2025

Community Health Needs Assessment:

OSF Saint Katherine Medical Center

LEE COUNTY

Introduction

The Lee County Community Health-Needs Assessment is a collaborative undertaking by OSF Saint Katharine Medical Center to highlight the health needs and well-being of residents in Lee County.

Through this needs assessment, collaborative community partners have identified numerous health issues impacting individuals and families in Lee County. Several themes are prevalent in this health-needs assessment – the demographic composition of Lee County, 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.

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, survey data from 428 respondents in the community were assessed with a special focus on 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, social drivers (determinants) of health (SDoH) were analyzed to provide insights into why certain segments of the population behaved differently.

Ultimately, the identification and prioritization of the most important health-related issues in Lee County 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, the collaborative team prioritized two significant health needs:

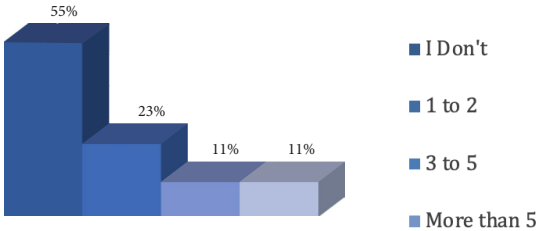
- **Behavioral Health –** Mental Health
- **Access to Healthcare**

Behavioral Health

Behavioral Health

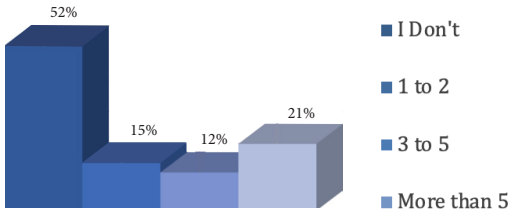
The CHNA survey asked respondents to indicate prevalence of specific issues, namely depression and stress/anxiety. Of respondents, 45% indicated they felt depressed in the last 30 days and 48% indicated they felt anxious or stressed in the last 30 days. Depression tends to be rated higher by those with lower income and those living in an unstable housing environment. Stress and anxiety tend to be rated higher for younger people, women and those living in an unstable housing environment. Respondents were also asked if they spoke with anyone about their mental health in the last year. Of respondents, 49% indicated that they spoke to someone, the most common response was to family/friends (44%). In regard to self-assessment of overall mental health, 20% of respondents stated they have poor overall mental health. In the 2025 CHNA survey, respondents indicated that mental health was the most important health issue (22%).

FELT DEPRESSED LAST 30 DAYS



Source: CHNA Survey

FELT ANXIOUS OR STRESSED LAST 30 DAYS



Source: CHNA Survey

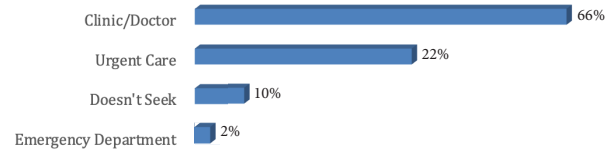
Access to Healthcare

Access to Healthcare

PRIMARY SOURCE OF HEALTHCARE

The CHNA survey asked respondents to identify their primary source of healthcare. Four different options were presented: clinic or doctor's office, urgent-care facility, did not seek medical treatment, and emergency department. The most common response for source of medical care was clinic/doctor's office, chosen by 66% of survey respondents. This was followed by urgent care (22%), not seeking medical attention (10%), and the emergency department at a hospital (2%). Note that not seeking healthcare when needed is more likely to be selected by men. Selection of an emergency department as the primary source of healthcare did not have any significant correlates.

CHOICE OF MEDICAL CARE – GENERAL POPULATION

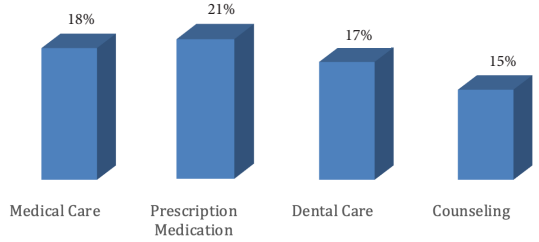


Source: CHNA Survey

ACCESS TO MEDICAL CARE, PRESCRIPTION MEDICATIONS, DENTAL CARE AND MENTAL-HEALTH COUNSELING

In the CHNA survey, respondents were asked, "In the past year, 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 medication, dental care, and counseling. Survey results showed that 18% of the population did not have access to medical care when needed; 21% did not have access to prescription medication when needed; 17% did not have access to dental care when needed; and 15% did not have access to counseling when needed. The leading causes of not getting access to care when needed were cost and too long of a wait.

DID NOT HAVE ACCESS TO CARE



Source: CHNA Survey

Collaborative Team

COLLABORATIVE TEAM

John Bowser | OSF Healthcare System
Rich Boysen | Retired
Pastor Michael Cole | The Worship Center Ministries
Rick Curia | Ken Nelson Auto Group
Margo Empen | Dixon Public Schools
Drew Fenner | OSF Healthcare System
Aaron Fox | OSF Healthcare System
Jim Grot | Sauk Valley Community College
Dr. David Hellmich | Sauk Valley Community College
Colleen Henkel | The First National Bank
Dr. Laxman Iyer | OSF Healthcare System
Jackie Kernan | OSF Healthcare System
Dr. Jon Mandrell | Sauk Valley Community College
Joan Melzer | Former KSB Board Member
Dr. Glenn Milos | OSF Healthcare System
Meagan Rothrock-Magana | OSF Healthcare System
Mark Scholl | Retired
Sandy Stahler | Wahl Clipper Corp
Nancy Varga | OSF Healthcare System
Abby Weber | OSF Healthcare System
Megan White | OSF Healthcare System

FACILITATORS

Michelle A. Carrothers | OSF Healthcare System
Dawn Tuley | OSF Healthcare System