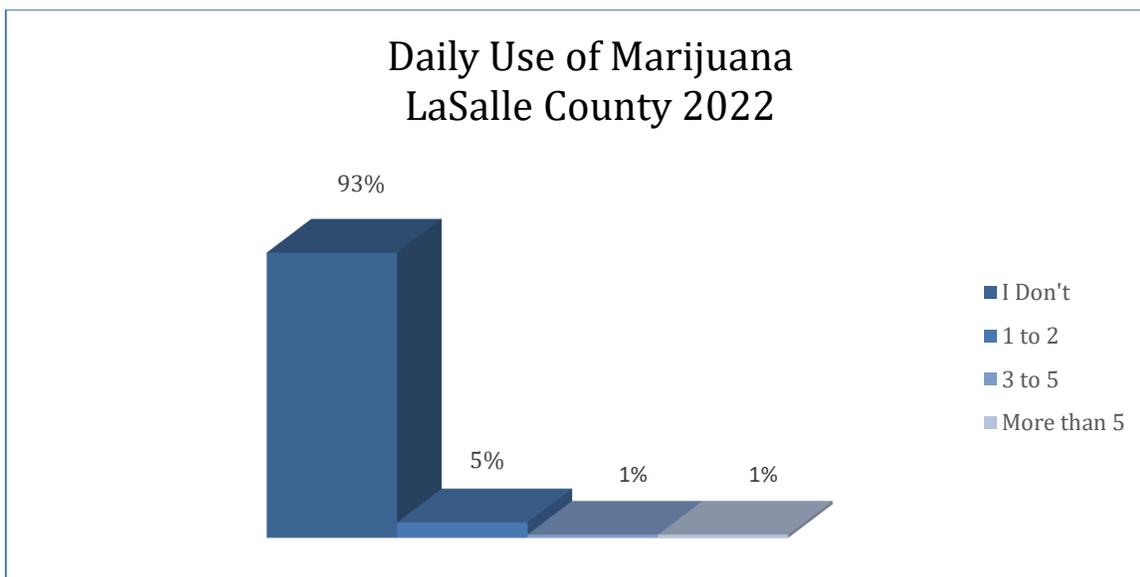
Source: CHNA Survey

Figure 46



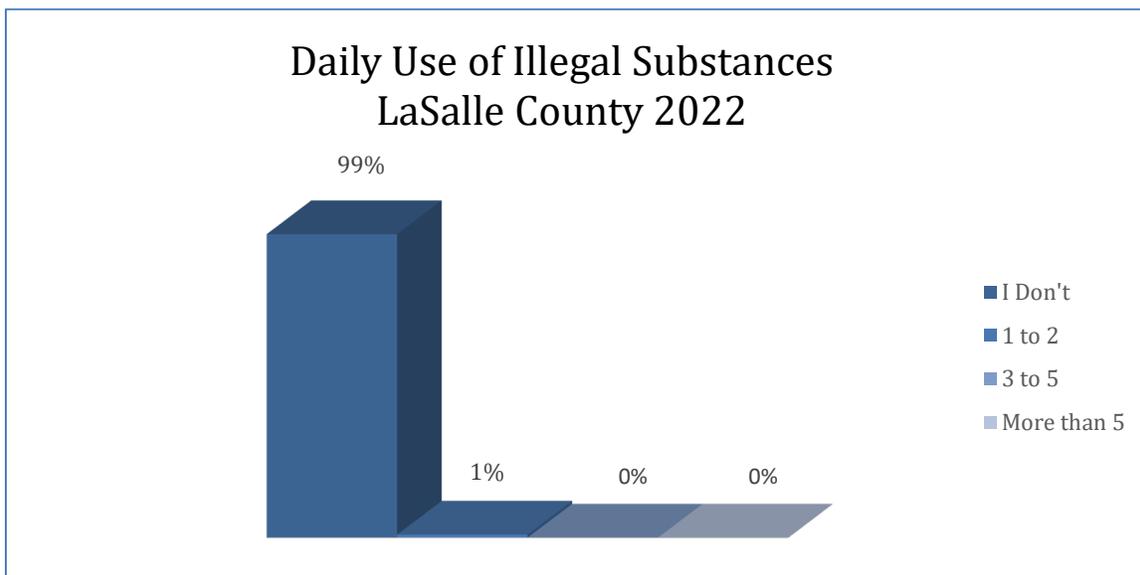
Source: CHNA Survey

Figure 47



Source: CHNA Survey

Figure 48



Source: CHNA Survey



## Social Determinants Related to Substance Use

Multiple characteristics show significant relationships with substance abuse. The following relationships were found using correlational analyses:

- **Alcohol consumption** tends to be rated higher by men, White people and those with higher income.
- **Misuse of prescription medication including opioid use** tends to be rated higher by Black people and those with lower income. Misuse of prescription medication tends to be rated lower by White people.

- **Marijuana use** tends to be rated higher by Black people, those with lower education and those with less income. Use of marijuana tends to be rated lower by LatinX people.
- **Use of Illegal substances** tends to be rated higher by Black people and those with lower income. Use of illegal substances tends to be rated lower by White people.

### 3.3 Overweight and Obesity

*Importance of the measure:* Individuals who are overweight and obese place greater stress on their internal organs, thus increasing the propensity to utilize health services. Research strongly suggests that obesity is a significant problem facing youth and adults nationally, in Illinois, and within LaSalle County. The US Surgeon General has characterized obesity as “the fastest-growing, most threatening disease in America today.” According to the Obesity Prevention Initiative from the Illinois General Assembly, 20% of Illinois children are obese. The financial burden of overweight and obese individuals is staggering, as the estimated annual medical costs attributed to obesity in Illinois for 1998-2000 exceeded \$3.4 billion, ranking Illinois 6th in the nation for obesity-attributed medical costs.

With children, research has linked obesity to numerous chronic diseases including Type II diabetes, hypertension, high blood pressure, and asthma. Adverse physical health side effects of obesity include orthopedic problems due to weakened joints and lower bone density. Detrimental mental health side effects include low self-esteem, poor body image, symptoms of depression and suicide ideation. Obesity impacts educational performance as well; studies suggest school absenteeism of obese children is six times higher than that of non-obese children.

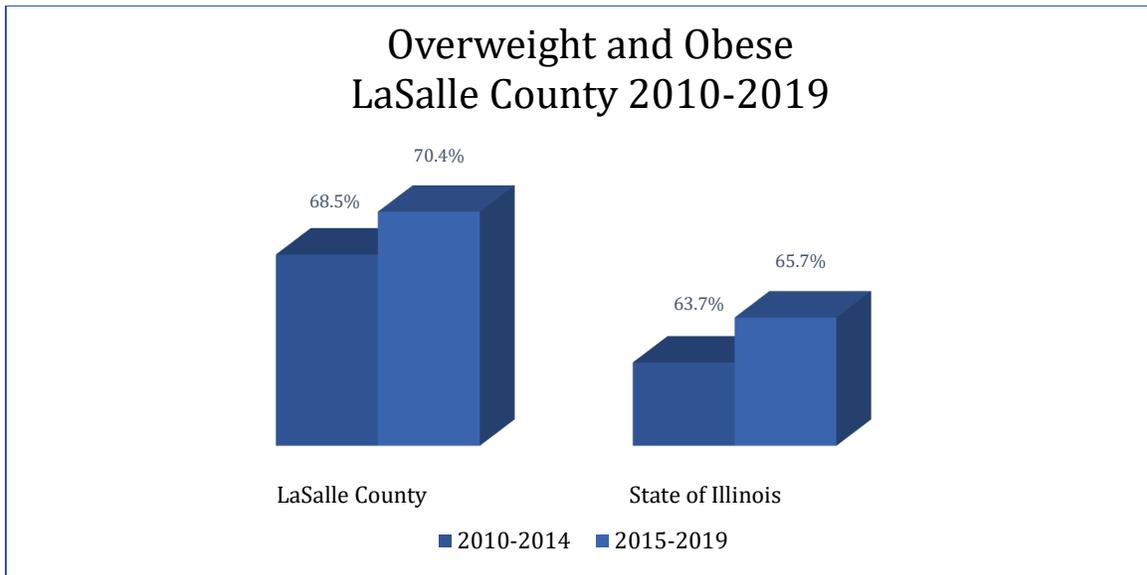
With adults, obesity has far-reaching consequences. Testimony to the Illinois General Assembly indicated that obesity-related illnesses contribute to worker absenteeism, slow workflow, and high worker compensation rates. A Duke University study on the effects of obesity in the workforce noted 13 times more missed workdays by obese employees than non-obese employees. Nationwide, lack of physical activity and poor nutrition contribute to an estimated 300,000 preventable deaths per year.

In LaSalle County, the number of people diagnosed with obesity and being overweight has increased over the years from 2010-2014 to 2015-2019. Note specifically that the percentage of obese and overweight people has increased from 68.5% to 70.4%.

Overweight and obesity rates in Illinois have increased over the years from 2010-2014 to 2015-2019. Note specifically that the percentage of obese and overweight people has increased from 63.7% to 65.7%. Note that data have not been updated by the Illinois Department of Public Health.

Additionally, note in the 2019 CHNA survey, respondents indicated that being overweight was their most prevalently diagnosed health condition.

Figure 49

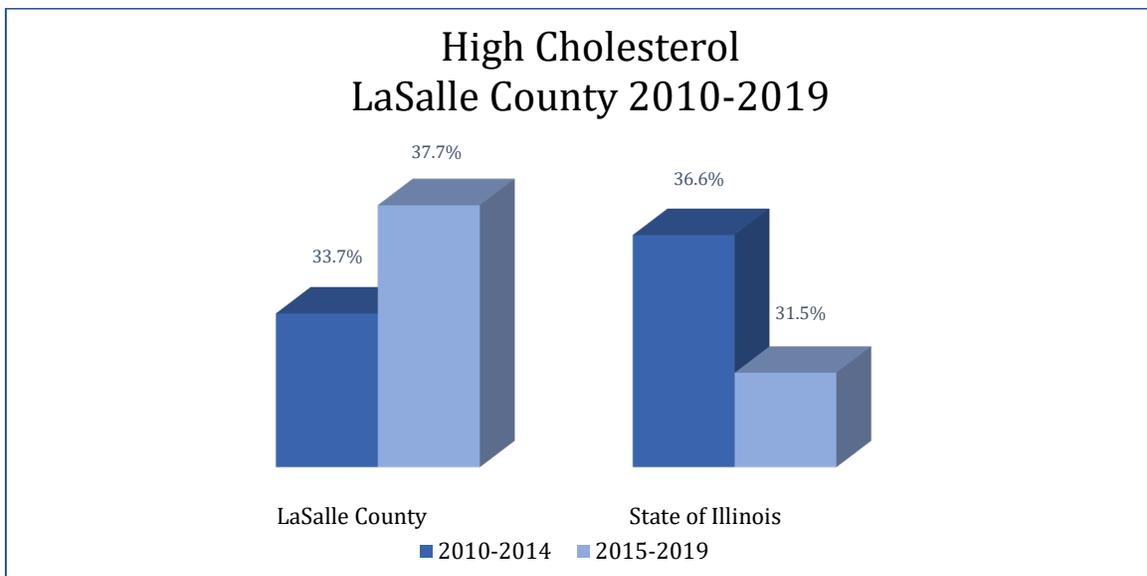


Source: Illinois Behavioral Risk Factor Surveillance System

### 3.4 Predictors of Heart Disease

Residents in LaSalle County report a higher than State average prevalence of high cholesterol. The percentage of residents who report they have high cholesterol is higher in LaSalle County (37.7%) than the State of Illinois average of 31.5%. Note that data have not been updated by the Illinois Department of Public Health (Figure 50).

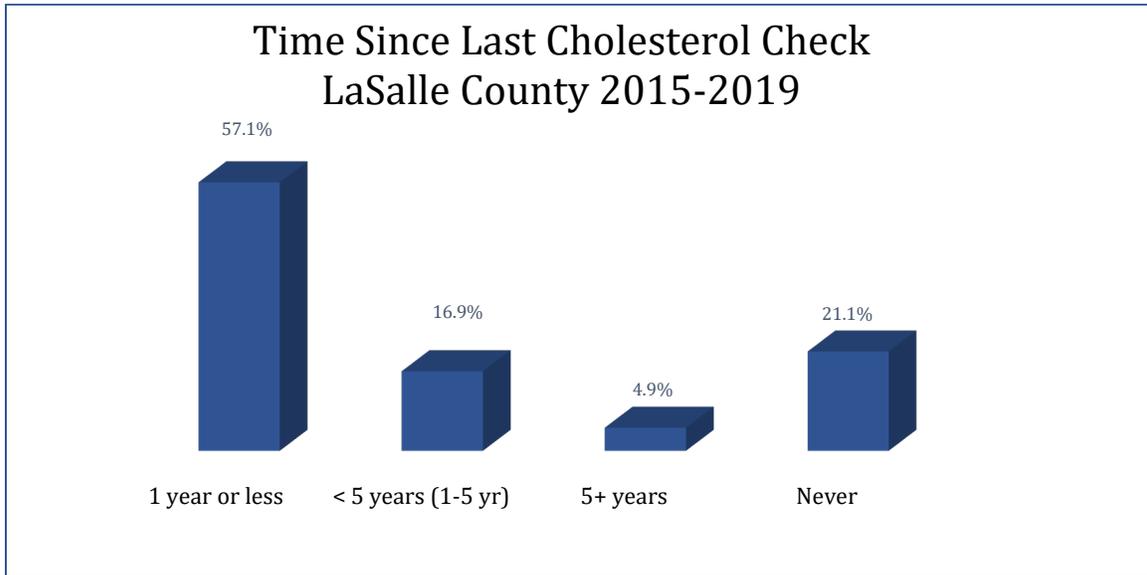
Figure 50



Source: Illinois Behavioral Risk Factor Surveillance System

Most (57.1%) residents of LaSalle County report having their cholesterol checked recently, whereas 21.1% report never having their cholesterol checked (Figure 51). Note that data have not been updated by the Illinois Department of Public Health.

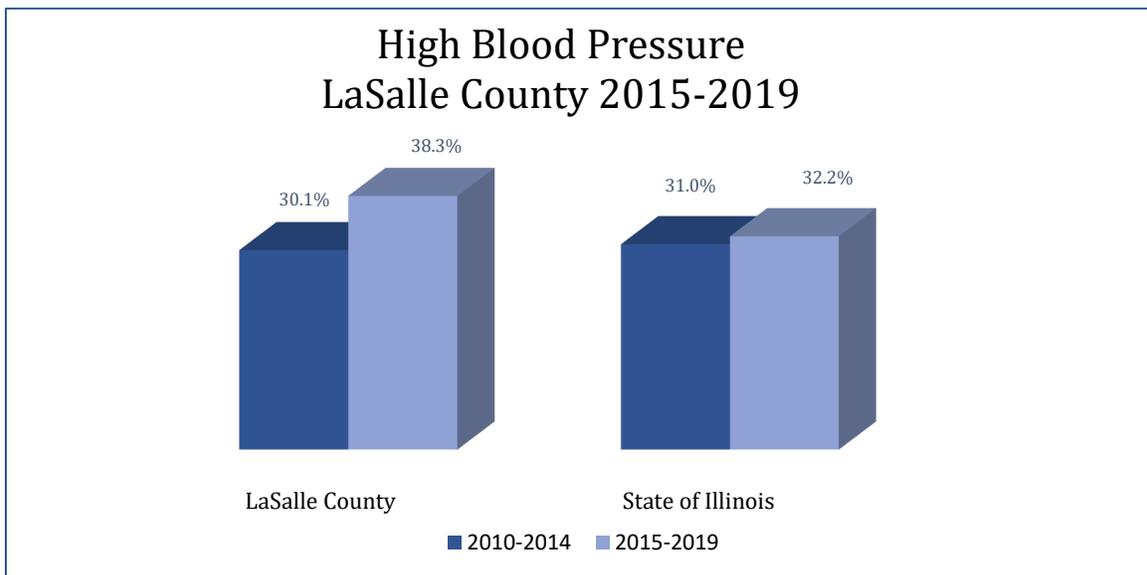
Figure 51



Source: Illinois Behavioral Risk Factor Surveillance System

With regard to high blood pressure, LaSalle County has a higher percentage of residents with high blood pressure than residents in the State of Illinois as a whole. The percentage of LaSalle County residents reporting they have high blood pressure in 2019 (38.3%) is higher than the State average of 32.2% (Figure 52). Note that data have not been updated by the Illinois Department of Public Health.

Figure 52



Source: Illinois Behavioral Risk Factor Surveillance System

## 3.5 Key Takeaways from Chapter 3

- ✓ SUBSTANCE ABUSE AMONG 8TH AND 12TH GRADERS IS AT OR ABOVE STATE AVERAGES FOR MOST CATEGORIES.
- ✓ THE PERCENTAGE OF PEOPLE WHO ARE OVERWEIGHT AND OBESE HAS INCREASED IN LASALLE COUNTY.
- ✓ RISK FACTORS FOR HEART DISEASE ARE INCREASING.

**CHAPTER 4 OUTLINE**

- 4.1 Self-Identified Health Conditions
- 4.2 Healthy Babies
- 4.3 Cardiovascular Disease
- 4.4. Respiratory
- 4.5 Cancer
- 4.6 Diabetes
- 4.7 Infectious Disease
- 4.8 Injuries
- 4.9 Mortality
- 4.10 Key Takeaways from Chapter 4

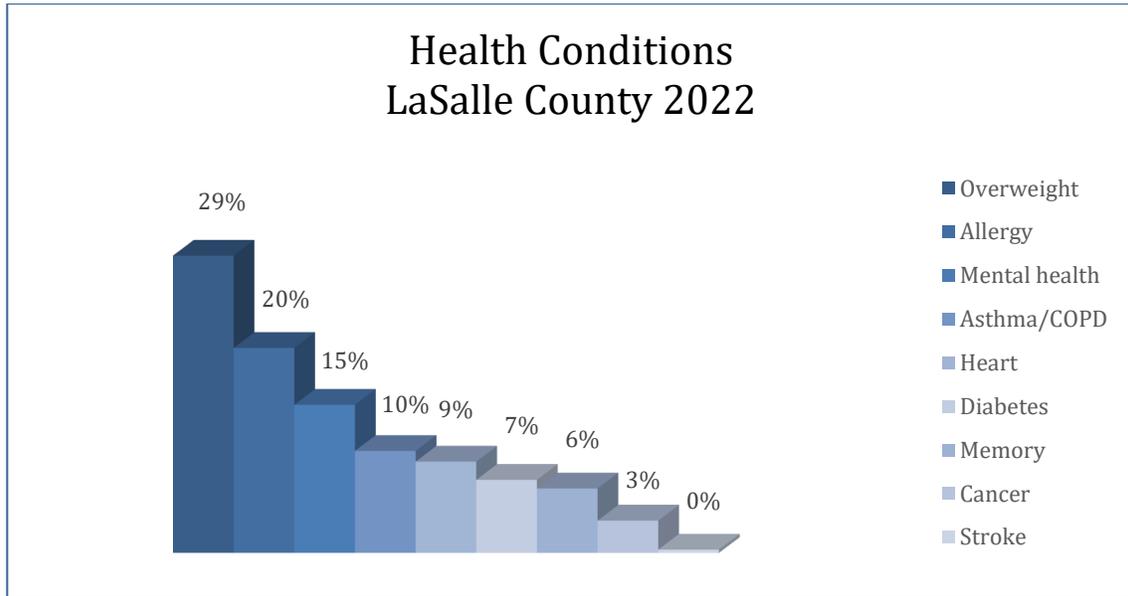
## **CHAPTER 4: MORBIDITY AND MORTALITY**

Given the lack of recent disease/morbidity data from existing secondary data sources, much of the data used in this chapter was manually gathered from LaSalle County hospitals using COMPdata Informatics. Note that hospital-level data only show hospital admissions and do not reflect outpatient treatments and procedures.

### **4.1 Self-Identified Health Conditions**

Survey respondents were asked to self-identify any health conditions. Note that being overweight (29%) was significantly higher than any other health conditions. This percentage is significantly lower than secondary sources. Specifically, BRFSS data indicate that roughly two-thirds of the population is overweight or obese (Figure 53).

Figure 53



Source: CHNA Survey

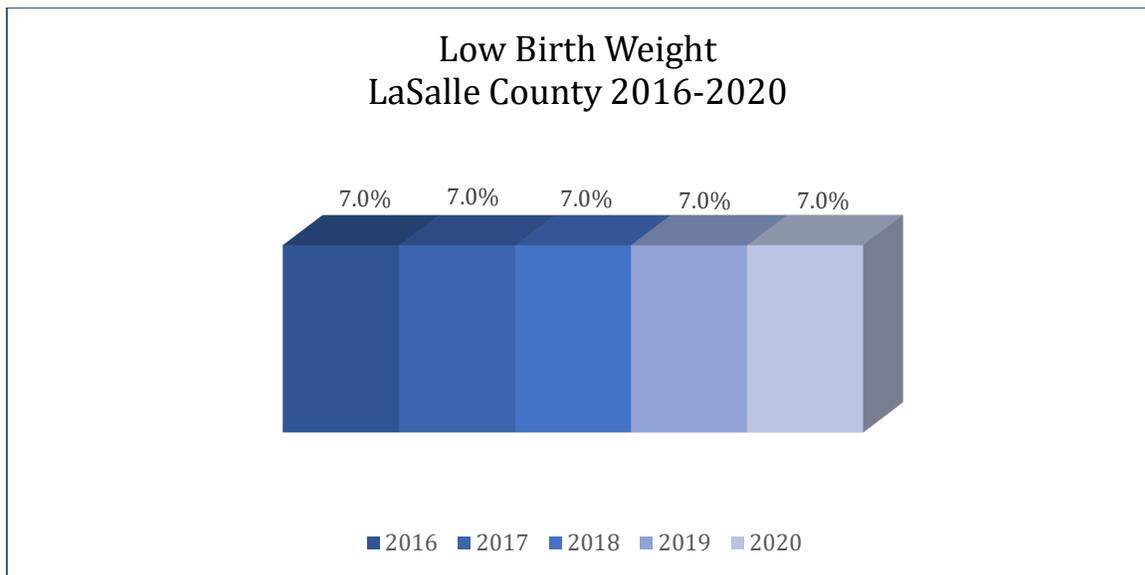
## 4.2 Healthy Babies

*Importance of the measure:* Regular prenatal care is a vital aspect in producing healthy babies and children. Screening and treatment for medical conditions as well as identification and interventions for behavioral risk factors associated with poor birth outcomes are important aspects of healthy babies. Research suggests that women who receive adequate prenatal care are more likely to have better birth outcomes, such as full term and normal weight babies.

### Low Birth Weight Rates

Low birth weight rate is defined as the percentage of infants born below 2,500 grams or 5.5 pounds. Very low birth weight rate is defined as the percentage of infants born below 1,500 grams or 3.3 pounds. In contrast, the average newborn weighs about 7 pounds. The percentage of babies born with low birth weight in LaSalle County stayed consistent at 7% 2016-2020 (Figure 54).

Figure 54



Source: County Health Rankings

## 4.3 Cardiovascular Disease

*Importance of the measure:* Cardiovascular disease is defined as all diseases of the heart and blood vessels, including ischemic (also known as coronary) heart disease, cerebrovascular disease, congestive heart failure, hypertensive disease and atherosclerosis.

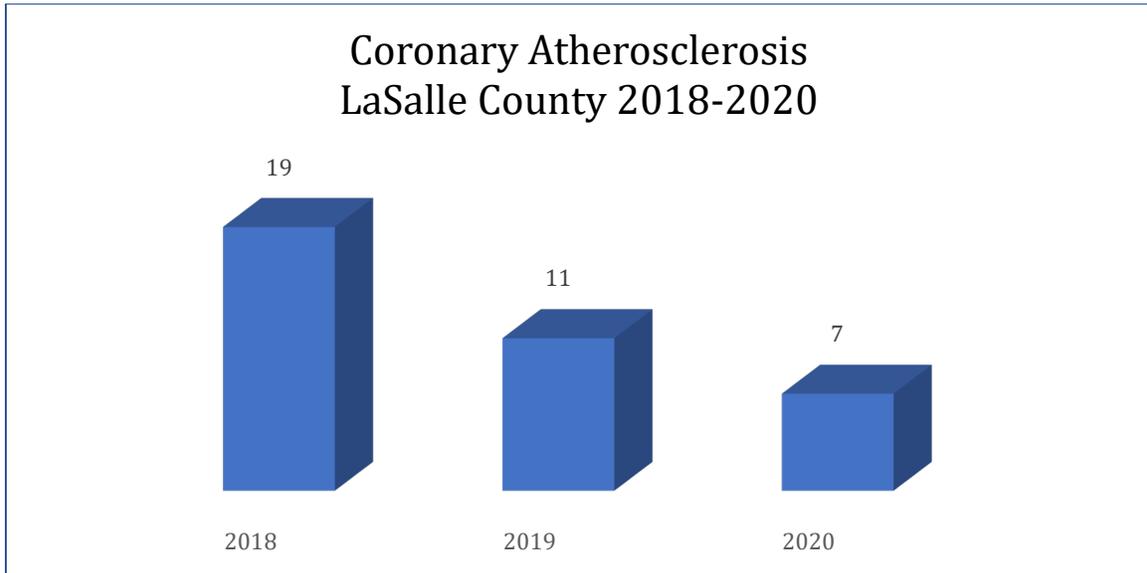
### Coronary Atherosclerosis

Coronary Atherosclerosis, sometimes-called hardening of the arteries, can slowly narrow and harden the arteries throughout the body. When atherosclerosis affects the arteries of the heart, it is called coronary artery disease.

Coronary artery disease is a leading cause of death for Americans. Most of these deaths are from heart attacks caused by sudden blood clots in the heart's arteries.

The number of cases of coronary atherosclerosis complication at LaSalle County area hospitals decreased from 2018 to 2020. This change is likely due to the COVID-19 pandemic (Figure 55). Note that hospital-level data only show hospital admissions and do not reflect out-patient treatments and procedures.

Figure 55

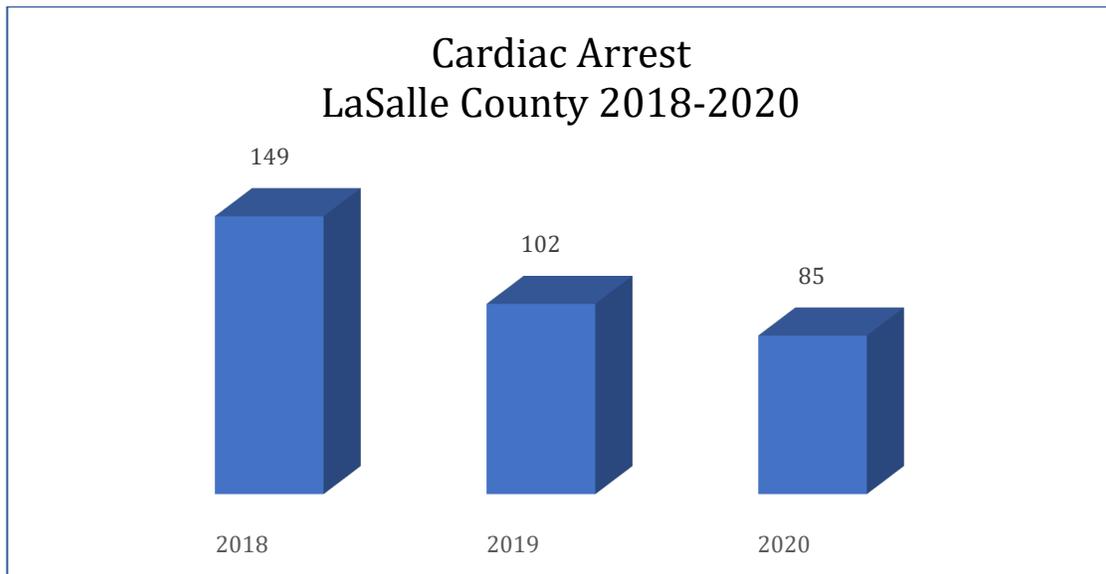


Source: COMPdata Informatics 2021

## Cardiac Arrest

Cases of dysrhythmia and cardiac arrest at LaSalle County area hospitals decreased by 17 cases between 2019 and 2020 (Figure 56). Note that hospital-level data only show hospital admissions.

Figure 56

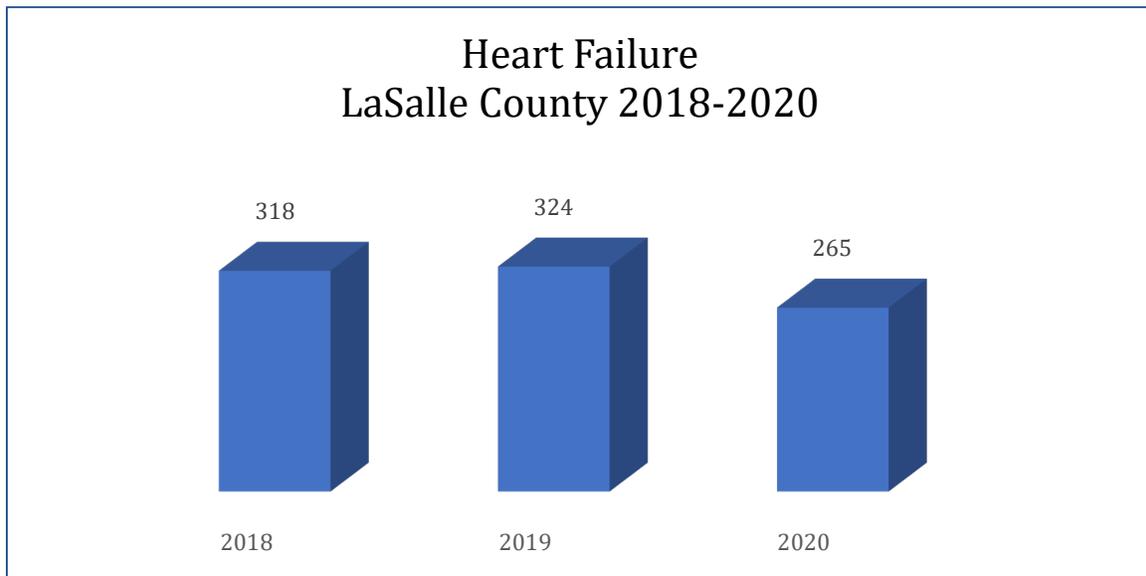


Source: COMPdata Informatics 2021

## Heart Failure

The number of treated cases of heart failure at LaSalle County area hospitals decreased in 2020. In 2018, 318 cases were reported, and in 2020, there were 265 cases reported (Figure 57). Note that hospital-level data only show hospital admissions.

Figure 57

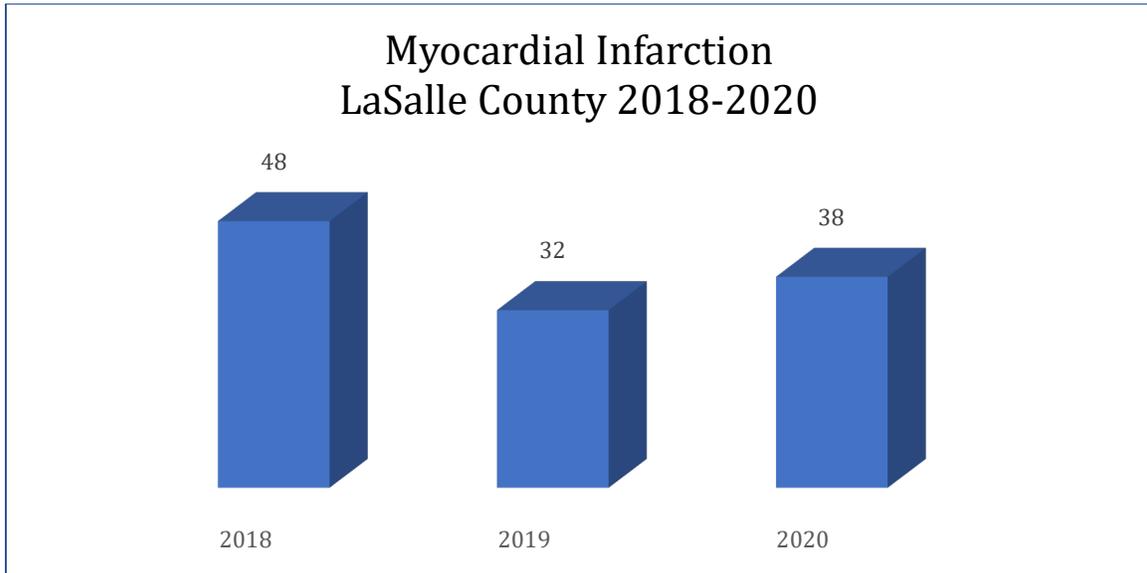


Source: COMPdata Informatics 2021

## Myocardial Infarction

The number of treated cases of myocardial infarction at area hospitals in LaSalle County increased from 32 in 2019 to 38 in 2020. (Figure 58). Note that hospital-level data only show hospital admissions.

Figure 58



Source: COMPdata Informatics 2021

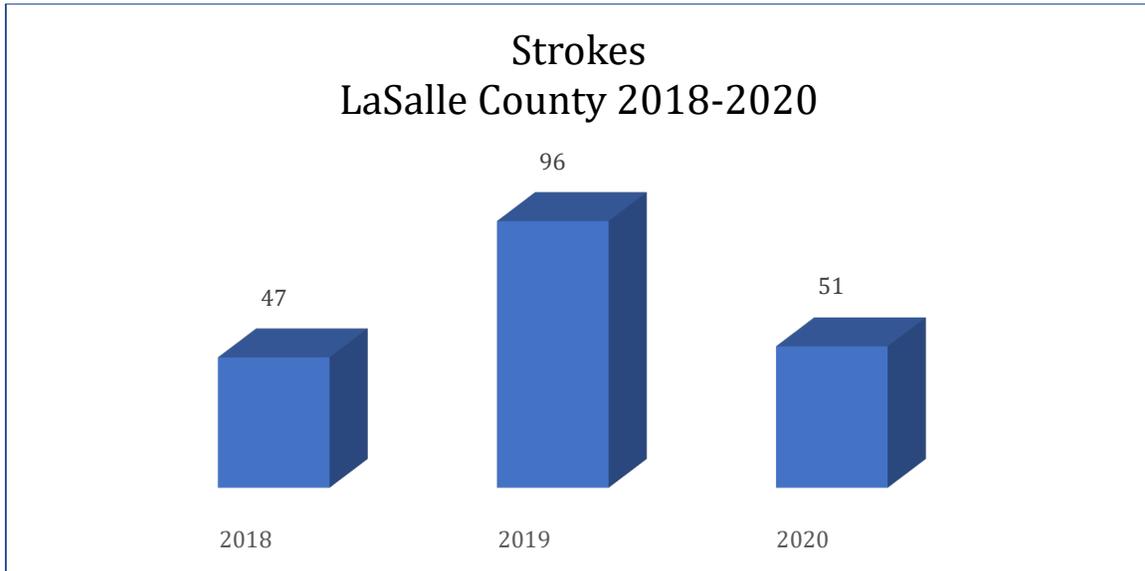
## Arterial Embolism

There were no treated cases of arterial embolism at LaSalle County area hospitals. Note that hospital-level data only show hospital admissions.

## Strokes

The number of treated cases of stroke at LaSalle County area hospitals increased between 2018 (47) and 2019 (96). The number of cases then decreased in 2020 to 51 cases (Figure 59). Note that hospital-level data only show hospital admissions and do not reflect outpatient treatments and procedures.

Figure 59



Source: COMPdata Informatics 2021

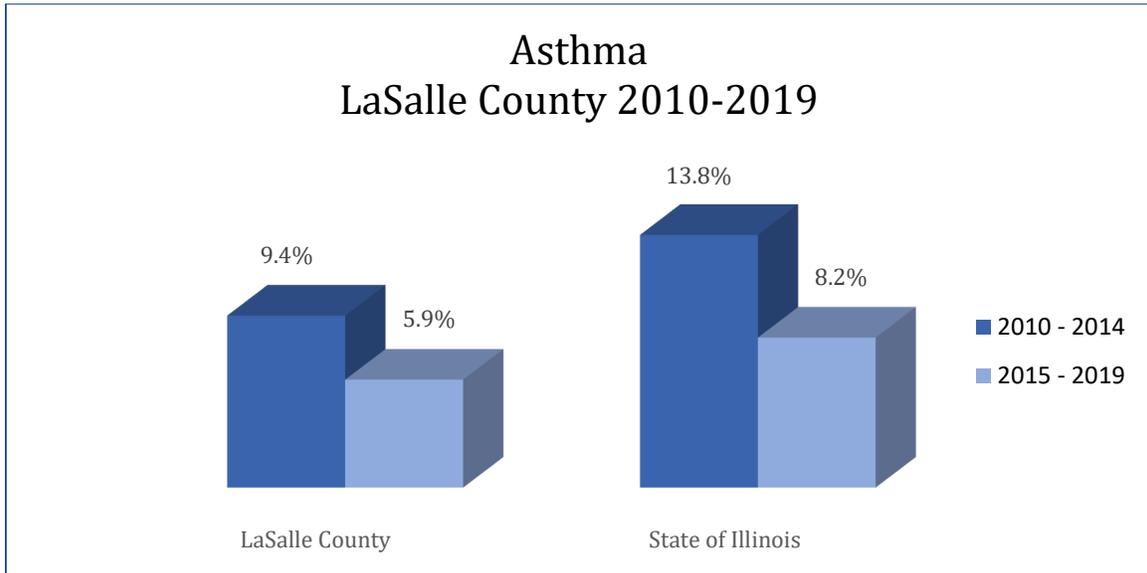
## 4.4 Respiratory

*Importance of the measure:* Disease of the respiratory system includes acute upper respiratory infections such as influenza, pneumonia, bronchitis, asthma, emphysema and Chronic Obstructive Pulmonary Disease (COPD). These conditions are characterized by breathlessness, wheezing, chronic coughing, frequent respiratory infections and chest tightness. Many respiratory conditions can be successfully controlled with medical supervision and treatment. However, children and adults who do not have access to adequate medical care are likely to experience repeated serious episodes, trips to the emergency room and absences from school and work. Hospitalization rates illustrate the worst episodes of respiratory diseases and are a proxy measure for inadequate treatment.

### Asthma

The percentage of residents who have been diagnosed with asthma increased in LaSalle County has decreased between 2010-2014 and 2015-2019, while State averages also decreased. According to the Illinois BRFSS, asthma rates in LaSalle County (5.9%) are lower than the State of Illinois (8.2%) (Figure 60). Note that data have not been updated by the Illinois Department of Public Health.

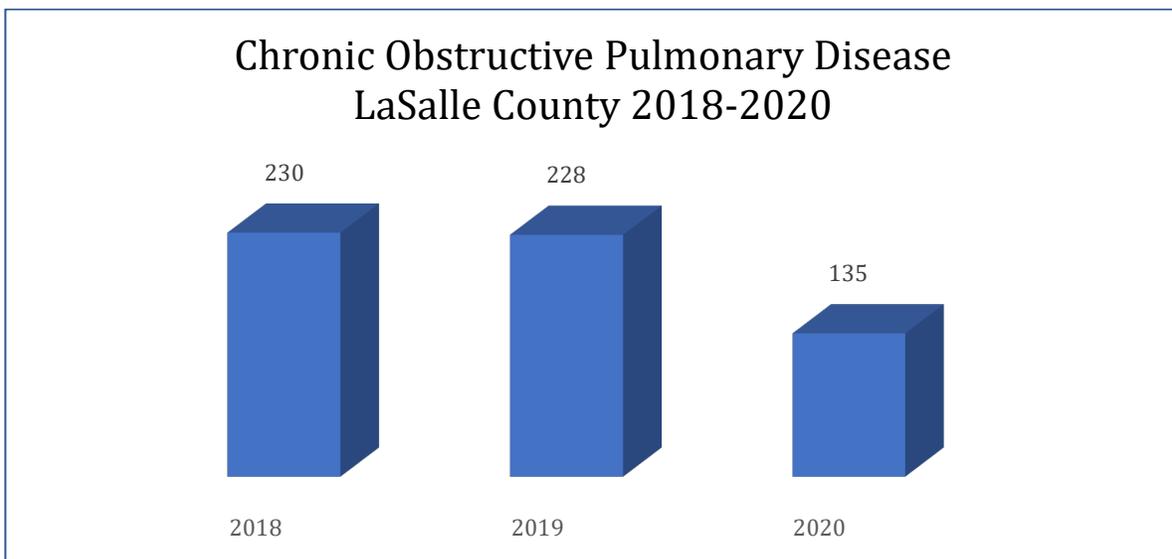
Figure 60



Source: Illinois Behavioral Risk Factor Surveillance System

Treated cases of COPD at LaSalle County area hospitals stayed relatively the same between 2018 and 2019, with a decline in 2020 (Figure 61). Note that hospital-level data only show hospital admissions and do not reflect out-patient treatments and procedures.

Figure 61



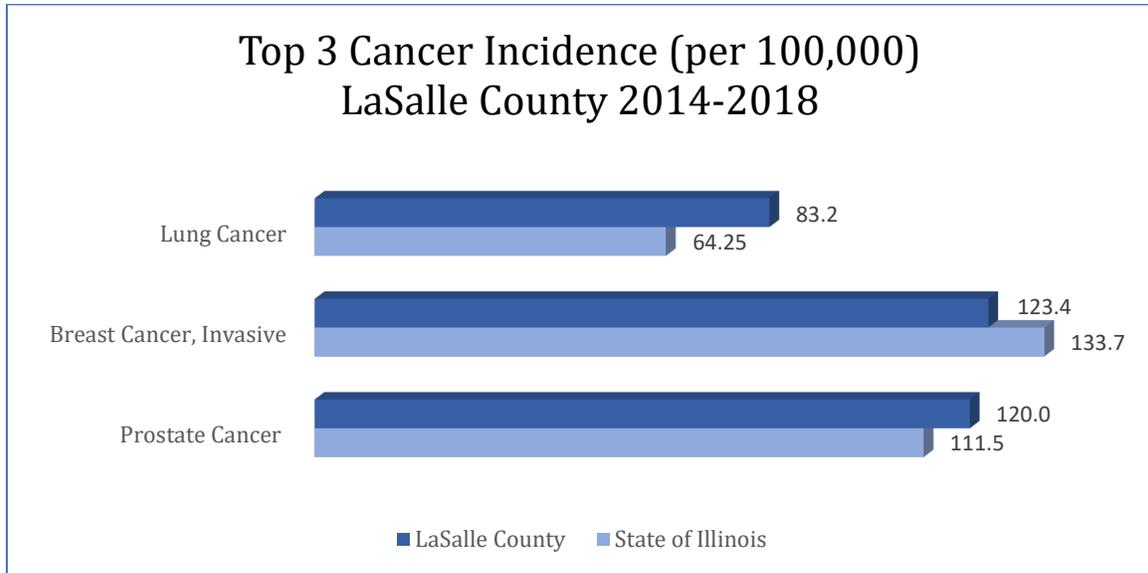
Source: COMPdata Informatics 2021

## 4.5 Cancer

*Importance of the measure:* Cancer is caused by the abnormal growth of cells in the body and many causes of cancer have been identified. Generally, each type of cancer has its own symptoms, outlook for cure, and methods for treatment. Cancer is one of the leading causes of death in LaSalle County.

The top three prevalent cancers in LaSalle County are illustrated in Figure 62. Specifically, breast cancer is lower than the State of Illinois, while prostate and lung cancer rates are higher.

Figure 62



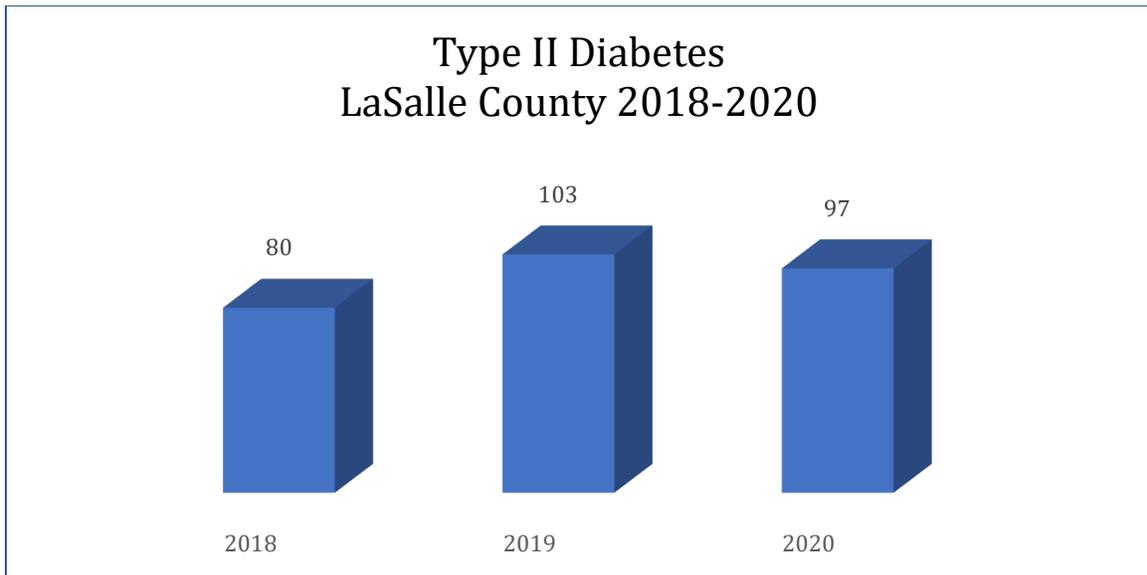
Source: Illinois Department of Public Health – Cancer in Illinois

## 4.6 Diabetes

*Importance of the measure:* Diabetes is the leading cause of kidney failure, adult blindness and amputations and is a leading contributor to strokes and heart attacks. It is estimated that 90-95% of individuals with diabetes have Type II diabetes (previously known as adult-onset diabetes). Only 5-10% of individuals with diabetes have Type I diabetes (previously known as juvenile diabetes).

Inpatient cases of Type II diabetes from LaSalle County increased between 2018 (80 cases) and 2020 (97 cases) (Figure 63). Note that hospital-level data only show hospital admissions and do not reflect out-patient treatments and procedures.

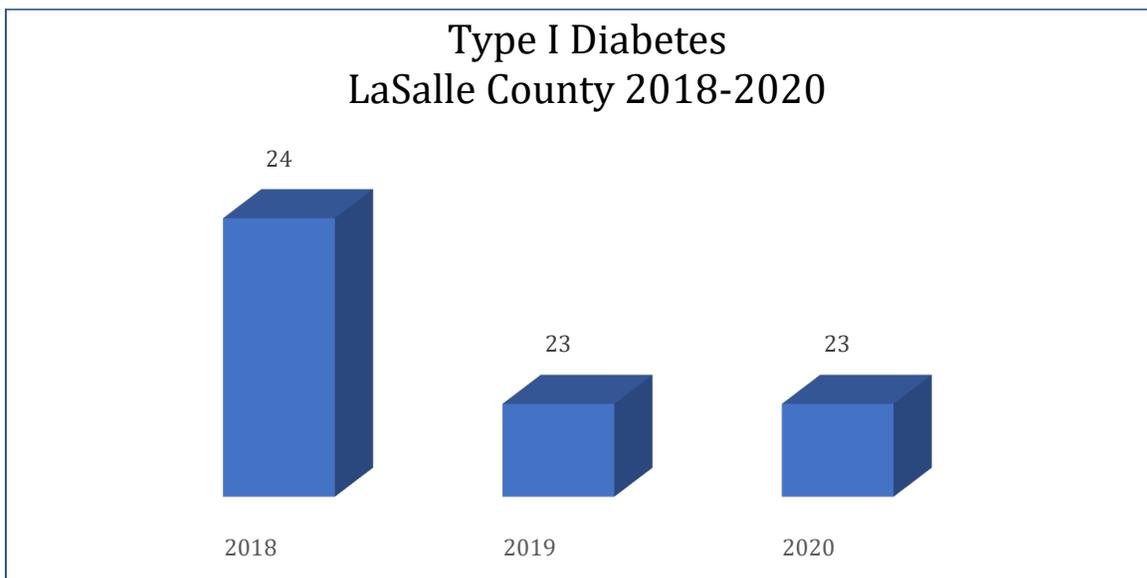
Figure 63



Source: COMPdata Informatics 2021

Inpatient cases of Type I diabetes show a slight decrease from 2018 (24) to 2020 (23) for LaSalle County (Figure 64). Note that hospital-level data only show hospital admissions and do not reflect out-patient treatments and procedures.

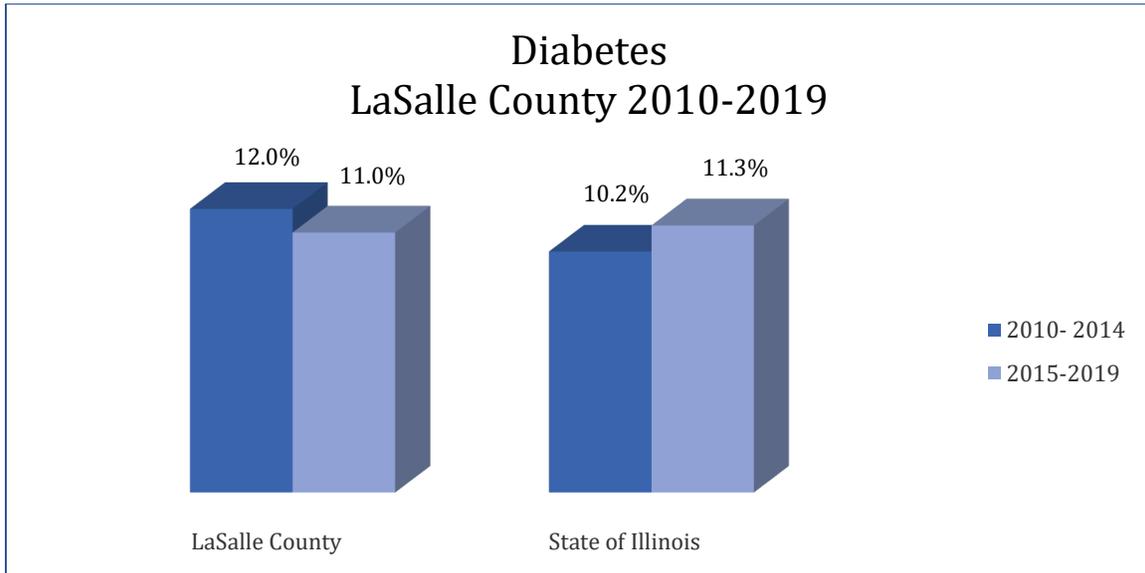
Figure 64



Source: COMPdata Informatics 2021

Data from the Illinois BRFSS indicate that 11% of LaSalle County residents have diabetes (Figure 65). Trends are concerning, as the prevalence of diabetes is increasing dramatically in the State of Illinois. Note that data have not been updated by the Illinois Department of Public Health.

Figure 65



Source: Illinois Behavioral Risk Factor Surveillance System

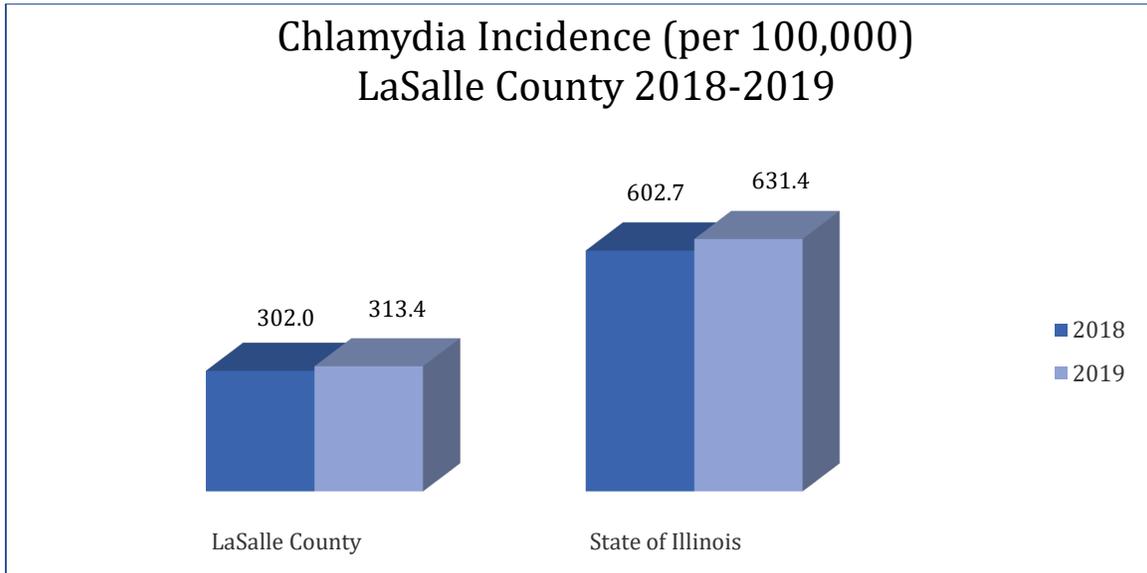
## 4.7 Infectious Diseases

*Importance of the measure:* Infectious diseases, including sexually transmitted infections and hepatitis, are related to high-risk sexual behavior, drug and alcohol abuse, limited access to healthcare, and poverty. It would be highly cost-effective for both individuals and society if more programs focused on prevention rather than treatment of infectious diseases.

### Chlamydia and Gonorrhea Cases

The data for the number of infections of chlamydia in LaSalle County from 2018-2019 indicate an increase. There is also an increase of incidence of chlamydia across the State of Illinois. (Figure 66). Rates of chlamydia in LaSalle County are lower than State averages.

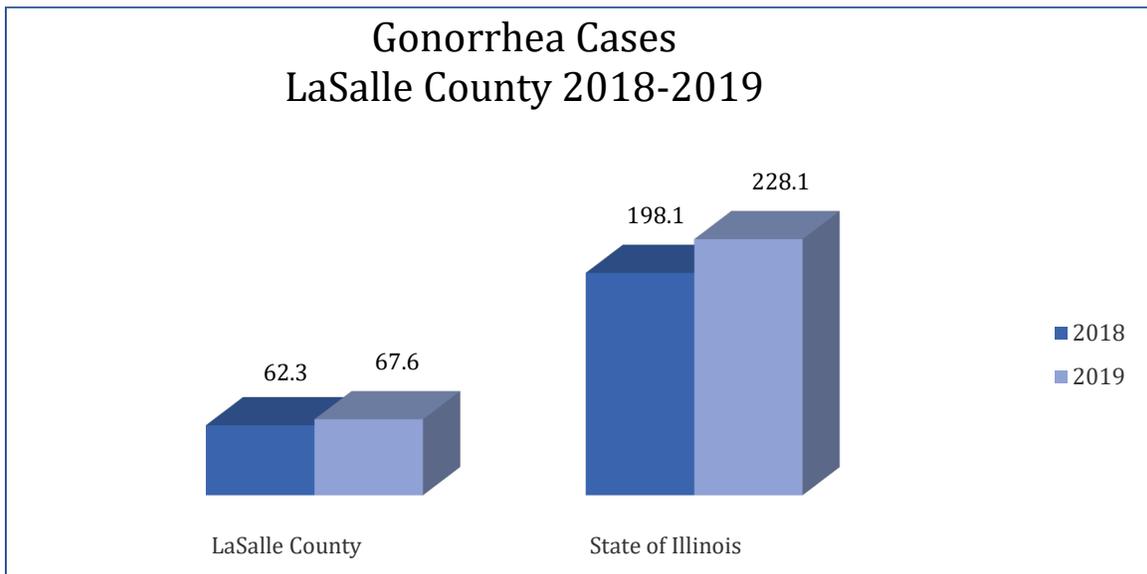
Figure 66



Source: Illinois Department of Public Health

The data for the number of infections of gonorrhea in LaSalle County indicate a slight increase from 2018-2019, similar to the increase experienced by the State of Illinois from 2018-2019. Rates of gonorrhea in LaSalle County are significantly lower than State averages (Figure 67).

Figure 67



Source: Illinois Department of Public Health

## Vaccine Preventable Diseases

A vaccine-preventable disease is an infectious disease for which an effective preventive vaccine exists. If a person acquires a vaccine-preventable disease and dies, the death is considered a vaccine-preventable

death. According to the Michigan Public Health Department, the most common and serious vaccine-preventable diseases are: Varicella (chickenpox), Tetanus (lockjaw), Pertussis (whooping cough), Poliomyelitis (Polio), Measles (Rubeola), Mumps, Rubella (German measles), Diphtheria, Hepatitis B and Hemophilic Influenza Type B (HIB) Infections. These diseases used to strike thousands of children each year. Today there are relatively few cases, but outbreaks still occur each year because some babies are not immunized. LaSalle County has shown no significant outbreaks compared to state statistics, but there are limited data available (Table 1 and Table 2).<sup>2</sup> Note data has not been updated by the State beyond years displayed in table. Also note that COVID-19 vaccine rates are presented in Chapter 2.

*Table 1 Vaccine Preventable Diseases 2013-2016 LaSalle County Region*

Mumps	2013	2014	2015	2016
LaSalle County	0	0	1	0
State of Illinois	26	142	430	333

Pertussis	2013	2014	2015	2016
LaSalle County	32	2	0	2
State of Illinois	785	764	718	1034

Varicella	2013	2014	2015	2016
LaSalle County	16	10	13	6
State of Illinois	731	596	443	469

*Source: Illinois Department of Public Health*

*Table 2 Tuberculosis 2017-2018 LaSalle County Region*

Tuberculosis	2017	2018
LaSalle County	1	2
State of Illinois	336	319

*Source: Illinois Department of Public Health*

## 4.8 Injuries

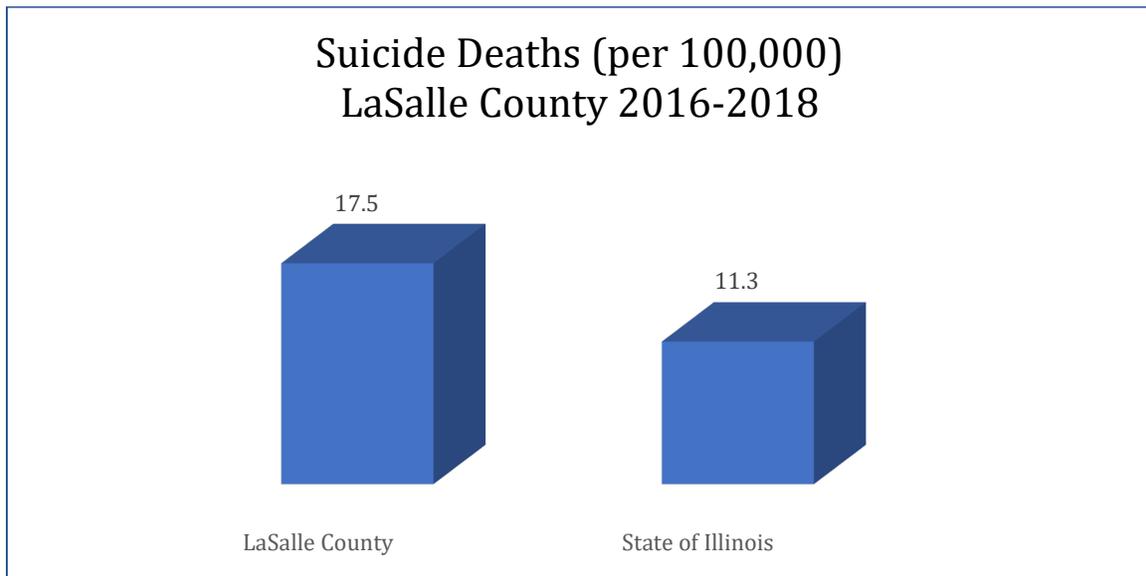
*Importance of the measure:* Suicide is intentional self-harm resulting in death. These injuries are often indicative of serious mental health problems requiring the treatment of other trauma-inducing issues. Unintentional injuries can occur, in part, from violent crimes.

<sup>2</sup> Source: <http://www.idph.state.il.us/about/vpcd.htm>

## Suicide

The number of suicide deaths in LaSalle County indicate higher incidence than State of Illinois averages, as there were approximately 17.5 per 100,000 people in LaSalle County in 2018 (Figure 68).

Figure 68

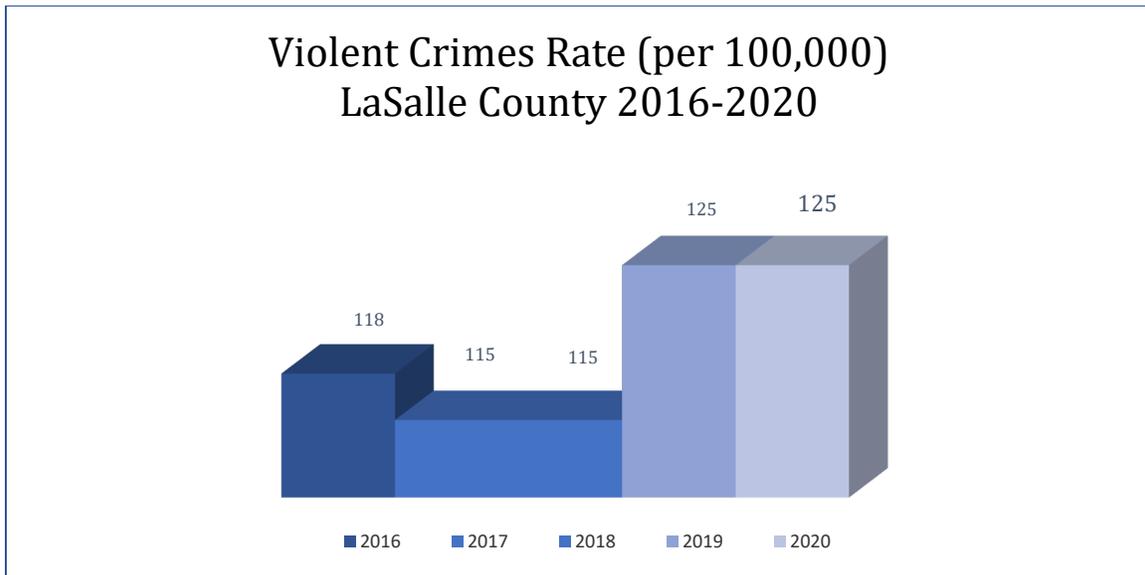


Source: Illinois Department of Public Health

## Violent Crimes

Violent crimes are defined as offenses that involve face-to-face confrontation between the victim and the perpetrator, including homicide, forcible rape, robbery and aggravated assault. Violent crime is represented as an annual rate per 100,000 people (Figure 69). The number of violent crimes has increased for year 2019-2020 in LaSalle County.

Figure 69



Source: Illinois County Health Rankings 2020

## 4.9 Mortality

*Importance of the measure:* Presenting data that focuses on causes of mortality provides an opportunity to define and quantify which diseases are causing the most deaths.

The top three leading causes of death in the State of Illinois and LaSalle County are similar as a percentage of total deaths in 2020. Diseases of the Heart are the cause of 21.4% of deaths, cancer is the cause of 18.8% of deaths and COVID-19 is the cause of 11.8% of deaths in LaSalle County (Table 3).

Table 3

Top 5 Leading Causes of Death for all Races, County & State 2020		
Rank	LaSalle County	State of Illinois
1	Diseases of Heart (21.4%)	Diseases of Heart (20.7%)
2	Malignant Neoplasm (18.8%)	Malignant Neoplasm (18.1%)
3	COVID-19 (11.8%)	COVID-19 (11.8%)
4	Cerebrovascular Disease (4.2%)	Accidents (5.1%)
5	Accidents (4.2%)	Cerebrovascular Disease (5.4%)

Source: Illinois Department of Public Health

## 4.10 Key Takeaways from Chapter 4

- ✓ LUNG CANCER RATES ARE SLIGHTLY HIGHER THAN STATE AVERAGES.
- ✓ THERE HAS BEEN A DECREASE IN ASTHMA CASES AND IN DIABETES.
- ✓ CANCER, HEART DISEASE AND COVID-19 ARE THE LEADING CAUSES OF MORTALITY IN LASALLE COUNTY.
- ✓ VIOLENT CRIMES HAVE INCREASED IN LASALLE COUNTY.
- ✓ SUICIDE RATES ARE HIGHER THAN STATE AVERAGES.

**CHAPTER 5 OUTLINE**

- 5.1 Perceptions of Health Issues
- 5.2 Perceptions of Unhealthy Behavior
- 5.3 Perceptions of Issues with Well Being
- 5.4 Summary of Community Health Issues
- 5.5 Community Resources
- 5.6 Significant Needs Identified and Prioritized

## **CHAPTER 5: PRIORITIZATION OF HEALTH-RELATED ISSUES**

In this chapter, the most critical health-related needs in the community are identified. To accomplish this, community perceptions of health issues, unhealthy behaviors and issues related to well-being were first considered. Key takeaways from each chapter were then used to identify important health-related issues in the community. Next, a comprehensive inventory of community resources was completed; and finally, the most significant health needs in the community are prioritized.

Specific criteria used to identify these issues included: (1) magnitude in the community; (2) severity in the community; (3) potential for impact to the community.

### **5.1 Perceptions of Health Issues**

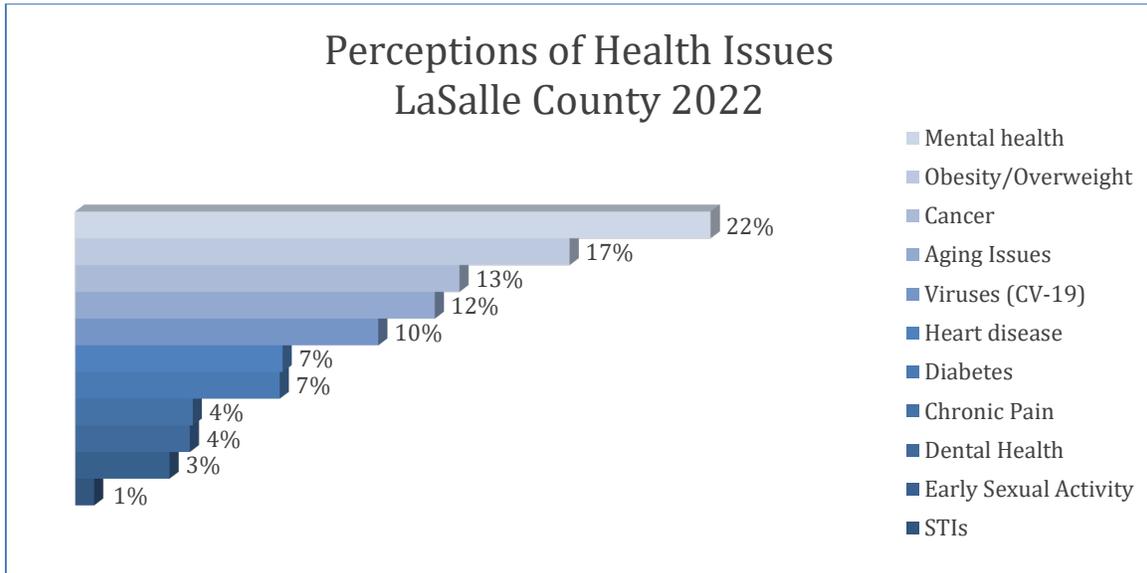
The CHNA survey asked respondents to rate the three most important health issues in the community. Respondents had a choice of 11 different options.

The health issue that rated highest was mental health (22%), followed by obesity (17%). The two factors were significantly higher than other categories based on t-tests between sample means).

Note that perceptions of the community were accurate in some cases. For example, mental health issues are significantly increasing. Also, there is a steady rise in obesity. The survey respondents accurately identified these as important health issues. However, some perceptions were inaccurate. For example, while heart disease is a leading cause of mortality, it is ranked relatively low (Figure 70).

Note that perceptions of the community were accurate in some cases. For example, mental health issues are significantly increasing. Also, there is a steady rise in obesity. The survey respondents accurately identified these as important health issues. However, some perceptions were inaccurate. For example, while heart disease is a leading cause of mortality, it is ranked relatively low.

Figure 70

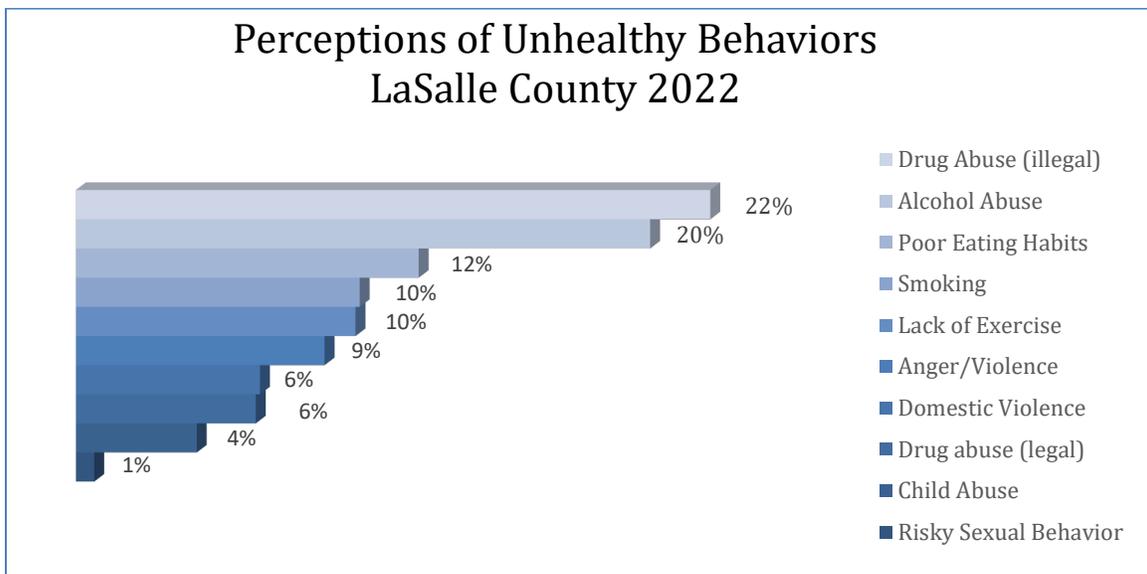


Source: CHNA Survey

## 5.2 Perceptions of Unhealthy Behaviors

Respondents were asked to select the three most important unhealthy behaviors in the community out of a total of 10 choices. The two unhealthy behaviors that rated highest were drug abuse (illegal) at 22% and alcohol abuse at 20% (Figure 71). These two factors were significantly higher than other categories based on *t-tests* between sample means.

Figure 71



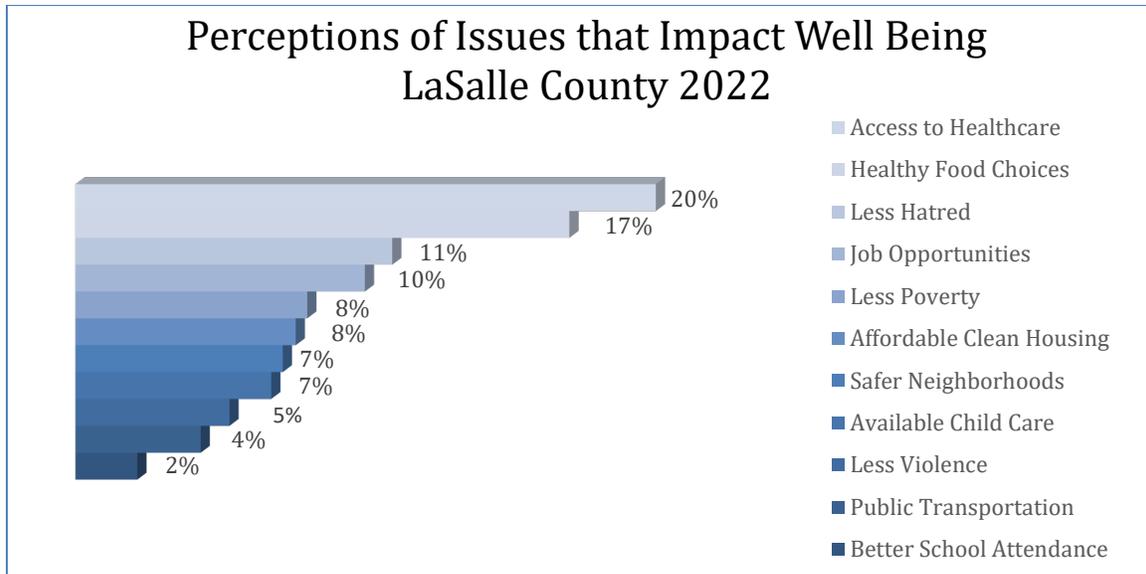
Source: CHNA Survey

### 5.3 Perceptions of Issues Impacting Well Being

Respondents were asked to select the three most important issues impacting well-being in the community out of a total of 11 choices.

The issue impacting well-being that rated highest was access to healthcare (20%). It was followed by healthy food choices (17%) (Figure 72).

Figure 72



Source: CHNA Survey

### 5.4 Summary of Community Health Issues

Based on findings from the previous analyses, a chapter-by-chapter summary of key takeaways is used to provide a foundation for identification of the most important health-related issues in the community. Considerations for identifying key takeaways include magnitude in the community, strategic importance to the community, existing community resources and potential for impact and trends and future forecasts.

**Demographics (Chapter 1)** – Four factors were identified as the most important areas of impact from the demographic analyses:

- Population decreased
- Population over age 65 increased
- Increasing LatinX population
- Single female head-of-house-household

**Prevention Behaviors (Chapter 2)** – Five factors were identified as the most important areas of impact from the chapter on prevention behaviors:

- Access to healthcare
- COVID-19 vaccination rates
- Prostate screening is very low
- Exercise and healthy eating behaviors
- Depression and stress/anxiety

**Symptoms and Predictors (Chapter 3)** – Three factors were identified as the most important areas of impact from the chapter on symptoms and predictors:

- Substance abuse among youth
- Overweight and obesity
- Heart disease

**Morbidity and Mortality (Chapter 4)** – Three factors were identified as the most important areas of impact from the chapter on morbidity/mortality behaviors:

- Cancer – lung
- Violent crime
- Suicide

## Potential Health-Related Needs Considered for Prioritization

Before the prioritization of significant community health-related needs was performed, results were aggregated into 9 potential categories. Based on similarities and duplication, the 9 potential areas considered are:

- **Aging issues**
- **Healthy behaviors – nutrition & exercise**
- **Behavioral health**
- **Overweight/Obesity**
- **Substance abuse**
- **Prostate screening**
- **Cancer – prostate**
- **Cancer - lung**
- **COVID-19**

## 5.5 Community Resources

After summarizing potential categories for prioritization in the Community Health Needs Assessment, a comprehensive analysis of existing community resources was performed to identify the efficacy to which these 9 health-related areas were being addressed. A resource matrix can be seen in APPENDIX 5: RESOURCE MATRIX relating to the 9 health-related issues.

There are numerous forms of resources in the community. They are categorized as recreational facilities, county health departments, community agencies and area hospitals/clinics. A detailed list of community resources and descriptions appears in APPENDIX 6: DESCRIPTION OF COMMUNITY RESOURCES.

## 5.6 Significant Needs Identified and Prioritized

In order to prioritize the previously identified dimensions, the collaborative team considered health needs based on: (1) magnitude of the issues (e.g., what percentage of the population was impacted by the issue); (2) severity of the issues in terms of their relationship with morbidities and mortalities; (3) potential impact through collaboration. Using a modified version of the Hanlon Method (as seen in APPENDIX 7: PRIORITIZATION METHODOLOGY), the collaborative team identified three significant health needs and considered them equal priorities:

- **Healthy Behaviors – defined as active living and healthy eating, and their impact on obesity**
- **Behavioral Health – including mental health and substance abuse**
- **Healthy Aging**

### HEALTHY BEHAVIORS – ACTIVE LIVING, HEALTHY EATING AND SUBSEQUENT OBESITY

**ACTIVE LIVING.** A healthy lifestyle, comprised of regular physical activity and balanced diet, has been shown to increase physical, mental and emotional well-being. Note that 22% of respondents indicated that they do not exercise at all, while the majority (64%) of residents exercise 1-5 times per week. The most common reasons for not exercising are not having enough energy (29%), not time (22%) or a dislike of exercise (16%).

**HEALTHY EATING.** Almost two-thirds (64%) of residents report no consumption or low consumption (1-2 servings per day) of fruits and vegetables per day. Note that the percentage of residents who consume five or more servings per day is only 4%. The most prevalent reasons for failing to eat more fruits and vegetables were the lack of desire and lack of importance.

**OBESITY.** In LaSalle County, over two-thirds (70.4%) of residents were diagnosed with obesity and being overweight. In the 2022 CHNA survey, respondents indicated that being overweight was the second most important health issue and was rated as the most prevalently diagnosed health condition. Research strongly suggests that obesity is a significant problem facing youth and adults nationally, in Illinois, and within LaSalle County. The U.S. Surgeon General has characterized obesity as “the fastest-growing, most threatening disease in America today.” According to the Obesity Prevention Initiative from the Illinois General Assembly, 20% of Illinois children are obese. With children, research has linked obesity to numerous chronic diseases including Type II diabetes, hypertension, high blood pressure and asthma. Adverse physical health side effects of obesity include orthopedic problems due to weakened joints and lower bone density. Detrimental mental health side effects include low self-esteem, poor body image, symptoms of depression and suicide ideation. Obesity impacts educational performance as well; studies suggest school absenteeism of obese children is six times higher than that of non-obese children. With adults, obesity has far-reaching consequences. Testimony to the Illinois General Assembly indicated that obesity-related illnesses contribute to worker absenteeism, slow workflow, and high worker

compensation rates. A Duke University study on the effects of obesity in the workforce noted 13 times more missed workdays by obese employees than non-obese employees. Nationwide, lack of physical activity and poor nutrition contribute to an estimated 300,000 preventable deaths per year.

## BEHAVIORAL HEALTH – MENTAL HEALTH AND SUBSTANCE ABUSE

**MENTAL HEALTH.** The CHNA survey asked respondents to indicate prevalence of specific issues, namely depression and stress/anxiety. Of respondents, 49% indicated they felt depressed in the last 30 days and 44% indicated they felt anxious or stressed. Depression tends to be rated higher by women, younger people, those with less income and those with less education. Similarly, stress and anxiety tend to be rated higher by women, younger people, those with less income and those with less education. Respondents were also asked if they spoke with anyone about their mental health in the last year. Of respondents 31% indicated that they spoke to someone, the most common response was to a counselor (38%). In regard to self-assessment of overall mental health, 14% of respondents stated they have poor overall mental health. In the 2022 CHNA survey, respondents indicated that mental health was the most important health issue.

**SUBSTANCE ABUSE.** Of survey respondents, 20% indicated they consume at least one alcoholic drink each day. Alcohol consumption tends to be rated higher by men, White people, and those with higher income. Of survey respondents, 6% indicated they improperly use prescription medications each day to feel better and 7% indicated the use marijuana each day. Note that misuse of prescription medication (oftentimes opioid use) tends to be rated higher by Black people, those with lower education, and those with less income. Marijuana use tends to be rated higher by Black people, those with lower education, and those with less income. Finally, of survey respondents, 1% indicated they use illegal drugs on a daily basis.

In the 2022 CHNA survey, respondents rated drug abuse (illegal) as the most prevalent unhealthy behavior (22%) in LaSalle County, followed by alcohol abuse (20%).

## HEALTHY AGING

In the CHNA survey, respondents rated aging issues (12%) as the fourth most important health issue. The percentage of individuals aged 65 and older increased 10.2% between 2015 and 2019. Alzheimer's disease was the 5th leading cause of death in LaSalle County in 2020. Illinois is projected to see an 18.2% increase in Alzheimer's disease incidence between 2018 and 2025. Alzheimer's and dementia care in the U.S. will cost an estimated \$277 billion. According to a 2015 study, the average cost of dementia care (over a five-year period) was \$287,038, compared to \$175,136 (heart disease) and \$173,383 (cancer).

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## III. APPENDICES

## APPENDIX 1: MEMBERS OF COLLABORATIVE TEAM

Members of the **Collaborative Team** consisted of individuals with special knowledge of and expertise in the healthcare of the community. Individuals, affiliations, titles and expertise are as follows:

<b>PARTICIPANT</b>	<b>BIO</b>	<b>AGENCY</b>
Albers, Elise	Manager, Population Health for OSF Children's Hospital. She earned a BBA from the University of Memphis as well as MBA and MPH degrees from the University of South Dakota. Outside of work Elise serves as a board member for the Children's Discovery Museum Foundation and as a court appointed special advocate (CASA). She also serves on the advisory board for Sigma Kappa Sorority, Eta Chapter, at Illinois Wesleyan University.	OSF HealthCare Children's Hospital of Illinois
Alcorn, Carol	Executive Director Illinois Valley PADS Homeless Shelter Program. Began as a volunteer and has served in leadership for thirteen years. She has served on many local community leadership teams and currently is on the LP Township High School Board.	Illinois Valley Public Action to Deliver Shelter (IV PADS)
Barrie, Jenny	Health Educator and Public Information at the LaSalle County Health Department for 20 years. She received her bachelor's degree in Community Health from Eastern Illinois University. Her time is divided between the Administrative and Environmental Health Divisions.	LaSalle County Health Department
Bedeker, Cari	Manager of OSF HealthCare Physician Offices in Ottawa and Marseilles and Occupational Health in Ottawa and Streator.	OSF HealthCare Medical Group
Biggins, Ed	Director of Asset Management for the Housing Authority of LaSalle County.	Housing Authority for LaSalle County
Bima, Kim	Business Development Specialist in Employer Relations and Occupational Health Account Rep for OSF Healthcare. Serving I80 Region. Kim has worked for OSF Healthcare and previously for St. Mary's Hospital for 11 years.	OSF HealthCare I-80 Market
Bomstad, Heather	Vice President of Patient Care Services/CNO at OSF Saint Paul Medical Center. She has worked at the hospital for 28 years in a variety of nursing positions. Heather has lived in the community for her entire life and has been involved in different community organizations.	OSF HealthCare I-80 Market
Booze, Judy	Director of the Streator Salvation Army since 2008. Manages a food pantry, thrift store,	Streator Salvation Army

	shower facility, keep Streator warm program with socks, coats, hats etc. also manages financial assistance program for the Streator community.	
Bourell, Danielle	Community Outreach Coordinator for OSF HealthCare in the I-80 market. She previously worked for the Girl Scouts of Central Illinois as the Director of Membership before beginning her career in the healthcare setting. She received her Bachelor's degree in English and Psychology from the University of Minnesota. She is also a board member of the United Way of Eastern LaSalle County.	OSF HealthCare I-80 Market
Brooks, Connie	Illinois Registered Nurse and IVCC graduate. She worked in public health for over 10 years and 12 years in emergency management with 10 as Director for LaSalle County since 1999. Prior to that she worked at St. Margaret's Hospital in Spring Valley on Medical/Surgical/ICU floors.	LaSalle County Health Department
Bursztynsky, Susan	Executive Director of Safe Journeys (formerly, ADV & SAS) since 2016. Prior to this, Susan was managing attorney with Prairie State Legal Services (1987 - 1997), director of Thirteenth Judicial Circuit Family Violence Coordinating Council (1997 - 2009) and President/CEO of Starved Rock Regional Center (formerly, Easter Seals) (2009 - 2016). She serves on several community boards/agencies, including Tri-County Opportunities Council.	Safe Journeys
Capece, Joe	Executive Director of the Ottawa YMCA	Ottawa YMCA
Corcoran, Jerry	32 Years at Illinois Valley Community College, 14 years as President. Bachelor of Science in Liberal Arts and Sciences from University of Illinois. Master of Arts in Educational Administration and Supervision from Chicago State University. Doctorate in Curriculum and Instruction from Northern Illinois University.	Illinois Valley Community College
Cox, Brad	Superintendent for Mendota Elementary School District #289.	Mendota Elementary School District #289
Cushing, Michael	Superintendent of Ottawa Township High School District #140. Has served as a public-school administrator since 2004 and has been at OTHS since 2010. He earned his bachelor's degree from Southern Illinois University at Carbondale, his master's degree from Illinois State University and his doctoral degree from	Ottawa Township High School

	the University of St. Francis. He is a member of the Illinois Association of School Administrators, Sunrise Rotary and the Knights of Columbus (Ottawa, IL).	
Damron, Don	Vice President of Ambulatory Services for OSF HealthCare Saint Elizabeth Medical Center, OSF HealthCare Saint Paul Medical Center and the OSF HealthCare Center for Health – Streator. Prior to his career in healthcare leadership, Don was a physical therapist at Newsome and Damron Physical Therapy Center, where he was partner and director. Don earned his Bachelor's degree in Kinesiology from the University of Illinois Champaign/Urbana, his Master's degree in Physical Therapy from Midwestern University, and his currently pursuing his MBA at LSU- Shreveport. He holds board distinction as a Fellow of the American College of Healthcare Executives and is a Board Member for the Streator Area Chamber of Commerce and Industry.	OSF HealthCare I-80 Market
Donnell, Steve	Mendota YMCA Branch Manager	Mendota YMCA
Dougherty, Leslie	Health Educator and Public Information at the LaSalle County Health Department for 29 years. She received her bachelor's degree in Community Health from Eastern Illinois University. Her time is spent in the Personal Health Division.	LaSalle County Health Department
Driscoll, Michael Fr.	Chaplain and Director of Pastoral Care at OSF Saint Elizabeth Medical Center and Pastor of St. Mary's Catholic Church in Utica.	Ottawa Ministerial Association
Dvorak, Chris	Regional Superintendent of Schools for LaSalle, Marshall & Putnam Counties. He has served as Regional Superintendent since 2012 with a total of 27 years working in education. He received his bachelor's degree in education and master's degree in school administration from Illinois State University and his superintendent certification from Western Illinois University. He has served as chairman of the University of Illinois Extension Council for Bureau, LaSalle, Marshall & Putnam Counties, with eight years of service on the council.	LaSalle County Regional Office of Education #35
Dzuris, Jack	Streator Chamber of Commerce Executive Director since 2010. He retired from 42 years of banking with Streator National Bank/First Midwest Bank serving as President from 1988	Streator Chamber of Commerce & Industry

	through 2005. He has been an active Streator community fund raising member for a number of years. Some of his efforts have been directed to St. Mary's Hospital Foundation Board and Community Advisory Board, Streator Area United Way, Streator Twp. High School Foundation, Streator Elementary School District Board of Directors, the Streator Incubator, LLC., Live Well Streator Steering Committee and several of the local youth sports activities.	
Folken, Carrie	Executive Director	Business Employment Skills Team (BEST)
Foster, Kim	Manager of OSF HealthCare Physician Offices in Mendota.	OSF HealthCare Saint Paul Medical Center
Gahan, JoEllyn	JoEllyn has been an OSF HealthCare Mission Partner for over 13 years and currently serves as the Community Relations Coordinator for the I-80 market which covers, Mendota, Ottawa and Streator. She resides in Mendota and, over the years, has been involved in numerous community organizations.	OSF HealthCare I-80 Market
Glassman, Susan	Nutrition and Wellness Educator, Family and Consumer Sciences for the University of Illinois Extension office serving Bureau, LaSalle, Marshall and Putnam Counties.	University of Illinois Extension
Guerrero, Kassidi	Student Services	LaSalle County Regional Office of Education #35
Hettrick, Jeff	Ottawa Area Chamber of Commerce Executive Director since 2020, and also currently serving on the executive board of the United Way of Eastern LaSalle County. He retired after 37 years with Commonwealth Edison, serving in Government Affairs. Has lived in the Illinois Valley since 1990 and involved with many chambers of commerce, economic development groups and volunteer organizations.	Ottawa Chamber of Commerce
Kelsey, Jennifer	OSF HealthCare Advanced Practice Nurse	OSF Saint Elizabeth Medical Center

Kerestes, Julie	Worked in the Public Health field for 35 years and has been Public Health Administrator at LaSalle County Health Department for 20 years. She received her bachelor's degree at Eastern Illinois University and is a Licensed Environmental Health Practitioner.	LaSalle County Health Department
Krier, Rodney	Lead Pastor, Church of the Open Bible	Streator Ministerial Association
Lauterjung, Anne	Diabetes Education Coordinator for OSF Healthcare Saint Elizabeth Medical Center and OSF Center for Health Streator.	OSF Saint Elizabeth Medical Center
Lewis, Megan	Captain Megan Lewis is the Executive Director and Lead Pastor of The Salvation Army in Ottawa. She brings a decade of diverse experience to the Starved Rock area, including serving in urban Indianapolis, rural Minnesota, and other unique locations. Megan has a passion for leadership development, creating sustainable community change, and changing lives through loving service wherever there is a need.	Ottawa Salvation Army
Mascal, Amy Jo	Principal at Streator Township High School. She received her bachelor's degree from North Central College and her master's degree from Illinois State University. She is in her 28th year employed by Streator Township High School, serving as an English teacher for 13 years and Principal for the last 15 years. She is also a member of the IHSA Golf Advisory Committee, and the Starved Rock Illinois Principal Association and the state level Illinois Principal Association. She also facilitates the Bulldog Pantry at Streator High School and is a member of the Live Well Streator Steering Committee.	Streator Township High School
Ocepek, Shelli	Executive Director of United Way of Eastern LaSalle County with thirty-three years in non-profit administration and thirty years with United Way. She has served on numerous Boards, including Easter Seals, the OTHS Foundation, Reddick Mansion Association, United Way of Illinois, and LaSalle County Long Term Recovery. She currently leads the LaSalle County Emergency Food and Shelter Program and serves on the LaSalle County Early Childhood Collaboration.	United Way of Eastern LaSalle County

Olson, Lissa	Outreach Coordinator	LaSalle County Veterans Assistance Commission
Palm, Elizabeth	Executive Director of the Streator Area United Way	Streator Area United Way
Palm, Jeremy	Licensed professional engineer in the State of Illinois and is the City Engineer for the City of Streator.	City of Streator
Parker, Lisa	Superintendent at Streator Elementary School District #44 since March 2018 with a total of 32 years in education. She received her Doctorate from Western Illinois University with her Masters in Guidance and Counseling from Eastern Illinois University. She is a member of the Illinois Association of School Administrators, Illinois Association of School Business Officials and previously served on the board for Methodist College in Peoria.	Streator Elementary District 44
Peshel, Zoe	Zoe is a Registered Nurse and currently the Interim physician office manager of OSFMG Ottawa/Streator/Mendota Orthopedics, General Surgery, and ENT/Allergy and Audiology. She has a BSN and is currently pursuing her MHA. She has been a nurse for 20+ years and has been with OSF for almost 10 years.	OSF HealthCare Medical Group
Pilon, Peter Fr.	Pastor at Holy Cross Church in Mendota and Sts. Peter and Paul Church in Peterstown and St. Theresa Church in Earlville	Mendota Ministerial Association
Pozzi, Chris	Environmental Health Director since 2016, 29+ year's public health experience. Licensed Environmental Health Practitioner. Graduate of Northern Illinois University.	LaSalle County Health Department
Prusator, Jeff	Administrator at Mendota High School for over 20 years. He served 5 years as the assistant principal, 3 years as the principal, and is currently completing his 12th year as the district superintendent. He received his BA degree from St. Ambrose University, MS in Educational Administration from Western Illinois University, and his Education Specialist Degree also from Western Illinois University.	Mendota High School

Pyszka, Lindsey	Coordinator Community Health Education for OSF HealthCare Saint Elizabeth Medical Center for 15 years. She received a bachelor's degree in Community Education from Illinois State University. She is certified in Basic Life Support, is a Safe Sitter Instructor, Real Colors Facilitator and MOAB Facilitator. She is a leader for Dimmick Braves 4-H and was the LaSalle County Make-A-Wish Team Captain for the last 3 years.	OSF HealthCare I-80 Market
Pyszka, Molly	Regional Director of Food and Nutrition Services for the I-80 Market. She is a Registered Dietitian and has worked at OSF for over 35 years in both clinical and management roles.	OSF HealthCare I-80 Market
Sage, Emily	Manager of Behavioral Health Department at OSF Saint Elizabeth Medical Center. She has bachelor's degree of nursing from University of St. Francis and has been with OSF since 2013.	OSF Saint Elizabeth Medical Center
Seaton, Jill	CEO of the Streator Family YMCA since May of 2021. She earned her Masters degree from Benedictine University and Bachelors degree from St. Mary-of-the-Woods College. She taught for 14 years in Catholic elementary education. She also serves as a new member of the Live Well Streator Steering Committee. Jill resides in Streator with her husband and six children.	Streator YMCA
Sester, Rayanne	Executive Director of Mendota Area Senior Services. She joined MASS in 1993 as a part-time Outreach Specialist, became the Information & Assistance Supervisor for many years before accepting the position of Director in 2014. She is certified as an Information & Referral Specialist for Aging/Disabilities (CIRS-A/D), and a certified Senior Health Insurance Program (SHIP) counselor. She has also completed certification under the Illinois ADRC Program for Aging and Disabilities through Boston University's Center for Aging and Disability Education and Research. Rayanne has been involved in many community organizations over the years, and is an active advocate for seniors, caregivers, and the disabled.	Mendota Area Senior Services
Snell, Lori	Manager of Physician Offices in Streator. Has served in Catholic Healthcare since 2007 in	OSF HealthCare Medical Group

	both the hospital and Medical Group entities for two separate health systems. Community enthusiast and Streator business owner since 1991.	
Swank, Paula	Director of OSF Medical Group Physician Offices for the I80 Region. She has a bachelor's degree in Health Information Management from ISU. She has been with OSF Healthcare and previously with Ottawa Regional Medical Center for over 30 years.	OSF HealthCare Medical Group
Szewczuk, Karen	Health & Wellness Coordinator	Ottawa YMCA
Theis, Lauren	Director of Community Engagement for OSF HealthCare Mendota, Ottawa and Streator. Lauren received her bachelor's degree from Columbia College of Missouri in 2014 and her MBA from the University of St. Francis in 2019. She has worked for OSF HealthCare since 2015. She also serves as a Rotarian for the Ottawa Noon Rotary club.	OSF HealthCare I-80 Market
Threadgill, Cleve	Superintendent of Ottawa Elementary Schools. He has an associate's degree from Illinois Valley Community College, bachelor's degree in elementary education and a master's degree in administration from Illinois State University and a superintendent endorsement from ISU. He earned national board certification in early adolescent science and is an adjunct instructor for Aurora University. He is a member of the Noon Rotary and Illinois Association of School Administrators.	Ottawa Elementary Schools
Tomsha, Luke	Founder/Executive Director	The Perfectly Flawed Foundation
Trenor, David	Bridges Community Center Coordinator in Peru, IL. He received his bachelor's degree in Recreation, Parks, and Tourism from the University of Florida. He is a former adaptive sports instructor, park ranger, and volunteer coordinator who wants to help people to live their lives to their fullest.	Bridges Senior Center

Trompeter, Dawn	President of OSF Saint Elizabeth Medical Center in Ottawa and OSF Saint Paul Medical Center in Mendota. She has over 30 years of experience in the healthcare field.	OSF HealthCare I-80 Market
Trumper, Marissa	Ottawa PADS Program Director	Illinois Valley Public Action to Deliver Shelter (IV PADS)
Vogel, Ellen	Community Health Engagement Program Manager who leads the Live Well Streator community collaborative. She holds a bachelor's degree from the University of Illinois at Urbana-Champaign, is a trustee for the Streator Public Library and a board member for the Streator Business Incubator and the LaSalle County Emergency Food and Shelter Program.	OSF Center for Health - Streator
Weide, Shelby	President/CEO Mendota Area Chamber of Commerce for 1 year and was the Administrative Assistant for 2 years prior.	Mendota Chamber of Commerce
Whalen, Beth	BS in Business from Northern IL University. Owned her private Optometric Office for 28 years in the Illinois Valley. Currently working for a Federally Qualified Community Health Center for the past 13 years and the prior 4 years in Community Health in Rockford. As operations manager she supports all clinical aspects of the Clinics including Dental and Behavior Health. Her duties also include support of IT and Facilities management.	Community Health Partnership of Illinois
Williams, Eileen	Chief Administrative Office/VP for North Central Behavioral Health Systems, has worked in the behavioral health field for over 30 years. Graduate from University of Saint Francis with a masters degree in Healthcare Administration.	North Central Behavioral Health Systems
Zimmerman, Diane	Manager Physician Office OSFMG Primary/Prompt Care South, Ottawa/Streator/Mendota OB/GYN. She has her BSN from University of Illinois-Springfield and has worked for OSF Healthcare for 26 years.	OSF HealthCare Medical Group
Zimmerman, Kim	Transit Director for North Central Area Transit	North Central Area Transit (NCAT)

In addition to collaborative team members, the following **facilitators** managed the process and prepared the Community Health Needs Assessment. Their qualifications and expertise are as follows:

**Michelle A. Carrothers (Coordinator)** is currently the Vice President of Strategic Reimbursement for OSF Healthcare System, a position she has served in since 2014. She serves as a Business Leader for the Ministry Community Health Needs Assessment process. Michelle has over 35 years of health care experience. Michelle obtained both a Bachelor of Science Degree and Masters of Business Administration Degree from Bradley University in Peoria, IL. She attained her CPA in 1984 and has earned her Fellow of the Healthcare Financial Management Association Certification in 2011. Currently she serves on the National Board of Examiners for HFMA. Michelle serves on various Peoria Community Board of Directors and Illinois Hospital Association committees.

**Dawn Tuley (Coordinator)** is a Strategic Reimbursement Senior Analyst at OSF Healthcare System. She has worked for OSF Healthcare System since 2004 and acts as the coordinator for 15 Hospital Community Health Need Assessments. In addition, she coordinates the submission of the Community Benefit Attorney General report and the filing of the IRS Form 990 Schedule H since 2008. Dawn holds a Master's in Healthcare Administration from Purdue University and is certified in Community Benefit. Dawn has been a member of the McMahon-Illini Chapter of Healthcare Financial Management Association for over twelve years. She has served as the Vice President, President-Elect and two terms as the Chapter President on the board of Directors. She has earned a silver, bronze, gold and Metal of Honor from her work with the McMahon-Illini HFMA Chapter. She is currently serving as a Director on the board.

**Dr. Laurence G. Weinzimmer, Ph.D. (Principal Investigator)** is the Caterpillar Inc. Professor of Strategic Management in the Foster College of Business at Bradley University in Peoria, IL. An internationally recognized thought leader in organizational strategy and leadership, he is a sought-after consultant to numerous *Fortune 100* companies and not-for-profit organizations. Dr. Weinzimmer has authored over 100 academic papers and four books, including two national best sellers. His work appears in 15 languages, and he has been widely honored for his research accomplishments by many prestigious organizations, including the Academy of Management. Dr. Weinzimmer has served as principal investigator for numerous community assessments, including the United Way, Economic Development Council and numerous hospitals. His approach to Community Health Needs Assessments was identified by the Healthcare Financial Management Association (HFMA) as a Best-in-Practice methodology. Dr. Weinzimmer was contracted for assistance in conducting the CHNA.

## APPENDIX 2: ACTIVITIES RELATED TO 2019 CHNA PRIORITIZED NEEDS

Two major health needs were identified and prioritized in LaSalle County 2019 CHNA. Below are examples of the activities, measures and impact during the last three years to address these needs.

### 1. Healthy Behaviors defined as - Active Living, Healthy Eating and Their Impact on Obesity

**Goal 1:** Increase active living in LaSalle County over the next three years as evidenced by the Community Health Needs Assessment survey.

1. Promote the use of Bike Routes/Walking Paths in Mendota, Ottawa and Streator.
  - a. The Live Well Streator Activity Maps posted on our website. It has been promoted on the Live Well Streator Facebook page and was handed out at our 3/11/20 Move Your Way kickoff event at the Streator Business Incubator. University of Illinois finished the walking guide for Ottawa, Streator, and Mendota.
2. Increase offering of the Healthy Kids U Program.
  - a. North lawn Jun. High School, Streator, IL = 145 kits
  - b. St. Michael Archangel School – Streator, IL = 18 kits
  - c. Woodland Comm. Sch. District - Streator, IL = 32 kits
  - d. Ransom Grade School, Ransom, IL = 9 kits
  - e. Grand Ridge Grade School, Grand Ridge, IL = 25 kits
  - f. Northbrook Middle School, Mendota IL = 110 kits
  - g. Holy Cross, Mendota IL = 17 kits
  - h. Wallace Grade School, Ottawa = 38
  - i. Waltham Grade School, Utica IL= 33
  - j. Dimmick Grade School, Peru IL = 25
  - k. Northbrook Middle School, Mendota IL = 24 Scavenger Hunts completed, 1 Fitbit donated by CHOI
  - l. Wallace Grade School, Ottawa = 12 Scavenger Hunts completed, 1 Fitbit donated by CHOI
  - m. Waltham Grade School, Utica IL= 12 Scavenger Hunts completed, 1 Fitbit donated by CHOI
3. Implement Journey to Health – Redesigned program.
  - a. Reset Program – locally 350 people participate LaSalle County. 90% complete all 6 weeks. July 12 – Summer Out Loud – 3-week summer family program. Fall Session – 9 participants

**Goal 2:** *Increase community consumption of fruits/vegetables to more than 2 servings per day.*

1. Promote awareness of Community Gardens at OSF Healthcare, Ottawa Community Gardens, SHS Edible Garden, North lawn Jr. High School Garden and the distribution locations to address local food disparities and access to healthy foods.
  - a. Ottawa partnered with U of I extension. Working with master gardener. Purchasing and planting in the month of May. Ottawa – 12 beds and herbs planted. Mendota – 26 beds. Streator – 3 garden bed areas, south lot garden divided into 4 sections, transportation center 12 raised beds. The Ottawa Community Garden harvested 347 pounds and donated the produce to Servant’s Heart. Streator donated 563.5 pounds to the Streator Land Food Pantry, Grace Community Church Food Pantry and New Beginnings Baptist Church Food Pantry. The Mendota Garden donated 946.69 pounds to the SPMC Café, Mission Partners, and the Mendota Area Christian Food Pantry. Total of 1857.19 pounds of produce this season.
2. Increase offerings of the Healthy Kids U Program. Host a Healthy Kids U session quarterly.
  - a. North Lawn Jun. High School, Streator, IL = 145 kits, St. Michael Archangel School – Streator, IL = 18 kits, Woodland Comm. School District - Streator, IL = 32 kits, Ransom Grade School, Ransom, IL = 9 kits, Grand Ridge Grade School, Grand Ridge, IL = 25 kits, Northbrook Middle School, Mendota IL = 110 kits, Holy Cross, Mendota IL = 17 kits, Wallace Grade School, Ottawa = 38, Waltham Grade School, Utica IL= 33, Dimmick Grade School, Peru IL = 25, Healthy Kids Camp and Walking Adventure (Streator) – 20 kids.
3. Develop and Promote Live Well Streator Health Eating Restaurant Menu Guide.
  - a. The Live Well Streator Restaurant Guide has been developed. 6 pilot restaurants. 2021 – 1. Do to COVID, supplier and staffing short.
4. Conduct the Illinois Jr. Chef’s Cooking School in three communities.
  - a. Due to the COVID-19 pandemic, the University of Illinois Extension Junior Chef program was cancelled in Streator.
5. Promote healthier school lunchroom environments.
  - a. Due to the COVID-19 pandemic, our April 2020 fruit and veggie taste testing is at Kimes & Centennial Schools in Streator were cancelled. On 7/30/20, Ellen Vogel spoke about Live Well Streator to a group of teachers and school foodservice employees on the University of Illinois Extensions’ Serve It Safely virtual training call.
6. King Care-A-Van client nutrition education and food demonstrations within OSF Service area through mobile King Care-A-Van service.
  - a. Nutrition education 4/20, Marshall Putnam Fair Healthy Eating Education 7/15.

## 2. Behavioral Health – Including Mental Health and Substance Abuse

**Goal 1:** *Increase the overall community understanding of Mental Health needs and access to Mental Health services.*

1. Conduct Mental Health First Aid Training, Groups/Programs for behavioral/mental health for specific ages from youth, 18-35 and senior.
  - a. North Central trained staff from IVCIL – 8 participants – 8hr - 2 dates June 8th and 10<sup>th</sup>.
2. Embed bilingual Behavioral Health provider at OSF Multi-Specialty Group Mendota, Bilingual programming's and communications.
  - a. Another bilingual provider starting next September, 2022 - full time NP. Using Globo which has been a big improvement with translation that in demand.
  - b. Current bilingual Providers Dr. Lopez/Joy.
3. Engage Faith Community Nurse to work with school nurses regarding students not having medications needed.
  - a. COVID determining factor in staffing position after resignation.
4. Provide free access to digital Behavioral Health solution – Silvercloud.
  - a. 2020 - 104 utilizing app. 2021 - 116 utilizing app.
5. Provide free Behavioral Health Navigation Service.
  - a. 2020 – 9; 2021 – 63

**Goal 2:** *Use Social Determinates of Health (SDOH) to identify patients at increased risk of poor mental health and connect them to community organizations in order to improve mental health outcomes.*

1. Implement screening of patients for SDOH. Screen and Connect. Number of patients screened.
  - a. 4,400
2. Track number of patients referred to community based organizations (CBO)
  - a. 1006
3. Track number of Mission Partners educated for continued roll-out.

a. 23

4. Track number of patient referrals to OSF Care Management and social workers.

a. 40

**Goal 3:** *Improve community compliance with proper drug disposal processes to decrease availability of prescription and non-prescription drugs utilized for substance abuse.*

1. Provide education on substance use in target schools throughout communities.

a. 2020- 2021 School Year Ottawa Township High School, Streator Township High School participate in Prescription Drug Safety.

## APPENDIX 3: SURVEY

# LaSalle County 2021 COMMUNITY HEALTH-NEEDS ASSESSMENT SURVEY

### INSTRUCTIONS

We want to know how you view our community, and other factors that may impact your health. We are inviting you to participate in a research study about community health needs. Your opinions are important! This survey will take about 12 minutes to complete. All of your individual responses are anonymous and confidential. We will use the survey results to better understand and address health needs in our community.

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3. If you were not able to get medical care, why not? (Please choose all that apply).

- Didn't have health insurance.  Too long to wait for appointment.  
 Couldn't afford to pay my co-pay or deductible.  Didn't have a way to get to the doctor.  
 Fear of discrimination.  Lack of trust.

### Prescription Medicine

4. In the last YEAR, was there a time when you needed prescription medicine but were not able to get it?

- Yes (please answer #5)  No (please go to #6: Dental Care)

5. If you were not able to get prescription medicine, why not? (Please choose all that apply).

- Didn't have health insurance.  Pharmacy refused to take my insurance or Medicaid.  
 Couldn't afford to pay my co-pay or deductible.  Didn't have a way to get to the pharmacy.  
 Fear of discrimination.  Lack of trust.

### Dental Care

6. In the last YEAR, was there a time when you needed dental care but were not able to get it?

- Yes (please answer #7)  No (please go to #8: Mental-Health Counseling)

7. If you were not able to get dental care, why not? (Please choose all that apply).

- Didn't have dental insurance.  The dentist refused my insurance/Medicaid  
 Couldn't afford to pay my co-pay or deductible.  Didn't have a way to get to the dentist.  
 Fear of discrimination.  Lack of trust.  
 Not sure where to find available dentist

### Mental-Health Counseling

8. In the last YEAR, was there a time when you needed mental-health counseling but could not get it?

- Yes (please answer #9)  No (please go to next section – HEALTHY BEHAVIORS)

9. If you were not able to get mental-health counseling, why not? (Please choose all that apply).

- Didn't have insurance.  The counselor refused to take insurance/Medicaid.  
 Couldn't afford to pay my co-pay or deductible.  Embarrassment.  
 Didn't have a way to get to a counselor.  Cannot find counselor.  
 Fear of discrimination.  Lack of trust.  
 Long wait time.

## HEALTHY BEHAVIORS

The following questions ask about your own health and health choices. Remember, this survey will not be linked to you in any way.

### Exercise

1. In the last WEEK how many times did you participate in exercise, (such as jogging, walking, weight-lifting, fitness classes) that lasted for at least 30 minutes?

- None (please answer #2)  1 – 2 times  3 - 5 times  More than 5 times

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2. If you answered “none” to the question about exercise, why didn’t you exercise in the past week? (Please choose all that apply).

- Don’t have any time to exercise.
- Don’t like to exercise.
- Can’t afford the fees to exercise.
- Don’t have child care while I exercise.
- Don’t have access to an exercise facility.
- Too tired.
- Safety issues.

**Healthy Eating**

3. On a typical DAY, how many **servings/separate portions** of fruits and/or vegetables did you have? An example would be a banana (but not banana flavored pudding).

- None (please answer #4)
- 1 - 2 servings
- 3 - 5 servings
- More than 5 servings

4. If you answered “none” to the questions about fruits and vegetables, why didn’t you eat fruits/vegetables? (Please choose all that apply).

- Don’t have transportation to get fruits/vegetables
- Don’t like fruits/vegetables
- It is not important to me
- Can’t afford fruits/vegetables
- Don’t know how to prepare fruits/vegetables
- Don’t have a refrigerator/stove
- Don’t know where to buy fruits/vegetables

5. Where is your primary source of food? (Please choose only one answer).

- Grocery store
- Fast food
- Gas station
- Food delivery program
- Food pantry
- Farm/garden
- Convenience store

6. Please check the box next to any health conditions that you have. (Please choose all that apply).

If you don’t have any health conditions, please check the first box and go to question #8: Smoking.

- I do not have any health conditions
- Diabetes
- Mental-health conditions
- Allergy
- Heart problems
- Stroke
- Asthma/COPD
- Overweight
- Cancer
- Memory problems

7. If you identified any conditions in Question #6, how often do you follow an eating plan to manage your condition(s)?

- Never
- Sometimes
- Usually
- Always

**Smoking**

8. On a typical DAY, how many cigarettes do you smoke?

- None
- 1 - 4
- 5 - 8
- 9 - 12
- More than 12

**Vaping**

9. On a typical DAY, how many times do you use electronic vaping?

- None
- 1 - 4
- 5 - 8
- 9 - 12
- More than 12

**GENERAL HEALTH**

10. Where do you get most of your health information and how would you like to get health information in the future? (For example, do you get health information from your doctor, from the Internet, etc.). \_\_\_\_\_

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11. Do you have a personal physician/doctor?  Yes  No
12. How many days a week do you or your family members go hungry?  
 None  1-2 days  3-5 days  More than 5 days
13. In the last 30 DAYS, how many days have you felt depressed, down, hopeless?  
 None  1-2 days  3-5 days  More than 5 days
14. In the last 30 DAYS, how often has your stress and/or anxiety stopped you from your normal daily activities?  
 None  1-2 days  3-5 days  More than 5 days
15. In the last YEAR have you talked with anyone about your mental health?  
 Yes (please answer #16)  No (please go to #17)
16. If you talked to anyone about your mental health, who was it?  
 Doctor/nurse  Counselor  Family/friend  Other \_\_\_\_\_
17. How often do you use prescription medications (not prescribed to you or used differently than how the doctor instructed) on a typical DAY?  
 None  1-2 times  3-5 times  More than 5 times
18. How many alcoholic drinks do you have on a typical DAY?  
 None  1-2 drinks  3-5 drinks  More than 5 drinks
19. How often do you use marijuana on a typical DAY?  
 None  1-2 times  3-5 times  More than 5 times
20. How often do you use substances such as inhalants, ecstasy, cocaine, meth or heroin on a typical DAY?  
 None  1-2 times  3-5 times  More than 5 times
21. Do you feel safe where you live?  Yes  No
22. In the past 5 years, have you had a:
- |   |                              |                             |   |
|---|------------------------------|-----------------------------|---|
| Breast/mammography exam                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not applicable |
| Prostate exam                           | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not applicable |
| Colonoscopy/colorectal cancer screening | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not applicable |
| Cervical cancer screening/pap smear     | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not applicable |

**Overall Health Ratings**

21. My overall physical health is:  Below average  Average  Above average
22. My overall mental health is:  Below average  Average  Above average

**INTERNET**

1. Do you have Internet at home? For example, can you watch Youtube at home?  
 Yes (please go to next section – BACKGROUND INFORMATION)  No (please answer #2)

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2. If don't have Internet, why not?  Cost  No available Internet provider  I don't know how  
 Data limits  Poor Internet service  No phone or computer

## BACKGROUND INFORMATION

1. What county do you live in?

- LaSalle  Other

2. What is your Zip Code? \_\_\_\_\_

3. What type of health insurance do you have? (Please choose all that apply).

- Medicare  Medicaid/State insurance  Commercial/Employer  
 Don't have (Please answer #4)

4. If you answered "don't have" to the question about health insurance, why **don't** you have insurance? (Please choose all that apply).

- Can't afford health insurance  Don't need health insurance  
 Don't know how to get health insurance  Other \_\_\_\_\_

5. What is your gender?  Male  Female  Non-binary  Transgender  Prefer not to answer

6. What is your sexual orientation?  Heterosexual  Lesbian  Gay  Bisexual  
 Queer  Prefer not to answer

7. What is your age?  Under 20  21-35  36-50  51-65  Over 65

8. What is your racial or ethnic identification? (Please choose only one answer).

- White/Caucasian  Black/African American  Hispanic/LatinX  
 Pacific Islander  Native American  Asian/South Asian  
 Multiracial  Other: \_\_\_\_\_

9. What is your highest level of education? (Please choose only one answer).

- Grade/Junior high school  Some high school  High school degree (or GED)  
 Some college (no degree)  Associate's degree  Certificate/technical degree  
 Bachelor's degree  Graduate degree  Other: \_\_\_\_\_

10. What was your household/total income last year, before taxes? (Please choose only one answer).

- Less than \$20,000  \$20,001 to \$40,000  \$40,001 to \$60,000  
 \$60,001 to \$80,000  \$80,001 to \$100,000  More than \$100,000

11. What is your housing status?

- Do not have  Have housing, but worried about losing it  Have housing, **NOT** worried about losing it

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12. If you answered that you have housing, does your house have:

- leaking roof       mold       heat       air conditioning  
 running water       rodents       lead       electricity       Internet

13. How many people live with you? \_\_\_\_\_

14. How often do you communicate with people you care about and feel close to? (For example, talking, texting, meeting with friends/family?)

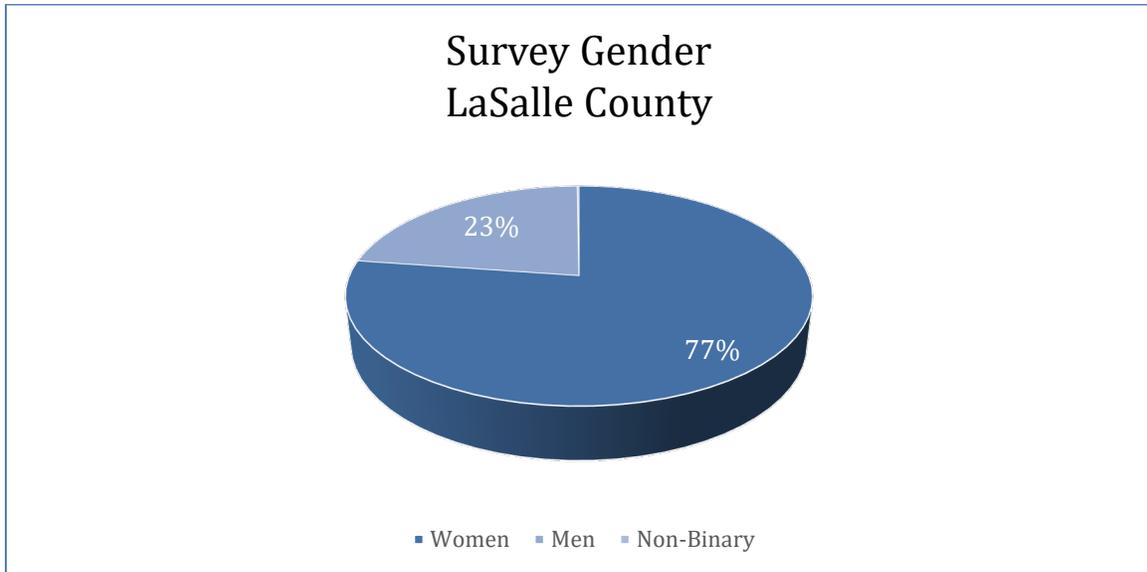
- Less than once per week       1-2 times per week       3 - 5 times per week       More than 5 times per week

Is there anything else you'd like to share about your own health goals or health issues in our community?

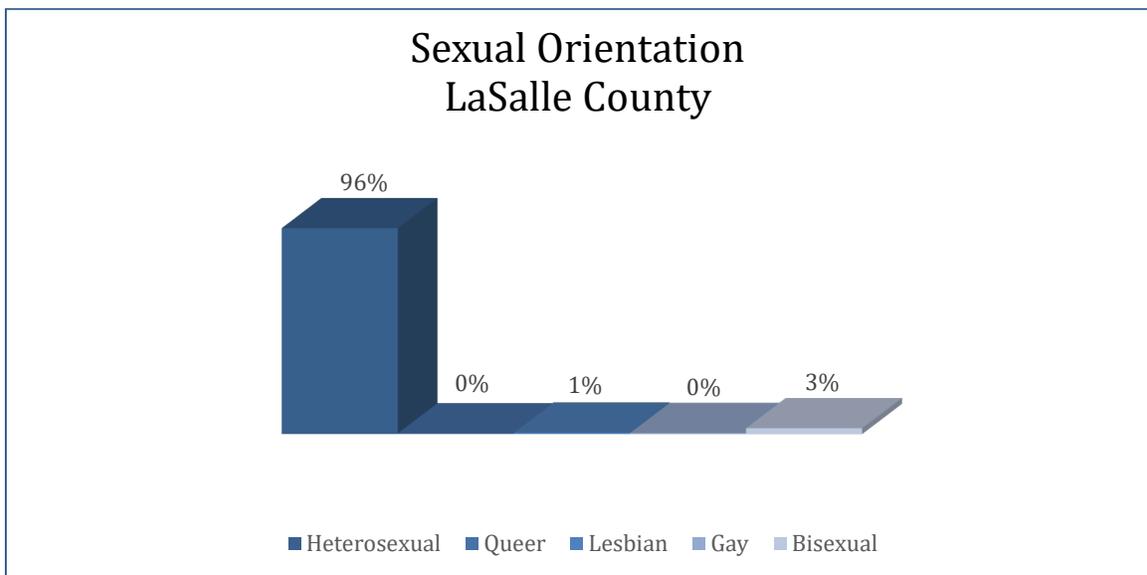
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**Thank you very much for sharing your views with us!**

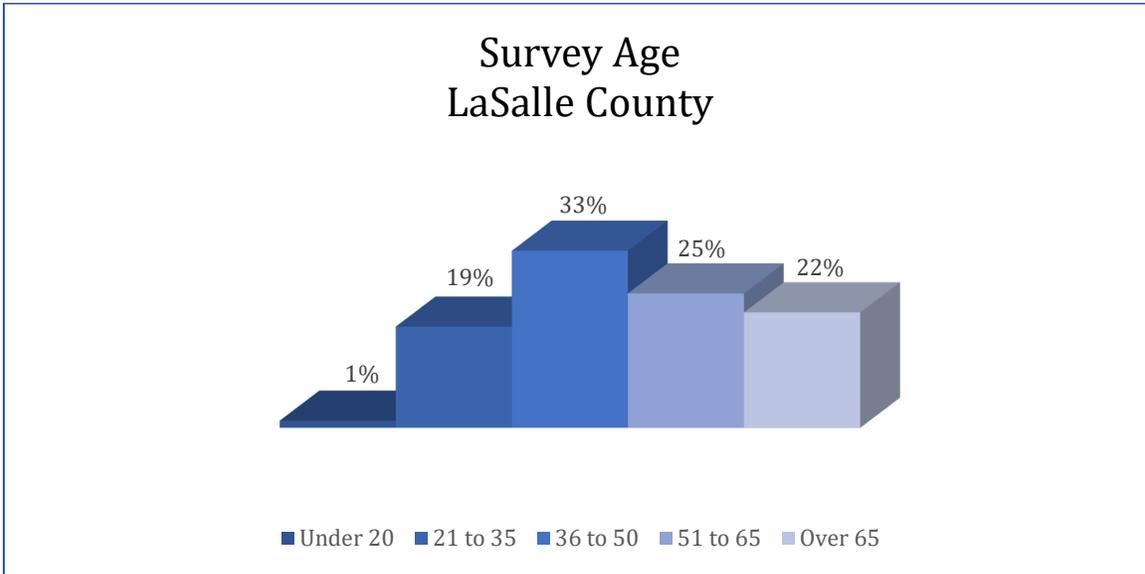
## APPENDIX 4: CHARACTERISTICS OF SURVEY RESPONDENTS



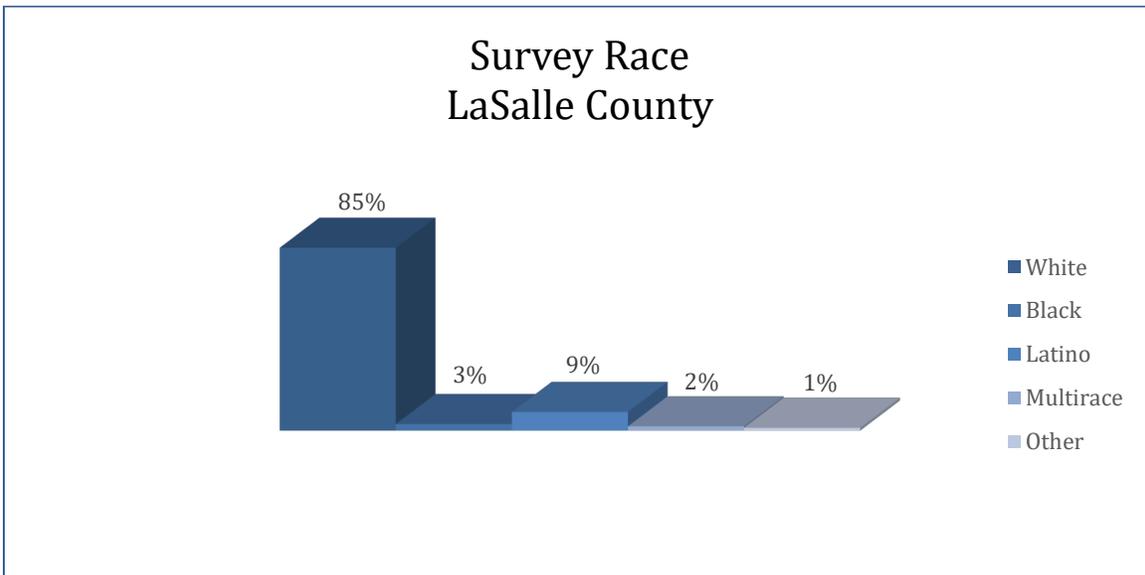
Source: CHNA Survey



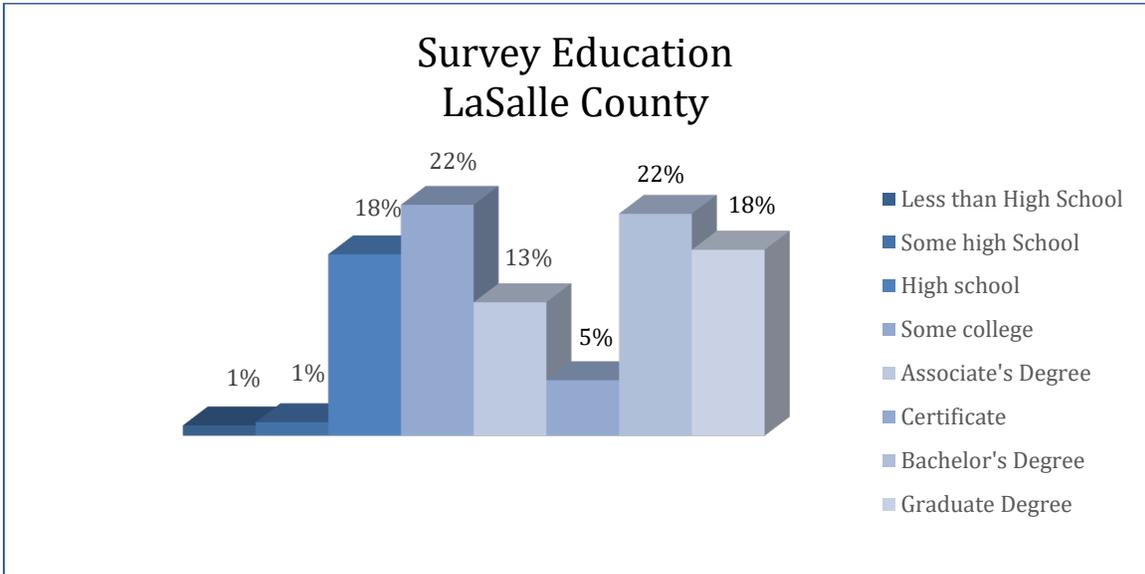
Source: CHNA Survey



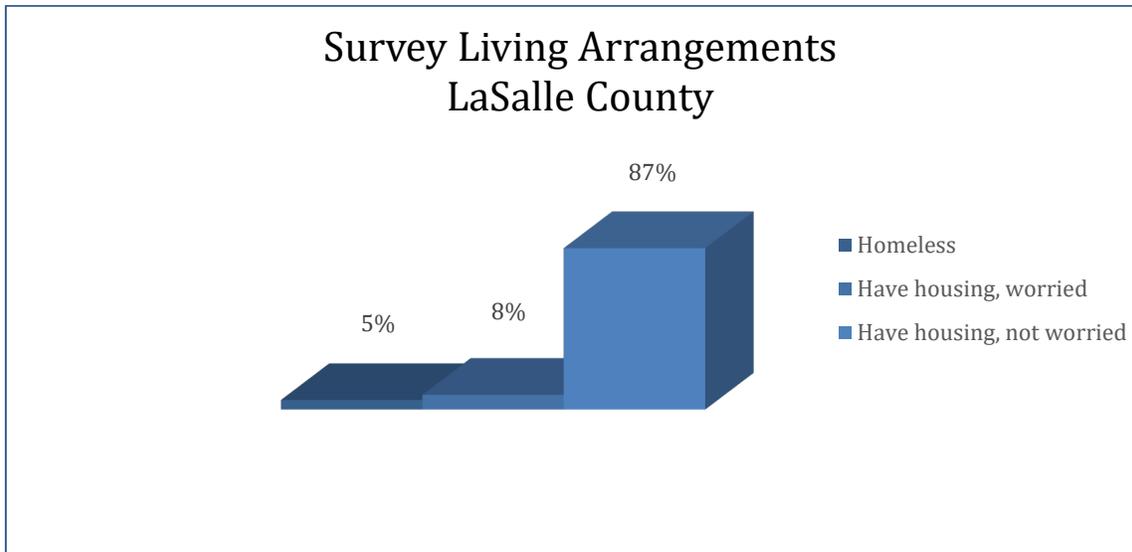
Source: CHNA Survey



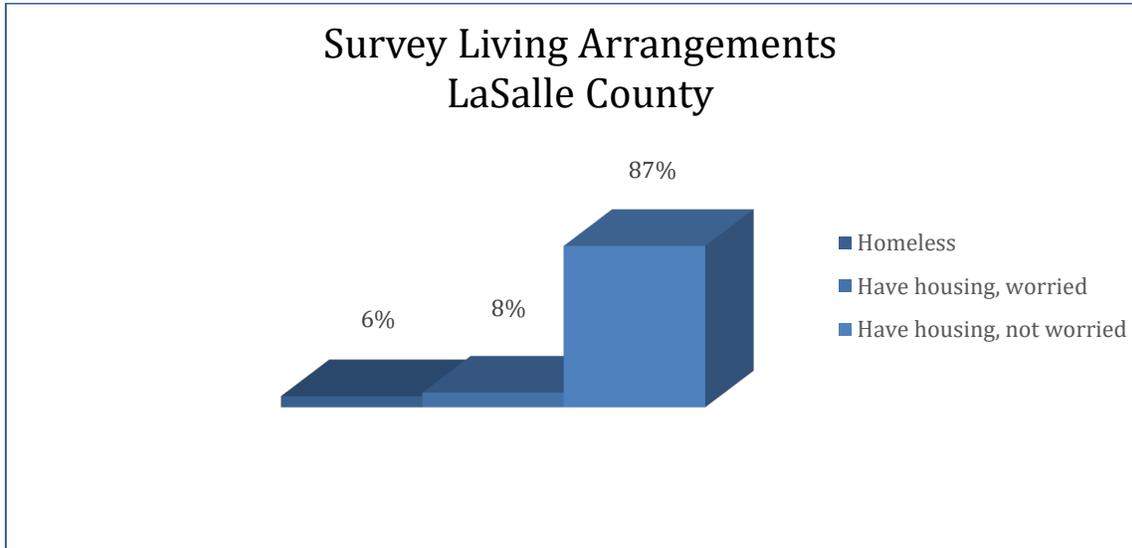
Source: CHNA Survey



Source: CHNA Survey



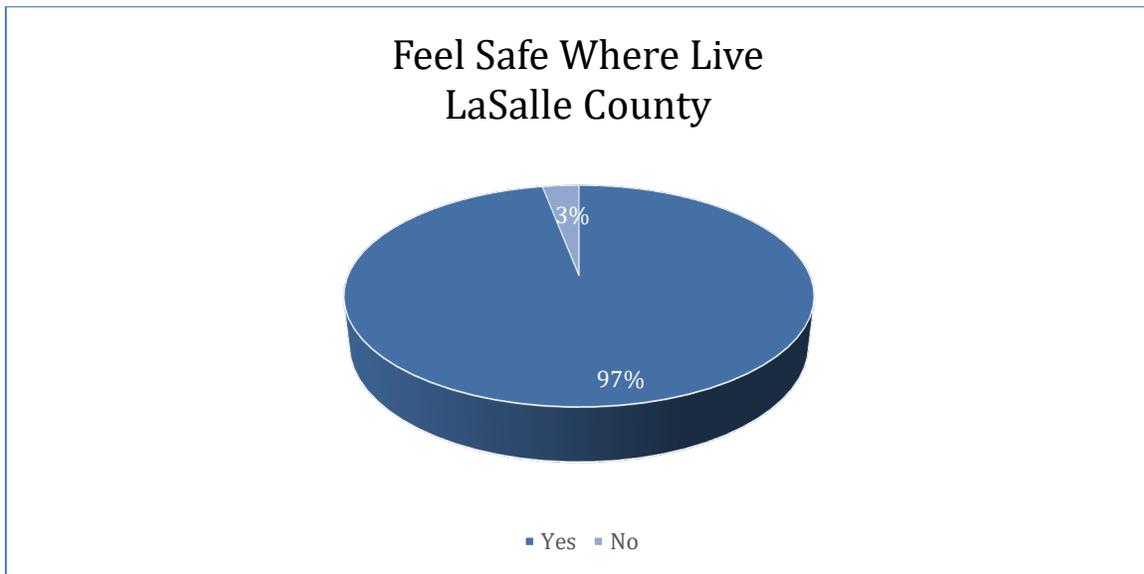
Source: CHNA Survey



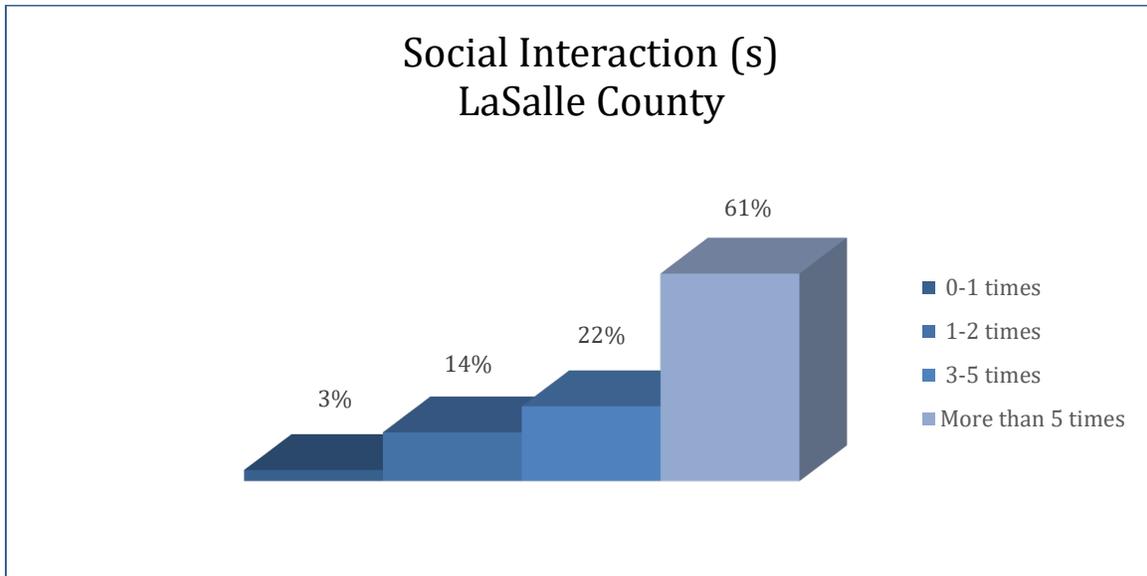
Source: CHNA Survey

## Housing Environment

Housing environment is a measure of the housing-related standard of living in a community. Key risk influencers include affordability, crowding and quality. For LaSalle County, 29% of the population is at elevated risk for Housing environment. This is lower than the State of Illinois average of 33% (SocialScape® powered by SociallyDetermined®, 2022).



Source: CHNA Survey



Source: CHNA Survey

## APPENDIX 5: RESOURCE MATRIX

	Aging Population	Healthy Behaviors - Nutrition & Exercise	Behavioral Health	Overweight Obesity	Substance Abuse	Prostate Screening	Prostate Cancer	Lung Cancer	COVID-19
<b>Recreational Facilities</b>									
Mendota Area YMCA	3	3	1	3	1	1	1	1	1
Ottawa Parks and Recreation	3	3	1	3	1	1	1	1	1
Streator Family YMCA	3	3	1	3	1	1	1	1	1
YMCA of Ottawa	3	3	1	3	1	1	1	1	1
<b>Health Departments</b>									
LaSalle County Health Department	1	2	1	1	2	1	1	1	3
<b>Schools</b>									
Allen-Otter Creek CCSD #65	0	3	2	3	2	0	0	1	1
Deer Park CCSD #82	1	2	2	2	3	1	1	1	3
Dimmick CCSD #175	0	3	2	2	2	0	0	1	2
Earlville CUSD #9	0	3	2	3	2	0	0	0	2
Grand Ridge CCSD #95	0	3	2	3	3	0	0	2	2
LaSalle ESD #122	0	3	2	3	2	0	0	0	0
LaSalle Peru Twp. High School #120	0	2	2	2	3	0	0	0	2
Leland CUSD #1	0	3	2	3	2	0	0	0	2
Lostant CUSD #425	0	3	2	3	2	0	0	1	3

	Aging Population	Healthy Behaviors - Nutrition & Exercise	Behavioral Health	Overweight Obesity	Substance Abuse	Prostate Screening	Prostate Cancer	Lung Cancer	COVID-19
Marseilles ESD #150	1	2	2	2	2	0	0	0	3
Mendota CCSD #289	0	3	2	2	2	0	2	2	3
Mendota Twp. High School #280	1	2	2	2	3	1	1	1	3
Miller CCSD #210	0	2	2	1	1	0	0	0	0
Oglesby ESD #125	0	3	2	2	2	0	0	3	3
Ottawa Twp. High School #140	0	2	2	2	2	0	1	1	1
Ottawa ESD #141	0	2	2	2	2	0	0	0	3
Peru ESD #124	0	3	2	3	3	0	1	2	3
Regional Safe School	0	2	2	2	2	0	0	0	1
Rutland Twp. CCSD #230	0	3	2	2	2	0	0	0	2
Seneca CCSD #170	0	3	2	1	1	0	0	0	1
Seneca Twp. High School #160	0	2	2	2	2	0	0	1	2
Serena CUSD #2,	3	3	1	2	3	0	1	1	1
Streator ESD #44	0	3	2	3	2	0	0	0	1
Streator Twp. High School #40,	0	2	2	2	2	0	1	1	1
Tonica CCSD #79,	0	3	2	3	2	0	0	0	2
Wallace CCSD #195	0	3	2	2	3	0	0	0	2

	Aging Population	Healthy Behaviors - Nutrition & Exercise	Behavioral Health	Overweight Obesity	Substance Abuse	Prostate Screening	Prostate Cancer	Lung Cancer	COVID-19
Waltham CCSD #185	0	3	2	2	2	0	0	0	2
<b>Community Agencies</b>									
A Servant's Heart	3	1	1	1	1	1	1	1	1
Al-Anon	2	1	2	1	3	1	1	1	1
Alateen	1	2	2	1	3	1	1	1	1
Alcoholics Anonymous	1	2	2	1	2	1	1	1	1
Alternatives for Older Adults	3	2	2	1	1	1	1	1	1
BEST Inc.	2	1	1	1	1	1	1	1	1
Body & Soul Food Ministries (Mendota)	2	3	1	3	1	1	1	1	1
Bridges Community Center	3	2	2	1	1	1	1	1	1
Cancer Resource Center - Streator	2	1	1	1	1	3	3	3	1
Celebrate Recovery - Grace Community Church, Streator	2	1	2	1	3	1	1	1	1
Center for Youth and Family Solution - LaSalle	1	1	3	1	2	1	1	1	1
Changes Counseling, LLC (Mendota)	2	2	3	1	2	1	1	1	1
Community Food Basket of Ottawa	1	3	1	2	1	1	1	1	1
Cops 4 Cancer	3	1	1	1	1	1	3	3	1
Crossroads Counseling Services, LLC	2	1	3	1	2	1	1	1	1

	Aging Population	Healthy Behaviors - Nutrition & Exercise	Behavioral Health	Overweight Obesity	Substance Abuse	Prostate Screening	Prostate Cancer	Lung Cancer	COVID-19
Family Home Medical Equipment	3	1	1	1	1	1	1	1	1
Grace Community Church Food Pantry	2	2	1	3	1	1	1	1	1
Great Heights Family Medicine (Methadone Clinic)	1	1	2	1	3	1	1	1	1
Guardian Angel Outreach	1	2	1	1	1	1	1	1	1
Help at Home	3	2	1	2	1	1	1	1	1
Illinois Dept of Human Services/Div of Rehab Services	2	1	1	1	1	1	1	1	1
Illinois Valley Center for Independent Living	3	1	1	1	1	1	1	1	1
Illinois Valley Counseling Services (Mendota)	2	2	3	1	1	1	1	1	1
Illinois Valley Food Pantry	2	2	1	3	1	1	1	1	1
Illinois Valley Hispanic Health Partnersip Council	2	2	2	2	1	2	2	2	3
Illinois Valley PADS Homeless SheltersOttawa & Peru	2	2	2	1	2	1	1	1	2
In Home Care Connection	3	2	1	1	1	1	1	1	1
Live Well Streator	2	3	2	3	3	1	1	1	1
Mendota Area Christian Food Pantry	2	2	1	3	1	1	1	1	1
Mendota Area Seniors Service	3	2	1	1	1	1	1	1	1
Mendota Chamber of Commerce	1	1	1	1	1	1	1	1	1
Narcotics Anonymous (NA)	2	1	1	1	3	1	1	1	1

	Aging Population	Healthy Behaviors - Nutrition & Exercise	Behavioral Health	Overweight Obesity	Substance Abuse	Prostate Screening	Prostate Cancer	Lung Cancer	COVID-19
New Beginnings Baptist Church Food Pantry	2	2	1	3	1	1	1	1	1
North Central Area Transit (NCAT)	3	1	1	1	1	1	1	1	1
North Central Behavioral Health Systems	3	2	3	1	3	1	1	1	1
Ottawa Area Chamber of Commerce	1	1	1	1	1	1	1	1	1
Safe Journeys (formerly ADV&SAS)	1	1	1	1	2	1	1	1	1
Schott's Pharmacy (Home Medical Equipment)	3	1	1	1	1	1	1	1	1
St. Vincent de Paul Society - Streator	3	1	1	1	1	1	1	1	1
Starved Rock Reg Center for Therapy /Child Develop	1	2	2	1	1	1	1	1	2
Streator Chamber of Commerce	1	1	1	1	1	1	1	1	1
Streator Lions Club	3	1	1	1	1	1	1	1	1
Streator Salvation Army	3	1	1	1	1	1	1	1	1
Streatorland Food Pantry	2	2	1	3	1	1	1	1	1
The Landing-Grace Community Church, Streator	1	2	2	1	2	1	1	1	1
The Perfectly Flawed Foundation	2	1	2	1	3	1	1	1	1
TriCounty Opportunity Council - LaSalle	3	1	2	1	1	1	1	1	1
United Way of Eastern LaSalle County	3	1	1	1	1	1	1	1	1
United Way of the Illinois Valley	3	1	1	1	1	1	1	1	1

	Aging Population	Healthy Behaviors - Nutrition & Exercise	Behavioral Health	Overweight Obesity	Substance Abuse	Prostate Screening	Prostate Cancer	Lung Cancer	COVID-19
Streator Area United Way	3	1	1	1	1	1	1	1	1
University of Illinois Extension	3	3	1	3	1	1	1	1	1
Veterans Benefits - LaSalle County	3	1	1	1	1	1	1	1	1
Youth Service Bureau of Illinois Valley	1	1	3	1	3	1	1	1	1
<b>Hospitals / Clinics</b>									
Abigail Women's Clinic - Mendota	2	1	1	1	1	1	1	1	3
Community Health Partnership (CHP) (Mendota)	2	1	1	2	1	2	2	2	3
Fox River Cancer Center	3	2	1	1	1	2	3	3	3
LaSalle Veteran's Health Administration Clinic	3	1	1	1	1	2	2	2	3
Morris Hospital Ottawa Campus	3	2	2	2	1	2	2	2	3
OSF Center for Health - Streator	3	2	3	2	2	2	2	2	3
OSF Prompt Care	3	2	1	2	1	1	1	1	3
OSF Medical Group	3	2	1	2	1	1	1	1	3
OSF Saint Elizabeth Medical Center (Ottawa)	3	2	3	2	1	1	1	1	3
OSF Saint Paul Medical Center (Mendota)	3	2	3	2	1	1	1	1	3
OSF OnCall Urgent Care - Ottawa	3	2	1	2	1	1	1	1	3
St. Margaret's Health - Oglesby Clinic	3	1	1	1	1	1	1	1	3

	Aging Population	Healthy Behaviors - Nutrition & Exercise	Behavioral Health	Overweight Obesity	Substance Abuse	Prostate Screening	Prostate Cancer	Lung Cancer	COVID-19
St. Margaret's Health - Peru	3	1	1	1	1	1	1	1	3
St. Margaret's Midtown Health Center - Peru	3	1	1	1	1	1	1	1	3
Trinity Health Care Mendota	2	2	1	2	1	1	1	1	3
Xpress Care (Urgent Care) Mendota, Streator	2	2	1	2	1	1	1	1	3
<b>Governmental</b>									
LaSalle County Drug Court	1	1	2	1	3	1	1	1	1
LaSalle County Mental Health Court	1	1	3	1	2	1	1	1	1

(1)= low; (2)= moderate; (3) = high, in terms of degree to which the need is being addressed

## APPENDIX 6: DESCRIPTION OF COMMUNITY RESOURCES

### RECREATIONAL FACILITIES (4)

#### Ottawa Parks and Recreation

The Ottawa Parks and Recreation district offers a variety of summertime programs for infants, toddlers, early childhood, youth, adults, and seniors.

#### Mendota Area YMCA

The Mendota Area YMCA provides a full range of opportunities that empower people and communities to learn, grow and thrive. With a focus on youth development, healthy living and social responsibility.

#### Streator Family YMCA

The Streator Family YMCA provides a full range of aquatics and other fitness, child care, adult literacy, health and leisure, and community service programs.

#### YMCA of Ottawa

The YMCA of Ottawa offers high quality after school programs, swimming and gymnastics instruction, youth sports, teen programs, Day Camp and a variety of recreational experience for children and adults of all ages.

### HEALTH DEPARTMENTS (1)

#### LaSalle County Health Department

The LaSalle County Health Department sponsors programs in the following areas: environmental health, personal health, and health education. Programs have been targeted to serve the needs of LaSalle County residents.

### COMMUNITY AGENCIES/PRIVATE PRACTICES (43)

#### A Servant's Heart

A Servant's Heart provides assistance with food, material goods, transportation, house and utilities. They also operate a community kitchen serving nutritious lunches, free of charge, five days per week from 11:30 am – 12:30 pm.

#### Al-Anon

Support network of peers who share their experience in applying the Al-Anon principles to problems related to the effects of a problem drinker in their lives.

#### Alateen

Peer support group for teens affected by someone else's drinking problem.

#### Alcoholics Anonymous – Mendota, Ottawa & Streator

Alcoholics Anonymous is an international mutual aid fellowship whose stated purpose is to "enable its members to stay sober and help other alcoholics achieve sobriety."

**Alternatives for Older Adults**

Supports the independence and quality of life for older adults, adults with disabilities, and their families.

**BEST Inc.**

Business Employment Skills Team offers job seekers resources to look for employment.

**Body & Soul Food Ministries – Mendota**

Located inside the Victory Baptist Church

**Bridges Community Center**

Senior center that is a designated aging and disability resource center that provides information and assistance on available services.

**Cancer Resource Center – Streator**

The Cancer Resource Center and Wig Boutique provides free resources to cancer patients offering items such as wigs, hats, scarves, quilt lap blankets, bras, forms and educational materials.

**Celebrate Recovery – Grace Community Church, Streator**

A Christ-centered, 12 step recovery program for anyone struggling with hurt, pain or addiction or any kind.

**Center for Youth and Family Solution – LaSalle**

The Center for Youth and Family Solutions is a comprehensive not-for-profit social service agency providing strength-based, family-centered services to youth and families in need throughout Central Illinois and Eastern Iowa, which provides: critical counseling, casework, and support services to assist those whose lives have been touched by trauma, grief and loss, abuse and neglect, and other significant family life challenges. Programs include: foster care services for abused and neglected children; adoption services; crisis response for runaways and their families; delinquency prevention services for at-risk youth; residential treatment for abused and neglected boys; professional counseling for children, individuals, couples, and families; in-home counseling for seniors; mental health crisis response for youth; and community advocacy programs.

**Changes Counseling, LLC – Mendota**

Life is full of changes. Make your next change a good one. All counselors are licensed, skilled, and experiences in helping people make positive changes in their lives.

**Community Food Basket of Ottawa**

Food pantry is open Monday and Tuesday 9 am – 11 am and Wednesday and Thursday 3 pm – 6:30 pm.

**Cops 4 Cancer**

A local charity that assists families of the Illinois Valley area when battling cancer.

**Crossroads Counseling Services, LLC**

Provide behavioral/emotional counseling, addiction services and medication management.

### **Family Home Medical Equipment**

Medical equipment provider.

### **Grace Community Church Food Pantry - Streator**

Food pantry open Wednesday 8:30 am – 10:30 am.

### **Great Heights Family Medicine**

A licensed provider of alcohol and substance abuse services.

### **Guardian Angel Outreach**

Our outreach assists at-risk mothers and their infants from conception through the first two years of the baby's life.

### **Help At Home**

Help At Home is a home care agency that provides care which allows our clients to remain comfortable in their own homes with dignity and independence.

### **Illinois Department of Human Services/Division of Rehabilitation Services**

State agency that works in partnership with people with disabilities and their families to assist them in making informed choices to achieve full community participation through employment, education, and independent living opportunities.

### **Illinois Valley Center for Independent Living**

The Illinois Valley Center for Independent Living advocates with compassion for the dignity and rights of people with disabilities and their families. Our goal is equal access for all: to services, to employment, and to the benefits our society offers.

### **Illinois Valley Counseling Services – Mendota**

(IVCS) is unlike any other psychotherapy practice in LaSalle County. We provide services to LaSalle County and the surrounding area. Our therapists specialize in meeting the needs of infants, children, adolescents, adults and geriatric patients. We have therapists who treat both mental health and substance use issues. Additionally, IVCS can provide individual, couples, and family therapy.

### **Illinois Valley Food Pantry**

Food pantry open Monday and Friday 9 am – 12 pm; Wednesday 3 pm – 6 pm

### **Illinois Valley Hispanic Health Partnership Council**

The Illinois Valley Hispanic Partnership Council promotes Hispanic participation in higher education; cultural sensitivity and diversity in the Illinois Valley; and provides resources to individuals, organizations and communities enriched by Hispanic stakeholders.

- To help Hispanic families access the healthcare system and educational services.
- To reduce language barriers and improve communication in order to provide access to available resources.
- To develop community-based partnerships
- To focus on bilingual community programs and agencies that promote access for Hispanic stakeholders in the Illinois Valley.
- To inform the Hispanic community of new immigration laws, procedures and help them obtain services.
- To establish a scholarship program for Hispanic students electing to further their education beyond high school and to encourage their parents to participate in scholarship grant application procedures.

### **Illinois Valley PADS (Ottawa and Peru)**

IV PADS is a PLAN for a workable future for an individual in crisis. IV PADS utilizes case management, assessments, and service plans. Individuals are able to improve their lives by building skills learned in the Education Programs. They then develop positive change in their own lives and end the spiral of hopelessness, unemployment and homelessness. Resources, support groups, and referral guidance is provided in the areas of mental health issues, healthcare needs and substance abuse addiction.

### **In Home Care Connection**

The In-Home Care Connection & IHCC Hospice team is made up of Nurses, Physical, Occupational, and Speech Therapists, Medical Social Workers, Home Health & Hospice Aides, Caregivers and Client Care Managers who all have a passion for serving the disabled and senior citizens living in our communities. We are proud to come together as a locally owned and operated Home Health, Hospice & Caregiver Agency serving clients and employing staff from our communities. We are your friends and neighbors. Many of us have years of experience providing Home Health, Hospice and Caregiver Services in the community setting, have backgrounds in long term care, or in the hospital setting. We understand the importance and desire to live safely and independently at home for as long as possible. We promise to be partners in the communities we serve and ethically provide Home Health, Hospice & Caregiver Services to those in our communities needing our assistance.

### **Live Well Streator**

Live Well Streator is a community collaborative organization focused on building awareness about community resources and creating new partnerships that support healthy living.

### **Mendota Area Chamber of Commerce**

The Mendota Area Chamber of Commerce is a not-for-profit organization of businesses representing industry, retail, service, professionals, and agriculture in partnership with tourism and government to further promote economic growth and quality of life in Mendota. The strength of the Chamber lies in the active involvement of its membership. Both large and small businesses are represented and influence the direction of the organization.

**Mendota Area Christian Food Pantry**

The MACFP strives to provide an emergency, supplemental food supply for the people of the community. It is important to us that our clients leave with both food and their dignity.

**Mendota Area Seniors Service**

Mendota Area Seniors Service is a not-for-profit corporation formed to act as an umbrella agency to coordinate and introduce programs and services for seniors over the age of 60 as well as persons with disabilities with the purpose of helping to improve the quality of life and to attain their highest level of independence. *Serving the townships of: Adams, Earl, Freedom, Mendota, Meriden, Mission, Northville, Ophir, Serena & Troy Grove*

**Narcotics Anonymous (NA)**

NA is a global, community-based organization that offer recover from the effects of addiction through working a twelve-step program, including regular attendance at group meetings.

**New Beginnings Baptist Church Food Pantry - Streator**

Food pantry open Wednesday from 9 am – 11 am

**North Central Area Transit (NCAT)**

Public transportation serving LaSalle County.

**North Central Behavioral Health Systems**

North Central Behavioral Health Systems provides a comprehensive continuum of mental health and addiction services throughout Central and North Central Illinois. Services include, Emergency & Crisis Intervention, Information and Referral, Assessment & Evaluation, Mental Health Counseling/Therapy, Substance Use/Addictions Counseling, Psychiatric Evaluation, Medication Management, Clinical Consultation, Community Support Services, Permanent Supportive Housing Program, Psychosocial Rehabilitation, Community Integrated Living Arrangements (CILA), Health Promotion & Wellness through Prevention and Intervention and Community Outreach, Parent & Teacher Risk Prevention, Student Assistance Programs, Community & Industry Education & Training, Employee Assistance Programs (EAP), DUI Evaluation & Risk Education, and Mental Health First Aid Trainings (MHFA).

**Ottawa Area Chamber of Commerce**

The Ottawa Area Chamber of Commerce & Industry is a dynamic business organization working to advance the economic and civic interests of the Ottawa Area. We serve our members as an action agency, information clearing house, a business counselor, a government liaison, and a center for research and promotion of the Ottawa business community. The Chamber works very closely with its members and local government officials to determine the needs of the business community and the city as a whole. The Chamber works to assess and serve those needs through effective communication of available resources and programs.

**Safe Journeys**

Safe Journeys (formerly ADV & SAS) assists individuals seeking to free themselves from violence through crisis intervention, supportive counseling, and advocacy and prevention education.

**Schott's Pharmacy (Home Medical Equipment)**

Community pharmacy providing home medical equipment.

**St. Vincent de Paul Society - Streator**

Provides financial assistance, utilities assistance, transportation, and other social services.

**Starved Rock Regional Center for Therapy & Child Development**

A daycare for children with and without special needs. Provides developmental, speech, occupational and physical therapy for children.

**Streator Chamber of Commerce**

The Streator Chamber of Commerce & Industry was organized and incorporated for the purpose of serving the needs and concerns of the business community of Streator, Illinois. The ways we meet the needs of our business community include but are not limited to: preserving our competitive enterprise system; appreciating the importance of all businesses; addressing current economic issues; representing members on city, county, state, national and political affairs; promoting business and community growth; and offering education programs.

**Streator Lions Club**

Provides assistance for the purchase of eyeglasses, hearing aids, and home medical equipment.

**Streator Salvation Army**

Provides assistance for medication, water bill, gas utility and rent along with operating a food pantry.

**Streatorland Food Pantry**

Food pantry open Monday, Thursday and Friday from 9 am – 10:30 am and Wednesday from 5 pm - 6 pm.

**The Landing – Grace Community Church, Streator**

The Landing is Celebrate Recovery's ministry for junior high and high school students who may need guidance in finding freedom from life's hurts and habits.

**The Perfectly Flawed Foundation**

The Perfectly Flawed Foundation is a community based non-profit organization that provides services and support related to substance use and addiction to individuals and families in North Central Illinois.

**Tri-county Opportunity Council**

The Tri-County Opportunities Council (TCOC), Community Action Agency, was organized and incorporated for the purposes of investigating the frequency, location, character and cause of poverty; and coordinating efforts to prevent, alleviate and eliminate poverty through the cooperation of public agencies, private organizations, business, industry and interested individuals.

- To strengthen and enable low-income people to become self-sufficient through the attaining of necessary skills, knowledge, motivations and opportunities.

- To better organize a wide range of services related to the needs of low-income people in Bureau, Carroll, LaSalle, Lee, Marshall, Ogle, Putnam, Stark and Whiteside Counties by utilization of innovative approaches and new types of services in attacking the causes of poverty including the support of self-help groups and cooperative efforts of low-income people.
- To encourage participation of low-income people in the planning, development and implementation of programs and projects and in the decision-making processes of governmental entities affecting their lives.
- To strengthen the capabilities of the CAA's community for planning and coordinating federal, state, local and private assistance related to the elimination of poverty by broadening the resource base of programs to include public officials, private organizations, individuals, business and industry.

### **United Way of Eastern LaSalle County**

#### **United Way Illinois Valley**

#### **Streator Area United Way**

The United Way is a recognized leader in helping solve community problems by gathering and distributing, in an efficient and accountable manner, community resources that respond to priority health and human service needs.

### **University of Illinois Extension LaSalle County**

Illinois Extension is the flagship outreach effort of the University of Illinois, offering unbiased, practical education to help people, businesses and communities solve problems, develop skills and build a better future.

### **Veterans Benefits – LaSalle County**

Assists veterans with applying for claims with the Department of Veterans Affairs, Department of Defense, and various other agencies.

### **Youth Services Bureau of Illinois Valley**

YSB responds to the needs of children and youth through a variety of programs with the purpose of enhancing the quality of life for all children, youth and families.

## **HOSPITALS/CLINICS (22)**

### **Abigail Women's Clinic**

To empower individuals to make healthy choices related to sexuality and childbearing, consistent with the sanctity of human ...life. Providing free and confidential services, education, counsel, support, and encouragement. We are a Christian organization committed to helping men and women within our community that are facing a crisis pregnancy. ...As a medical clinic with nurses on staff, we offer free pregnancy tests and limited obstetrical ultrasounds starting at 5 to 6 weeks after a positive pregnancy test. We offer educational material to assist women in making an informed choice for life as well as material assistance to women in need, clothing up to size 2T, childcare supplies and equipment. We also offer classes to non-pregnant women as well.

**Community Health Partnership of Illinois - Mendota**

CHP is committed to improving the health and well-being of migrant and seasonal farmworkers. We support these communities by providing quality medical and dental care to workers and their families from a team of dedicated, bilingual-bicultural professionals, in an atmosphere that fosters a sense of belonging.

**Fox River Cancer Center***Cancer*

The Fox River Cancer Center is a collaboration between Radiation Oncology of Northern Illinois, Illinois CancerCare, and OSF Saint Elizabeth Medical Center. Services include oncology/hematology and radiation oncology.

**LaSalle Veterans Health Administration Clinic**

An outpatient clinic that provides primary care and specialty health services, including mental health care, pharmacy, laboratory services, and more.

**Morris Hospital Ottawa Campus**

Morris Hospital Ottawa Campus offers primary care for all ages, behavioral health, same-day appointments, on-site blood draws, blood pressure screenings, immunizations, physicals, ePrescribing, and more.

**OSF Saint Elizabeth Medical Center Ottawa****OSF Center for Health Streator**

OSF Saint Elizabeth Medical Center, formally known as Ottawa Regional Hospital and Healthcare Center, is a 97-bed acute care facility. OSF Saint Elizabeth provides a full range of services, including inpatient and outpatient medical and surgical care, emergency care, pre-natal and post-partum care, physical therapy, behavioral health services, home health and hospice care. Center for Health in Streator provides outpatient Emergency Services, Lab, Radiology and Cardio-pulmonary services.

**OSF Saint Paul Medical Center Mendota**

OSF Saint Paul Medical Center is a 25-bed Critical Access Hospital located in Mendota, Illinois. OSF Saint Paul provides a full range of services, including inpatient and outpatient medical and surgical care, emergency care, physical therapy, home health and hospice care.

**OSF Medical Group – Ottawa/Marseilles/Mendota/Streator**

A part of OSF HealthCare, the OSF Medical Group offices are multi-specialty primary-care facilities in Ottawa, Marseilles, Mendota, and Streator. Outpatient laboratory and radiology services are also available on most sites.

**Xpress Care-Urgent Care Mendota, Streator**

Xpress Care is committed to providing our patients with professional healthcare services in an affordable, convenient, and timely manner.

**OSF OnCall Urgent Care - Ottawa****OSF Prompt Care – Mendota, Ottawa, and Streator**

Convenient locations are open with extended hours to care for walk-in patients with physician office type concerns, not requiring emergency room level of service.

**St. Margaret's Health – Oglesby Clinic**

St. Margaret's Health – Oglesby Clinic offers a full range of primary care for all ages.

**St. Margaret's Health – Peru**

St. Margaret's Health – Peru, formally known as Illinois Valley Community Hospital, is a 49-bed acute care hospital providing a full range of services.

**St. Margaret's Midtown Health Center – Peru**

The Midtown Health Center offers a full range of primary care for all ages, including walk-in care for minor injuries and illnesses.

**Trinity Health Care - Mendota**

Serves those who cannot afford traditional health care. We offer Diabetic teaching, mental health counseling, and minor ailment treatment per physician- approved protocols.

**GOVERNMENTAL (2)****LaSalle County Drug Court**

The mission of the LaSalle County Drug Court is to enhance public safety and reduce recidivism for substance addicted offenders by combining effective treatment and intensive judicial supervision in a therapeutic court setting that uses accountability, support, and individualized treatment plans to encourage offenders to change their lives.

**LaSalle County Treatment Alternative Court (TAC)**

The LaSalle County Treatment Alternative Court (TAC) is a problem-solving court for non-violent offenders with a serious mental illness involved in the criminal justice system. This mental health court provides for increased judicial interaction and participant accountability while providing expedited access to treatment and increase services.

## APPENDIX 7: PRIORITIZATION METHODOLOGY

### 5-Step Prioritization of Community Health Issues

**Step 1.** Review Data for Potential Health Issues

**Step 2.** Briefly Discuss Relationships Among Issues

**Step 3.** Apply “PEARL” Test from Hanlon Method<sup>3</sup>

Screen out health problems based on the following feasibility factors:

**Propriety** – Is a program for the health problem appropriate?

**Economics** – Does it make economic sense to address the problem?

**Acceptability** – Will a community accept the program? Is it wanted?

**Resources** – Is funding available for a program?

**Legality** – Do current laws allow program activities to be implemented?

**Step 4.** Use Voting Technique to Narrow Potential Issues

Prioritize Issues. Use a weighted-scale approach (1-5 scale) to rate remaining issues based on:

**1. Magnitude** – size of the issue in the community. Considerations include, but are not limited to:

- Percentage of general population impacted
- Prevalence of issue in low-income communities
- Trends and future forecasts

**2. Severity** – importance of issue in terms of relationships with morbidities, comorbidities and mortality. Considerations include, but are not limited to:

- Does an issue lead to serious diseases/death
- Urgency of issue to improve population health

**3. Potential for impact through collaboration** – can management of the issue make a difference in the community?

Considerations include, but are not limited to:

- Availability and efficacy of solutions
- Feasibility of success

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<sup>3</sup> “Guide to Prioritization Techniques.” National Connection for Local Public Health (NACCHO)