



**HSHS
St. Anthony's
Memorial Hospital**



Community Health Needs Assessment 2018

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Section 1

An assessment of Effingham and Jasper Counties, Illinois was conducted jointly by HSHS St. Anthony's Memorial Hospital, Jasper County Health Department and the Effingham County Health Department. This report provides secondary demographic and community health data to provide information to help identify the hospital's priority areas to improve community health.

Provisions in the Affordable Care Act (ACA) require charitable hospitals to conduct a Community Health Needs Assessment (CHNA) and adopt implementation strategies to meet the needs identified. The CHNA is a systematic process involving the community to identify and analyze community health needs as well as community assets and resources in order to plan and act upon priority community health needs. This process results in a CHNA Report which is used to develop implementation strategies based on the evidence and assets and resources identified in the CHNA process.

Triennially, HSHS St. Anthony's conducts a CHNA and adopts an Implementation Plan by an authorized body of the hospital in the same tax year, and makes the report widely available to the public. The hospital's previous CHNA Report and Implementation Plan was conducted and adopted in FY2015.

In FY 2018 (July 1, 2017 through June 30, 2018), HSHS St. Anthony's conducted its CHNA in partnership with representatives from the community. Upon completion of the CHNA, the hospital developed a set of implementation strategies and adopted an Implementation Plan to address priority community health needs. The populations assessed were Effingham and Jasper Counties. Sources include federal and state level health agencies, such as Center for Disease Control and Prevention, US Census Bureau, National Center for Education Statistics, and non-profit and academic entities such as University of Wisconsin Population Health Institute and Dartmouth College Institute for Health Policy Clinical Practice. Data collected throughout the assessment process was supplemented with qualitative data gathered through the Alliance for a Greater Effingham County, Jasper County Steering Committee, Effingham County Board of Health, Community Area Service Providers (CASP), HSHS St. Anthony's Administrative Team, HSHS St. Anthony's Physician Strategy Committee, and HSHS St. Anthony's Medical Executive Committee.

Identification and Prioritization of Needs: The following health needs were identified based on primary and secondary data sources; local expertise and input; the community assets and resources that could be leveraged through strategic collaboration in the hospital's service area to address the health need; the importance the community places on addressing the health need; and the burden, scope, severity and urgency of the health need.

- Behavioral Health
- Access to Care
- Chronic Disease Management & Prevention

Implementation Plan Development: As part of the engagement process with key stakeholders, attention was given to natural partnerships and collaborations that will be used to operationalize the Implementation Plan. Open subcommittee meetings were conducted in both Jasper and Effingham Counties to discuss programs existing and needed in the community. The Implementation Plan is considered a "living document" -a set of strategies that can be adapted to

the lessons learned while implementing Community Benefit activities and initiatives relevant to the priority needs. The broader set of community health needs will continue to be monitored for consideration as future focus areas.

Hospital Background: HSHS St. Anthony's is a fully accredited non-for-profit general acute care health facility. For more than 140 years, the hospital has been the leader in health and wellness in the Effingham community and the south-central region of Illinois. HSHS St. Anthony's has 133 licensed beds and a workforce of over 800 employees. The Medical Staff at St. Anthony's represents over 78 local physician providers in 32 specialties and over 150 consulting physicians.

HSHS St. Anthony's partners with other area organizations to address the health needs of the community, living its mission *to reveal and embody Christ's healing love for all people through our high quality Franciscan health care ministry*, with a preference for the poor and vulnerable. The hospital is part of Hospital Sisters Health System (HSBS), a highly-integrated health care delivery systems serving more than 2.6 million people in rural and mid-sized communities in Illinois and Wisconsin. HSBS generated approximately \$2 billion in operating revenue with 15 hospitals and more than 200 physician practice sites. Our mission is carried out by 14,000 colleagues and 2,100 physicians who care of patients and their families in both states.

Hospital Sisters Health System has a rich and long tradition of addressing the health of the community. This flows directly from our Catholic identity. In addition to community health improvement services guided by our triennial CHNA process, the hospital contributes to other needs through our broader community benefit programs including health professions education, subsidized health services and community building activities. In FY2017, the hospital's community benefit contribution totaled more than \$8 million.

Current Hospital Services and Assets

Major Centers & Services	Statistics	New Services & Facilities
<ul style="list-style-type: none"> • Bone & Joint Services • Center for Advanced Imaging • Diagnostic & Health Centers • Emergency Services • Home Care and Hospice • Interventional Pain Management • Medical Care Services • Prairie Heart Institute at St. Anthony's • Physical Rehabilitation and Wellness Center • Surgical Services • Women and Infants Center • Women's Services • Wound Healing Center 	<p>Total Beds: 133 Total Colleagues: 823 RNs: 336 AS, 164 BS, 23 Masters Inpatient admissions: 5,127 ED visits: 24,265 Births: 802 Surgical Procedures: 5,056 Physicians on Medical Staff: 76 Volunteers: 199 Community Benefit: \$8 million</p>	<ul style="list-style-type: none"> • Da Vinci Surgical Robotic System • MAKO® Robotic Orthopedic Surgery • St. Anthony's Health Center – Altamont • HMR® Weight Management Program • Affiliate of MD Anderson Cancer Network®

Hospital Accreditations and Awards

Accreditations:

HSHS St. Anthony's is licensed/accredited/regulated by the Illinois Department of Health (IDPH), The Joint Commission (TJC), Centers for Medicare and Medicaid Services (CMS), American College of Surgeons and Commission on Cancer (ACoS-CoC), American College of Radiology (ACR), College of American Pathologists (CAP), Department of Human Services (DHS) – Clinical Laboratory Improvement Amendments (CLIA), Effingham County Health Department (ECHD), Intersocietal Accreditation Commission Echocardiography Laboratories (IACEL), Intersocietal Accreditation Commission Echocardiography Laboratories (IACVL), Illinois Emergency Management Agency (IEMA) – Mammography Quality Standards Act (MQSA), and IEMA – Radiation Safety. The hospital complies with federal and state regulations and The Health Insurance Portability and Accountability Act of 1996 (HIPAA), as well as payer requirements for fraud and abuse. As a Catholic hospital, we also comply with the Ethical and Religious Directives for Catholic Health Care Services.

Awards and Recognitions:

- 2018 Certificate of Distinction from The Joint Commission in the Management of Joint Replacement – Shoulder
- 2018 Certificate of Distinction from The Joint Commission for Advanced Certification in Total Hip and Total Knee Replacement
- Designated an Aetna Institute of Quality® for Total Joint Replacement Surgery in 2017
- Awarded a Leapfrog “A” Safety Grade in the Fall 2017 Ratings (licensing purchased)
- Designated a Blue Distinction® Center+ for Maternity Care, a designation under the Blue Distinction Specialty Care program in 2017
- Practice Greenhealth 2017 “Greenhealth Partner for Change” Award and “Greening the OR” Award
- 2017 Robert A. Warriner Center of Excellence Award and Center of Distinction Award for Wound Healing Center from Healogics
- Three-Year Accreditation by the Commission on Cancer (CoC), a quality program of the American College of Surgeons (ACS) to the Cancer Program granted in 2017

Community Served by HSHS St. Anthony's Memorial Hospital

Although HSHS St. Anthony's serves Effingham County and Jasper County along with portions of the counties of Clark, Clay, Coles, Crawford, Cumberland, Fayette, Marion, Richland, Shelby, Wayne and beyond, for the purpose of the CHNA, the hospital defined its primary service area and populations as Effingham and Jasper Counties. The hospital's patient population includes all who receive care without regard to insurance coverage or eligibility of assistance.

Demographic Profile of Effingham and Jasper Counties

Effingham County Characteristics*	IL 2015	Effingham 2015	Effingham 2010	% Change for County
Total Population	12,873,761	34,332	34,242	0.3%
Median Age (years)	36	38.9	38.7	0.5%
Age				
Under 5 years	6.0%	6.4%	6.6%	-3.1%
Under 18 years	22.9%	23.4%	24.7%	-5.6%
65 years and over	14.6%	17.5%	15.2%	13.1%
Gender				
Female	50.9%	50.2%	50.3%	-0.2%
Male	49.1%	49.8%	49.7%	0.2%
Race and Ethnicity				
White (non-Hispanic)	77.2%	97.8%	96.5%	1.3%
Black or African American	14.7%	0.5%	0.0%	100%
Native American or Alaska Native	0.6%	0.3%	Z	Z
Asian	5.5%	0.7%	0.4%	42.9%
Hispanic or Latino	17%	1.9%	2.7%	-42.1%
Hmong	0.1%	Z	Z	Z
Speaks language other than English at home[^]				
	22.7%	2.8%	2.3%	17.9%
Median household income				
	\$59,196	\$52,977	\$49,509	6.5%
Percent below poverty in the last 12 months[^]				
	13%	10.9%	10.5%	3.7%
High School graduate or higher, percent of persons age 25+[^]				
	88.3%	91.1%	89.4%	1.9%

*Unless otherwise indicated, the data source is U.S. Census QuickFacts.

[^]Source: U.S. Census Bureau, 2010-2014 and 2006-2010 American Community Survey 5 Year estimates (through Fact Finder. Z=Value greater than zero but less than half unit of measure shown

Jasper County Characteristics*	IL 2015	Jasper 2015	Jasper 2010	% Change for County
Total Population	12,873,761	9,635	9,752	-1.2%
Median Age (years)	36	42.9	42.6	0.7%
Age				
Under 5 years	6.0%	5.7%	5.7%	0%
Under 18 years	22.9%	22.8%	22.7%	0.4%
65 years and over	14.6%	18.8%	17.4%	7.4%
Gender				
Female	50.9%	49.6%	50.2%	-1.2%
Male	49.1%	50.4%	49.8%	1.2%
Race and Ethnicity				
White (non-Hispanic)	77.2%	98.5%	98.8%	-0.3%
Black or African American	14.7%	0.2%	0.2%	0%

Native American or Alaska Native	0.6%	0.2%	0.3%	-50%
Asian	5.5%	0.3%	0.3%	0%
Hispanic or Latino	17%	1.5%	0.6%	60%
Hmong	0.1%	Z	Z	Z
Speaks language other than English at home[^]				
	22.7%	2.4%	1.0%	58.3%
Median household income				
	\$59,196	\$56,305	\$46,546	17.3%
Percent below poverty in the last 12 months[^]				
	13%	10.7%	9.2%	14%
High School graduate or higher, percent of persons age 25+[^]				
	88.3%	90.1%	88.2%	2.1%

*Unless otherwise indicated, the data source is U.S. Census QuickFacts.

[^]Source: U.S. Census Bureau, 2010-2014 and 2006-2010 American Community Survey 5 Year estimates (through Fact Finder. Z=Value greater than zero but less than half unit of measure shown

Process and Methods Used to Conduct the Assessment

HSHS St. Anthony's led the planning, implementation and completion of the CHNA in partnership with the Effingham and Jasper County Health Departments.

Internal

HSHS St. Anthony's undertook an 8-month planning and implementation effort to develop the CHNA, identify and prioritize community health needs for its service area and formulate an implementation plan to guide ongoing population health initiatives with like-missioned partners and collaborators. These planning and development activities included the following internal steps:

- Selecting a lead organization
- Engaging leadership and physician committees
- Convening an internal CHNA team
- Engaging colleagues on tracking and documenting Community Benefit in Community Benefit Inventory for Social Accountability (CBISA)

External

HSHS St. Anthony's also leveraged existing relationships that provided diverse input for a comprehensive review and analysis of community health needs in the hospital's service area. External components and steps included:

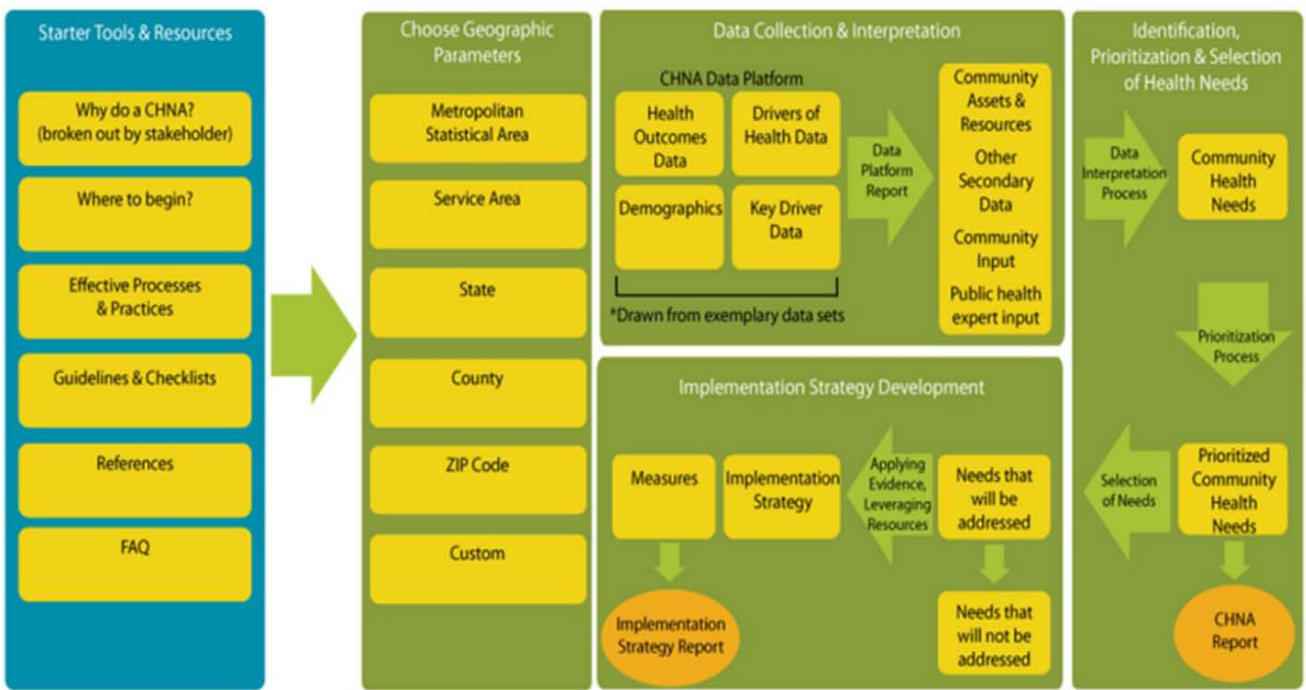
- Meeting with regional steering committees
- Hosting sub-committee focus groups with key community stakeholders
- Gathering input from area community agencies
- Reviewing past CHNA data

Defining the Purpose and Scope

The purpose of the CHNA was to 1) evaluate current health needs of the hospital's service area, 2) identify resources and assets available to support initiatives to address the health priorities identified, 3) develop an Implementation Plan to organize and help coordinate collaborative efforts impacting the identified health priorities, and 4) establish a system to track, report and evaluate efforts that will impact identified population health issues on an ongoing basis.

Data Collection and Analysis

The overarching framework used to guide the CHNA planning and implementation is based on the Catholic Health Association's (CHA) Community Commons CHNA flow chart:



Data Sources

The CHNA process utilizes both primary data including Effingham and Jasper County Community Health Needs survey data, hospital data, sub-committee focus groups and key stakeholder meetings as well as secondary data. Secondary data sources include Behavioral Risk Factor Surveillance System (BRFSS), the US Census Bureau, and Centers for Disease Control and Prevention (CDC) data sources. Data sources and specific data points were considered for their timeliness and accessibility at the county level. All data were extracted from reputable, publicly available data sources. In addition, this data was supplemented with data from:

- County Health Rankings and Roadmaps
- Wisconsin Department of Health Services
- Centers for Medicare and Medicaid Services
- County Health Rankings & Roadmaps

- Dartmouth Atlas of Healthcare
- Illinois Department of Public Health IQUERY
- Illinois Department of Transportation
- Population Health Metrics
- National Center for Education Statistics
- US Department of Education-EDFacts & Area Health Resource File
- US Department of Transportation

The data was gathered into a written report/presentation and shared with community members at in-person focus groups and key stakeholder meetings (described below).

Deena Mosbarger with the Effingham County Health Department gave a PowerPoint presentation summarizing the secondary data results and provided a Profile Report of the secondary data at the July Alliance for a Healthier Effingham County and the August Jasper County Steering Committee meetings. Primary data results from the community survey were also shared with both groups. Presentations on the data were also given to the HSHS St. Anthony's Administrative Team, Effingham County Board of Health, Community Area Service Providers (CASP), HSHS St. Anthony's Physician Strategy Committee and the HSHS St. Anthony's Medical Executive Committee in the fall of 2017. In addition to the Community Health Needs survey, the Effingham Public Library, Effingham County Chamber of Commerce and CEFS Economic Opportunity Corporation conducted their own community surveys in 2017. A meeting with representatives from these agencies was held at the library in order to share data from all the surveys conducted.

Input from Persons Who Represent the Broad Interests of the Community

HSHS St. Anthony's is committed to addressing community health needs in collaboration with local organizations and other area health care institutions. In response to the FY2015 CHNA, the hospital planned, implemented and evaluated implementation strategies to address the top identified community health needs: Access to Primary Care, Chronic Disease: Diabetes, Cerebrovascular Disease: Stroke, Nutrition and Smoking. This year's assessment built on that collaboration, actively seeking input from a broad cross section of community stakeholders with the goal of reaching consensus on priorities to mutually focus human, material and financial resources on.

Input from Community Stakeholders

The Effingham County Health Department developed and circulated a paper and electronic survey instrument on behalf of the hospital; in total 783 surveys were received from individuals in the hospital's primary service area. The Effingham County Health Department analyzed and provided a summary report of the results of the electronic survey.

Data collected throughout the assessment process was supplemented with qualitative data gathered through the Alliance for a Greater Effingham County, Jasper County Steering Committee, Effingham County Board of Health, Community Area Service Providers (CASP), HSHS St. Anthony's Administrative Team, HSHS St. Anthony's Physician Strategy Committee, and HSHS St. Anthony's Medical Executive Committee.

Community stakeholders were asked to actively participate in the CHNA process. Preliminary community health data was presented to nineteen participants at the July 13 and August 17 in-person key stakeholder meetings of the Alliance for a Healthier Effingham County and the Jasper County Steering Committee. The Effingham County Health Department representatives provided an overview of county demographics, and detailed data on the seven health focus areas identified by the IL Administrative Code for IPLAN from existing data sources (see Data Sources section for a list of quantitative and qualitative data sources). Topics included: General Health and Access to Health Care, Maternal and Child Health Indicators, Chronic Disease Indicators, Health Behaviors, Infectious Disease Indicators, Environmental, Occupational and Injury Control and Sentinel Events. The groups then participated in a discussion facilitated by the Effingham County Health Department about the data, progress on previous priority areas, identifying current initiatives and any emerging needs. The members of the partnership committee were then asked to participate in sub-committee focus group meetings. A total of 34 individuals attended the sub-committee focus group meetings held on November 13, 15 and December 4 and 12. All meetings were moderated and recorded by the Effingham County Health Department.

Community assets and resources were identified and, based on those assets and resources and additional criteria, the top three community health priorities were ranked and strategies identified to address the health priorities.

Community Stakeholders who participated in the CHNA process represented the following area organizations and institutions:

- Effingham County Health Department*
- Jasper County Health Department*
- HSHS St. Anthony's Memorial Hospital*
- Effingham Catholic Charities *
- Family Care Associates of Effingham, SC*
- Effingham City Police Department
- University of Illinois Extension Center*
- Effingham Unit 40 Schools*
- Horin Dentistry*
- Effingham County Committee on Aging*
- Kingery Printing Company
- Greater Effingham County Chamber of Commerce
- Heartland Human Services *
- Premier Broadcasting
- Bloomberg Chiropractic*
- City of Newton*
- Jasper Unit 1 Schools*
- Rides Mass Transit District*

**Denotes groups representing medically underserved, low-income and minority populations.*

Input from Members of Medically Underserved, Low Income and Minority Populations

Hospital Sisters Health System and HSHS St. Anthony's are committed to promoting and defending human dignity, caring for persons living in poverty and other vulnerable persons, promoting the common good, and stewarding resources. We believe that the CHNA process must be informed by input from the poor and vulnerable populations we seek to serve. To ensure that the needs of these groups were adequately represented, we included representatives from Effingham County Health Department, Jasper County Health Department, HSHS St. Anthony's Memorial Hospital, Effingham Catholic Charities, Family Care Associates of Effingham, SC, University of Illinois Extension Center, Effingham Unit 40 Schools, Horin Dentistry, Effingham County Committee on Aging, Heartland Human Services, Bloomberg Chiropractic, City of Newton, Jasper Unit 1 Schools and Rides Mass Transit District. These organizations serve the under-resourced in our community, including low-income seniors, children living in poverty, and families who struggle with shelter and food insecurity, the medically underserved and low-income community members. Representatives of these organizations, who work directly with their constituents, have extensive knowledge and quantifiable data regarding the needs of their service populations. Actively including these organizations in the CHNA process was critical to ensure that the needs of the most vulnerable persons in our communities were being shared and addressed in the CHNA process and development of related implementation strategies.

Input on FY2015 CHNA

No written comments were received regarding the FY2015 CHNA.

Prioritizing Significant Health Needs

The hospital collaborated with the Effingham County Health Department to gather primary and secondary community data. The planning and development process for the primary data survey included input from individuals from the HSHS St. Anthony's Community Benefit department, Effingham and Jasper County Health Departments, the Alliance for a Healthier Effingham County Committee and Jasper County Steering Committee. The steering committee members were key to promoting the community survey to those in their agencies and the general community.

As part of the identification and prioritization of health needs, the hospital considered the estimated feasibility and effectiveness of possible interventions by the hospital to impact these health priorities; the burden, scope, severity, or urgency of the health need; the health disparities associated with the health needs; the importance the community places on addressing the health need; and other community assets and resources that could be leveraged through strategic collaboration in the hospital's service area to address the health need.

Based on the CHNA planning and development process described, the following community health needs were identified:

1. Behavioral Health
2. Access to Care
3. Chronic Disease Management & Prevention

As an outcome of the prioritization process, the following community health needs were also identified and will not be addressed directly by the hospital for the reasons indicated:

- Affordable Housing – The hospital is not directly involved in initiatives dealing with local housing. The local government takes the lead on this focus area.
- Education/Schools – The hospital is not directly involved in initiatives dealing with college graduation rates or student reading proficiency. The local school districts have the expertise to address these issues. The hospital supports education through its School Wellness Program.
- Crime Rates – Local law enforcement have the expertise to address this focus area.
- Infant Mortality – The hospital did not take the lead on this issue. However, the hospital supports local families, particularly those in possible crisis situations, through support of the Crisis Nursery.
- Motor Vehicle Deaths/ATV Injuries – This focus area is addressed by local law enforcement.
- Teen Pregnancy – The local school districts take the lead for this focus area.
- Unemployment/Economy – Being a provider of health care services through inpatient and outpatient services, the hospital does not have the expertise or resources to address unemployment or the economy in the region. However, as the largest employer in Effingham the hospital is a major contributor to the local economy.
- Unsafe Sex/Sexually Transmitted Infections – The local school districts take the lead for this focus area.

Overview of Priorities

1. Behavioral Health

The entirety of Jasper County is designated as a "Health Professional Shortage Area" (HPSA), defined as having a shortage of primary medical care, dental or mental health professionals. Table 2.1 reports the rate of the county population to the number of mental health providers including psychiatrists, psychologists, clinical social workers, and counselors that specialize in mental health care (County Health Rankings & Roadmaps, 2016). When asked in the 2016 County Health Rankings & Roadmaps survey, Effingham County, Jasper County and Illinois residents all reported 3.4 days out of the past 30 days their mental health was not good, which includes stress, depression and problems with emotions.

There have been multiple expressed needs in the community for a licensed clinical psychiatrist. There is currently no practicing psychiatrist working in Effingham County. Figure 2.1 shows the number of suicides in Effingham and Jasper Counties from 2010 to 2014.

Table 2.1 Access to Mental Health Professionals

Report Area	Estimated Population	Number of Mental Health Providers	Ratio of Mental Health Providers to Population (1 Provider per x Persons)	Mental Health Care Provider Rate (Per 100,000 Population)
Report Area	43,941	64	686.6	145.6
Effingham County, IL	34,318	36	953.3	104.9
Jasper County, IL	9,623	28	343.7	290.9
Illinois	12,806,917	23,090	554.7	180.2
United States	317,105,555	643,219	493	202.8

Data Source: University of Wisconsin Population Health Institute, County Health Rankings. 2016. Source geography: County

Figure 2.1 Number of Intentional self-harm (suicide) deaths, 2010-2014

	2010	2011	2012	2013	2014
Effingham County	0	0	4	3	1
Jasper County	2	2	0	2	1

Source: County Health Rankings & Roadmaps

When asked “what do you think are the three most important health problems in our community?” in the Community Health Needs survey conducted by the Effingham County Health Department, 32.48 percent of respondents indicated mental health problems, 14.32 percent indicated suicide, 11.25 percent indicated domestic violence and 10.87 percent indicated child abuse/neglect.

Table 2.2 shows the child abuse and neglect statistics for Effingham and Jasper counties compared to Illinois.

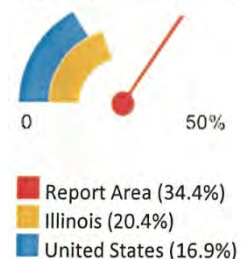
Table 2.2 Child Abuse and Neglect Statistics

Child Abuse and Neglect 2014-2015 (Rate per 1,000)			
	Effingham County	Jasper County	Illinois
Alleged Victims of Sexual Abuse	1.3	1.9	2.2
Alleged Victims of Abuse and Neglect	28.2	32.7	29.0
Indicated Victims of Abuse and Neglect	6.0	6.5	7.6

Source: IL DCFS

According to the primary data in the Community Health Needs survey, when asked “what do you think are the three most important risky behaviors in our community?” 68.29 percent indicated alcohol abuse and 60.85 percent indicated drug abuse. Figure 2.2 shows that 34.4 percent of adults aged 18 and older self-report heavy alcohol consumption (defined as more than two drinks per day on average for men and one drink per day on average for women). Additionally, when asked “the three most important factors for a healthy community, the second highest percentage response was low crime/safe neighborhoods at 42.46 percent.

Figure 2.2
Estimated Adults Drinking Excessively (Age-Adjusted Percentage)



Source: CDC, BRFSS 2006-12

2. Access to Care

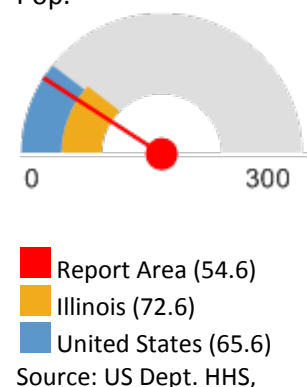
When asked “what are the three most important factors for a healthy community?” in the Community Health Needs survey conducted by the Effingham County Health Department, 38.11 percent of residents responded access to health care.

In Effingham and Jasper Counties, over fourteen percent of adults age 18 and older self-reported that six or more of their permanent teeth have been removed due to tooth decay, gum disease, or infection, compared to 15.7 percent in the United State and 14.5 percent in Illinois (Centers for Disease Control and Prevention, 2010). When asked “what is the most significant barrier to seeking regular dental care?” in the Community Health Needs survey, 66.42 percent of residents indicated the cost of dental care.

Table 3.1 Access to Dentists

Report Area	Total Population, 2015	Dentists, 2015	Dentists, Rate per 100,000 Pop.
Report Area	43,978	24	54.6
Effingham County, IL	34,371	23	66.92
Jasper County, IL	9,607	1	10.41
Illinois	12,859,995	9,336	72.6
United States	321,418,820	210,832	65.6

Dentists, Rate per 100,000 Pop.



Data Source: US Department of Health Human Services, Health Resources and Services Administration, Area Health Resource File. 2014. Source geography: County

Table 3.1 reports the number of dentists per 100,000 population. This indicator includes all dentists - qualified as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.), who are licensed by the state to practice dentistry and who are practicing within the scope of that license (US Department of Health & Human Services, 2014). In the reporting area 7,589 or 23 percent of adults aged 18 and older self-reported that they have not visited a dentist, dental hygienist or dental clinic within the past year. This rate is far below the Illinois rate of 30.9 percent and the United States rate of 30.2 percent (Centers for Disease Control and Prevention, 2010). Within the reporting area 12.8 percent of adults age 18 and older self-report having poor or fair health in response to the question "Would you say that in general your health is excellent, very good, good, fair, or poor?" (Centers for Disease Control and Prevention, 2011-2012)

According to the Community Health Needs survey, 98.52 percent of residents indicated that they or a member of their household currently use a daily medication; while 55.19 percent indicated that the most significant barrier for seeking medical attention for themselves or a family member was cost. According to 2010-2014 data from the CDC National Vital Statistics System, 4.57 percent of the population have no motor vehicle or a total of 599 households in Effingham County and 101 households in Jasper County.

In 2015, the leading cause of death in Jasper and Effingham Counties was heart disease with cancer as the second leading cause. Similarly, heart disease and cancer were the top two leading causes of death in the state of Illinois. The percentage of deaths caused by stroke, accidents, and Alzheimer’s disease are higher in Jasper and Effingham Counties than in the State of Illinois. Effingham County is ranked 47 out of 102 counties in Illinois for length of life. Jasper County is ranked 42 out of 102 for length of life. Premature death is considered death before the age 75. The top three leading causes of premature death in Effingham County were cancer, heart disease, and accidents (unintentional injury). In Jasper County, the top three causes of premature death were cancer, heart disease and chronic lower respiratory disease (Illinois Department of Public Health Death Statistics, 2010-2015)

Table 3.2 Leading Causes of Death

Top Ten Leading Causes of Death in 2015					
		Effingham	Jasper	Total Service Area	Illinois
Rank	Cause of Death	Percent of Deaths	Percent of Deaths	Percent of Deaths	Percent of Deaths
1	Diseases of the Heart	24.2%	33.7%	26.0%	24.0%
2	Cancer	20.0%	24.5%	20.9%	23.1%
3	Stroke	8.6%	5.1%	8.0%	5.3%
4	Accidents	5.4%	8.2%	6.0%	4.5%
5	Alzheimer’s	5.4%	4.1%	5.2%	3.4%
6	Chronic Lower Respiratory	5.2%	5.1%	5.2%	5.2%
7	Influenza and Pneumonia	2.0%	3.1%	2.2%	2.2%
8	Diabetes	2.5%	0.0%	2.0%	2.6%
8	Septicemia	2.0%	1.0%	1.8%	1.7%
10	Kidney Disease	1.0%	0.0%	0.8%	2.4%

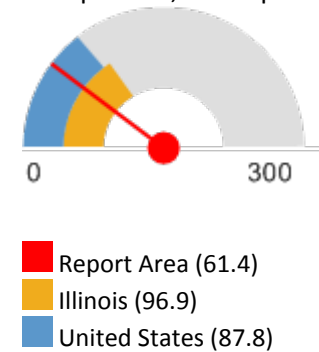
Source: Illinois Department of Public Health Death Statistics

In Effingham County, the female life expectancy is 80.9 year, and the male life expectancy is 76.1 years. In Jasper County, the female life expectancy is 80.8 years, and the male life expectancy is 76.1 years. The U.S. median life expectancy is 75.0 years (Kulkarni, 2011).

Table 3.3 Access to Primary Care

Report Area	Total Population, 2014	Primary Care Physicians, 2014	Primary Care Physicians, Rate per 100,000 Pop.
Report Area	43,943	27	61.4
Effingham County, IL	34,320	26	75.76
Jasper County, IL	9,623	1	10.39
Illinois	12,880,580	12,477	96.9
United States	318,857,056	279,871	87.8

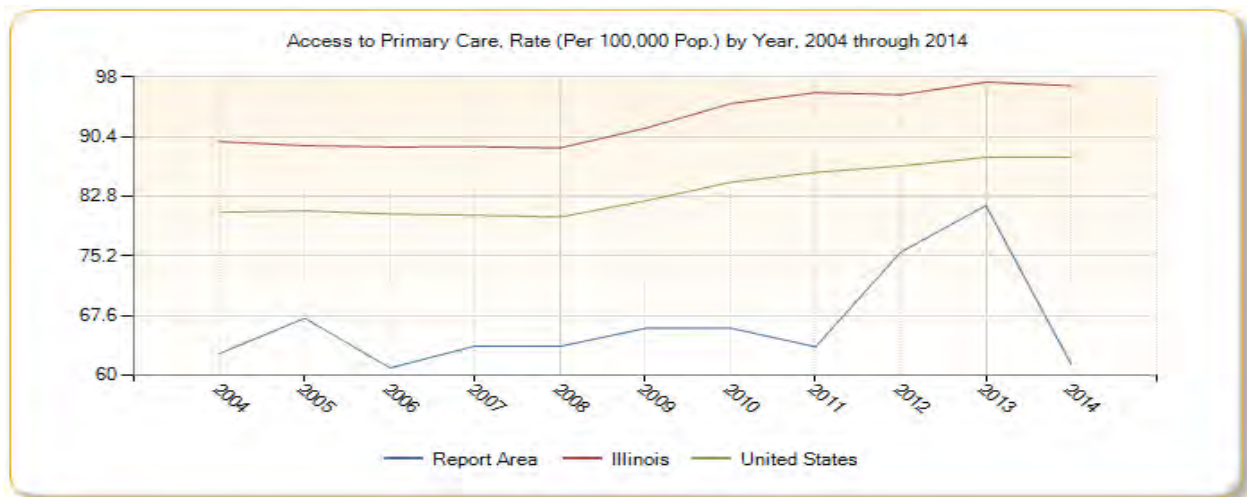
Primary Care Physicians, Rate per 100,000 Pop.



Data Source: US Department of Health Human Services, Health Resources and Services Administration, Area Health Resource File. 2014. Source geography: County

Table 3.3 reports the number of primary care physicians per 100,000 population. Doctors classified as "primary care physicians" by the AMA include: General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs and General Pediatrics MDs. Physicians age 75 and over and physicians practicing sub-specialties within the listed specialties are excluded (US Department of Health & Human Services, 2014).

Figure 3.1 Access to Primary Care Trend 2004 - 2014



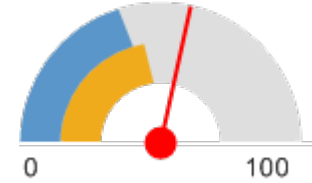
Data Source: US Department of Health Human Services, Area Health Resource File.

The service area's cancer mortality rate (174.1 per 100,000 pop.) is slightly higher than the Illinois (173.9) and National Rate (166.3), all of which are higher than the Healthy People 2020 Target (160.6). Additionally, the service area's cancer incident rate is slightly higher than the National rate for colon and rectum cancer, and prostate cancer.

Table 3.4 Colon and Rectum Cancer Incidence Rate

Report Area	Estimated Total Population	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Pop.)
Report Area	5,614	32	57
Effingham County, IL	4,232	24	56.7
Jasper County, IL	1,381	8	57.9
Illinois	1,382,781	6,264	45.3
United States	33,989,067	137,973	40.59
HP 2020 Target			<= 38.7

Annual Colon and Rectum Cancer Incidence Rate (Per 100,000 Pop.)



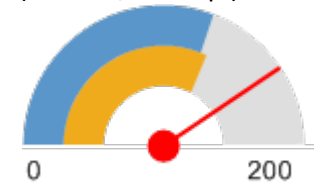
■ Report Area (57)
■ Illinois (45.3)
■ United States (40.59)

Data Source: State Cancer Profiles. 2009-13.
Source geography: County

Table 3.5 Prostate Cancer Incidence Rate

Report Area	Estimated Total Population (Male)	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Pop.)
Report Area	2,656	43	161.86
Effingham County, IL	2,005	32	159.6
Jasper County, IL	651	11	168.8
Illinois	650,000	8,372	128.8
United States	16,301,685	201,179	123.41

Annual Prostate Cancer Incidence Rate (Per 100,000 Pop.)



■ Report Area (161.86)
■ Illinois (128.8)
■ United States (123.41)

Data Source: State Cancer Profiles. 2009-13. Source geography: County

3. Chronic Disease Management & Prevention

Effingham and Jasper Counties have higher adult obesity rates than Illinois or the United States. Over thirty percent of Effingham and Jasper County adults aged 20 and older self-reported that their BMI is greater than 30, compared to 27 percent in Illinois and 27.5 percent in the United States. The trend shows that Effingham and Jasper Counties' obesity rates are

continuing to rise as Illinois and the United States have started to decline since 2010 (Centers for Disease Control and Prevention, 2010-2014).

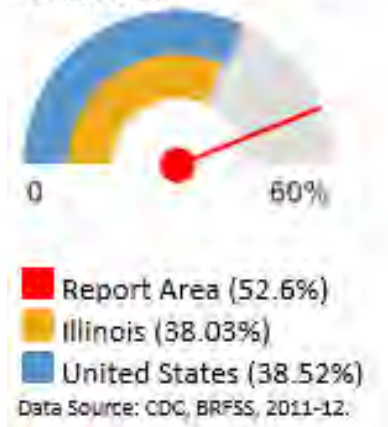
Figure 1.1 Adult Obesity Trend



Source: Centers for Disease Control, 2013.

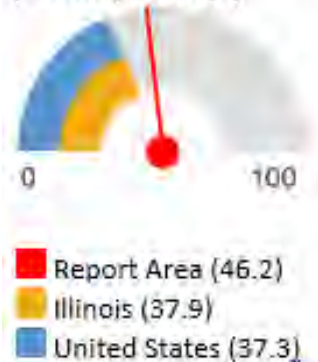
In Effingham and Jasper Counties 8.99 percent or 3,455 residents aged 20 and older have been told by a doctor they have diabetes. This rate is slightly higher than the Illinois rate of 8.47 percent and slightly lower than the national rate of 9.19 percent (Centers for Disease Control & Prevention, 2013). In Effingham County, 315, or one percent of adults aged 18 and older have ever been told by a doctor that they have coronary heart disease or angina. The population is too low in Jasper County to calculate. The Illinois rate is 3.8 percent and the United States rate is 4.4 percent. Between the years 2006 and 2012, 6,546, or 25.5 percent of adults in Effingham County aged 18 and older have ever been told by a doctor that they have high blood pressure or hypertension.

**Figure 1.2
Percent Adults with High Cholesterol**



When asked in the CDC BRFSS more than 52 percent of Effingham County residents aged 18 and older reported that they have ever been told by a doctor, nurse, or other health professional that they had high blood cholesterol or had high cholesterol, compared to 38 percent in Illinois and the United States. These statistics are displayed in Figure 1.2 (Centers for Disease Control and Prevention, 2011-2012).

**Figure 1.3
Stroke Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)**



Source: CDC Wonder, 2010-2014.

Within the report area the rate of death due to coronary heart disease (ICD10 Codes I20-I25) per 100,000 population is 92.2. The rate is less than the Healthy People 2020 target of less than or equal to 103.4. However, in Jasper County, the rate of 116.2 is higher than the

Healthy People 2020 target (Centers for Disease Control and Prevention, 2010-2014).

Within the report area from 2010-2014, there were an estimated 46.2 deaths due to cerebrovascular disease (stroke) per 100,000 population. This is greater than the Healthy People 2020 target of less than or equal to 33.8, the Illinois rate of 37.9 and the United States rate of 37.3 as indicated in Figure 1.3 (Centers for Disease Control and Prevention, 2010-2014).

Table 1.1 reports the percentage of diabetic Medicare patients who have had a hemoglobin A1C (hA1c) test, a blood test which measures blood sugar levels, administered by a health care professional in the past year. In the report area, 668 Medicare enrollees with diabetes have had an annual exam out of 766 Medicare enrollees in the report area with diabetes, or 87.3 percent (Dartmouth College Institute for Health Policy & Clinical Practice, 2014).

Table 1.1 Diabetes Management – Hemoglobin A1c Test

Report Area	Total Medicare Enrollees	Medicare Enrollees with Diabetes	Medicare Enrollees with Diabetes with Annual Exam	Percent Medicare Enrollees with Diabetes with Annual Exam
Report Area	6,222	766	668	87.3%
Effingham County, IL	4,863	580	501	86.6%
Jasper County, IL	1,359	186	166	89.8%
Illinois	316,321	36,855	31,820	86.3%
United States	26,753,396	3,314,834	2,822,996	85.2%

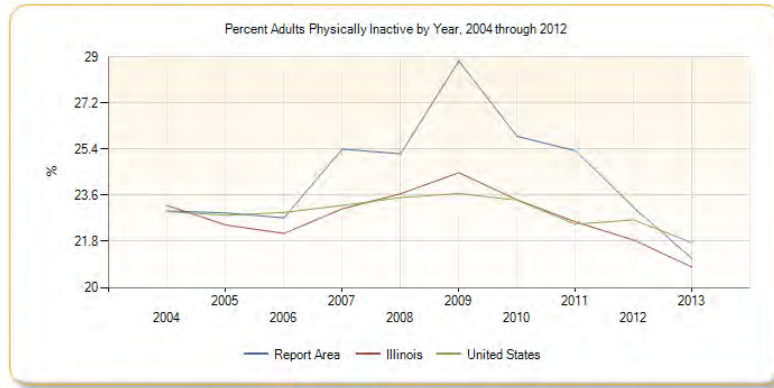
Data Source: Dartmouth College Institute for Health Policy Clinical Practice, Dartmouth Atlas of Health Care. 2014. Source geography: County

In the report area, the average home spends 11.92 percent of food-at-home expenditure on fruits and vegetables compared to 12.52 percent in Illinois and 12.68 percent in the United States. In addition, 4.42 percent is spent on soda, this is slightly higher than the state and national averages. In Effingham County an estimated 21,244, or 83.3 percent of adults over the age of 18 are consuming less than 5 servings of fruits and vegetables each day. Data is not available for Jasper County (Nielsen, 2014). According to the Centers for Disease Control and Prevention BRFSS over 83 percent of adults in the report area have inadequate fruit and vegetable consumption, compared to the Illinois rate of 76.3 percent and the United States rate of 75.7 percent. This data agrees with the Community Health Needs survey conducted by the Effingham County Health Department. When asked “during the past month, not counting juice, how many times did you eat fruit?” a majority of residents said 1-2 times a week. When asked in the Community Health Needs Survey, over 50 percent said they only ate vegetables 1-4 times a week (Effingham County Health Department, 2017).

According to the CHNA secondary data from the National Center for Education Statistics (NCES-Common Core of Data 2013-2014), 38.16 percent of children in the report area, were eligible for the free or reduced lunch program. Recent 2017 data from the Illinois State Board of Education shows this rate has increased to over 61 percent for the report area. According to the Community Health Needs survey, when asked “how often in the past 12 months would your household say they were worried or stressed about having enough money to buy food?” a total of 22.16 percent indicated sometimes, usually or always.

Over 7,300 or 21.1 percent of adults aged 20 and older self-report no leisure time for activity, based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?" There has been a decreasing trend since 2009 (Centers for Disease Control & Prevention, 2013).

Figure 1.4 Physical Inactivity Trend

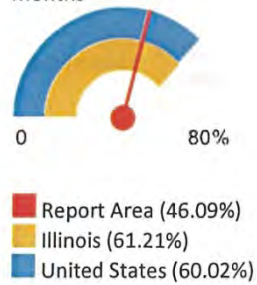


Source: Centers for Disease Control and Prevention, BRFSS 2004-2013

The prevalence of tobacco smokers is similar in Effingham and Jasper Counties to Illinois at 15 percent and 14 percent respectively; however, the Healthy People 2020 target is 12 percent. Figure 1.5 shows percent of smokers with quit attempts in the past 12 months in the report area.

Figure 1.5

Percent Smokers with Quit Attempt in Past 12 Months



Source: CDC, BRFSS 2011-12.

Potential Resources to Address the Significant Health Needs

As part of the focus groups and key stakeholders' meetings, community assets and resources that currently support health or could be used to improve health were identified. The following resources will be considered to develop the implementation plan to address the prioritized community health needs:

Hospitals and Related Medical Groups:

- HSHS St. Anthony's Memorial Hospital
- Area Physician Offices
- Area Dental Provider Offices
- Area Oral Surgeon Offices

Other Community Organizations and Government Agencies:

Access to Care

- Effingham Catholic Charities
- Local Employers
- Area Senior Centers
- American Cancer Society
- Rides Mass Transit
- Central Illinois Public Transit
- Ministerial Association
- Effingham and Jasper County Health Departments
- Local Businesses

Behavioral Health

- Heartland Human Services
- Effingham Catholic Charities
- Crisis Nursery of Effingham County
- Law Enforcement
- National Alliance on Mental Illness (NAMI) Group
- Jasper Suicide Prevention Group
- Effingham and Jasper County Health Departments
- Effingham 708 Mental Health Board
- Area Schools
- Drug Court Graduates
- Local EMT Agencies
- Juvenile Justice Council of the Fourth Judicial Circuit
- Community Area Service Providers

Chronic Disease Management & Prevention

- Effingham Catholic Charities
- Local Employers
- Area Senior Centers
- Area Food Pantries
- Effingham Unit 40 and Jasper Unit 1 Blessings in a Backpack
- Area Schools
- Head Start
- Ministerial Association
- Effingham and Jasper County Health Departments
- University of Illinois Extension Center

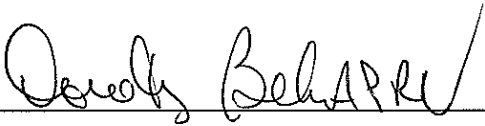
Next Steps

After completing the FY2018 CHNA process and identifying the top priority health needs, next steps include:

- Collaborate with community organizations and government agencies to develop or enhance existing implementation strategies.
- Develop a three-year Implementation Plan (FY2019 through FY2021) to address priority health needs identified in the FY2018 CHNA process.
- Integrate the Implementation Plan into organizational strategic planning and budgeting to ensure alignment and allocation of human, material and financial resources.
- Present and receive approval of the CHNA Report and Implementation Plan by the hospital's governing board in the same tax year that the CHNA was conducted.
- Publicize the CHNA Report and Implementation Plan widely on the hospital website and CHNA partner websites and make accessible in public venues such as Town Halls, etc.

Approval

The FY2018 CHNA Report was adopted by the hospital's governing board on May 29, 2018.



A handwritten signature in cursive script, reading "Dorothy Behrms", is written over a horizontal line.

Dorothy Behrms, APN, FNP-C, Chairperson
HSHS St. Anthony's Memorial Hospital,
Effingham, Board of Directors

Appendix 1

Evaluation of the impact of any actions that were taken, since the immediately preceding CHNA conducted in FY2015, to address significant health needs identified.

In FY2015, HSHS St. Anthony's Memorial Hospital conducted a Community Health Needs Assessment (CHNA). Primary and secondary data was gathered from multiple sources to assess the hospital's primary service area. Based on the data and the prioritization process, the following priority community health needs were selected:

- Access to Primary Care
- Chronic Disease: Diabetes
- Cerebrovascular Disease: Stroke
- Nutrition
- Smoking

The FY2015 Implementation Plan outlined the strategies that the hospital would undertake to address the priority community health needs identified through the CHNA process. Evaluation of the impact of the actions that were taken in response to the hospital's FY2015 CHNA follows.

Access to Care:

Outcomes: Promoted the availability of the Health Insurance Exchange (HIE) to the community. Made available a hospital-based enrollment counselor during the enrollment period to community members. Throughout FY2017, an enrollment counselor assisted 2,083 individuals with insurance.

Co-sponsored Effingham Catholic Charities prescription assistance program, an ongoing program that the hospital has supported since 2000, based on community health priorities. Rather than establishing their own prescription assistance and duplicating efforts, the hospital partners with Catholic Charities who already had an excellent program in place to assist those in need of prescription medication. In FY2017, Catholic Charities was able to help 246 people receive the prescription medications they need, thanks to the support of the hospital.

Provided monthly blood pressure program to increase access to care to low-income populations. The screening locations were determined based on access to underserved populations. In FY2017, 553 individuals were served by this program.

Partnered with Effingham Catholic Charities to provide a dental voucher program for adults 18 years and older who are underinsured or uninsured and in need of an emergency tooth extraction. The goal is to increase access to emergency dental care and improve the oral health for the underserved in the hospital's service area. The program facilitates access to the appropriate care for those individuals needing emergency tooth extraction. Those qualifying for the program will also find relief from the burden of paying for emergency, dental and oral surgery services when they cannot afford to do so. The program served 292 patients and provided \$79,860 in Community Benefit in FY2017.

Provided hearing and vision screenings free of charge to all Effingham County schools to assist the schools in meeting a State of Illinois requirement in FY2017. Under the Illinois Child Vision and Hearing Test Act, 410 ILCS 205/1 et. seq., hearing and vision screenings are required annually for all public, private, and parochial schools and licensed childcare facilities at certain grade levels.

In previous years, hearing and vision screenings for Effingham County schools were provided by the Effingham County Health Department, but due to State budget cuts, the health department no longer had the staff to provide the screenings. The hospital provided all the equipment and staffing, as well as handling all the reporting requirements to the State. A certified hearing and vision technician for HSHS St. Anthony's provides the screenings in each school location. During the school year, the technician provided 2,680 hearing screenings and 2,958 vision screenings. These screenings identified 55 children who failed their hearing screening and 124 children who failed their vision screening. From the follow-up vision reports received, at least 19 students required glasses or contacts due to their vision issues.

Offered free colorectal screenings to promote colorectal health in the community. The goal, in partnership with the American Cancer Society's 80 x 2018 colorectal screening initiative, is to screen 80% of individuals over the age of 50 by 2018. Community screening events were held in November 2016 and March 2017 providing a total of 61 screenings. The screenings resulted in two positive FIT tests and one colonoscopy with benign polyps removed.

Partnered with Effingham County Health Department to offer monthly low-cost health screenings to the community. "Working Together for Health" is available to anyone in the community, especially those with high-deductible insurance plans. In the first six months of the program, 25 individuals were served.

Continued to provide clothing and hygiene basics through the hospital's Clare's Closet to meet the immediate needs of patients or visitors. All colleagues have access to Clare's Closet and are encouraged to use this resource when a patient or visitor needs basic provisions. In FY17, Clare's Closet served 188 individuals.

Provided the start-up costs for the Crisis Nursery of Effingham County and operational funds. In its first four months of operation, the Crisis Nursery served 58 families with 375 total admissions. Clients' surveys before and after services showed a 96% decreased level of stress, 97% reduced risk of maltreatment and 98% improvement in parenting skills.

Contributed \$10,000 to help build Harmony Playground, an all-inclusive playground accessible to all children, adults, and veterans including those with disabilities and special needs.

Partnered with the Effingham City Police Department to assist with their Drug Overdose Prevention program. To relieve or reduce the burden of the local government, the hospital donated to the police department to purchase doses of Narcan in nasal spray form to use in cases of heroin overdoses.

In June 2014, the State of Illinois passed House Bill 3724, the Lauren Laman CPR & AED Training Law. This law requires all high school students to be trained on how to properly administer cardiopulmonary resuscitation and how to use an automated external defibrillator (AED). The hospital offered free CPR training to assist these schools in meeting this state requirement. In the FY17 school year, the hospital taught the Heart Saver CPR/AED at ten area schools. In total, 322 high school students and 92 teachers were taught CPR and AED use.

In addition to the partnership projects with members of the Alliance and the annual programs referenced above, the hospital offers numerous programs free of charge to residents in area communities to increase access to health care services including but not limited to: Antibiotic/C. Difficile Education Campaign, Breastfeeding Support Group, Bridges for Healing Hearts Monthly Support Group, Caregiver Symposium, Community Presentations on Nutrition, Children's Health, Diabetes, Hand Hygiene and Oral Hygiene, Continental Mills Health Fair, Effingham Senior Center Health Fair, Go! Healthy – Children's Summer Wellness Education Program, Healing the Grieving Heart Support Group, High School Free Heart Screenings, Illinois Senators' Senior Health Fair, Jasper County Health Dept. Health Fair, Lake Sara Dam Run, Mattoon Ge Plant Employee Health Fair, Memory Screening Event, Newton Dynege Power Station Employee Health Fair, Prenatal Classes (Having A Baby Class 1-3, Breastfeeding and New Brother/New Sister), Walk with a Doc Program, Breast Cancer Support Group, CHAT Cancer Support Group, Look Good/Feel Better Program, Women's Wellness Wig Bank, and Emergency Assistance for Transportation, Lodging, Medication and Meals.

Chronic Disease: Diabetes:

Outcomes: Following the FY2015 Community Health Needs Assessment (CHNA), it was discovered that diabetes prevalence in Jasper County exceeded the state average consistently between 2007 and 2011 with a most recent prevalence of 10.8%. Effingham County prevalence between 2007 and 2011 was similar to the state rate. However, among Medicare enrollees, the prevalence of diabetes in Jasper County and Effingham County in 2011 was 30.2% and 26.9%, respectively, compared to the Illinois prevalence of 27.7%.

Partnered with Catholic Charities to offer a free community program for people with diabetes. Clients meet with a Registered Dietitian who will assist them in obtaining the necessary resources to manage their disease. Through this free program, people can get help with healthy food options, medication costs, free blood sugar testing supplies nutrition education, behavioral goal setting and laboratory exams. Clients partner with a registered dietitian to work toward goals to improve their health. The program evaluates clients' blood pressure, HgbA1c, total cholesterol, LDL, HDL, and triglyceride levels pre- and post-participation in the Diabetes Community Education Program.

With Catholic Charities evaluated the availability of diabetic-friendly foods provided by their food pantry and filled any gaps as needed to support the overall program. The program had 1,302 consultations in FY17. Because of our partnership, these people now have access to blood glucose testing materials, including meters, test strips and lancets, and assistance with their diabetes medications.

Following the success of the Community Diabetes Program offered at Catholic Charities, the hospital s expanded the program to other locations.

Offered a free monthly diabetes support group to help people cope with their disease. Each session includes an educational presentation as well as discussion. By sharing ideas and struggles with others who deal with the same disease, each person finds encouragement and comfort, as well as advice on avoiding future problems. Ninety-four individuals participated in FY17.

Cerebrovascular Disease: Stroke:

Outcomes: Provided education in the community through various health fairs held throughout the year including the Effingham Senior Center Health Fair, Illinois Senators Senior Health Fair and the Effingham County Fair. During National Stroke Awareness Month in May, and at various times throughout the year, provided information on the hospital's social media pages to educate the community on signs and symptoms of a stroke.

Hosted 9th Annual Women's Wellness Event at the Keller Convention Center; more than 190 women attended. The free event included health informational displays on topics such as nutrition and diabetes and stroke education. Dr. Jessica Prange presented on "Getting to the Heart of the Matter: Women's Cardiovascular Health." This year's topic provided information on risk factors, and signs and symptoms of cardiovascular disease and stroke.

Continued to utilize telemedicine technology in partnership with our sister facility, HSHS St. John's Hospital in Springfield, for identification and diagnosis of stroke symptoms when patients present in our Emergency Department as well as current inpatients.

Nutrition:

Outcomes: Continued the hospital's six to eight-week School Wellness Program to educate children and instill healthy habits regarding physical activity levels, nutrition and safety. In the 2016/2017 school year, the program served 507 third grade students in 12 schools and 26 classrooms with an average increase in pre and post survey scores of 33%.

Another barrier to healthy nutrition is not having funds to buy an adequate food supply or milk to make a nutritious meal. Donated healthy food bags to Catholic Charities' Food Pantry, as well as gallons of milk for their clients. On average, the hospital donates 10 healthy food bags and 809 gallons of milk per month to the food pantry.

Supported the local Meals on Wheels and Crisis Nursery by preparing food for their clients to ensure that those who are most vulnerable receive the most basic of needs, a nutritious meal. In FY17, HSHS St. Anthony's provided the food and staff to prepare 3,076 meals to those in need.

Staffed an educational booth at the Effingham Farmer's Market to teach children about nutrition. Hospital dietitians provided nutritional games and activities for a total of 85 kids during weekends in August to celebrate "Kids Eat Right" month designated by the Academy of Nutrition and Dietetics.

Promoted outdoor fitness opportunities in the community by supporting the Jasper County Eagle Trail, specifically the addition of fit stations along the trail to encourage physical activity for the community.

Smoking:

Outcomes: Offered the American Cancer Society's Freshstart® program, which is designed for adults who are ready to quit smoking. The program guides participants in selecting a method of quitting while providing social support in a group setting led by a trained facilitator.

The School Wellness Program described also includes a lesson on the hazards of smoking. Children learn the dangers of cigarettes, smokeless tobacco, e-cigarettes and secondhand smoke. Smoking cessation and secondhand smoke information is also included in prenatal packets for expectant mothers given at the hospital's free prenatal classes. Mothers who deliver at HSHS St. Anthony's also receive an informational book that contains information about the hazards of smoking.

**Appendix 2:
Secondary Survey Data Report**

**Community Health Profile Report
Effingham and Jasper Counties, Illinois
April 2017**

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Section 1. Demographic and Socioeconomic Characteristics

For the purpose of the Community Health Needs Assessment, St. Anthony's defines its primary service area as the Effingham and Jasper counties. The counties consist primarily of rural communities. Effingham County has a total population of 34,242 residents and Jasper County has a total population of 9,635 residents. Effingham County's population increased 0.3% since 2010, while Jasper County decreased by -0.6%. Jasper County has an aging population, with the median age rising from 42.7 years in 2010 to 42.9 years in 2015. In Effingham County, the median age has decreased from 39.2 years in 2010 to 38.9 years in 2015.

Table 1.1: Total Population Change

Report Area	Total Population 2010	Total Population 2015	Percent Change Since 2010
Effingham County	34,242	34,332	0.3%
Jasper County	9,698	9,635	-0.6%
Total Service Area	43,940	43,967	-0.06%
Illinois	12,745,359	12,873,761	1.0%

U.S. Census Bureau, American Community Survey 2010-2015

Table 1.2: Population Characteristics by Age Groups (2015)

Report Area	Age 0 to 19	Age 20 to 24	Age 25 to 34	Age 35 to 44	Age 45 to 54	Age 55 to 64	Age 65 to 84	Age 85+
Effingham County	26.4%	6.2%	12.3%	11.2%	14.5%	13.1%	13.8%	2.5%
Jasper County	24.2%	5.4%	11.4%	11.2%	15.3%	14.6%	15.2%	2.3%
Total Service Area	25.9%	5.9%	12.1%	11.2%	14.7%	13.5%	14.2%	2.4%
Illinois	26.2%	7.0%	13.8%	13.1%	14.0%	12.4%	11.6%	1.9%

U.S. Census Bureau, American Community Survey 2010-2015

Section 1. Demographic and Socioeconomic Characteristics

Table 1.3: Race/Ethnicity Distribution (2015)

Report Area	One Race	White	Black or African American	American Indian & Alaska Native	Asian	Native Hawaiian & Pacific Islander	Other Race	Two or More Races	Hispanic or Latino
Effingham County	99.3%	97.8%	0.3%	0.1%	0.5%	0.0%	0.6%	0.7%	1.9%
Jasper County	99.2%	97.7%	0.3%	0.1%	0.1%	0.0%	0.9%	0.8%	1.3%
Total Service Area	99.3%	97.7%	0.34%	0.08%	0.46%	0.02%	0.63%	0.69%	1.7%
Percent Change since 2010	0.2%	-0.17%	89.9%	-45.1%	15.5%	0%	6.5%	-10.1%	15.6%

U.S. Census Bureau, American Community Survey 2010-2015

The Counties have a predominately white population, accounting for 97.7% of the service area’s total population. The racial makeup of the remaining 2.3% are 0.34% Black or African American, 0.08% American Indian or Alaskan Native, 0.46% Asian, 0.2% Native Hawaiian & Pacific Islander, 0.63% of other race. People of Hispanic or Latino origin or any race accounted for 1.7% of the population. The service area saw an 89.9% increase in the Black or African American population, a 15.5% increase in the Asian population, and 15.6% increase in the Hispanic or Latino population since 2010.

Table 1.4 Languages Spoken (2015)

Report Area	Speak only English	Speak a language other than English	Speak Spanish
Effingham County	97.0%	3.0%	1.6%
Jasper County	98.0%	2.0%	1.6%
Total Service Area	97.2%	2.8%	1.6%
Percent Change since 2010	-0.7%	27.9%	36.2%

U.S. Census Bureau, American Community Survey 2010-2015

Only 2.8% of the service area speaks a language other than English, with the predominant minority language being Spanish (1.6%). Since 2010, the service area has had a 36.2% increase in Spanish speaking residents, and a 27.9% increased in residents that speak a language other than English.

Section 1. Demographic and Socioeconomic Characteristics

Table 1.5 Educational Attainment (2015)

Report Area	Less than High School	High School Grad or Higher	Bachelor's or Higher
Effingham County	8.8%	91.2%	20.9%
Jasper County	10.4%	89.6%	17.6%
Total Service Area	9.2%	90.9%	20.1%
Illinois	12.1%	87.9%	32.3%
Total Service Area Percent Change since 2010	-16.8%	4.1%	8.6%

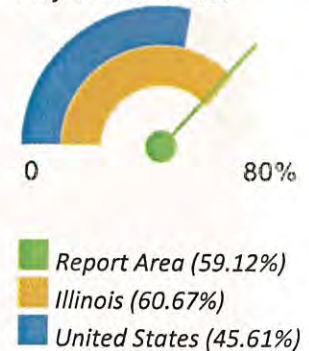
U.S. Census Bureau, American Community Survey 2010-2015

The percentage of Effingham and Jasper County residents age 25+ with a high school degree or higher surpasses State levels. However, the percentage of residents with at least a Bachelor's degree is much lower than the State. Jasper County has a lower percent of residents achieving a Bachelor's degree or higher (17.6%) than Effingham County (20.9%). Since 2010, the percentage of the population with less than a high school degree has decreased, while the percentage of the population with a high school degree or bachelor's degree or higher has increased.

Table 1.6 Student Reading Proficiency

Report Area	Total Students with Valid Test Scores	Percentage of Students Scoring 'Proficient' or Better	Percentage of Students Scoring 'Not Proficient' or Worse
Report Area	477	40.88%	59.12%
Effingham County, IL	374	45.8%	54.2%
Jasper County, IL	103	23.52%	76.48%
Illinois	144,944	39.33%	60.67%
United States	3,393,582	49.67%	45.61%

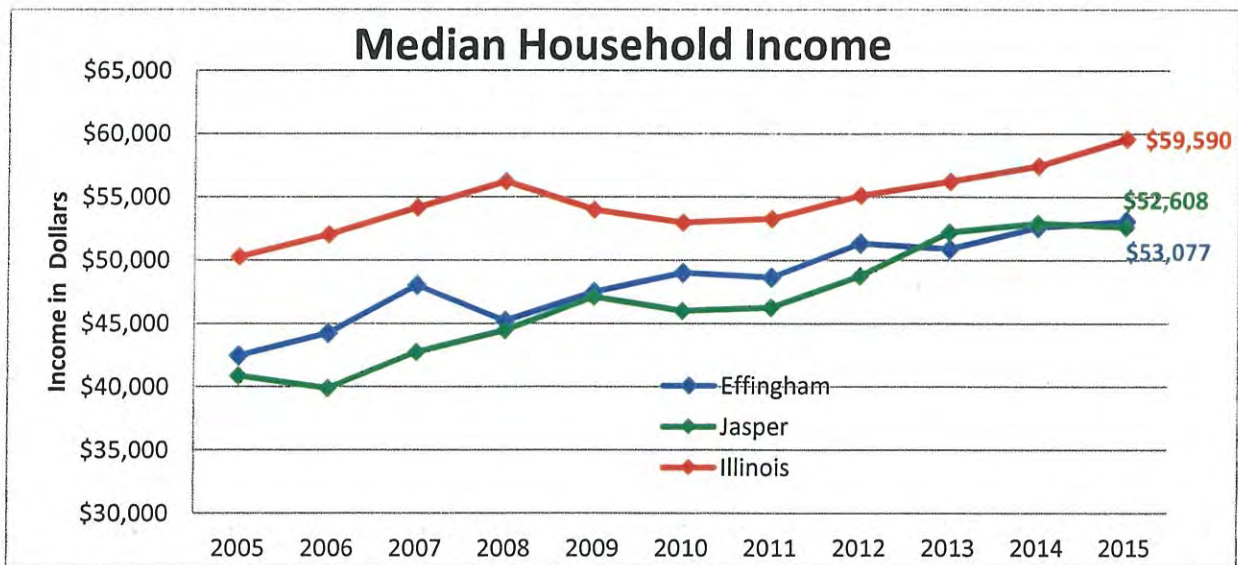
Percentage of Students Scoring 'Not Proficient' or Worse



Data Source: US Department of Education, ED Facts. Accessed via DATA.GOV. 2014-15. Source geography: School District

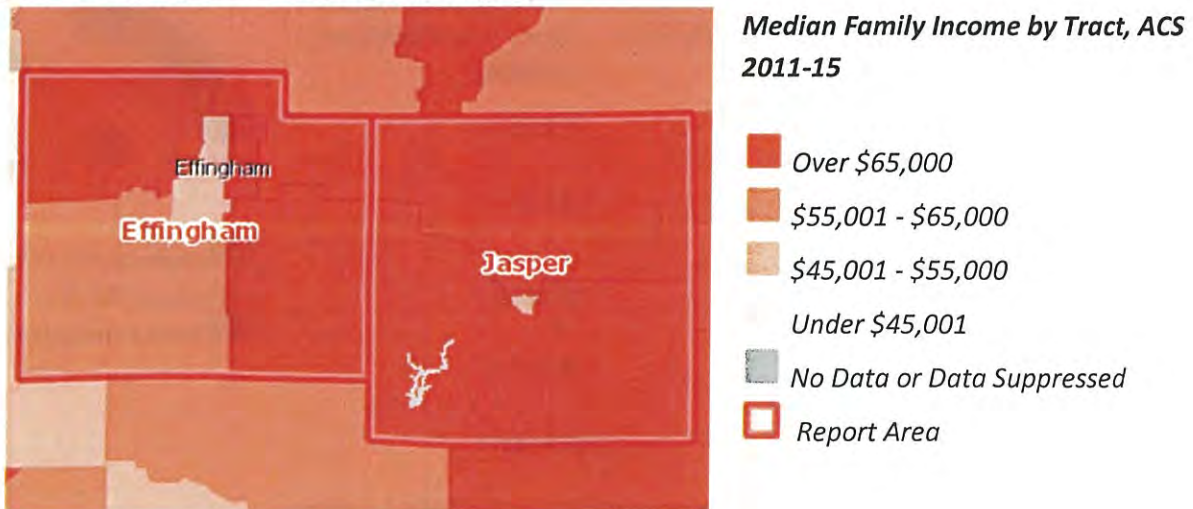
This indicator reports the percentage of children in grade 4 whose reading skills tested below the "proficient" level for the English Language Arts portion of the state-specific standardized test. In Jasper County 76.48% of 4th grade students scored 'not proficient' or worse compared to 54.2% in Effingham County, and the State average of 60.67%. This indicator is relevant because an inability to read English well is linked to poverty, unemployment, and barriers to healthcare access, provider communications, and health literacy/education.

Figure 1.1 Median Household Income



Source: "Small Area Income and Poverty Estimates," US Census Bureau

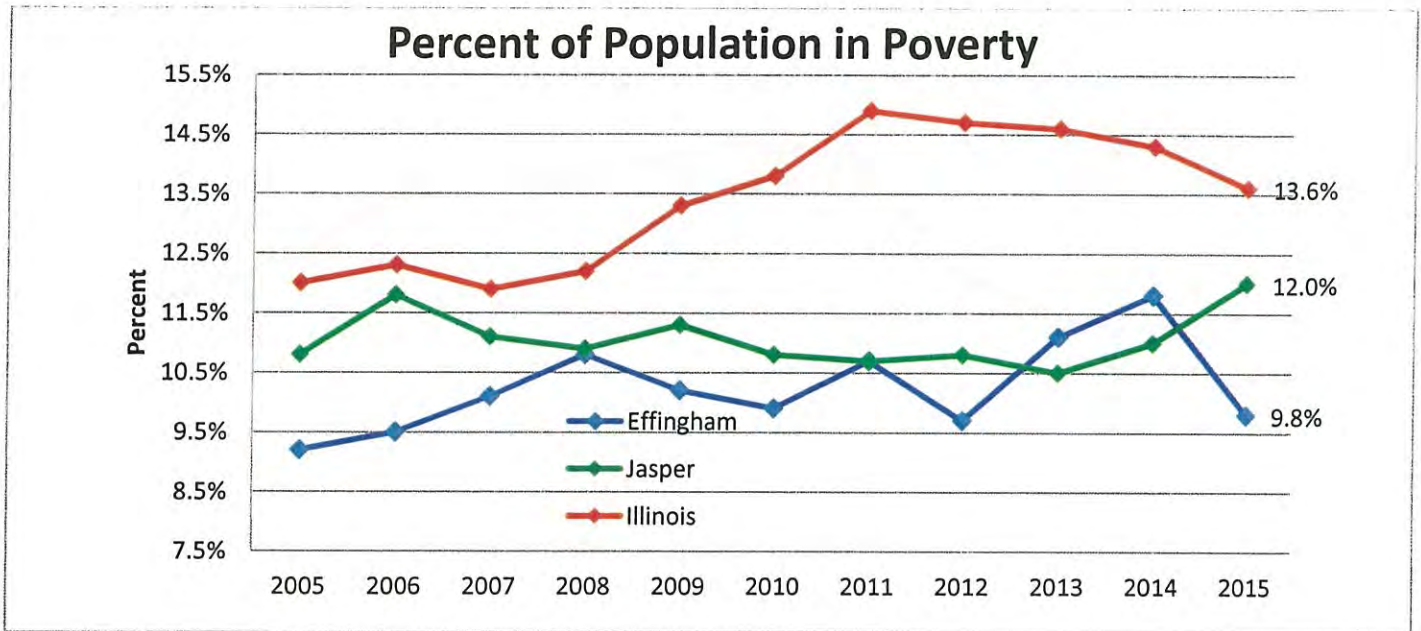
Figure 1.2 Median Household Income Map



U.S. Census Bureau, American Community Survey 2010-2015

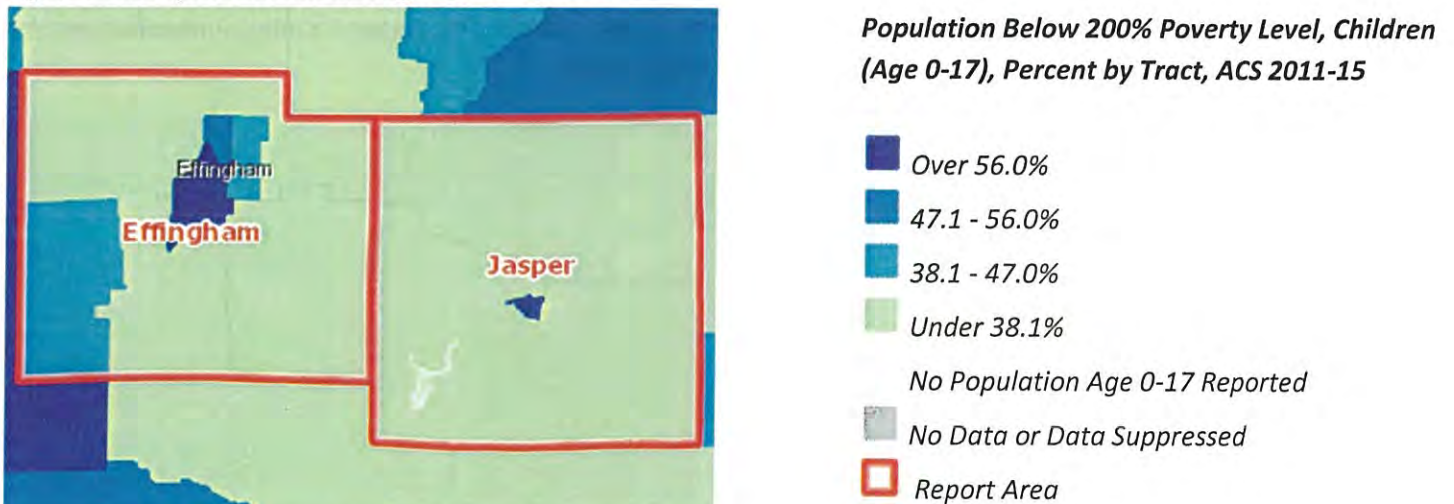
In Effingham County, the median household income was \$53,077 in 2015. In Jasper County, the median household income was \$52,608. Both Counties are rising to approach the State median household income of \$59,590. The sub-county areas with the lowest median household income are the City of Effingham and the City of Newton.

Figure 1.3 Percent of Population in Poverty



Source: "Small Area Income and Poverty Estimates," US Census Bureau

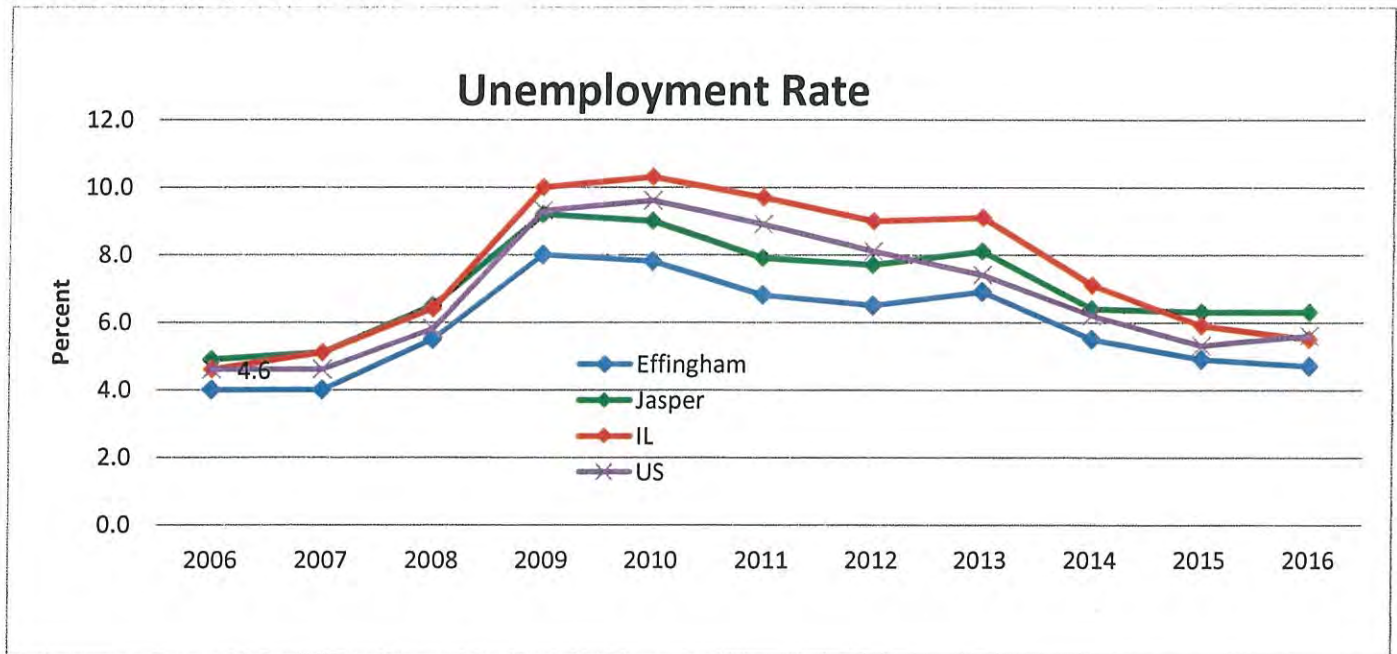
Figure 1.4 Map of Children Living Below 200% FLP



Data Source: US Census Bureau, American Community Survey, 2011-15. Source geography: Tract

Both Effingham and Jasper County’s overall percentage of the population in poverty is lower than the State as a whole. Jasper County’s population in poverty has been rising since 2013, and is approaching the State level. In the report area 38.19% or 3,851 children are living in households with income below 200% of the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status. The southwest section of the City of Effingham and the City of Newton have the highest percent of children living in poverty.

Figure 1.5 Unemployment Rate



Source: "Small Area Income and Poverty Estimates," US Census Bureau

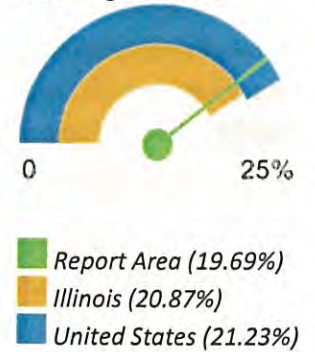
Effingham County and Jasper County unemployment rates have mirrored the State and National trends over the past 10 years. Effingham County's unemployment rate (4.7%) is below the State rate (5.6%). Jasper County's unemployment rate has risen since 2014, and is currently above the State rate (5.6%) at 6.3%.

Section 1. Demographic and Socioeconomic Characteristics

Table 1.7 Population Receiving Medicaid

Report Area	Total Population (For Whom Insurance Status is Determined)	Population with Any Health Insurance	Population Receiving Medicaid	Percent of Insured Population Receiving Medicaid
Report Area	43,499	40,364	7,946	19.69%
Effingham County, IL	33,927	31,555	6,484	20.55%
Jasper County, IL	9,572	8,809	1,462	16.6%
Illinois	12,694,224	11,295,589	2,357,392	20.87%
United States	311,516,332	271,070,101	57,557,806	21.23%

Percent of Insured Population Receiving Medicaid



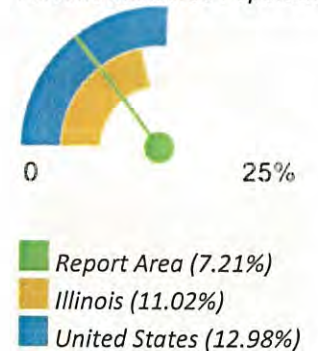
Data Source: US Census Bureau, American Community Survey. 2011-15. Source geography: Tract

This indicator reports the percentage of the population with insurance enrolled in Medicaid (or other means-tested public health insurance). This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs.

Table 1.8 Uninsured Population

Report Area	Total Population (For Whom Insurance Status is Determined)	Total Uninsured Population	Percent Uninsured Population
Report Area	43,499	3,135	7.21%
Effingham County, IL	33,927	2,372	6.99%
Jasper County, IL	9,572	763	7.97%
Illinois	12,694,224	1,398,635	11.02%
United States	311,516,332	40,446,231	12.98%

Percent Uninsured Population



Data Source: US Census Bureau, American Community Survey. 2011-15. Source geography: Tract

This shows the total civilian non-institutionalized population without insurance coverage. This indicator is relevant because lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other health services that contributes to poor health status. The lack of health insurance is considered a key driver of health status.

Identifying Vulnerable Populations: The Institute of Medicine defines vulnerable populations as a group of people with certain characteristics that cause them to be at greater risk of having poor health outcomes than the general populations. These characteristics include, but are not limited to age, culture, disability, education, ethnicity, health insurance, housing status, income, mental health and race. The World Health Organization defines **social determinants of health** as conditions in which people are born, grow, live, work and age. The social determinants of health are mostly responsible for health inequities – the unfair and avoidable difference in health status.

Population with a disability: This indicator reports the percentage of the total civilian non-institutionalized population with a disability. This indicator is relevant because disabled individuals comprise a vulnerable population that requires targeted services and outreach by providers.

Table 1.9 Population with Any Disability

Report Area	Total Population (For Whom Disability Status Is Determined)	Total Population with a Disability	Percent Population with a Disability
Report Area	43,499	5,625	12.93%
Effingham County, IL	33,927	4,097	12.08%
Jasper County, IL	9,572	1,528	15.96%
Illinois	12,694,224	1,362,286	10.73%
United States	311,516,332	38,601,898	12.39%

Data Source: US Census Bureau, American Community Survey. 2011-15. Source geography: Tract

Percent Population with a Disability

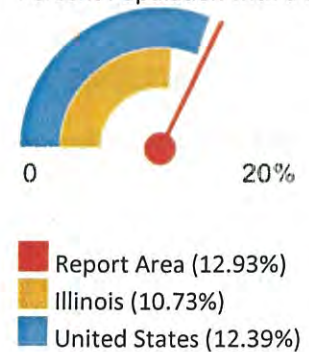
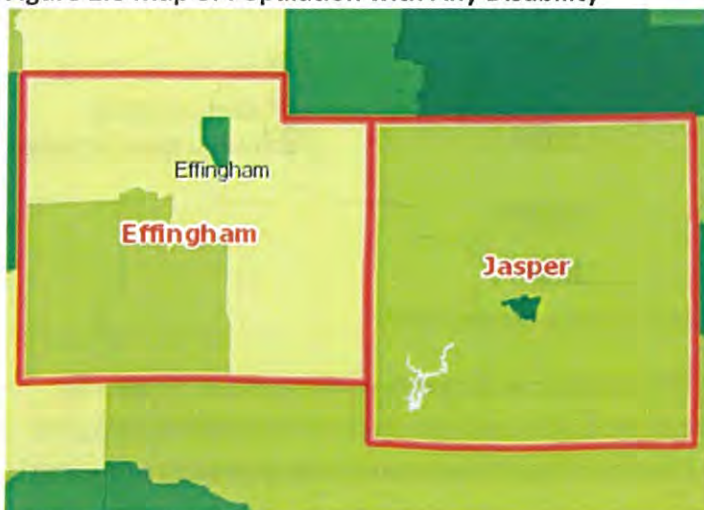
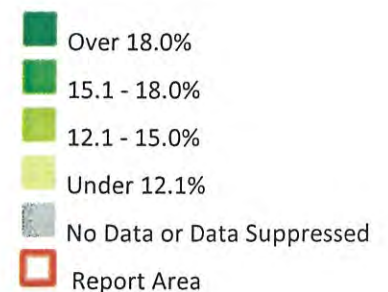


Figure 1.6 Map of Population with Any Disability



Disabled Population, Percent by Tract, ACS 2011-15

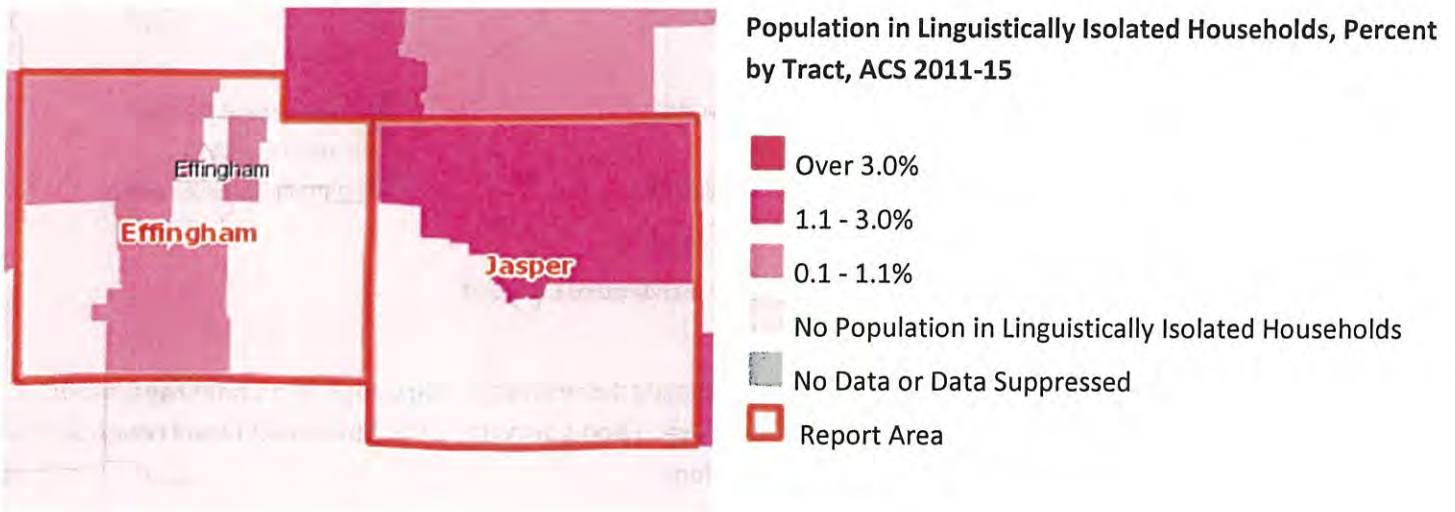


Section 1. Demographic and Socioeconomic Characteristics

Population with Limited English Proficiency: This indicator reports the percentage of the population aged 5 and older living in Limited English speaking households. A “Limited English speaking household” is one in which no member 14 years old and over (1) speaks only English at home or (2) speaks a language other than English at home and speaks English “Very well.” This indicator is significant as it identifies households and populations that may need English-language assistance.

Effingham County has a total of 258 residents and Jasper County has 94 residents who reported understanding English less than “very well.”

Figure 1.7 Population in Limited English Households



Veteran Population: This indicator reports the percentage of the population age 18 and older that served (even for a short time), but is not currently serving, on active duty in the U.S. Army, Navy, Air Force, Marine Corps, or the Coast Guard, or that served in the U.S. Merchant Marine during World War II.

Table 1.10 Veteran Population

Report Area	Total Population Age 18	Total Veterans	Veterans, Percent of Total Population
Report Area	33,555	3,002	8.95%
Effingham County, IL	26,097	2,318	8.88%
Jasper County, IL	7,458	684	9.17%
Illinois	9,832,607	668,933	6.8%
United States	241,816,698	20,108,332	8.32%

Data Source: US Census Bureau, American Community Survey. 2011-15. Source geography: Tract

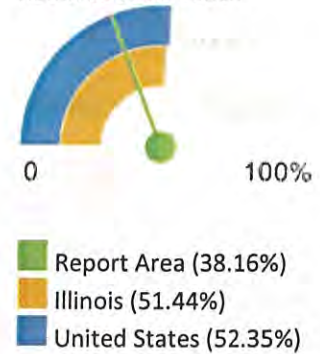
Section 1. Demographic and Socioeconomic Characteristics

Children Eligible for Free/Reduced Price Lunch Within the report area 2,570 public school students or 38.16% are eligible for Free/Reduced Price lunch out of 6,734 total students enrolled. This indicator is relevant because it assesses vulnerable populations which are more likely to have multiple health access, health status, and social support needs.

Table 1.11 Children Eligible for Free/Reduced Lunch

Report Area	Total Students	Number Free/Reduced Price Lunch Eligible	Percent Free/Reduced Price Lunch Eligible
Report Area	6,734	2,570	38.16%
Effingham County, IL	5,297	1,933	36.49%
Jasper County, IL	1,437	637	44.33%
Illinois	2,049,231	1,044,588	51.44%
United States	50,195,195	26,012,902	52.35%

Percent Students Eligible for Free or Reduced Price Lunch



Data Source: National Center for Education Statistics, NCES - Common Core of Data. 2013-14. Source geography: Address

Children with Food Insecurity: This indicator reports the estimated percentage of the population under age 18 that experienced food insecurity at some point during the report year. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food.

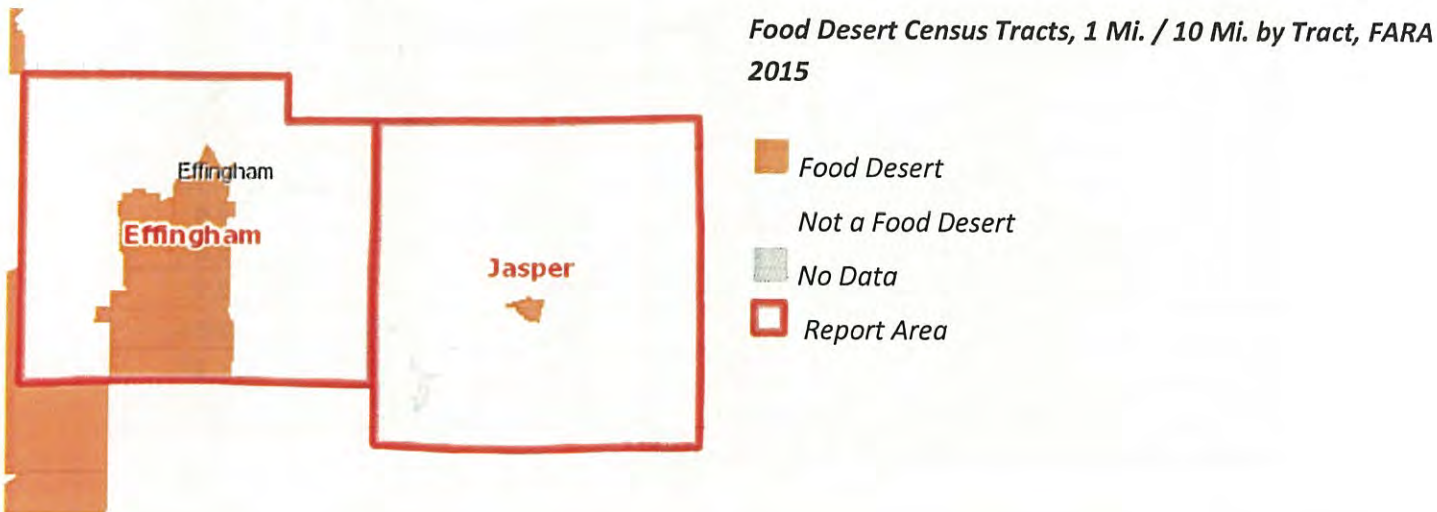
Table 1.12 Child Food Insecurity

Report Area	Population Under Age 18	Food Insecure Children, Total	Child Food Insecurity Rate
Report Area	10,543	2,110	20.01%
Effingham County, IL	8,391	1,680	20.02%
Jasper County, IL	2,152	430	19.98%
Illinois	3,022,155	643,040	21.28%
United States	73,580,326	17,284,530	23.49%

Section 1. Demographic and Socioeconomic Characteristics

Food Desert: A food desert is defined as a low-income census tract (where a substantial number or share of residents has low access to a supermarket or large grocery store. This indicator is relevant because it highlights populations and geographies facing food insecurity. Approximately 17,696 Effingham County and 2,896 Jasper County residents live in a “food desert”.

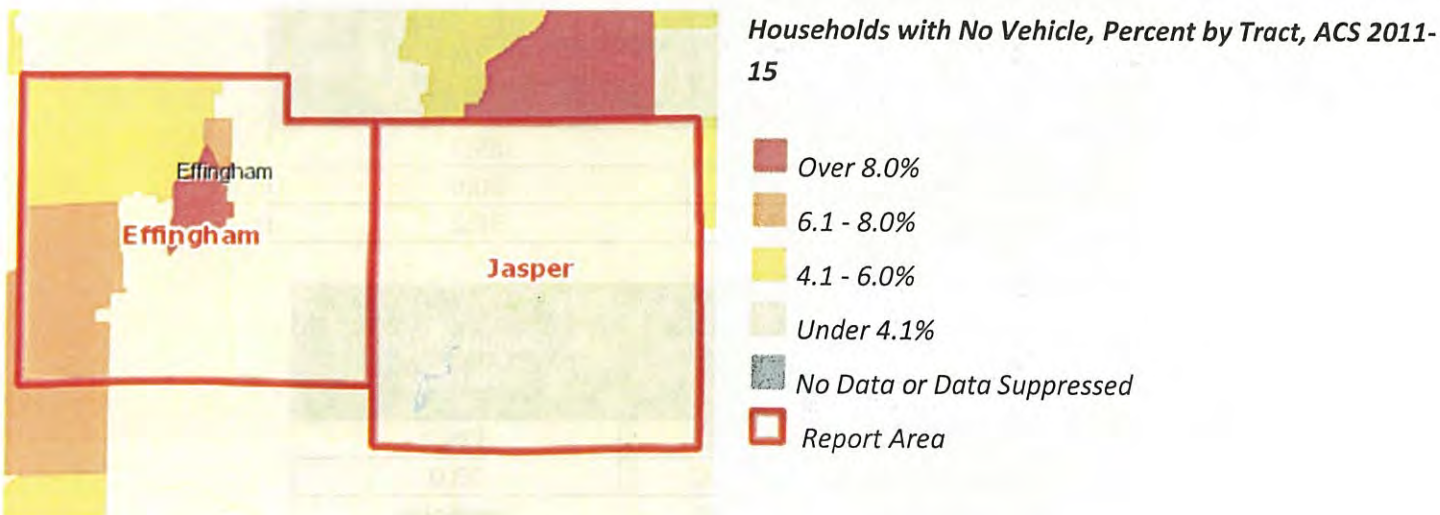
Figure 1.8 Map of Food Deserts



Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2014. Source geography: County

Households with No Motor Vehicle: This indicator reports the number and percentage of households with no motor vehicle based on the latest 5-year American Community Survey estimates. A total of 599 households in Effingham County and 101 households in Jasper County are estimated to have no motor vehicle (4.57% of population).

Figure 1.9 Map of Households with No Motor Vehicle Access



Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2010-14. Source geography: County

Table 2.1 Leading Causes of Death

Top Ten Leading Causes of Death in 2015					
		Effingham	Jasper	Total Service Area	Illinois
Rank	Cause of Death	Percent of Deaths	Percent of Deaths	Percent of Deaths	Percent of Deaths
1	Diseases of the Heart	24.2%	33.7%	26.0%	24.0%
2	Cancer	20.0%	24.5%	20.9%	23.1%
3	Stroke	8.6%	5.1%	8.0%	5.3%
4	Accidents	5.4%	8.2%	6.0%	4.5%
5	Alzheimer's	5.4%	4.1%	5.2%	3.4%
6	Chronic Lower Respiratory	5.2%	5.1%	5.2%	5.2%
7	Influenza and Pneumonia	2.0%	3.1%	2.2%	2.2%
8	Diabetes	2.5%	0.0%	2.0%	2.6%
8	Septicemia	2.0%	1.0%	1.8%	1.7%
10	Kidney Disease	1.0%	0.0%	0.8%	2.4%

Source: Illinois Department of Public Health Death Statistics

In 2015, the leading cause of death in Jasper and Effingham Counties was heart disease with cancer as the second leading cause. Similarly, heart disease and cancer were the top two leading causes of death in the state of Illinois. The percentage of deaths caused by stroke, accidents, and Alzheimer's disease are higher in Jasper and Effingham Counties than in the State of IL. Effingham County is ranked 47 out of 102 counties in Illinois for length of life. Jasper County is ranked 42 out of 102 for length of life. Premature death is considered death before the age 75. The top three leading causes of premature death in Effingham County were cancer, heart disease, and accidents (unintentional injury). In Jasper County, the top three causes of premature death were cancer, heart disease and chronic lower respiratory disease

Table 2.2 Leading Causes of Premature Death (before age 75)

Effingham County – 2012- 2014		
Cause	Deaths	Age-Adjusted Rate per 100,000
Cancer	105	85.3
Diseases of the Heart	76	60.6
Accidents	37	38.2

Jasper County - 2012- 2014		
Cause	Deaths	Age-Adjusted Rate per 100,000
Cancer	46	124.2
Diseases of the Heart	27	73.0
Chronic lower respiratory	11	Unreliable

Source: National Vital Statistics System

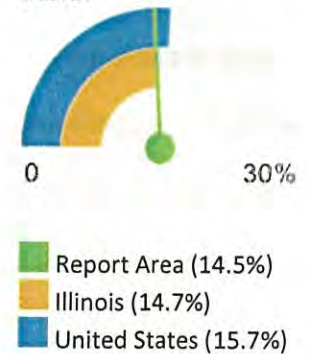
In Effingham County, the female life expectancy is 80.9 year, and the male life expectancy is 76.1 years. In Jasper County, the female life expectancy is 80.8 years, and the male life expectancy is 76.1 years. The U.S. median life expectancy is 75.0 years. (Kulkarni, S., et al. (2011). Population Health Metrics. Available at <http://www.pophealthmetrics.com/content/11/1/8>)

Section 2. General Health and Access to Care Indicators

Table 2.3 Poor Dental Health

Report Area	Total Population (Age 18)	Total Adults with Poor Dental Health	Percent Adults with Poor Dental Health
Report Area	32,963	4,765	14.5%
Effingham County, IL	25,443	4,765	18.7%
Jasper County, IL	7,520	0	0%
Illinois	9,654,603	1,418,280	14.7%
United States	235,375,690	36,842,620	15.7%

Percent Adults with Poor Dental Health



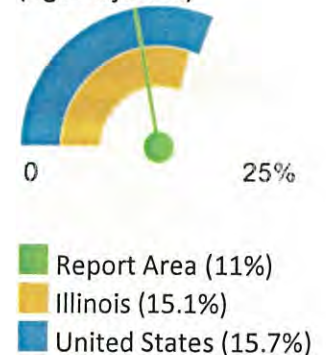
Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2006-10. Source geography: County

This indicator reports the percentage of adults age 18 and older who self-report that six or more of their permanent teeth have been removed due to tooth decay, gum disease, or infection.

Table 2.4 Poor General Health

Report Area	Total Population Age 18	Estimated Population with Poor or Fair Health	Crude Percentage	Age-Adjusted Percentage
Report Area	33,211	3,286	12.8%	11%
Effingham County, IL	25,670	3,286	12.8%	11%
Jasper County, IL	7,541	no data	suppressed	suppressed
Illinois	9,654,603	1,486,809	15.4%	15.1%
United States	232,556,016	37,766,703	16.2%	15.7%

Percent Adults with Poor or Fair Health (Age-Adjusted)



Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health Human Services, Health Indicators Warehouse. 2006-12. Source geography: County

Within the report area 12.8% of adults age 18 and older self-report having poor or fair health in response to the question "Would you say that in general your health is excellent, very good, good, fair, or poor?"

Section 2. General Health and Access to Care Indicators

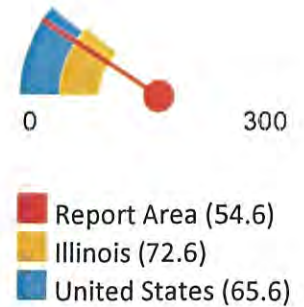
Access to Health Care:

The entirety of Jasper County is designated as a "Health Professional Shortage Area" (HPSA), defined as having a shortage of primary medical care, dental or mental health professionals.

Table 2.5. Access to Dentists

Report Area	Total Population, 2015	Dentists, 2015	Dentists, Rate per 100,000 Pop.
Report Area	43,978	24	54.6
Effingham County, IL	34,371	23	66.92
Jasper County, IL	9,607	1	10.41
Illinois	12,859,995	9,336	72.6
United States	321,418,820	210,832	65.6

Dentists, Rate per 100,000 Pop.



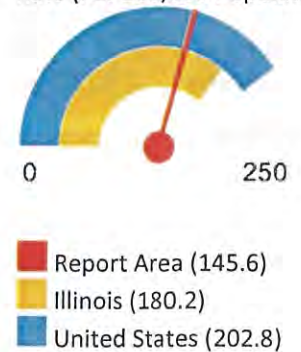
Data Source: US Department of Health Human Services, Health Resources and Services Administration, Area Health Resource File. 2015. Source geography: County

This indicator reports the number of dentists per 100,000 population. This indicator includes all dentists - qualified as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.), who are licensed by the state to practice dentistry and who are practicing within the scope of that license.

Table 2.6. Access to Mental Health Professionals

Report Area	Estimated Population	Number of Mental Health Providers	Ratio of Mental Health Providers to Population (1 Provider per x Persons)	Mental Health Care Provider Rate (Per 100,000 Population)
Report Area	43,941	64	686.6	145.6
Effingham County, IL	34,318	36	953.3	104.9
Jasper County, IL	9,623	28	343.7	290.9
Illinois	12,806,917	23,090	554.7	180.2
United States	317,105,555	643,219	493	202.8

Mental Health Care Provider Rate (Per 100,000 Population)



Data Source: University of Wisconsin Population Health Institute, County Health Rankings. 2016. Source geography: County

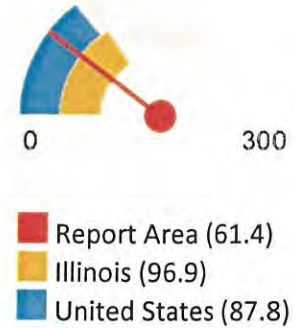
This indicator reports the rate of the county population to the number of mental health providers including psychiatrists, psychologists, clinical social workers, and counselors that specialize in mental health care.

Section 2. General Health and Access to Care Indicators

Table 2.7 Access to Primary Care

Report Area	Total Population, 2014	Primary Care Physicians, 2014	Primary Care Physicians, Rate per 100,000 Pop.
Report Area	43,943	27	61.4
Effingham County, IL	34,320	26	75.76
Jasper County, IL	9,623	1	10.39
Illinois	12,880,580	12,477	96.9
United States	318,857,056	279,871	87.8

Primary Care Physicians, Rate per 100,000 Pop.



Data Source: US Department of Health Human Services, Health Resources and Services Administration, Area Health Resource File. 2014. Source geography: County

This indicator reports the number of primary care physicians per 100,000 population. Doctors classified as "primary care physicians" by the AMA include: General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs and General Pediatrics MDs. Physicians age 75 and over and physicians practicing sub-specialties within the listed specialties are excluded.

Figure 2.1 Access to Primary Care Trend 2004 - 2014

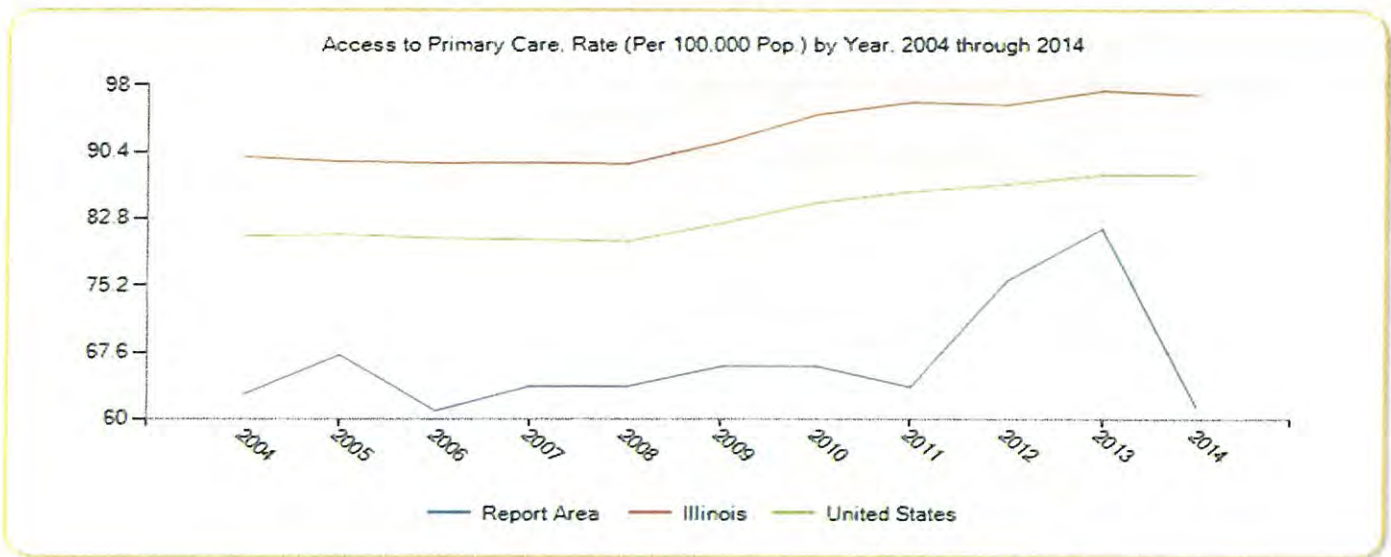


Table 2.8 Access to Primary Care Trend 2004-2014 (rate per 100,000 population by year)

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Report Area	62.79	67.26	60.94	63.73	63.68	65.98	66	63.64	75.68	81.62	61.44
Effingham County, IL	75.2	80.97	69.71	73.05	75.86	78.43	81.77	75.85	75.68	81.62	75.76
Jasper County, IL	19.96	19.96	30.36	30.91	20.62	20.99	10.31	20.58	0	0	10.39

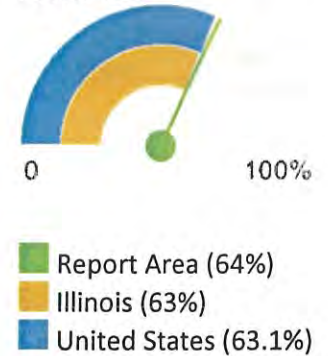
Section 2. General Health and Access to Care Indicators

Health Care Utilization

Table 2.9 Cancer Screening - Mammogram

Report Area	Total Medicare Enrollees	Female Medicare Enrollees Age 67-69	Female Medicare Enrollees with Mammogram in Past 2 Years	Percent Female Medicare Enrollees with Mammogram in Past 2 Year
Report Area	6,222	530	339	64%
Effingham County, IL	4,863	423	274	64.8%
Jasper County, IL	1,359	107	65	60.7%
Illinois	316,321	26,965	16,987	63%
United States	26,753,396	2,395,946	1,510,847	63.1%

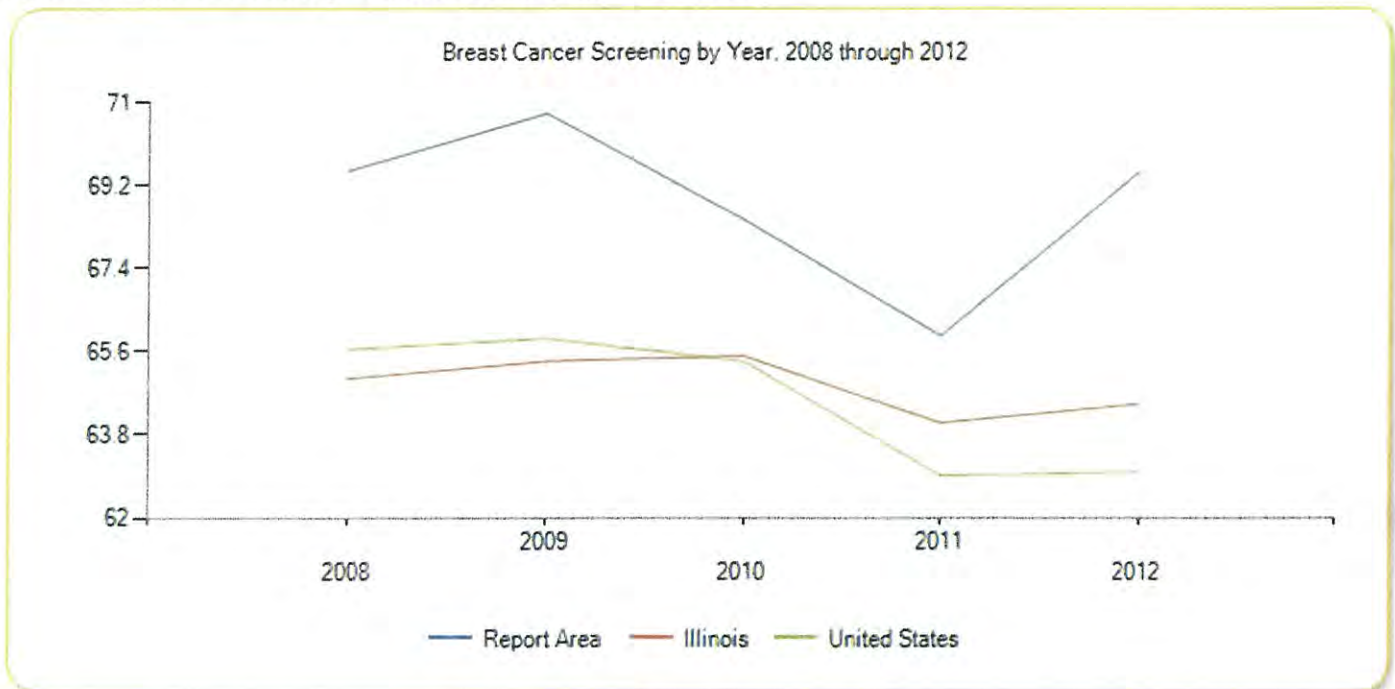
Percent Female Medicare Enrollees with Mammogram in Past 2 Year



Data Source: Dartmouth College Institute for Health Policy Clinical Practice, Dartmouth Atlas of Health Care. 2014. Source geography: County

This indicator reports the percentage of female Medicare enrollees, age 67-69, who have received one or more mammograms in the past two years. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems.

Figure 2.2 Cancer Screening – Mammogram Trend 2008 - 2012



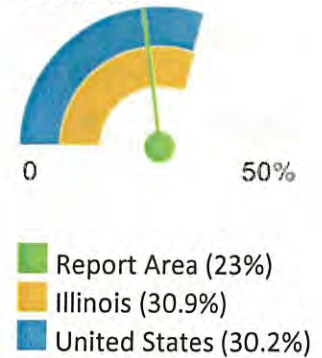
Data Source: Dartmouth College Institute for Health Policy Clinical Practice, Dartmouth Atlas of Health Care. 2014. Source geography: County

Section 2. General Health and Access to Care Indicators

Table 2.10 Dental Care Utilization

Report Area	Total Population (Age 18)	Total Adults Without Recent Dental Exam	Percent Adults with No Dental Exam
Report Area	32,963	7,589	23%
Effingham County, IL	25,443	7,589	29.8%
Jasper County, IL	7,520	0	0%
Illinois	9,654,603	2,981,670	30.9%
United States	235,375,690	70,965,788	30.2%

Percent Adults Without Recent Dental Exam



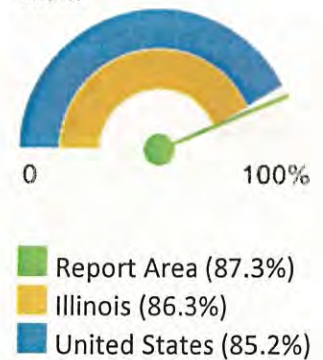
Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2006-10. Source geography: County

This indicator reports the percentage of adults aged 18 and older who self-report that they have not visited a dentist, dental hygienist or dental clinic within the past year. The latest available data is from 2010.

Table 2.11 Diabetes Management –Hemoglobin A1c Test

Report Area	Total Medicare Enrollees	Medicare Enrollees with Diabetes	Medicare Enrollees with Diabetes with Annual Exam	Percent Medicare Enrollees with Diabetes with Annual Exam
Report Area	6,222	766	668	87.3%
Effingham County, IL	4,863	580	501	86.6%
Jasper County, IL	1,359	186	166	89.8%
Illinois	316,321	36,855	31,820	86.3%
United States	26,753,396	3,314,834	2,822,996	85.2%

Percent Medicare Enrollees with Diabetes with Annual Exam



Data Source: Dartmouth College Institute for Health Policy Clinical Practice, Dartmouth Atlas of Health Care. 2014. Source geography: County

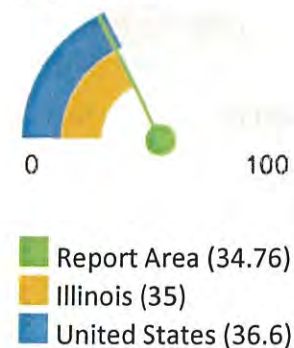
This indicator reports the percentage of diabetic Medicare patients who have had a hemoglobin A1c (hA1c) test, a blood test which measures blood sugar levels, administered by a health care professional in the past year. In the report area, 668 Medicare enrollees with diabetes have had an annual exam out of 766 Medicare enrollees in the report area with diabetes, or 87.3%.

Section 3. Maternal and Child Health Indicators

Table 3.1 Teen Birth Rate

Report Area	Female Population Age 15 - 19	Births to Mothers Age 15 - 19	Teen Birth Rate (Per 1,000 Population)
Report Area	1,467	51	34.76
Effingham County, IL	1,150	42	36.5
Jasper County, IL	317	9	29.6
Illinois	448,356	15,692	35
United States	10,736,677	392,962	36.6

Teen Birth Rate (Per 1,000 Population)



Data Source: US Department of Health Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2006-12. Source geography: County

This indicator reports the rate of total births to women age of 15 - 19 per 1,000 female population age 15 - 19. This indicator is relevant because in many cases, teen parents have unique social, economic, and health support services. Additionally, high rates of teen pregnancy may indicate the prevalence of unsafe sex practices. Effingham County's teen birth rate (42 per 1,000) is higher than Illinois (35 per 1,000). Jasper County's is lower at 29.6 per 1,000. The distribution of mother's age is younger in both Effingham and Jasper Counties than average.

Table 3.2 Mother's Age 2014

Resident County	Total Births	Mother's Age Group (Years)					
		< 20	20 - 24	25 - 29	30 - 34	35 - 39	40 +
ILLINOIS	158,522	6%	20%	27%	30%	14%	3%
Effingham	434	8%	25%	35%	24%	8%	1%
Jasper	110	3%	24%	44%	22%	8%	0%

Source: Birth Demographics by Resident County 2014, IDPH

Table 3.3 Birth Characteristics

Resident County	Total Births	Cesarean Births		Mother Unmarried		Not H.S. Graduate Age 20+	
		Births	Percent	Births	Percent	Births	Percent
ILLINOIS	158,522	49,473	31.2 %	63,521	40.1 %	15,778	10.7 %
Effingham	434	129	29.7 %	149	34.3 %	25	6.3 %
Jasper	110	37	33.6 %	25	22.7 %	7	**

Source: Birth Characteristics by Resident County 2014, IDPH

**Rate suppressed because low number does not meet standards of reliability or precision

Section 3. Maternal and Child Health Indicators

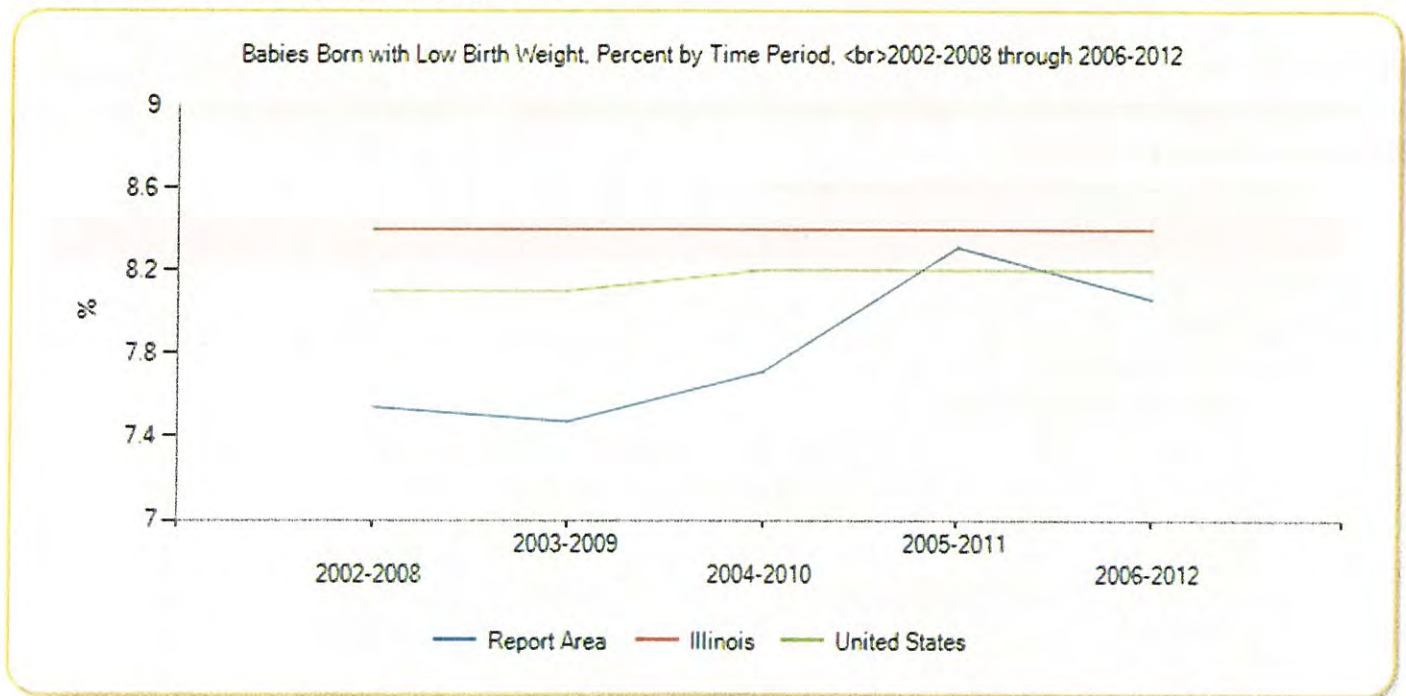
Table 3.4 Birth by Characteristics 2014

Resident County	Total Births	Low Birth Weight (<2,500 grams)		Very Low Birth Weight (<1,500 grams)		Preterm (<37 weeks)	
		Births	Percent	Births	Percent	Births	Percent
ILLINOIS	158,522	12,966	8.20%	2,448	1.50%	16,003	10.10%
Effingham	434	28	6.50%	8	**	32	7.40%
Jasper	110	8	**	1	**	9	**

Source: Birth Characteristics by Resident County 2014, IDPH

**Rate suppressed because low number does not meet standards of reliability or precision

Figure 3.1 Low Birth Weight Trend 2002- 2012



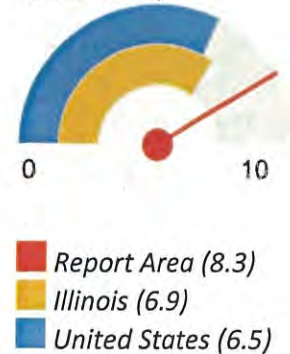
In 2014, Effingham and Jasper County’s percentage of low birth weights were not higher than Illinois or the United States. The trend from 2002- 2012 shows an increase in babies born with low birth weights, nearing the state and national rates.

Section 3. Maternal and Child Health Indicators

Table 3.5 Infant Mortality (2006-2010)

Report Area	Total Births	Total Infant Deaths	Infant Mortality Rate (Per 1,000 Births)
Report Area	2,895	24	8.3
Effingham County, IL	2,315	19	8.4
Jasper County, IL	580	5	8.7
Illinois	879,035	6,065	6.9
United States	20,913,535	136,369	6.5

Infant Mortality Rate (Per 1,000 Births)



HP 2020 Target <= 6.0

Data Source: US Department of Health Human Services, Health Resources and Services Administration, Area Health Resource File. 2006-10. Source geography: County

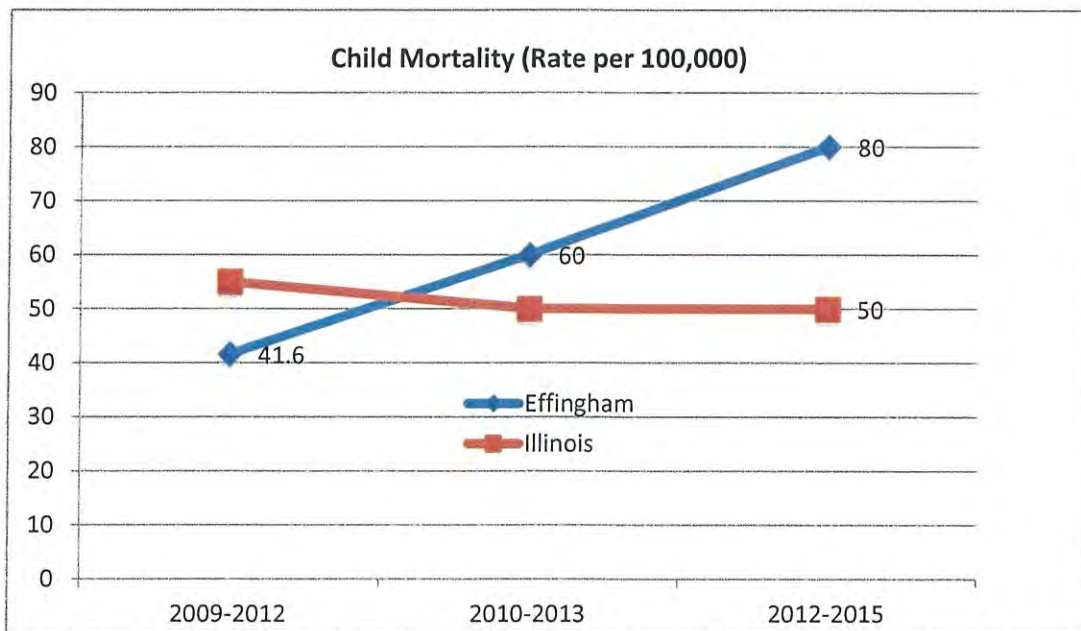
This indicator reports the rate of deaths to infants less than one year of age per 1,000 births. Effingham and Jasper Counties have higher infant mortality rates than Illinois and the United States. The rates are above the Healthy People 2020 Target of 6.0 per 1,000 births.

Table 3.6 Number of Infant Deaths (2010-2014)

Infant Deaths	2010	2011	2012	2013	2014
Effingham County	3	1	2	6	4
Jasper County	0	2	2	1	0

Source: IDPH Vital Statistics

Figure 3.2 Child Mortality



This indicator reports the number of deaths among children under age 18 per 100,000 population. Illinois’s child mortality rate has decreased since 2009, while Effingham County’s child mortality rate has increased and is now above the State level. Jasper County’s population size is too small to calculate this indicator.

Table 3.7 Child Abuse and Neglect Statistics

Child Abuse and Neglect 2014-2015 (Rate per 1,000)			
	Effingham County	Jasper County	Illinois
Alleged Victims of Sexual Abuse	1.3	1.9	2.2
Alleged Victims of Abuse and Neglect	28.2	32.7	29.0
Indicated Victims of Abuse and Neglect	6.0	6.5	7.6

Source: IL DCFS

Effingham County's rate of child abuse and neglect are lower than the State rate. Jasper County's rate of alleged victims of abuse and neglect is higher than the Illinois rate.

Section 4. Chronic Disease Indicators

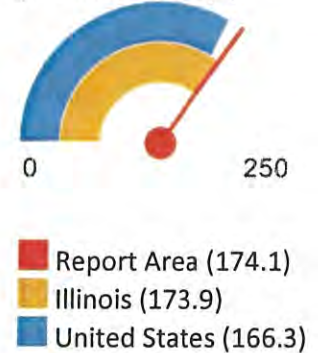
Health Outcomes:

The service area’s cancer mortality rate is slightly higher than the Illinois and National Rate, all of which are higher than the Healthy People 2020 Target (160.6). Additionally, the service area’s cancer incident rate is slightly higher than the National rate colon and rectum cancer, and prostate cancer.

Table 4.1 Cancer Mortality Rate

Report Area	Total Population	Average Annual Deaths, 2010-2014	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Report Area	43,950	99	225.7	174.1
Effingham County, IL	34,301	77	223.32	175.5
Jasper County, IL	9,649	23	234.22	169.1
Illinois	12,867,528	24,326	189.05	173.9
United States	313,836,267	581,919	185.42	166.3
<u>HP 2020 Target</u>				<= 160.6

Cancer Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)

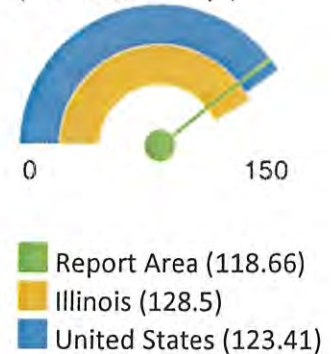


Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2010-14. Source geography: County

Table 4.2 Breast Cancer Incidence Rate

Report Area	Estimated Total Population (Female)	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Pop.)
Report Area	2,696	32	118.66
Effingham County, IL	2,093	25	119.4
Jasper County, IL	602	7	116.1
Illinois	741,089	9,523	128.5
United States	18,056,679	222,845	123.41

Annual Breast Cancer Incidence Rate (Per 100,000 Pop.)



Data Source: State Cancer Profiles. 2009-13. Source geography: County

Section 4. Chronic Disease Indicators

Table 4.3 Colon and Rectum Cancer Incidence Rate

Report Area	Estimated Total Population	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Pop.)	Annual Colon and Rectum Cancer Incidence Rate (Per 100,000 Pop.)
Report Area	5,614	32	57	
Effingham County, IL	4,232	24	56.7	
Jasper County, IL	1,381	8	57.9	
Illinois	1,382,781	6,264	45.3	
United States	33,989,067	137,973	40.59	
HP 2020 Target			<= 38.7	

Data Source: State Cancer Profiles. 2009-13. Source geography: County

Table 4.4 Prostate Cancer Incidence Rate

Report Area	Estimated Total Population (Male)	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Pop.)	Annual Prostate Cancer Incidence Rate (Per 100,000 Pop.)
Report Area	2,656	43	161.86	
Effingham County, IL	2,005	32	159.6	
Jasper County, IL	651	11	168.8	
Illinois	650,000	8,372	128.8	
United States	16,301,685	201,179	123.41	

Data Source: State Cancer Profiles. 2009-13. Source geography: County

Section 4. Chronic Disease Indicators

Table 4.5 Lung Cancer Incidence Rate

Report Area	Estimated Total Population	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Pop.)	Annual Lung Cancer Incidence Rate (Per 100,000 Pop.)
Report Area	5,633	38	67.45	<p>Report Area (67.45) Illinois (67.9) United States (62.62)</p>
Effingham County, IL	4,296	29	67.5	
Jasper County, IL	1,337	9	67.3	
Illinois	1,370,544	9,306	67.9	
United States	33,999,704	212,905	62.62	

Data Source: State Cancer Profiles. 2009-13. Source geography: County

Table 4.6 Lung Disease Mortality Rate

Report Area	Total Population	Average Annual Deaths, 2007-2011	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)	Lung Disease Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)
Report Area	43,950	27	62.3	46.8	<p>Report Area (46.8) Illinois (39.2) United States (41.7)</p>
Effingham County, IL	34,301	20	58.89	45.7	
Jasper County, IL	9,649	7	74.62	50.6	
Illinois	12,867,528	5,419	42.12	39.2	
United States	313,836,267	144,125	45.92	41.7	

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2010-14. Source geography: County

This indicator reports the rate of death due to chronic lower respiratory disease per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Lung disease mortality is higher in Effingham County and in Jasper County than the Illinois and United States average.

Section 4. Chronic Disease Indicators

Table 4.7 Adult Asthma Prevalence

Report Area	Survey Population (Adults Age 18)	Total Adults with Asthma	Percent Adults with Asthma	Percent Adults with Asthma
Report Area	31,370	5,144	16.4%	
Effingham County, IL	31,370	5,144	16.4%	
Jasper County, IL	no data	no data	no data	
Illinois	9,701,927	1,265,744	13%	
United States	237,197,465	31,697,608	13.4%	

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12. Source geography: County

This indicator reports the percentage of adults aged 18 and older who self-report that they have ever been told by a doctor, nurse, or other health professional that they had asthma. Effingham County's adult asthma rate is higher than the Illinois and United States rate.

Table 4.8 Depression Prevalence – Medicare population


Report Area	Total Medicare Beneficiaries	Beneficiaries with Depression	Percent with Depression	Percentage of Medicare Beneficiaries with Depression
Report Area	8,239	1,371	16.6%	
Effingham County, IL	6,576	1,106	16.8%	
Jasper County, IL	1,663	265	15.9%	
Illinois	1,476,750	219,269	14.8%	
United States	34,096,898	5,537,063	16.2%	

Data Source: Centers for Medicare and Medicaid Services. 2014. Source geography: County

This indicator reports the percentage of the Medicare fee-for-service population with depression. In both Effingham County and Jasper County, the prevalence is higher than in Illinois.

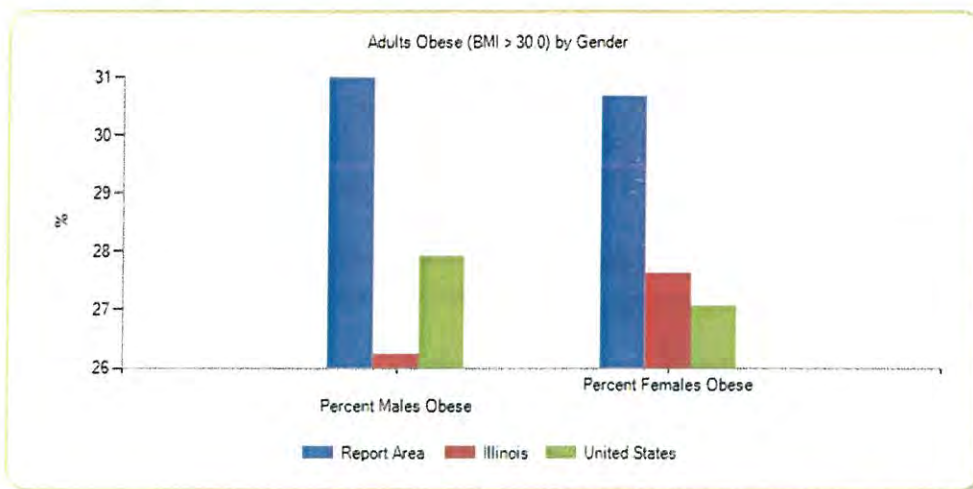
Section 4. Chronic Disease Indicators

Table 4.9 Adult Obesity Prevalence

Report Area	Total Population Age 20	Adults with BMI > 30.0 (Obese)	Percent Adults with BMI > 30.0 (Obese)	Percent Adults with BMI > 30.0 (Obese)
Report Area	32,492	10,217	30.8%	 <p>0 50%</p> <ul style="list-style-type: none"> Report Area (30.8%) Illinois (27%) United States (27.5%)
Effingham County, IL	25,280	8,039	31.2%	
Jasper County, IL	7,212	2,178	29.3%	
Illinois	9,511,847	2,600,939	27%	
United States	234,188,203	64,884,915	27.5%	

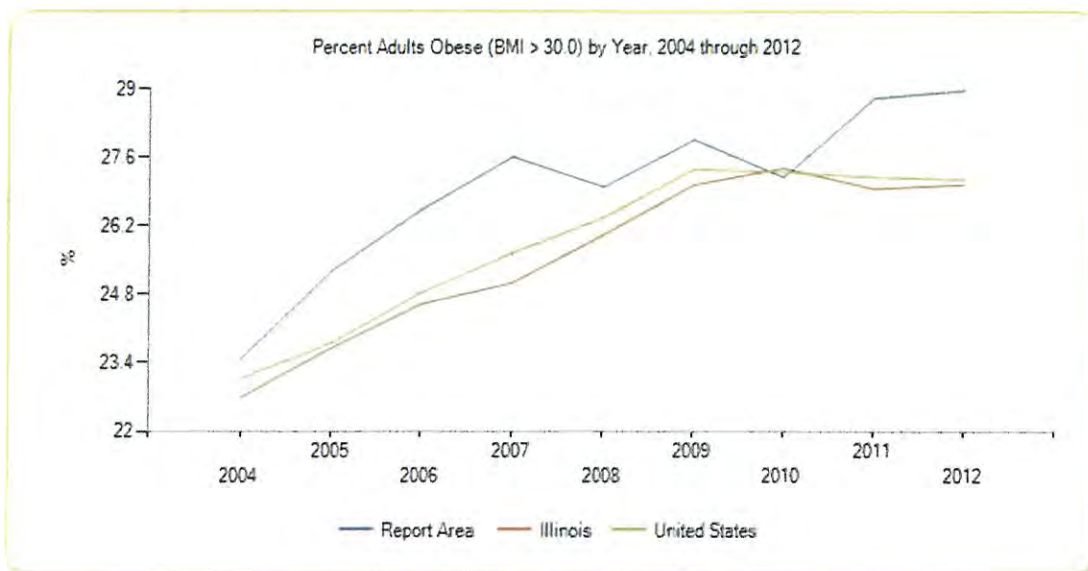
Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2013. Source geography: County

Figure 4.1 Adult Obesity by Gender



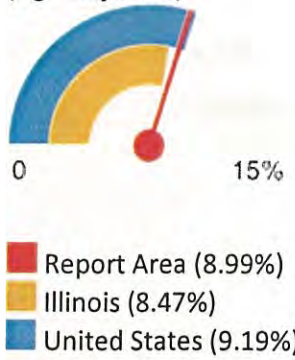
Effingham and Jasper County have higher adult obesity rates than Illinois or the United States. This measure reports adults aged 20 and older who self-report that their BMI is greater than 30. More males in the report area are obese. The trend shows that Effingham and Jasper County's obesity rates are continuing to rise as Illinois and the United States have started to decline since 2010.

Figure 4.2 Adult Obesity Trend



Section 4. Chronic Disease Indicators

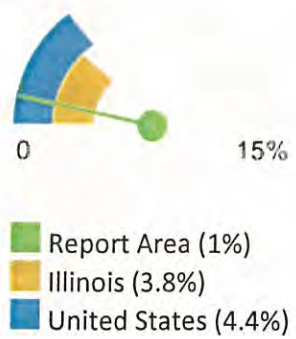
Table 4.10 Adult Diabetes Prevalence

Report Area	Total Population Age 20	Population with Diagnosed Diabetes	Population with Diagnosed Diabetes, Crude Rate	Population with Diagnosed Diabetes, Age-Adjusted Rate	Percent Adults with Diagnosed Diabetes (Age-Adjusted)
Report Area	32,628	3,455	10.59	8.99%	 <p>Report Area (8.99%) Illinois (8.47%) United States (9.19%)</p>
Effingham County, IL	25,383	2,716	10.7	9.2%	
Jasper County, IL	7,245	739	10.2	8.3%	
Illinois	9,507,158	864,658	9.09	8.47%	
United States	236,919,508	23,685,417	10	9.19%	

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2013. Source geography: County

This indicator reports the percentage of adults aged 20 and older who have ever been told by a doctor that they have diabetes. Diabetes prevalence is slightly higher in the report area than the Illinois average.

Table 4.11 Heart Disease Prevalence

Report Area	Survey Population (Adults Age 18)	Total Adults with Heart Disease	Percent Adults with Heart Disease	Percent Adults with Heart Disease
Report Area	31,485	315	1%	 <p>Report Area (1%) Illinois (3.8%) United States (4.4%)</p>
Effingham County, IL	31,485	315	1%	
Jasper County, IL	no data	no data	no data	
Illinois	9,681,141	369,926	3.8%	
United States	236,406,904	10,407,185	4.4%	

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12. Source geography: County

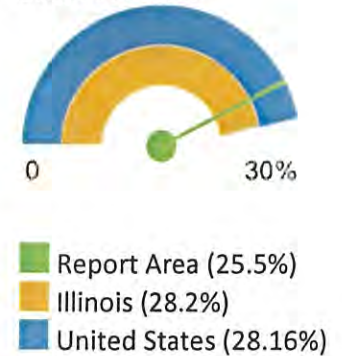
In Effingham Count, 315, or 1% of adults aged 18 and older have ever been told by a doctor that they have coronary heart disease or angina. The population is too low in Jasper County to calculate.

Section 4. Chronic Disease Indicators

4.12 High Blood Pressure Prevalence

Report Area	Total Population (Age 18)	Total Adults with High Blood Pressure	Percent Adults with High Blood Pressure
Report Area	33,211	6,546	25.5%
Effingham County, IL	25,670	6,546	25.5%
Jasper County, IL	7,541	no data	suppressed
Illinois	9,654,603	2,722,598	28.2%
United States	232,556,016	65,476,522	28.16%

Percent Adults with High Blood Pressure



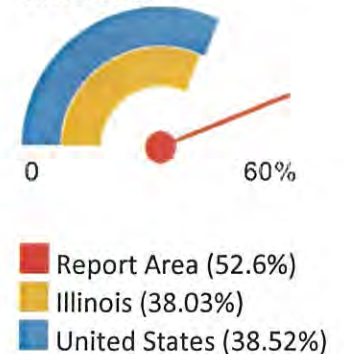
Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2006-12. Source geography: County

In Effingham County, between the years 2006 and 2012, 6,546, or 25.5% of adults aged 18 and older have ever been told by a doctor that they have high blood pressure or hypertension.

4.13 High Cholesterol Prevalence

Report Area	Survey Population (Adults Age 18)	Total Adults with High Cholesterol	Percent Adults with High Cholesterol
Report Area	28,770	15,132	52.6%
Effingham County, IL	28,770	15,132	52.60%
Jasper County, IL	no data	no data	no data
Illinois	7,348,647	2,794,348	38.03%
United States	180,861,326	69,662,357	38.52%

Percent Adults with High Cholesterol



Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12. Source geography: County

This indicator reports the percentage of adults aged 18 and older who self-report that they have ever been told by a doctor, nurse, or other health professional that they had high blood cholesterol. More than 50% of the population of Effingham County had high cholesterol, compared to 38% in Illinois and the United States.

Section 4. Chronic Disease Indicators

4.14 Heart Disease Mortality

Report Area	Total Population	Average Annual Deaths, 2010-2014	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)	Coronary Heart Disease Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)
Report Area	43,950	57	129.2	92.2	<p>0 200</p> <ul style="list-style-type: none"> Report Area (92.2) Illinois (102.3) United States (105.7)
Effingham County, IL	34,301	39	114.28	85.4	
Jasper County, IL	9,649	18	182.4	116.2	
Illinois	12,867,528	14,592	113.4	102.3	
United States	313,836,267	372,125	118.57	105.7	
				HP 2020 Target	<= 103.4

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2010-14. Source geography: County

Within the report area the rate of death due to coronary heart disease (ICD10 Codes I20-I25) per 100,000 population is 92.2. The rate is less than the Healthy People 2020 target of less than or equal to 103.4. However, in Jasper County, the rate is higher than the Healthy People 2020 target.

4.15 Stroke Mortality

Report Area	Total Population	Average Annual Deaths, 2010-2014	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)	Stroke Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)
Report Area	43,950	27	62.3	46.2	<p>0 100</p> <ul style="list-style-type: none"> Report Area (46.2) Illinois (37.9) United States (37.3)
Effingham County, IL	34,301	22	64.14	49.4	
Jasper County, IL	9,649	5	55.96	34.6	
Illinois	12,867,528	5,368	41.72	37.9	
United States	313,836,267	129,754	41.34	37.3	
				HP 2020 Target	<= 33.8

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2010-14. Source geography: County

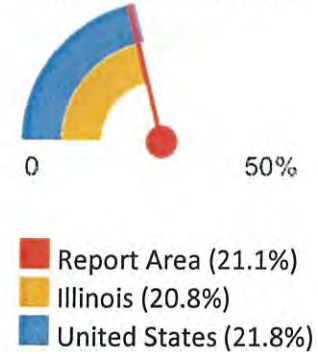
Within the report area, there were an estimated 46.2 deaths due to cerebrovascular disease (stroke) per 100,000 population between 2010-2014. This is greater than the Healthy People 2020 target of less than or equal to 33.8.

Health Behaviors:

Table 4.16 Physical Inactivity

Report Area	Total Population Age 20	Population with no Leisure Time Physical Activity	Percent Population with no Leisure Time Physical Activity
Report Area	32,543	7,300	21.1%
Effingham County, IL	25,333	5,548	20.7%
Jasper County, IL	7,210	1,752	22.6%
Illinois	9,516,375	2,020,399	20.8%
United States	234,207,619	52,147,893	21.8%

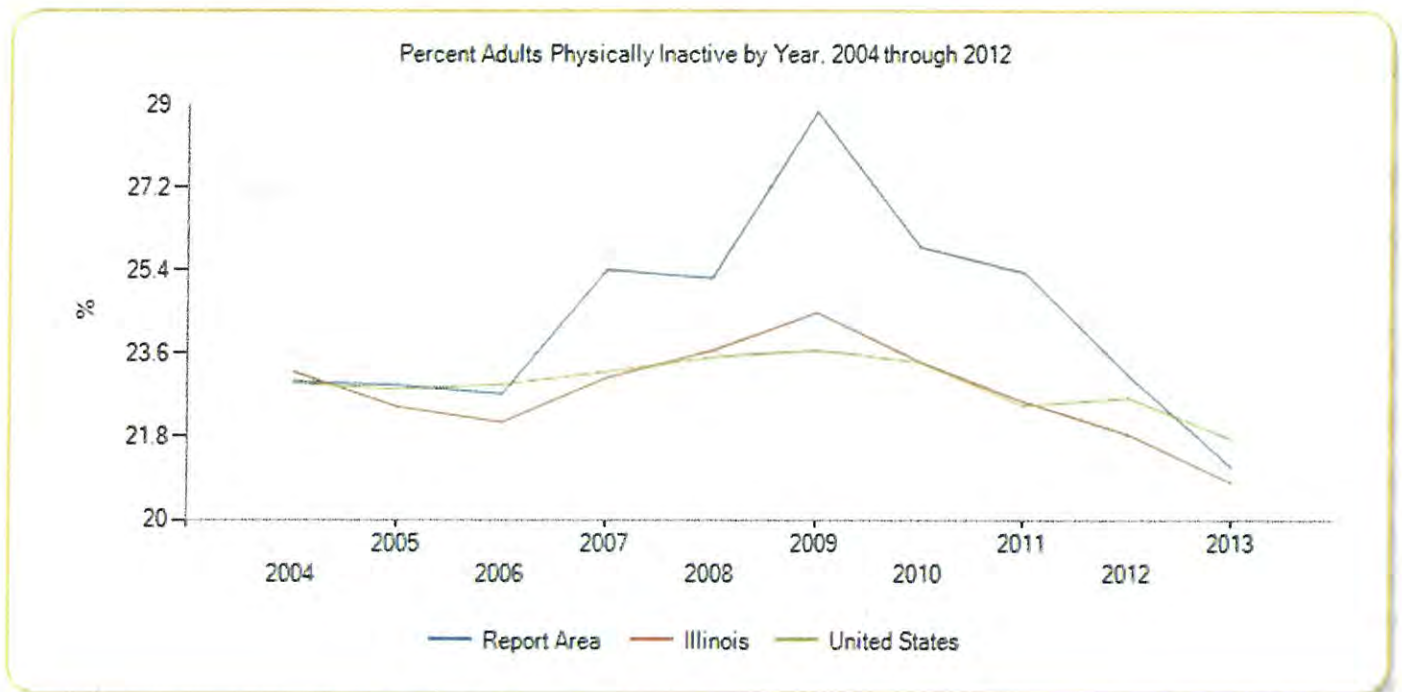
Percent Population with no Leisure Time Physical Activity



Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2013. Source geography: County

Within the report area, 7,300 or 21.1% of adults aged 20 and older self-report no leisure time for activity, based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?" There has been a decreasing trend since 2009.

Figure 4. 3 Physical Inactivity Trend

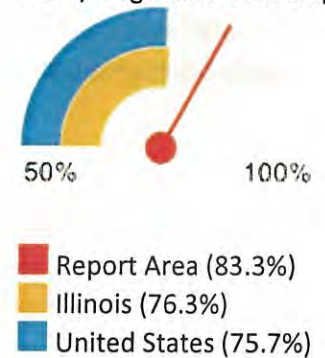


Section 4. Chronic Disease Indicators

Table 4.17 Fruit and Vegetable Consumption

Report Area	Total Population (Age 18)	Total Adults with Inadequate Fruit / Vegetable Consumption	Percent Adults with Inadequate Fruit / Vegetable Consumption
Report Area	32,947	21,244	83.3%
Effingham County, IL	25,503	21,244	83.3%
Illinois	9,591,923	7,318,637	76.3%
United States	227,279,010	171,972,118	75.7%

Percent Adults with Inadequate Fruit / Vegetable Consumption

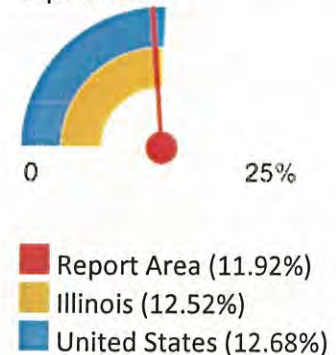


Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health Human Services, Health Indicators Warehouse. 2005-09. Source geography: County

Table 4.18 Fruit and Vegetable Expenditures

Report Area	State Rank	Z-Score (US)	Z-Score (State)	Average Expenditures (USD)	Percentage of Food-At-Home Expenditures
Report Area	suppressed	-1.15	-1.54	\$698.93	11.92%
Illinois	no data	-0.01	0	\$738.75	12.52%
United States	no data	no data	no data	\$744.71	12.68%

Fruit / Vegetable Expenditures, Percentage of Total Food-At-Home Expenditures



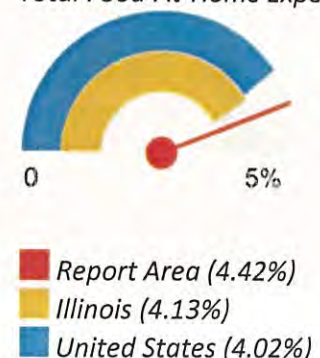
Data Source: Nielsen, Nielsen SiteReports. 2014. Source geography: Tract

This indicator reports estimated expenditures for fruits and vegetables and soda purchased for in-home consumption, as a percentage of total food-at-home expenditures. Expenditure data are suppressed for single counties. In the report area, the average home spends 11.92% of food-at-home expenditure on fruits and vegetables compared to 12.52% in Illinois and 12.68% in the United States. In addition, 4.42% on soda, this is slightly higher than the state and national averages. In Effingham County an estimated 21,244, or 83.3% of adults over the age of 18 are consuming less than 5 servings of fruits and vegetables each day. Data is not available for Jasper County.

Table 4.19 Soda Expenditures

Report Area	State Rank	Z-Score (US)	Z-Score (State)	Average Expenditures (USD)	Percentage of Food-At-Home Expenditures
Report Area	suppressed	1.13	1.36	\$259.17	4.42%
Illinois	no data	0.13	0	\$243.81	4.13%
United States	no data	no data	no data	\$236.04	4.02%

Soda Expenditures, Percentage of Total Food-At-Home Expenditures



Data Source: Nielsen, Nielsen SiteReports. 2014. Source geography: Tract

Section 4. Chronic Disease Indicators

The prevalence of tobacco smokers is similar in Effingham County and Jasper County to Illinois and to top U.S. performers. The data for this indicator is based on a new modeling method by *County Health Rankings* and cannot be compared to other years. The Healthy People 2020 Target is for 12% adult smokers.

Table 4.20 Adult Smoking (2015)

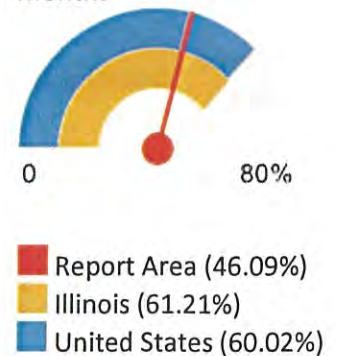
Report Area	Percentage of Adults who are Current Smokers
Effingham County	15%
Jasper County	14%
Illinois	15%
Top U.S. Performers	14%
HP 2020 Target	12%

Data source: County Health Rankings, modeling based on BRFSS data. 2015

Table 4.21 Tobacco Usage – Quit Attempts

Report Area	Survey Population (Smokers Age 18)	Total Smokers with Quit Attempt in Past 12 Months	Percent Smokers with Quit Attempt in Past 12 Months
Report Area	6,681	3,079	46.09%
Effingham County, IL	6,681	3,079	46.08%
Illinois	1,903,115	1,164,973	61.21%
United States	45,526,654	27,323,073	60.02%

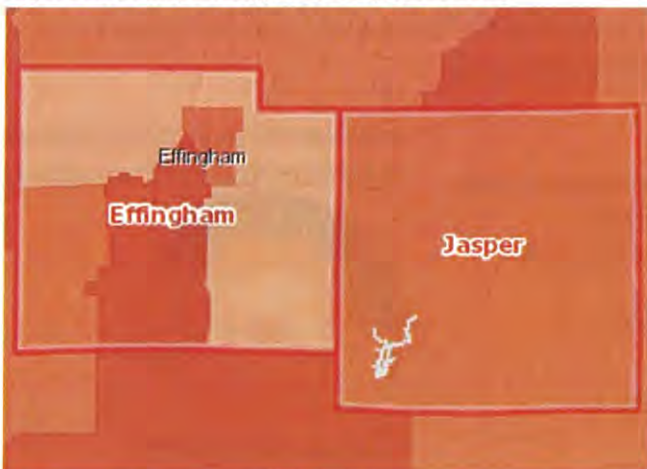
Percent Smokers with Quit Attempt in Past 12 Months



Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12. Source geography: County

In Effingham County, less than half of smokers in 2011-2012, tried to quit within the year, compared to 60% of tobacco smokers in the United States and 61% in Illinois. Data is not available for Jasper County. In the report area, the average household spent 1.96% of food-at-home expenditures on cigarettes compared to 1.5% in Illinois and the United States.

Figure 4.4 Map of Cigarette Expenditures



Cigarette Expenditures, Percent of Total Expenditures, National Rank by Tract, Nielsen 2014



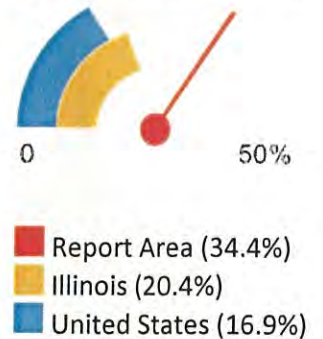
Data Source: Nielsen, Nielsen SiteReports. 2014. Source geography: Tract

Section 4. Chronic Disease Indicators

Table 4.22 Alcohol Consumptions

Report Area	Total Population Age 18	Estimated Adults Drinking Excessively	Estimated Adults Drinking Excessively (Crude Percentage)	Estimated Adults Drinking Excessively (Age-Adjusted Percentage)
Report Area	33,211	7,983	31.1%	34.4%
Effingham County, IL	25,670	7,983	31.1%	34.4%
Jasper County, IL	7,541	no data	suppressed	suppressed
Illinois	9,654,603	1,930,921	20%	20.4%
United States	232,556,016	38,248,349	16.4%	16.9%

Estimated Adults Drinking Excessively (Age-Adjusted Percentage)



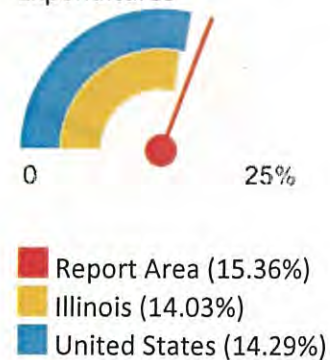
Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health Human Services, Health Indicators Warehouse. 2006-12. Source geography: County

This indicator reports the percentage of adults aged 18 and older who self-report heavy alcohol consumption (defined as more than two drinks per day on average for men and one drink per day on average for women). In Effingham County, approximately 34.4% of adults drink excessively compared to 20.4% in Illinois and 16.9% in the United States. Data is not available for Jasper County.

Table 4.23 Alcohol Expenditures

Report Area	Z-Score (US)	Z-Score (State)	Average Expenditures (USD)	Percentage of Food-At-Home Expenditures
Report Area	0.66	0.96	\$900.65	15.36%
Illinois	0.02	0	\$827.77	14.03%
United States	no data	no data	\$839.54	14.29%

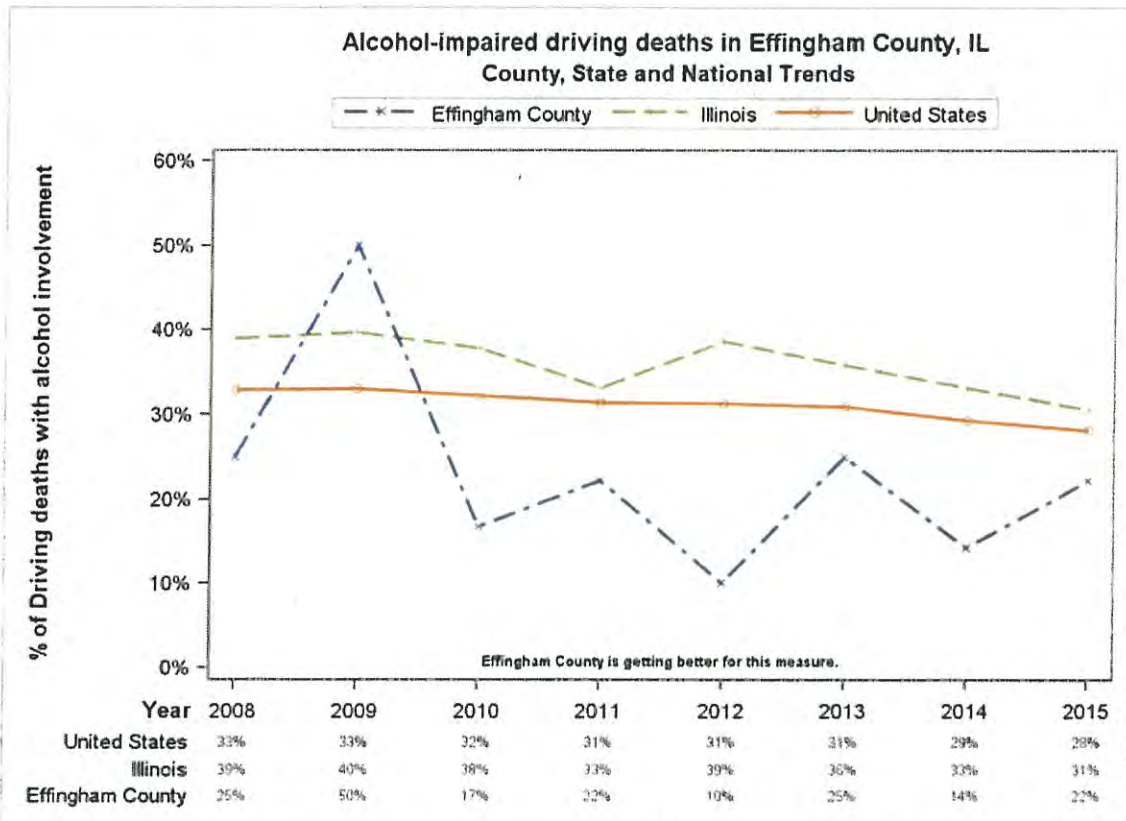
Alcoholic Beverage Expenditures, Percentage of Total Food-At-Home Expenditures



Data Source: Nielsen, Nielsen SiteReports. 2014. Source geography: Tract

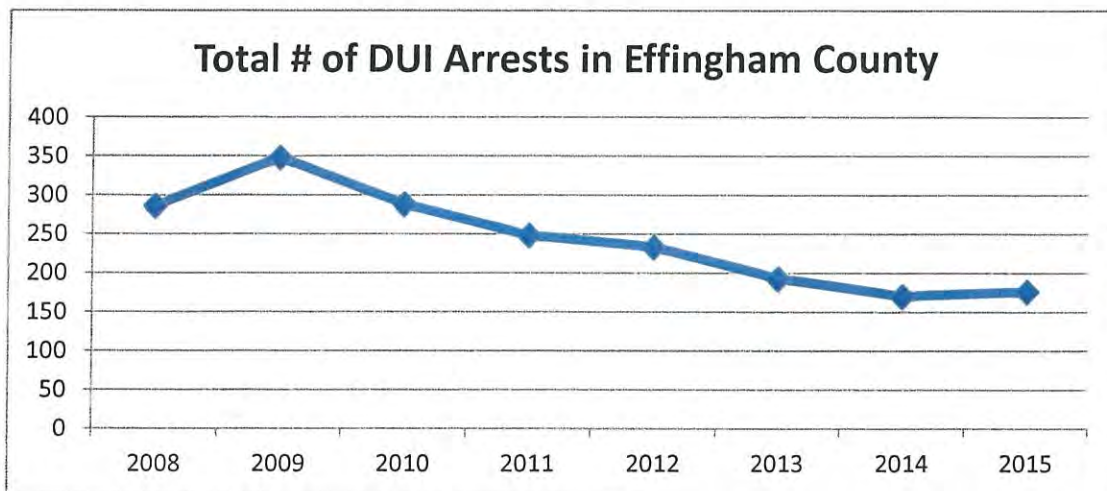
This indicator reports estimated annual expenditures for alcoholic beverages purchased at home, as a percentage of total household expenditures. Expenditures data are suppressed for single counties. In the report area, the average household spends 15.36% of food-at-home expenditures on alcoholic beverages, compared to 14.03% in Illinois and 14.29% in the United States.

Figure 4.5 Effingham County Alcohol Impaired Driving Deaths



Data source: County Health Rankings, Fatality Analysis Reporting System

Figure 4.6 Effingham County Arrests of Adult Drivers under the Influence of Alcohol



Data source: Illinois Secretary of State; IQUERY

In 2015, 22% of driving deaths in Effingham County involved alcohol. In Illinois, the 31% of driving deaths involved alcohol, which has been on a decreasing trend since 2008. The overall trend since 2008 in Effingham County has been a decrease in alcohol related driving deaths. Since 2008, Effingham County has seen a decreasing trend in the number of adult drivers arrested under the influence of alcohol (DUI).

Figure 4.7 Jasper County Alcohol Impaired Driving Deaths

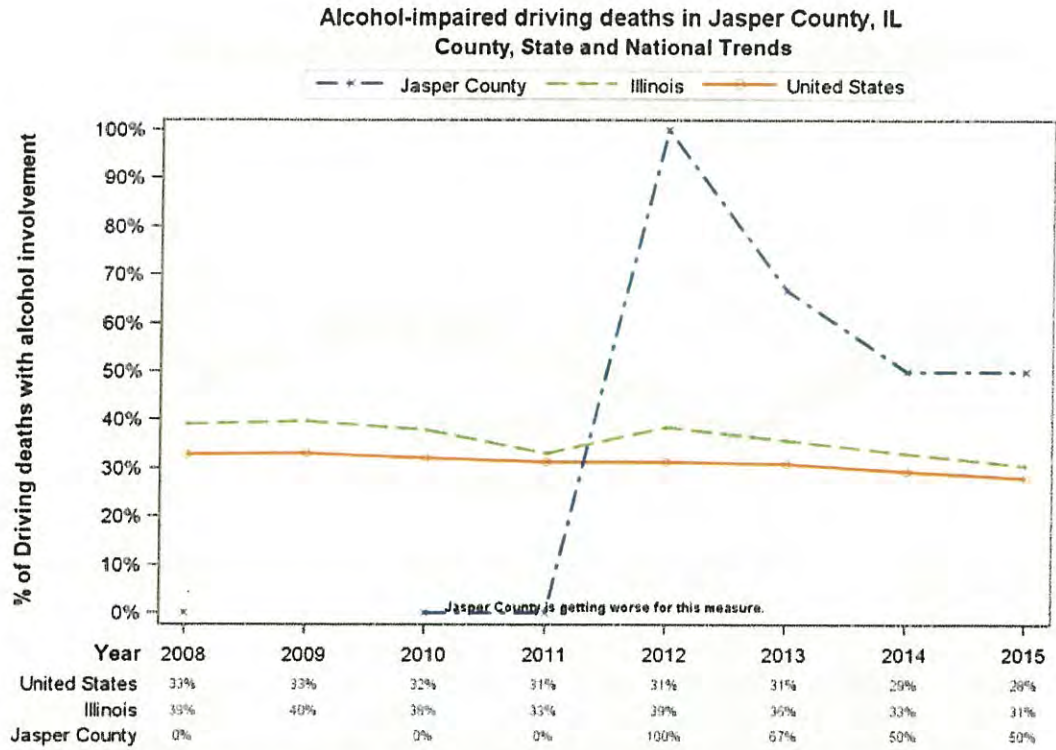
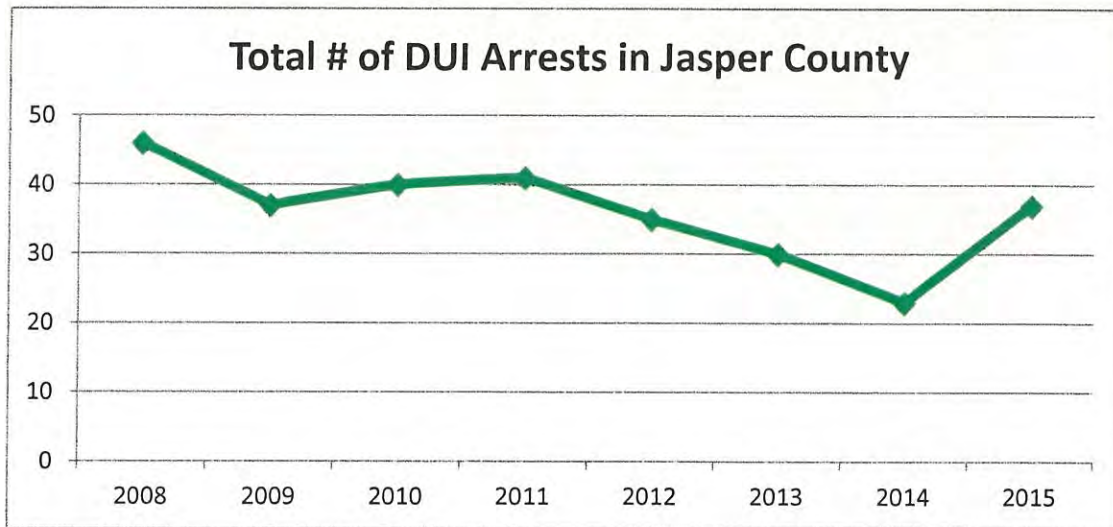
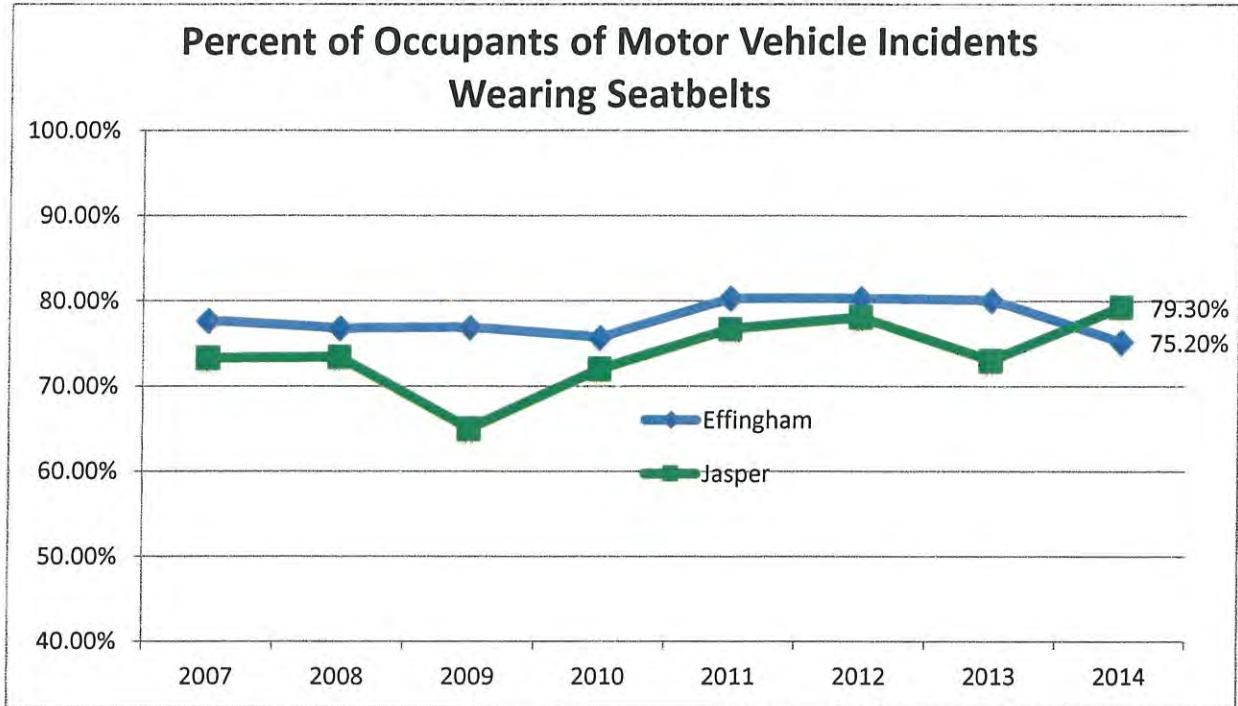


Figure 4.8 Effingham County Arrests of Adult Drivers under the Influence of Alcohol



In 2015, in Jasper County, 50% of driving deaths involved alcohol. In Illinois, the 31% of driving deaths involved alcohol, which has been on a decreasing trend since 2008. 100% of driving deaths in 2012 were alcohol related, and the percentage has been decreasing since. Since 2008, Jasper County primarily saw a decreasing trend in the number of adult drivers arrested under the influence of alcohol (DUI), except there was an increase in 2015.

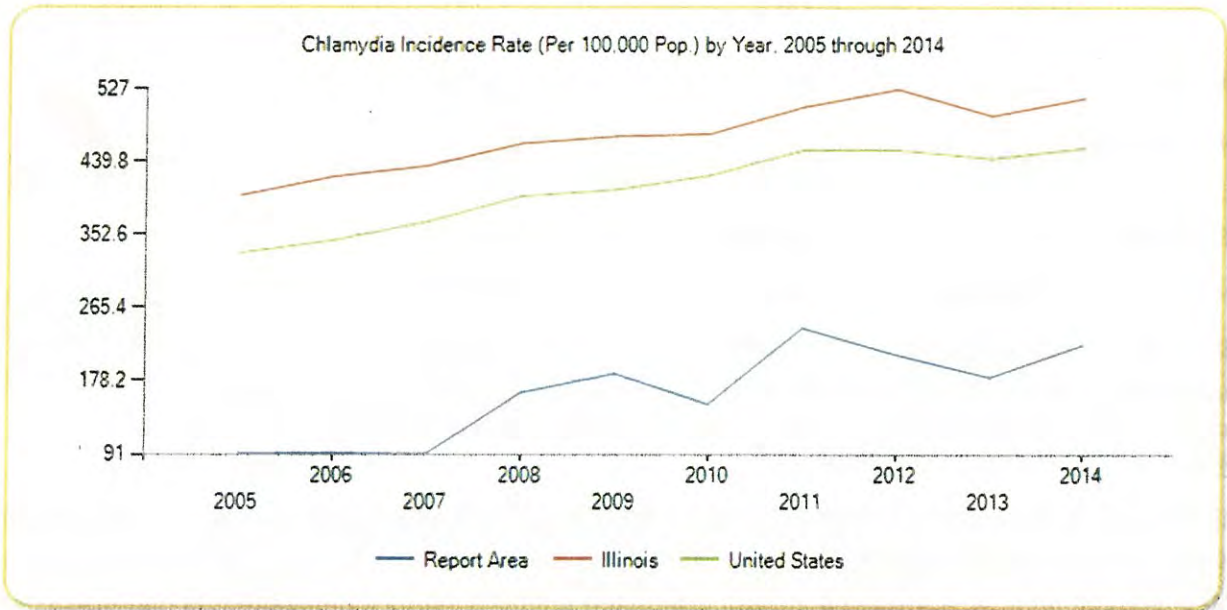
Figure 4.9 Seat Belt Use



Illinois Department of Transportation, Division of Traffic Safety, Crash Report Database

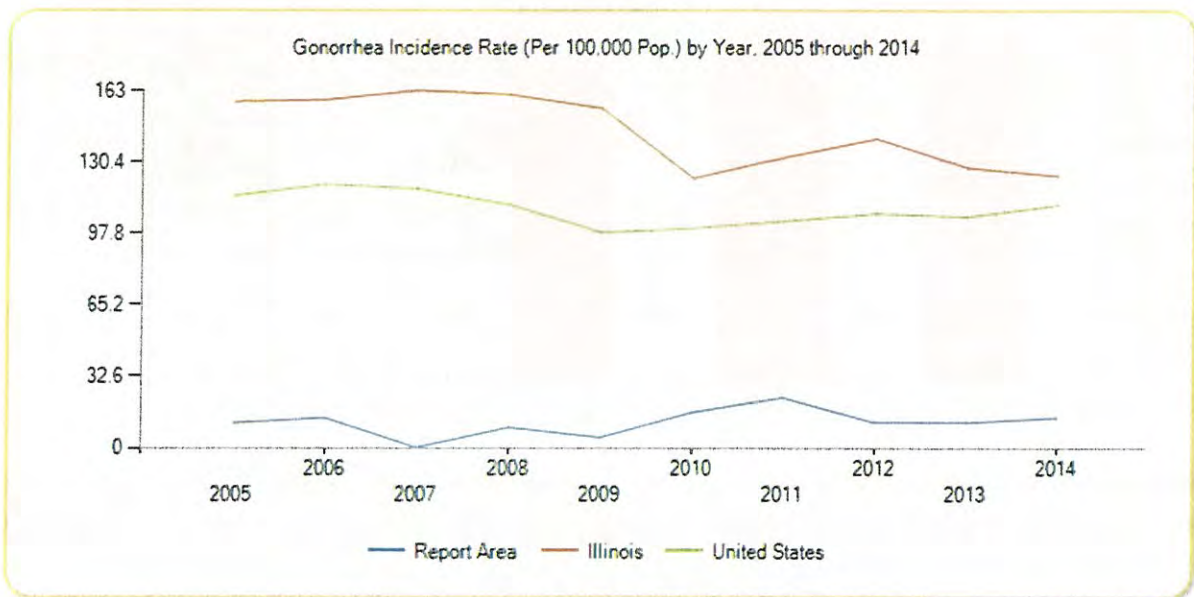
This indicator reports the percentage of occupants of motor vehicle incidents wearing seatbelts. In 2014 (latest available data), 79.3% of Jasper County motor vehicle accident occupants were wearing seatbelts. In Effingham County, 75.20% of motor vehicle accident occupants were wearing seatbelts. For the entire state of Illinois in 2014, in fatal motor vehicle accidents, only 56.1% were wearing a seatbelt.

Figure 5.1 STI Rate- Chlamydia Trend



Chlamydia rates in Effingham and Jasper counties are climbing to meet the state and national rates. Gonorrhea rates have remained low, far below the state and national rates.

Figure 5.2 STI Rate – Gonorrhea Trend



Section 5. Infectious Disease Indicators

Table 5.1 HIV Prevalence

Report Area	Population Age 13	Population with HIV / AIDS	Population with HIV / AIDS, Rate (Per 100,000 Pop.)	Population with HIV / AIDS, Rate (Per 100,000 Pop.)
Report Area	28,447	10	35.15	<p>0 700</p> <ul style="list-style-type: none"> Report Area (35.15) Illinois (322.93) United States (353.16)
Effingham County, IL	28,447	10	35.15	
Jasper County, IL	0	no data	no data	
Illinois	10,739,418	34,681	322.93	
United States	263,765,822	931,526	353.16	

Data Source: US Department of Health Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2013. Source geography: County

HIV/AIDS rates are much lower in Effingham County than in Illinois or the United States. Data is not available for Jasper County. This indicator reports prevalence rate of HIV per 100,000 population. This indicator is relevant because HIV is a life-threatening communicable disease that disproportionately affects minority populations and may also indicate the prevalence of unsafe sex practices. In Effingham County, 91.20% of adults (aged 18 – 70) self-report that they have never been screened for HIV (Data source: Behavioral Risk Factor Surveillance System, 2011-2012). Data is not available for Jasper County.

Table 5.2: Cases & Rates of Syphilis, 2011-2015

	Cases					Rates Rates are per 100,000 population.				
	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015
Early Syphilis										
COUNTY	2011	2012	2013	2014	2015	2011	2012	2013	2014	2015
EFFINGHAM	0	2	0	0	0	0	5.8	0	0	0
JASPER	0	1	2	2	0	0	10.3	20.6	20.6	0
TOTAL ILLINOIS	1462	1500	1607	1682	1,974	10.6	10.9	12.5	13.1	15.4
Total Ill. Excluding Chicago	393	402	12.5	493	622	3.5	3.6	3.9	4.9	6.1

Source: Illinois Department of Public Health, State of IL Data Portal, STD Counts by County

Early syphilis rates have been consistently rising in Illinois (including when Chicago is excluded). Effingham County had 2 early syphilis cases between 2011 and 2015. Jasper County, had higher early syphilis rates that the State in 2013 and 2014. There were no TB cases in Jasper County between 2011-2015, and 2 cases in Effingham County.

Table 5.3: Clay County Tuberculosis Cases

County	2011	2012	2013	2014	2015
Effingham County	0	1	0	0	1
Jasper County	0	0	0	0	0
Southern IL Region	11	18	16	15	26

Source: IDPH, Tuberculosis Cases by Illinois County of Residence

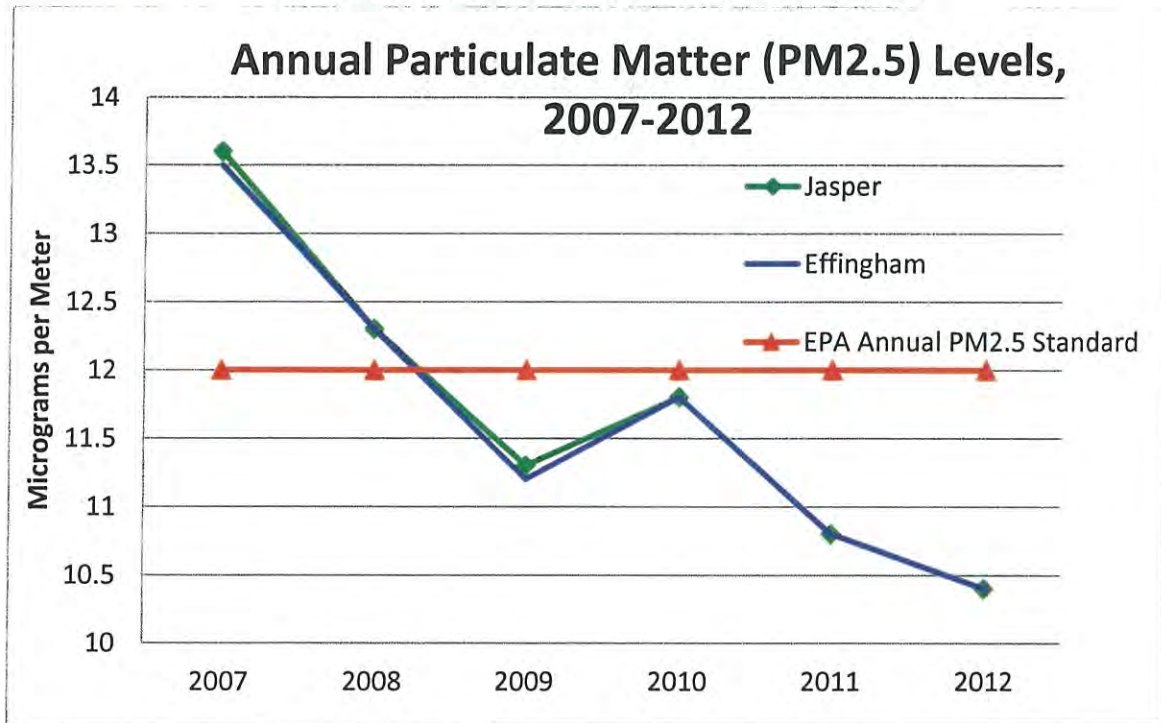
Table 5.4 Communicable Disease Case Counts (2011-2015)

COUNTY	Cases				
	2011	2012	2013	2014	2015
Cryptosporidiosis					
Effingham & Jasper	1	2	3	1	1
TOTAL ILLINOIS	213	173	266	158	240
Hepatitis C, chronic					
Effingham & Jasper	15	16	10	17	33
TOTAL ILLINOIS	8,439	7,673	6,819	8,933	8,696
Histoplasmosis					
Effingham & Jasper	2	1	0	0	1
TOTAL ILLINOIS	173	133	211	195	211
Influenza with ICU Hospitalization					
Effingham & Jasper	0	0	2	15	3
TOTAL ILLINOIS	305	553	680	1,558	482
Meningococcal					
Effingham & Jasper	0	1	0	0	0
TOTAL ILLINOIS	35	17	10	12	15
Mumps					
Effingham & Jasper	0	0	0	0	1
TOTAL ILLINOIS	78	32	26	142	430
Pertussis					
Effingham & Jasper	1	1	0	1	0
TOTAL ILLINOIS	1,509	2,026	785	764	718
Salmonellosis					
Effingham & Jasper	5	21	4	8	10
TOTAL ILLINOIS	1,694	1,970	1,772	1,771	1,829
E.Coli					
Effingham & Jasper	5	2	2	5	5
TOTAL ILLINOIS	241	218	279	195	186
Varicella (Chicken Pox)					
Effingham & Jasper	0	1	1	0	1
TOTAL ILLINOIS	881	898	731	596	443
West Nile Virus					
Effingham & Jasper	0	0	1	0	0
TOTAL ILLINOIS	34	290	117	45	77

Data Source: Illinois Department of Public Health, Communicable Disease Control Section, via, I-QUERY

In the Illinois Behavioral Risk Factor Surveillance System Survey conducted in 2011, 33.5% of participants in Effingham County had a flu vaccine in the past year, and 29.7% had a pneumonia vaccine ever. In Jasper County, 46.2% of participants had a flu vaccine in the past year, and 29.6% had a pneumonia vaccine ever.

Figure 6.1: Annual Particulate Matter (PM2.5) Levels



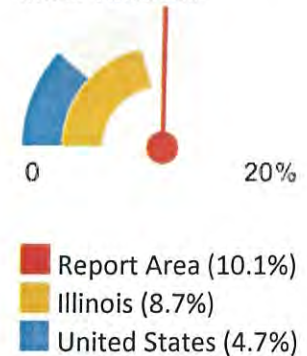
Source: US Environmental Protection Agency

In 2013, the US Environmental Protection Standard for particulate matter in the air was lowered from 15 parts per meter, to 12ppm. This graph shows that in 2007 and 2008 Effingham and Jasper County’s air quality would have been worse than the 12ppm standard, but below the 15ppm standard. Since 2009, air quality in Effingham and Jasper County has remained lower than the standard.

Table 6.1 High Heat Index Days

Report Area	Total Weather Observations	Average Heat Index Value	Observations with High Heat Index Values	Observations with High Heat Index Values, Percentage
Report Area	5,110	96.64	518	10.1%
Illinois	362,810	95.8	31,697	8.7%
United States	19,094,610	91.82	897,155	4.7%

Percentage of Weather Observations with High Heat Index Values:%



Data Source: National Oceanic and Atmospheric Administration, North America Land Data Assimilation System (NLDAS) . Accessed via CDC WONDER. Additional data analysis by CARES. 2014. Source geography: County

High heat index events are considered when temperature exceeds 103°F with humidity. The higher the heat index, the hotter the weather feels, since sweat does not readily evaporate and cool the skin. This is an important measure for estimating the risk to outside workers for heat exhaustion. Effingham and Jasper County had 518 days of high heat index from 1974 to 2011. This is higher than State and National percentages.

Section 6. Environmental, Occupational, and Injury Control Indicators

Built Environment: the Center for Disease Control and Prevention defines the built environment as “including all of the physical parts of where we live and work (e.g. homes, buildings, streets, open spaces and infrastructure.” The built environment can influence community health and individual behaviors such as physical activity and healthy eating.

Access to Parks: In Effingham County (2010), 28% of the population lived within ½ mile from a park. In Jasper County, 16% of the population lived within ½ mile from a park. The State benchmark for this measure is 59%. (Data source: Centers for Disease Control and Prevention. Healthy Community Design Initiative and Geospatial Research Analysis and Services Program. Accessed from Environmental Public Health Tracking Network. 2010)

Proximity to Highways: Traffic-related air pollution is a major cause of unhealthy air quality. In Effingham County (2010), 3.5% of the population lived within 150meters (2 blocks) of a highway. 0% of the population in Jasper County lives near a highway. (Data source: Centers for Disease Control and Prevention. Environmental Public Health Tracking Network. Community Design.)

Table 6.2 Access to Fast Food Restaurants

Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population
Report Area	43,940	39	88.8
Effingham County, IL	34,242	34	99.29
Jasper County, IL	9,698	5	51.56
Illinois	12,830,632	9,643	75.2
United States	312,732,537	228,677	73.1

Fast Food Restaurants, Rate (Per 100,000 Population)



Report Area (88.8)
Illinois (75.2)
United States (73.1)

Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2014.

This indicator reports the number of fast food restaurants per 100,000 population. This indicator is relevant because it provides a measure of healthy food access and environmental influences on dietary behaviors.

Table 6.3 Access to Liquor Stores

Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population
Report Area	43,940	8	18.2
Effingham County, IL	34,242	8	23.36
Jasper County, IL	9,698	0	0
Illinois	12,830,632	1,309	10.2
United States	312,732,537	33,204	10.6

Liquor Stores, Rate (Per 100,000 Population)



Report Area (18.2)
Illinois (10.2)
United States (10.6)

Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2014.

This indicator reports the number of beer, wine, and liquor stores per 100,000 population, as defined by North American Industry Classification System (NAICS) Code 445310. This indicator is relevant because it provides a measure of healthy food access and environmental influences on dietary behaviors.

Section 6. Environmental, Occupational, and Injury Control Indicators

Table 6.4 Access to Recreation and Fitness Facilities

Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population	Recreation and Fitness Facilities, Rate (Per 100,000 Population)
Report Area	43,940	3	6.8	<p>0 50</p> <ul style="list-style-type: none"> Report Area (6.8) Illinois (10.3) United States (10.1)
Effingham County, IL	34,242	2	5.84	
Jasper County, IL	9,698	1	10.31	
Illinois	12,830,632	1,325	10.3	
United States	312,732,537	31,715	10.1	

Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2014. Source geography: County

This indicator reports the number per 100,000 population of recreation and fitness facilities as defined by North American Industry Classification System (NAICS) Code 713940. This indicator is relevant because access to recreation and fitness facilities encourages physical activity and other healthy behaviors.

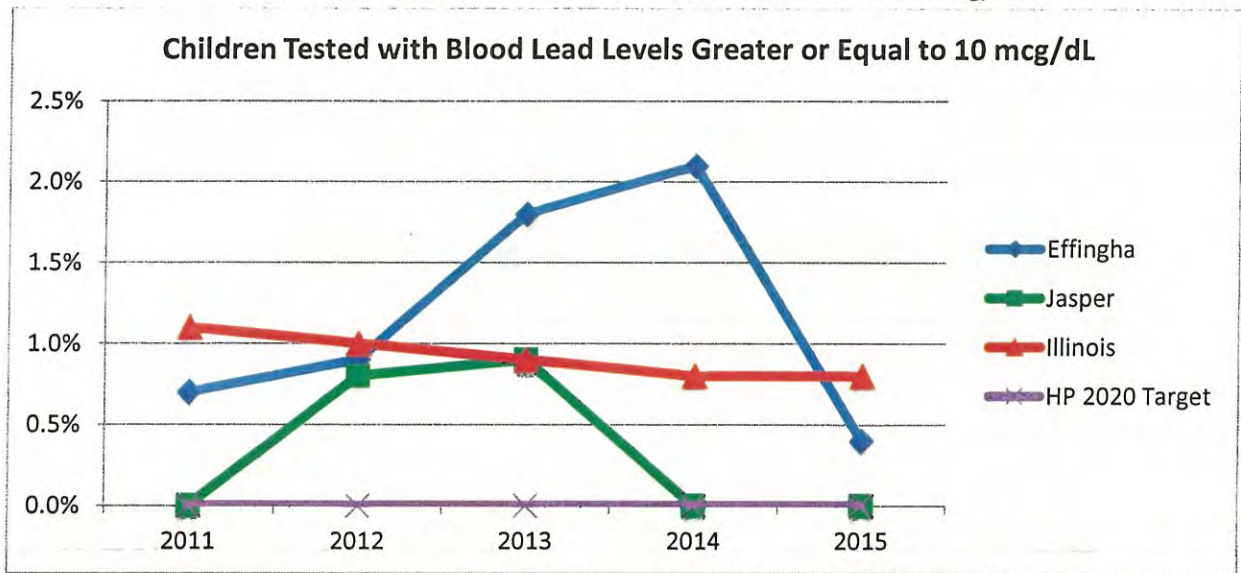
Table 6.5 Substandard Housing

Report Area	Total Occupied Housing Units	Occupied Housing Units with One or More Substandard Conditions	Percent Occupied Housing Units with One or More Substandard Conditions	Percent Occupied Housing Units with One or More Substandard Conditions
Report Area	17,111	3,333	19.48%	<p>0 50%</p> <ul style="list-style-type: none"> Report Area (19.48%) Illinois (34.35%) United States (34.71%)
Effingham County, IL	13,330	2,596	19.47%	
Jasper County, IL	3,781	737	19.49%	
Illinois	4,786,388	1,643,898	34.35%	
United States	116,926,305	40,585,236	34.71%	

Data Source: US Census Bureau, American Community Survey. 2011-15. Source geography: Tract

This indicator reports the number and percentage of owner- and renter-occupied housing units having at least one of the following conditions: 1) lacking complete plumbing facilities, 2) lacking complete kitchen facilities, 3) with 1.01 or more occupants per room, 4) selected monthly owner costs as a percentage of household income greater than 30%, and 5) gross rent as a percentage of household income greater than 30%.

Figure 6.2: Children Tested with Blood Lead Levels ≥ 10 mcg/dL



Source: IDPH, Illinois Lead Poisoning Surveillance Report, 2011-2015

There is an overall downward trend in Illinois in the percent of children tested with blood lead levels ≥ 10 mcg/dL. Effingham County and Jasper County both had an increase in 2012-2014 in children with blood lead levels ≥ 10 mcg/dL. The Healthy People 2020 goal is to have zero percent of children tested with blood lead levels ≥ 10 mcg/dL.

Injury Indicators

Violent Crimes: In Effingham County, between 2012-2014, there were 50 violent crimes. This is a rate of 145 per 100,000 populations. In Jasper County, between 2012-2014, there were 16 violent crimes, which is a rate of 166 per 100,000 populations. Both counties are far below the Illinois benchmark of 388 per 100,000 populations.

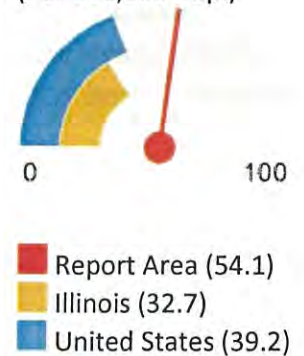
Table 6. 6 Number of Intentional self-harm (suicide) deaths, 2010-2014

	2010	2011	2012	2013	2014
Effingham County	0	0	4	3	1
Jasper County	2	2	0	2	1

Table 6.7 Accidental Death Rate

Report Area	Total Population	Average Annual Deaths, 2010-2014	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Report Area	43,950	26	60.1	54.1
Effingham County, IL	34,301	22	65.3	59.4
Jasper County, IL	9,649	4	41.45	35.3
Illinois	12,867,528	4,361	33.89	32.7
United States	313,836,267	128,295	40.88	39.2
				HP 2020 Target <= 36.0

Unintentional Injury (Accident) Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)



Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2010-14. Source geography: County

This indicator reports the rate of death due to unintentional injury (accident) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. This indicator is relevant because accidents are a leading cause of death in the U.S. The accidental death rate in Effingham County is higher than the Illinois, U.S. and Healthy People 2020 Target.

Section 6. Environmental, Occupational, and Injury Control Indicators

Table 6.8 Motor Vehicle Crash Death Rate

Report Area	Total Population	Average Annual Deaths, 2010-2014	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)	Motor Vehicle Crash Death, Age-Adjusted Death Rate (Per 100,000 Pop.)
Report Area	43,950	6	18.1	19.3	<p>0 50</p> <ul style="list-style-type: none"> Report Area (19.3) Illinois (7.8) United States (10.6)
Effingham County, IL	34,301	6	18.08	19.3	
Jasper County, IL	9,649	0	no data	no data	
Illinois	12,867,528	1,028	7.99	7.8	
United States	313,836,267	33,977	10.83	10.6	

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2010-14. Source geography: County

This indicator reports the rate of death due to motor vehicle crashes per 100,000 population, which include collisions with another motor vehicle, a nonmotorist, a fixed object, and a non-fixed object, an overturn, and any other non-collision. This indicator is relevant because motor vehicle crash deaths are preventable and they are a cause of premature death.

Table 6.9 Pedestrian Motor Vehicle Deaths

Report Area	Total Population (2010)	Total Pedestrian Deaths, 2011-2015	Average Annual Deaths, Rate per 100,000 Pop.	Pedestrian Motor Vehicle Mortality, Crude Death Rate (Per 100,000 Pop.)
Report Area	43,940	5	3.8	<p>0 10</p> <ul style="list-style-type: none"> Report Area (3.8) Illinois (2.1) United States (3.1)
Effingham County, IL	34,242	5	4.9	
Jasper County, IL	9,698	0	0	
Illinois	12,830,632	827	2.1	
United States	312,732,537	28,832	3.1	

HP 2020 Target <= 1.3

Data Source: US Department of Transportation, National Highway Traffic Safety Administration, Fatality Analysis Reporting System. 2011-2015. Source geography: County

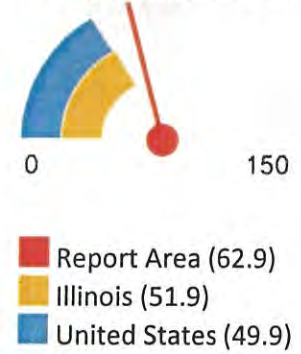
This indicator reports the crude rate of pedestrians killed by motor vehicles per 100,000 population. This indicator is relevant because pedestrian-motor vehicle crash deaths are preventable and they are a cause of premature death.

Section 7. Sentinel Events

Table 7.1 Preventable Hospital Events

Report Area	Total Medicare Part A Enrollees	Ambulatory Care Sensitive Condition Hospital Discharges	Ambulatory Care Sensitive Condition Discharge Rate
Report Area	6,449	405	62.9
Effingham County, IL	5,050	286	56.8
Jasper County, IL	1,399	118	84.9
Illinois	341,565	17,732	51.9
United States	29,649,023	1,479,545	49.9

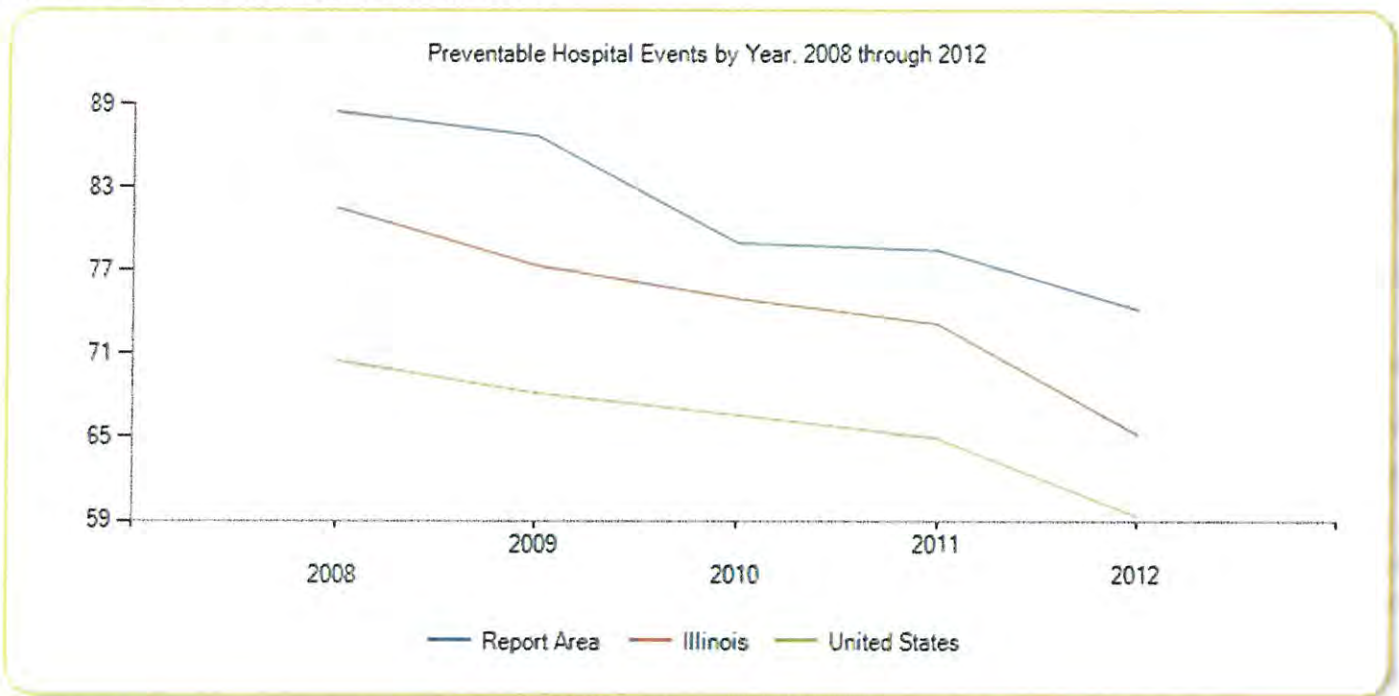
Preventable Hospital Events, Age-Adjusted Discharge Rate (Per 1,000 Medicare Enrollees)



Data Source: Dartmouth College Institute for Health Policy Clinical Practice, Dartmouth Atlas of Health Care. 2014. Source geography: County

Sentinel indicators are for health conditions considered preventable or controllable with regular primary care. This indicator reports the discharge rate (per 1,000 Medicare enrollees) for conditions that are ambulatory care sensitive (ACS). ACS conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by those patients. This indicator is relevant because analysis of ACS discharges allows demonstrating a possible “return on investment” from interventions that reduce admissions (for example, for uninsured or Medicaid patients) through better access to primary care resources.

Figure 7.1 Preventable Hospital Events Trend



**Appendix 3:
Primary Survey Data Report**

**Effingham & Jasper
Counties**

**Community Health
Needs Survey**

783

Total Responses

Date Survey Created: Monday, April 24, 2017

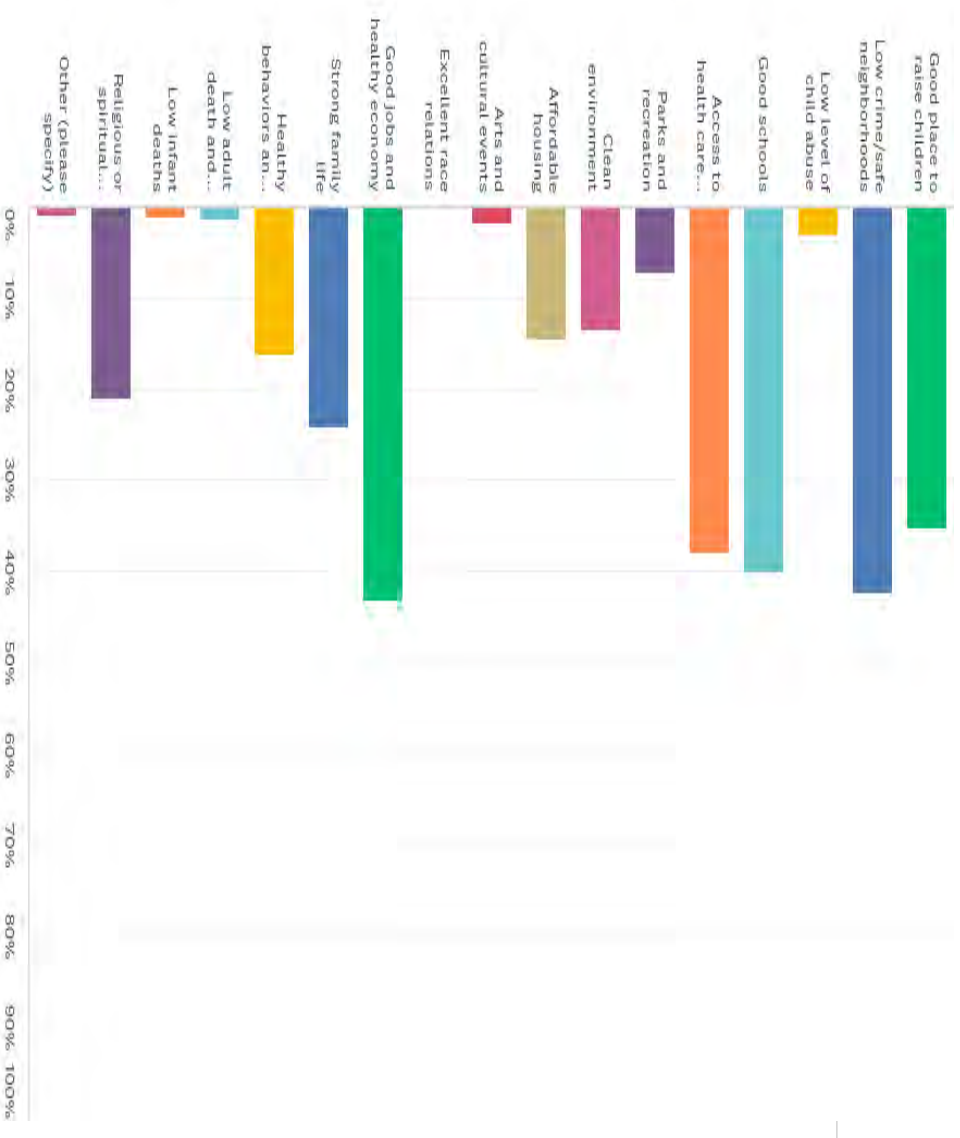
Effingham County responses: 429

Jasper County responses: 280

Unidentified county responses: 74

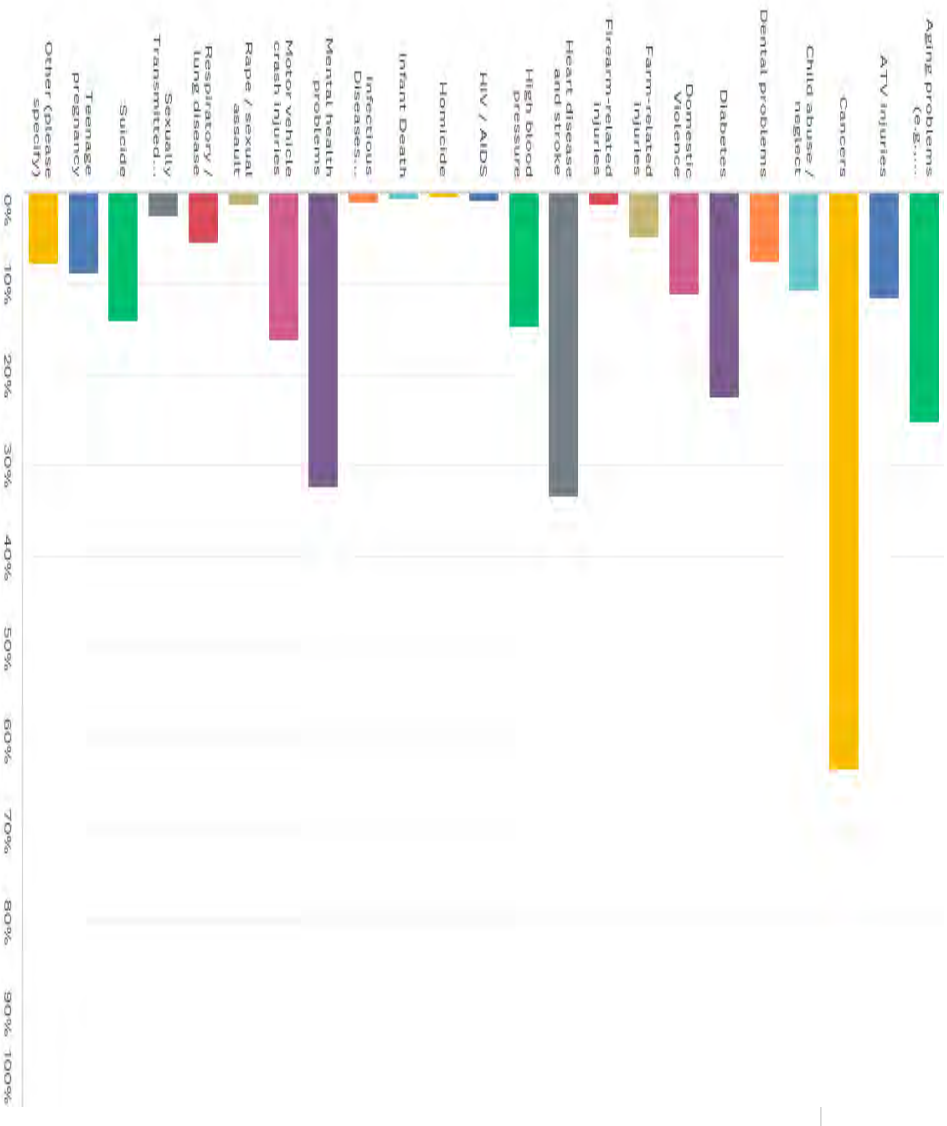
Q1: In the following list, what do you think are the three most important factors for a healthy community? (Those factors which most improve the quality of life in a community.)Check only three (3):

Answered: 782 Skipped: 1



Q2: In the following list, what do you think are the three most important health problems in our community? (Those problems which have the greatest impact on overall community health.) Check only three (3):

Answered: 782 Skipped: 1



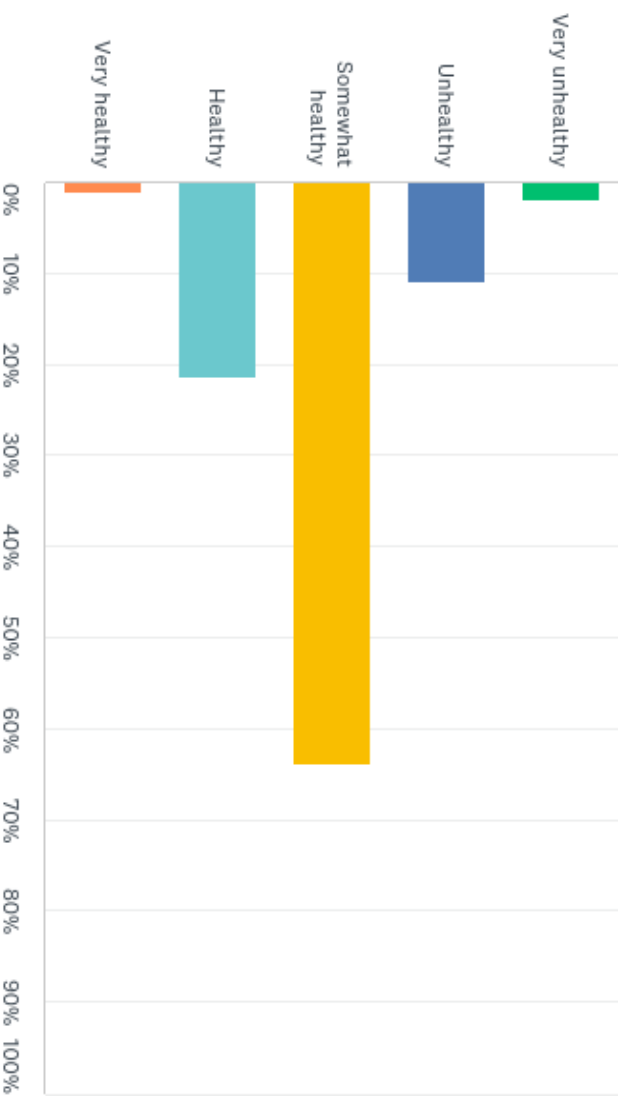
Q3: In the following list, what do you think are the three most important risky behaviors in our community? (Those behaviors which have the greatest impact on overall community health.) Check only three (3):

Answered: 779 Skipped: 4



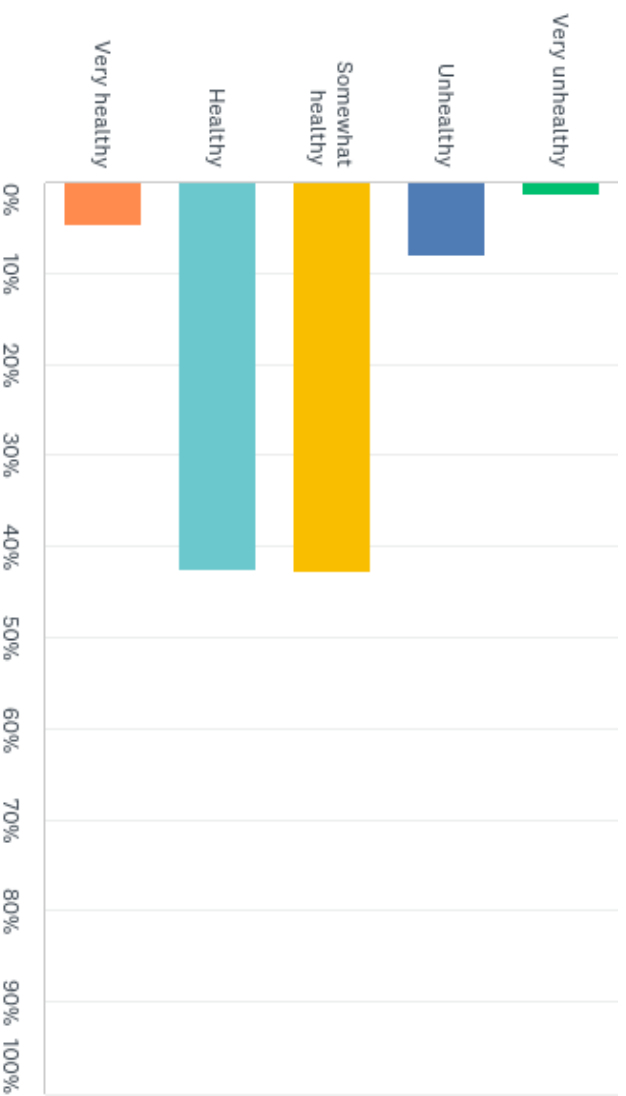
Q4: How would you rate our community as a “Healthy Community?”

Answered: 777 Skipped: 6



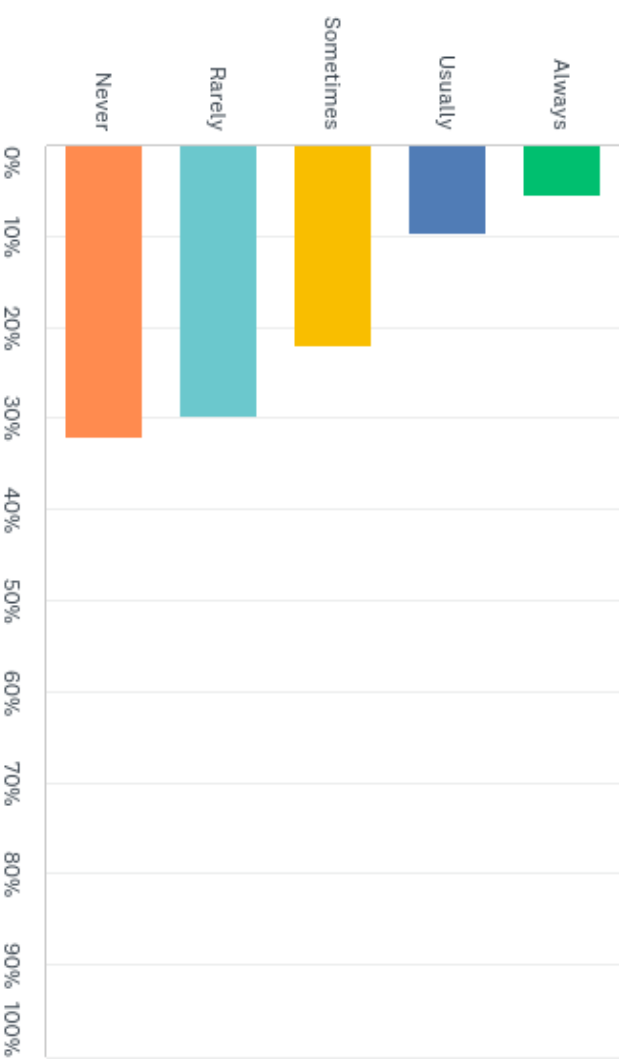
Q5: How would you rate your own personal health?

Answered: 778 Skipped: 5



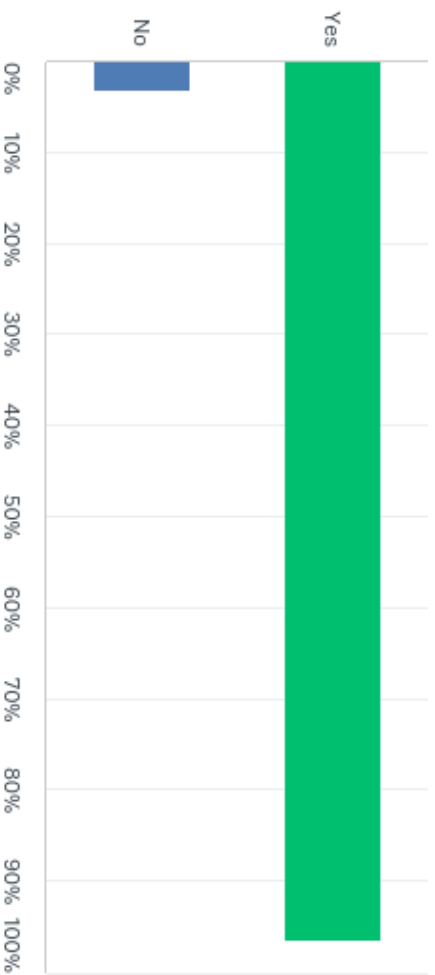
Q6: How often in the past 12 months would your household say they were worried or stressed about having enough money to pay your rent/mortgage? Would you say you were worried or stressed-

Answered: 777 Skipped: 6



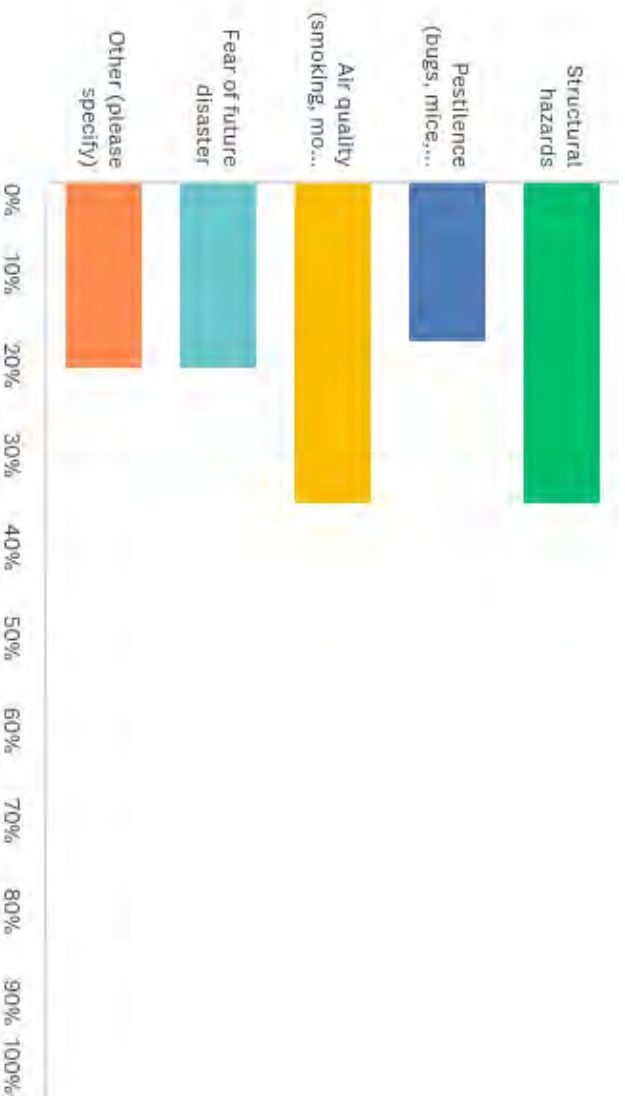
Q7: Do you feel your home is currently physically safe to live in?

Answered: 779 Skipped: 4



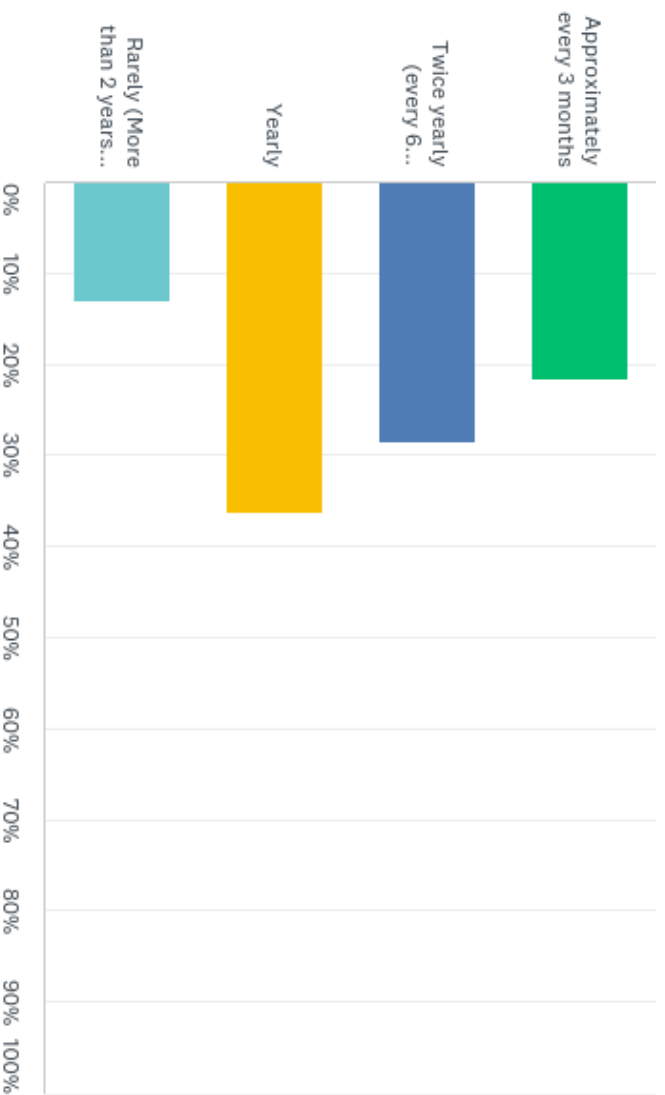
Q8: If No, why not? Choose all that apply

Answered: 34 Skipped: 749



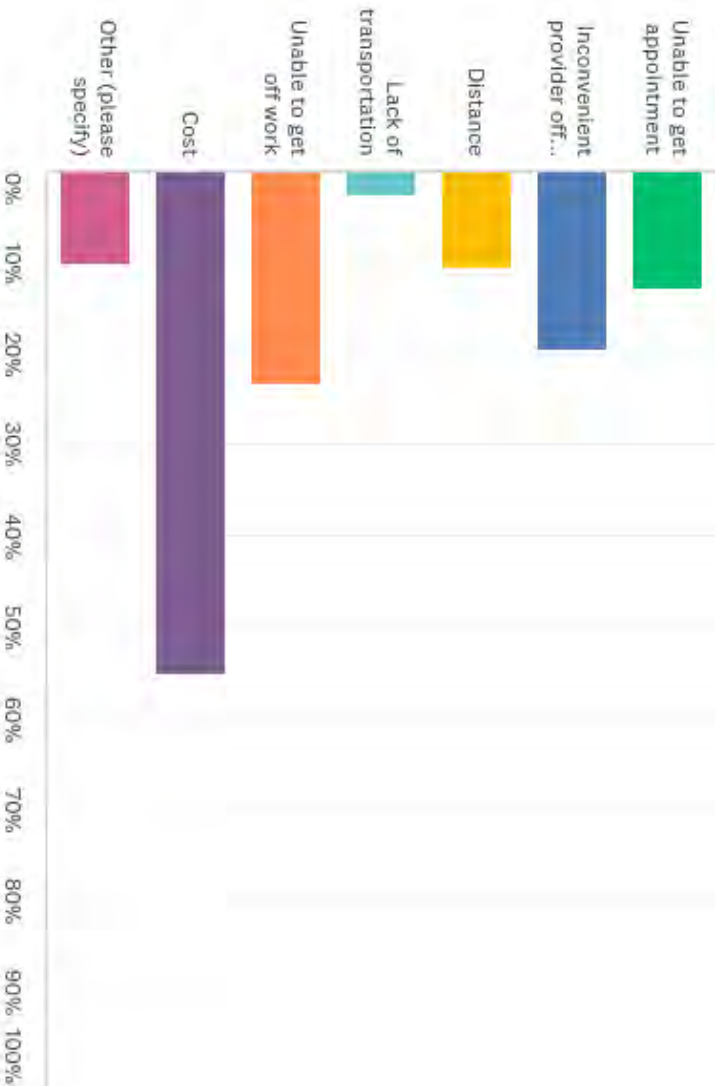
Q9: How often do you seek medical attention?

Answered: 777 Skipped: 6



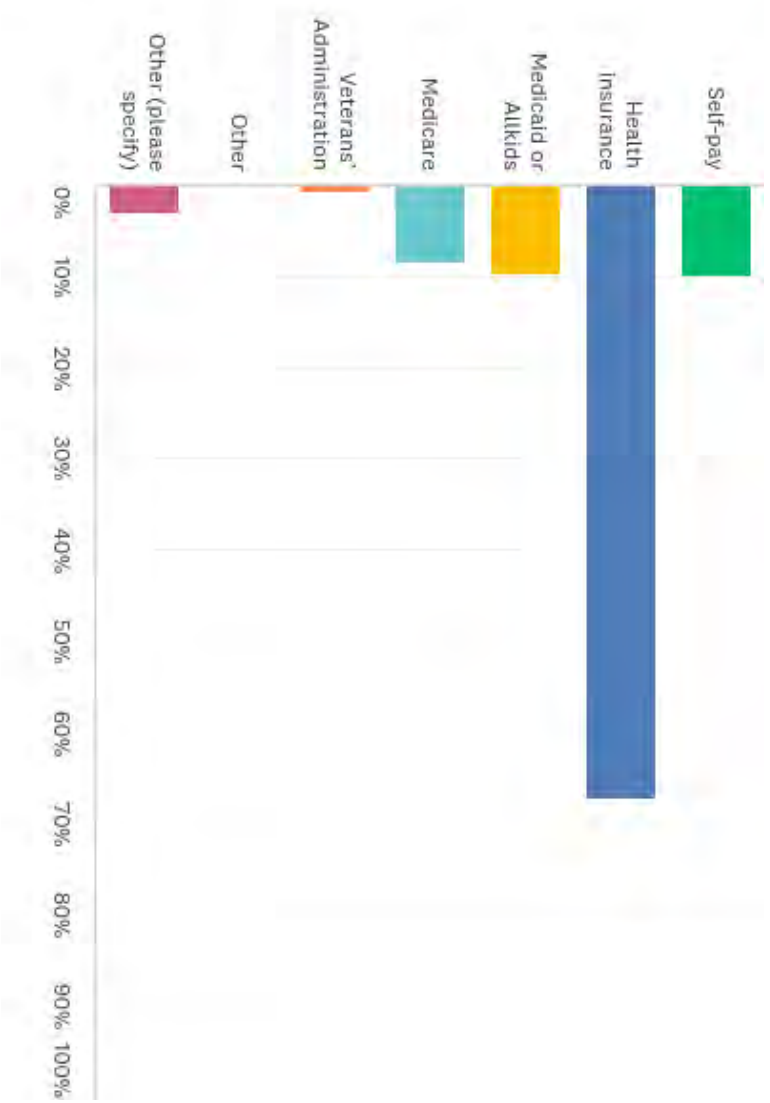
Q10: What is the most significant barrier for seeking medical attention for you and/or your family? (Choose all that apply.)

Answered: 674 Skipped: 109



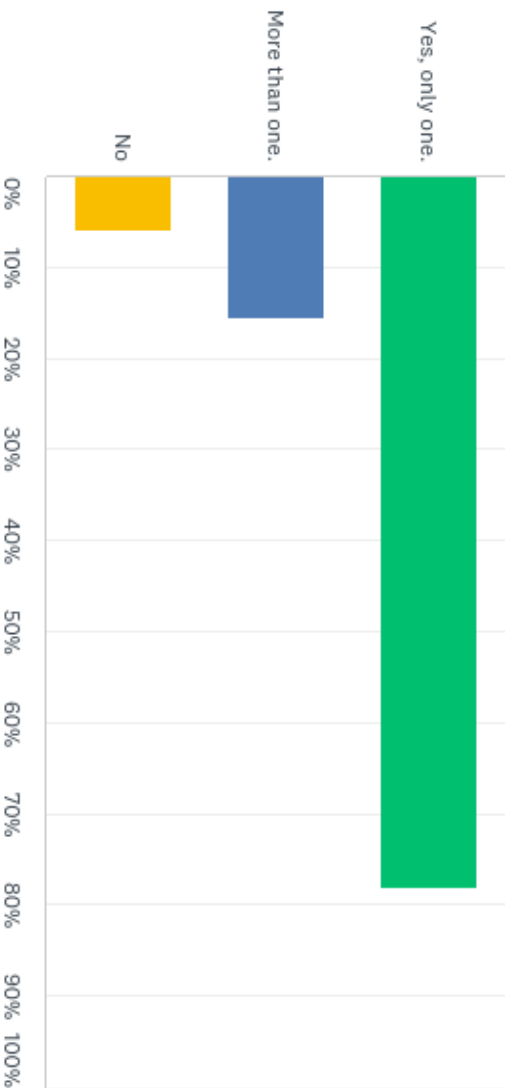
Q11: How do you pay for your health care?

Answered: 780 Skipped: 3



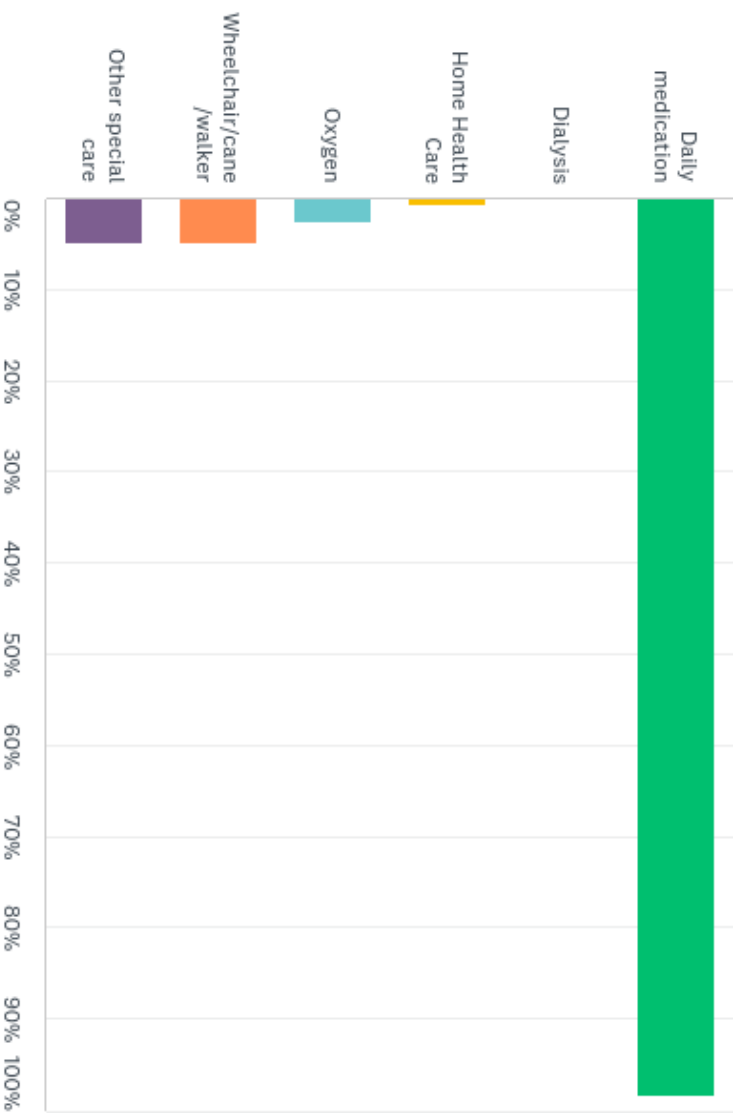
Q12: Do you have one person / clinic you think of as your primary health care provider?

Answered: 777 Skipped: 6



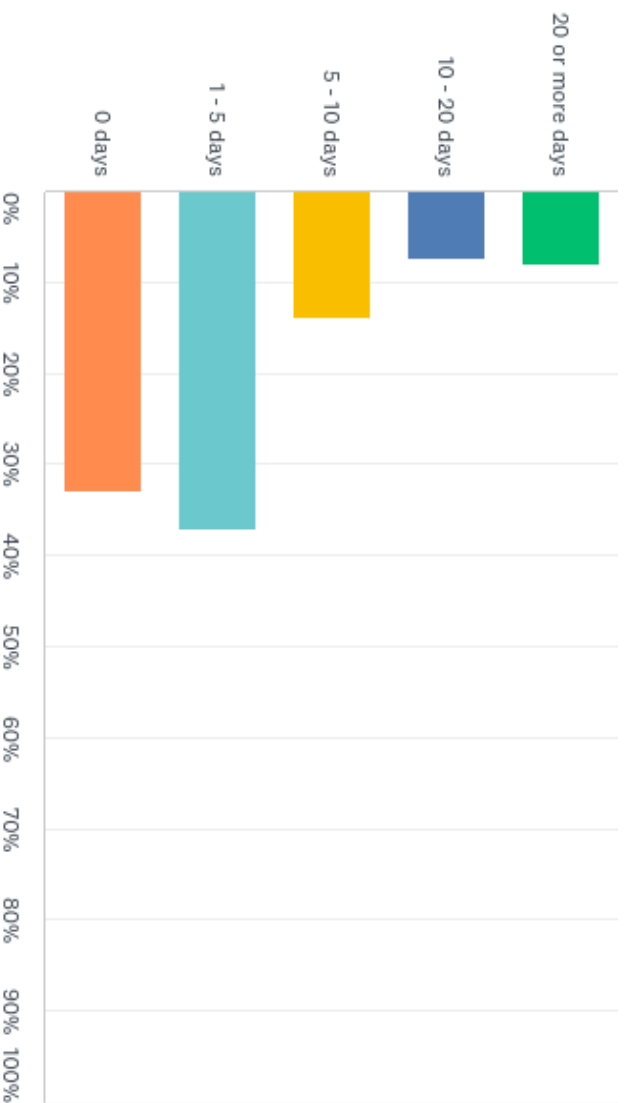
Q13: Do you or does any member of your household currently use..... (Choose all that apply.)

Answered: 539 Skipped: 244



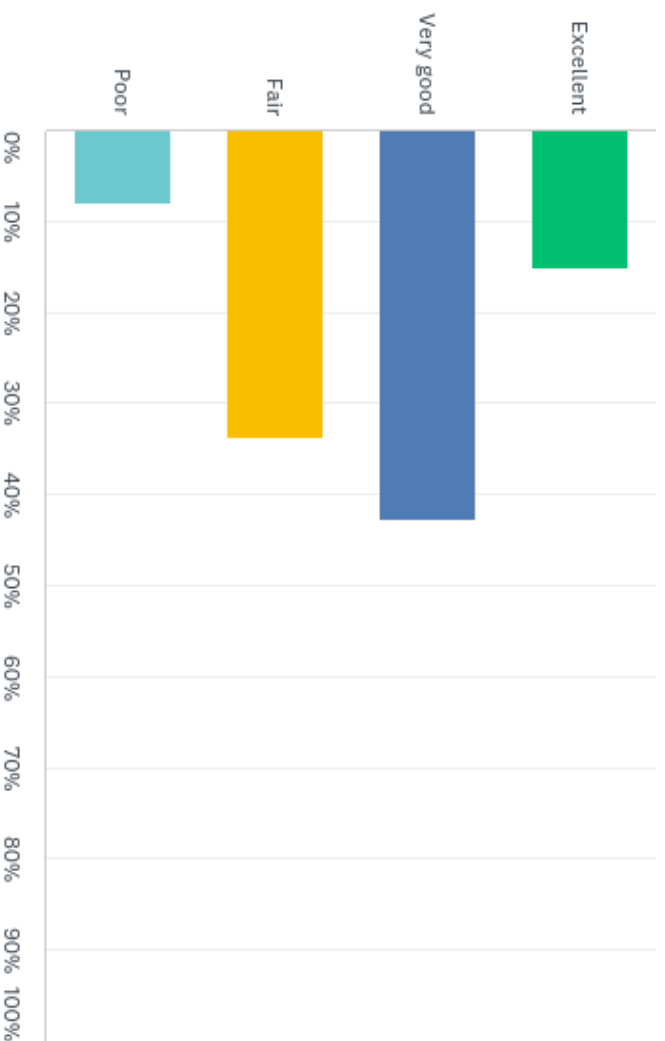
Q14: Thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

Answered: 775 Skipped: 8



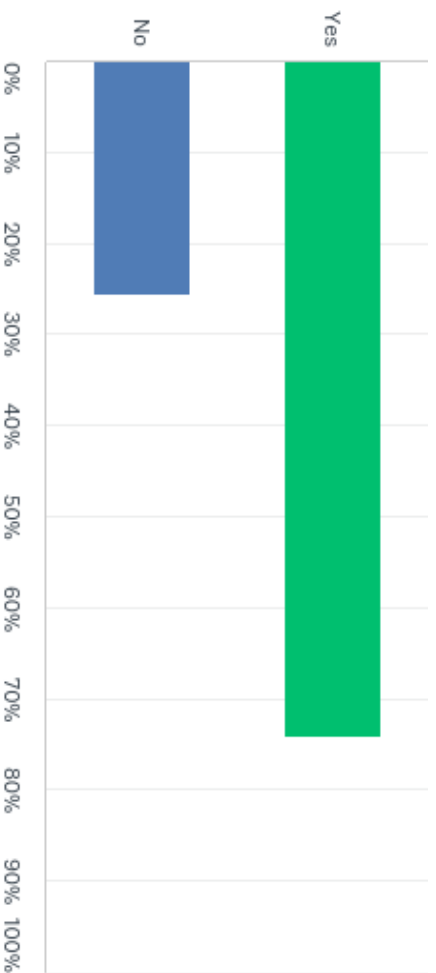
Q15: How would you rate your oral health status?

Answered: 776 Skipped: 7



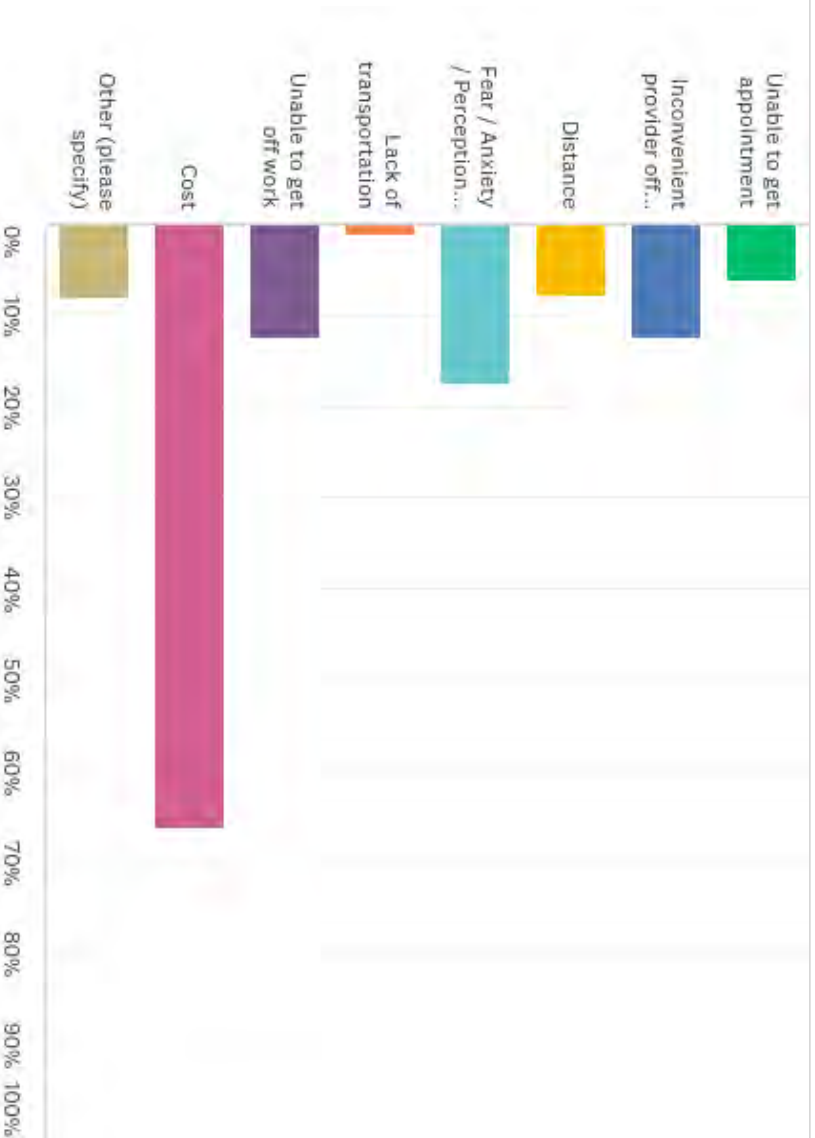
Q16: Do you have a regular dental provider?

Answered: 774 Skipped: 9



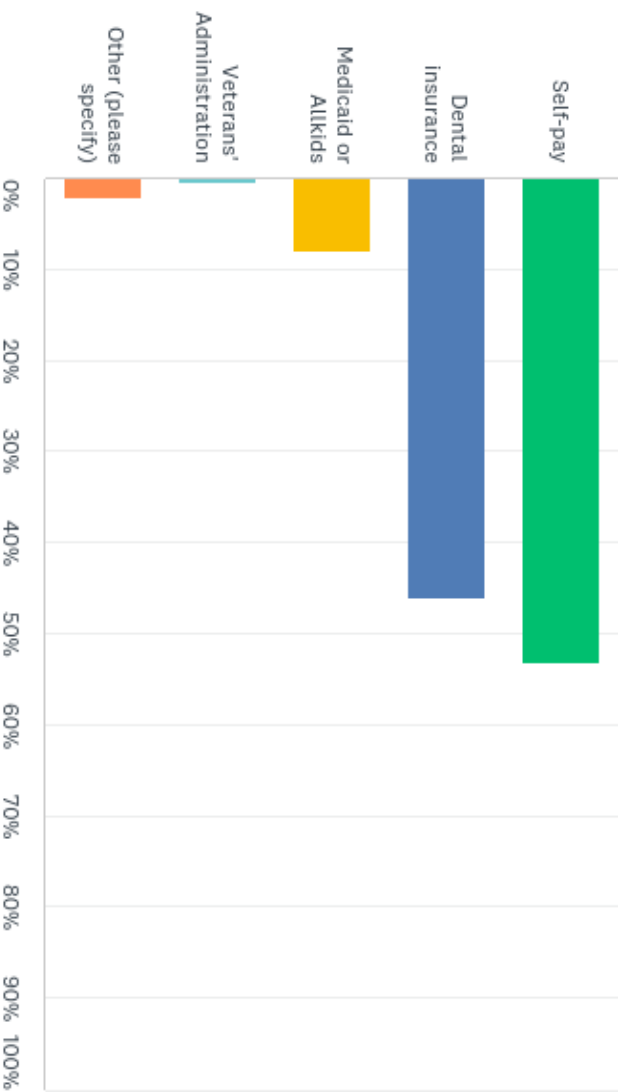
Q17: What is the most significant barrier to seeking regular dental care? (Choose all that apply)

Answered: 664 Skipped: 119



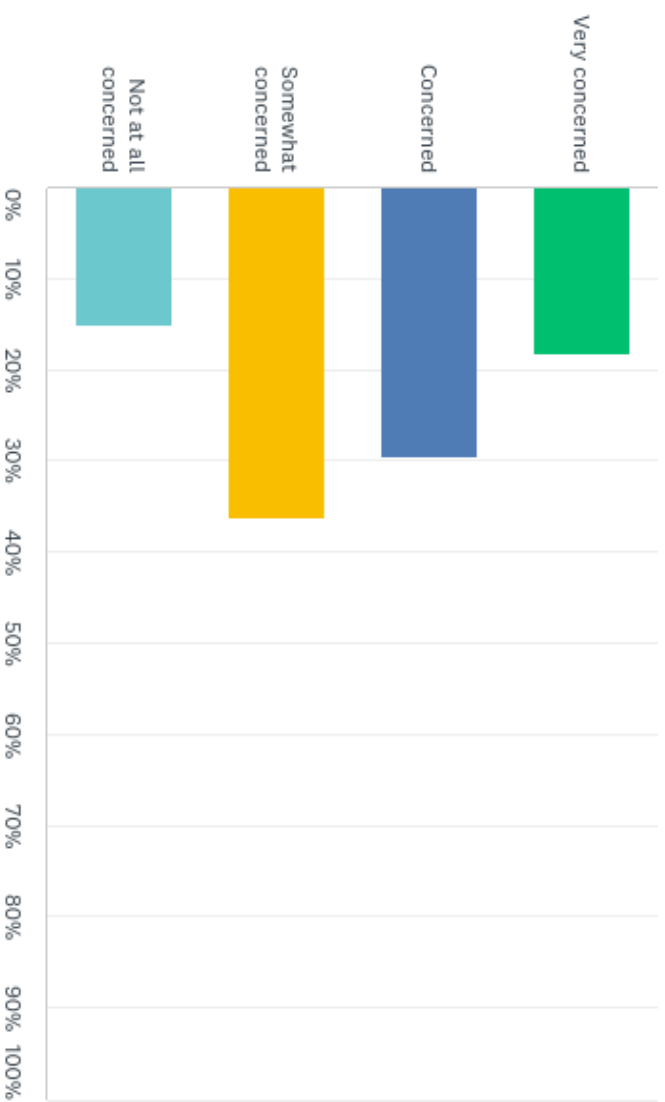
Q18: How do you pay for you and your family's dental care?

Answered: 764 Skipped: 19



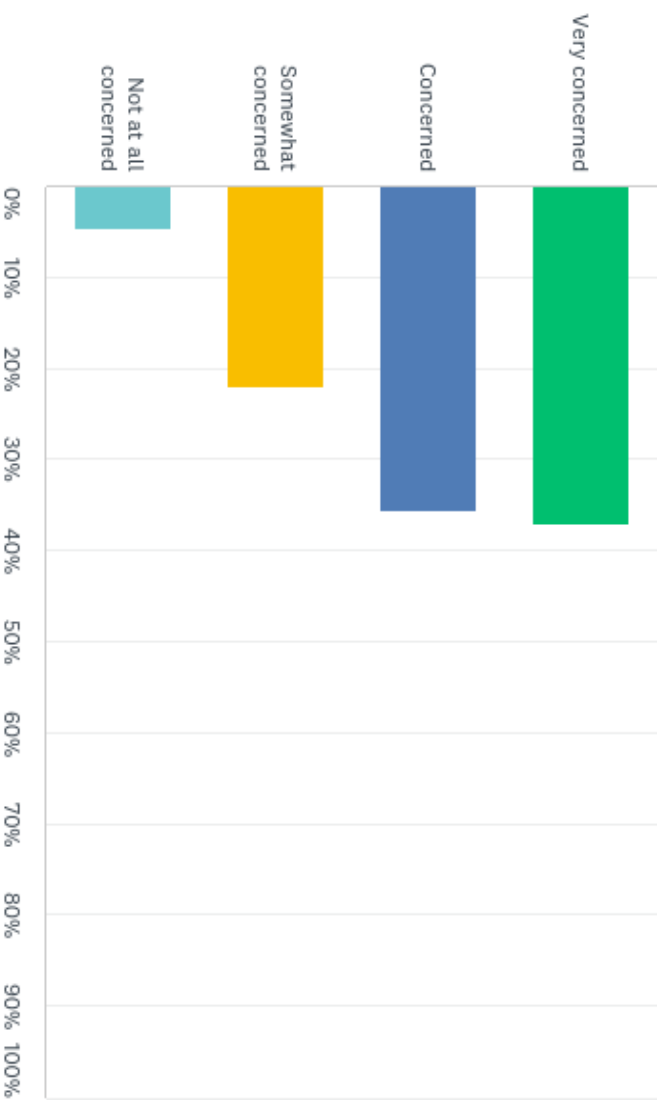
Q19: How concerned are you with prescription drug abuse in your community?

Answered: 774 Skipped: 9



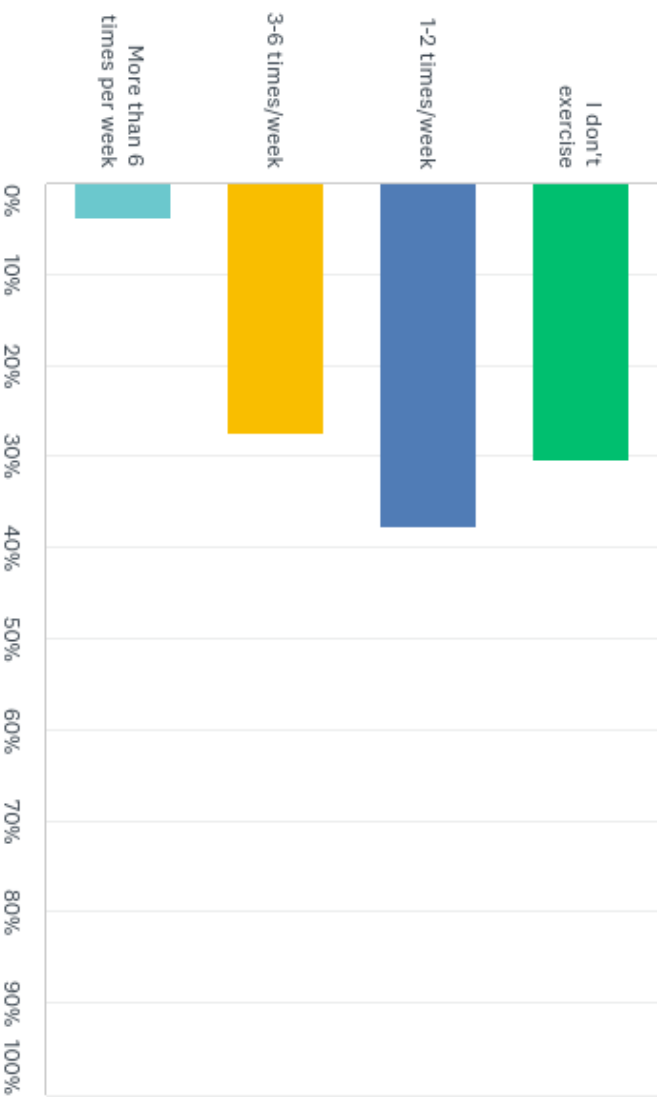
Q20: How concerned are you with illegal drug use in your community?

Answered: 775 Skipped: 8



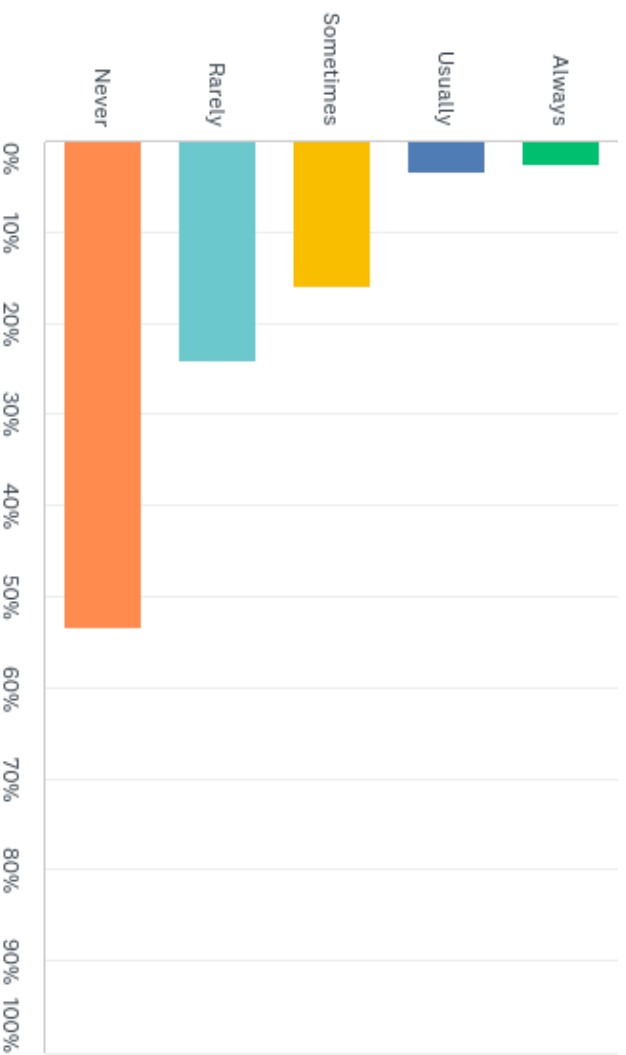
Q23: How many times a week do you exercise?

Answered: 775 Skipped: 8



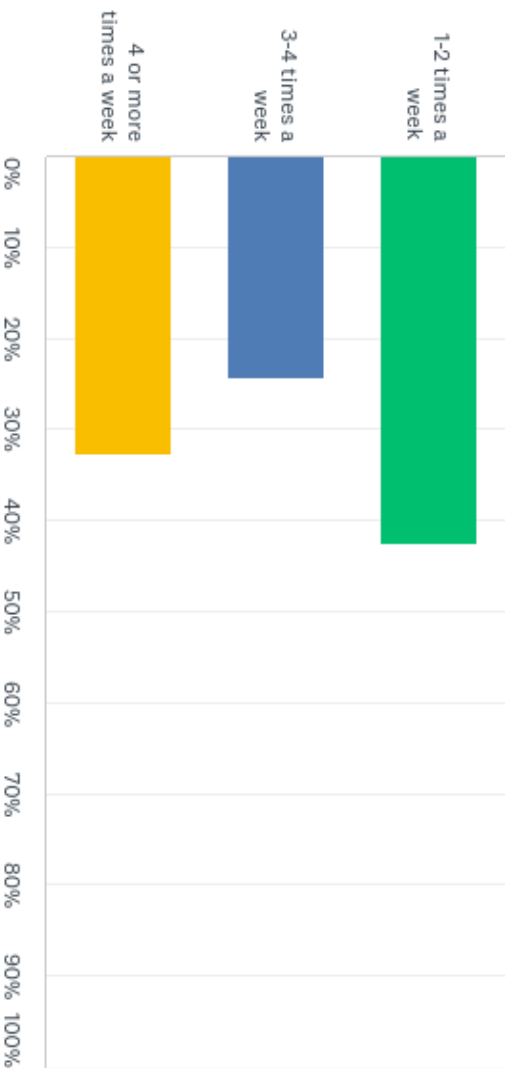
Q24: How often in the past 12 months would your household say they were worried or stressed about having enough money to buy food? Would you say you were worried or stressed -

Answered: 781 Skipped: 2



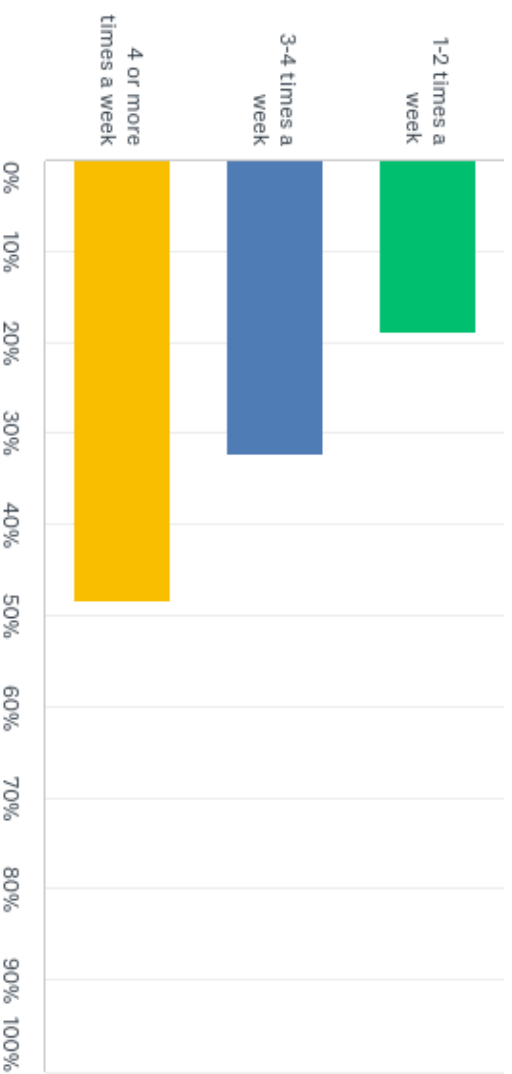
Q25: During the past month, not counting juice, how many times did you eat fruit?

Answered: 770 Skipped: 13



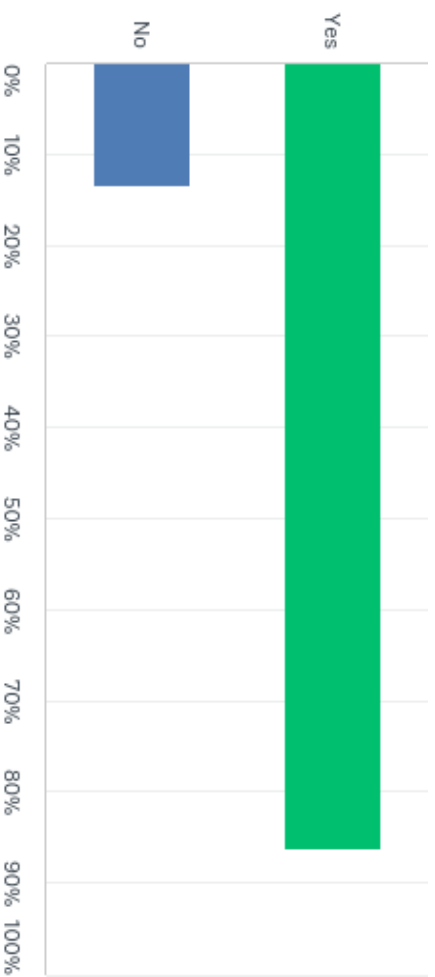
Q26: During the past month, how many times did you eat vegetables?

Answered: 779 Skipped: 4



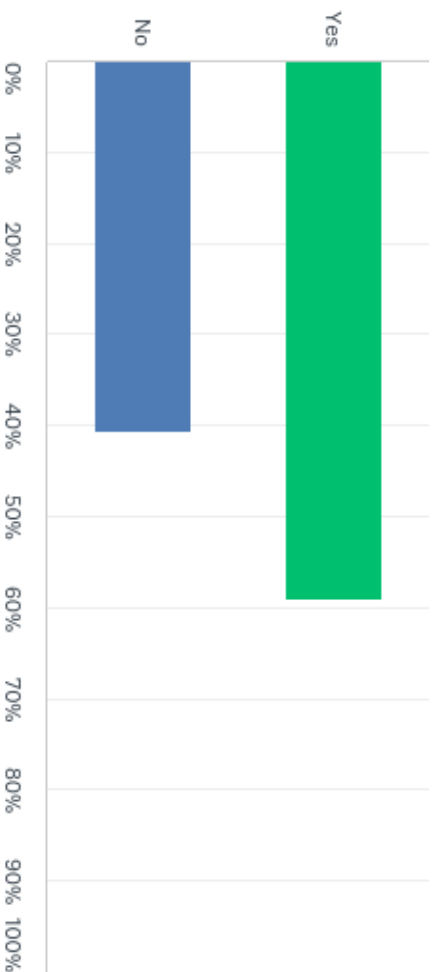
Q27: Are you satisfied with the quality of life in our community? (Consider your sense of safety, well-being, participation in community life and associations, etc.)

Answered: 778 Skipped: 5



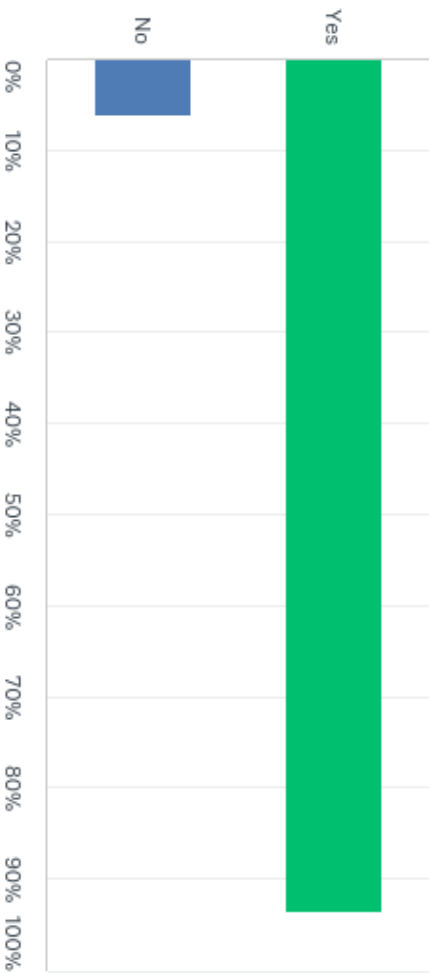
Q28: Is there economic opportunity in the community? (Consider locally owned and operated businesses, jobs with career growth, job training/higher education opportunities, affordable housing, reasonable commute, etc.)

Answered: 775 Skipped: 8



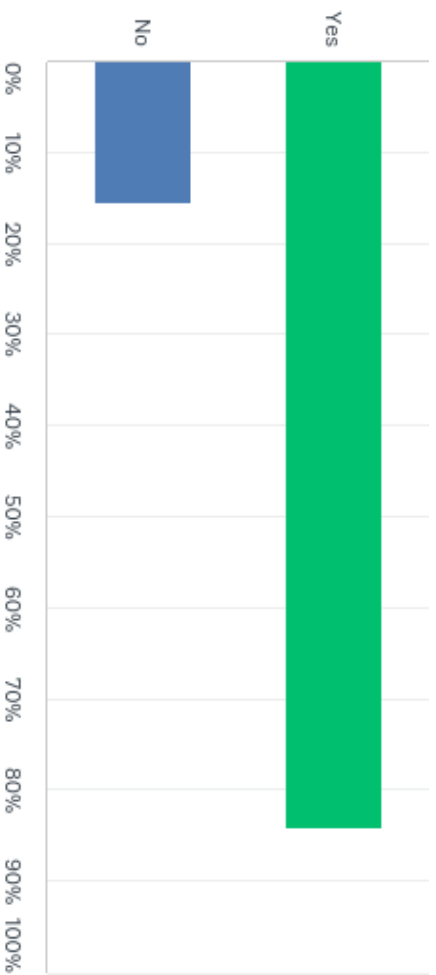
Q29: Do you feel the community is a safe place to live? (Consider resident's perceptions of safety in the home, the workplace, schools, playgrounds, parks, and the mall. Do neighbors know and trust one another? Do they look out for one another?)

Answered: 773 Skipped: 10



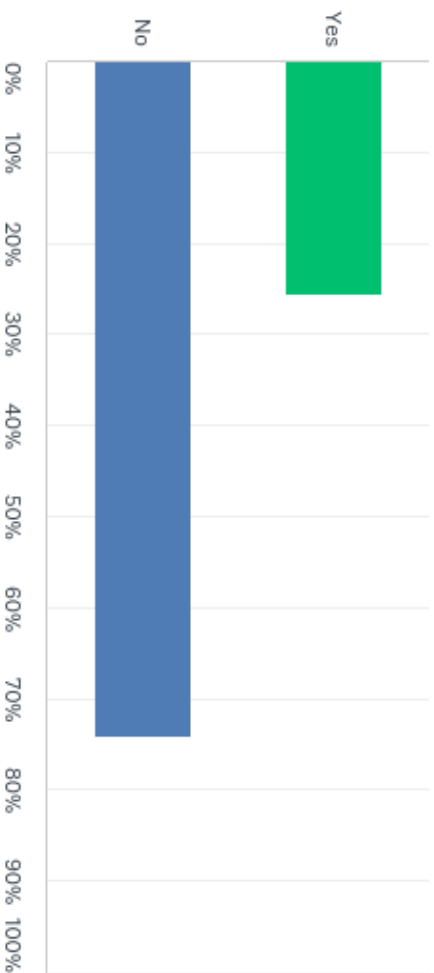
Q30: Does the community offer networks of support for individuals and families during times of stress and need? (such as neighbors, support groups, faith community outreach, agencies, organizations)

Answered: 769 Skipped: 14



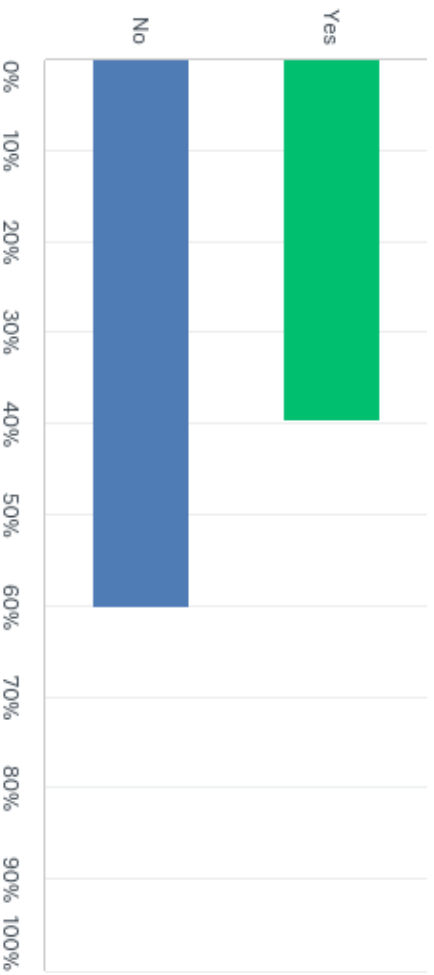
Q31 : Has your household prepared an Emergency Supply Kit with supplies like water, food, flashlights, and extra batteries that is kept in a designated place in your home?

Answered: 779 Skipped: 4



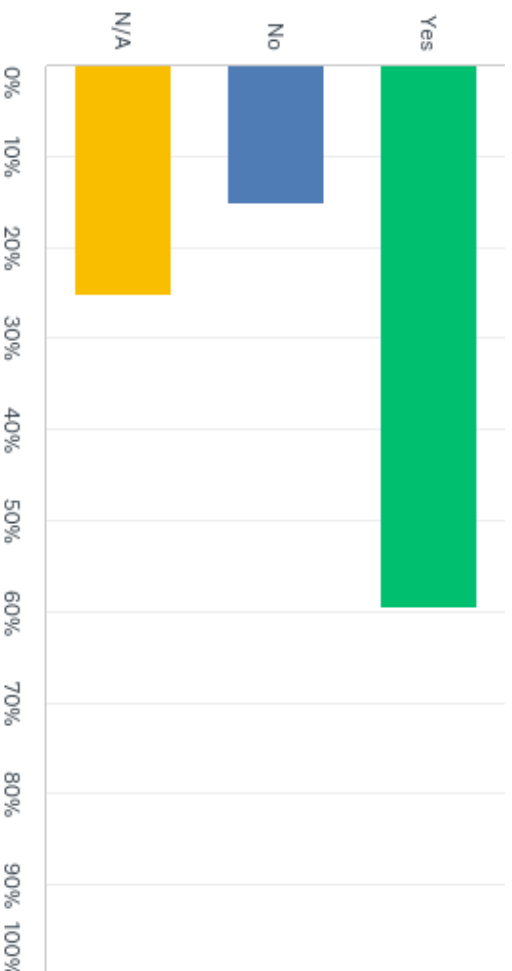
Q32: Does your household have any emergency plans, such as a list of emergency contact numbers and designated out-of-town contacts, designated meeting place, copies of important documents in a safe location?

Answered: 774 Skipped: 9



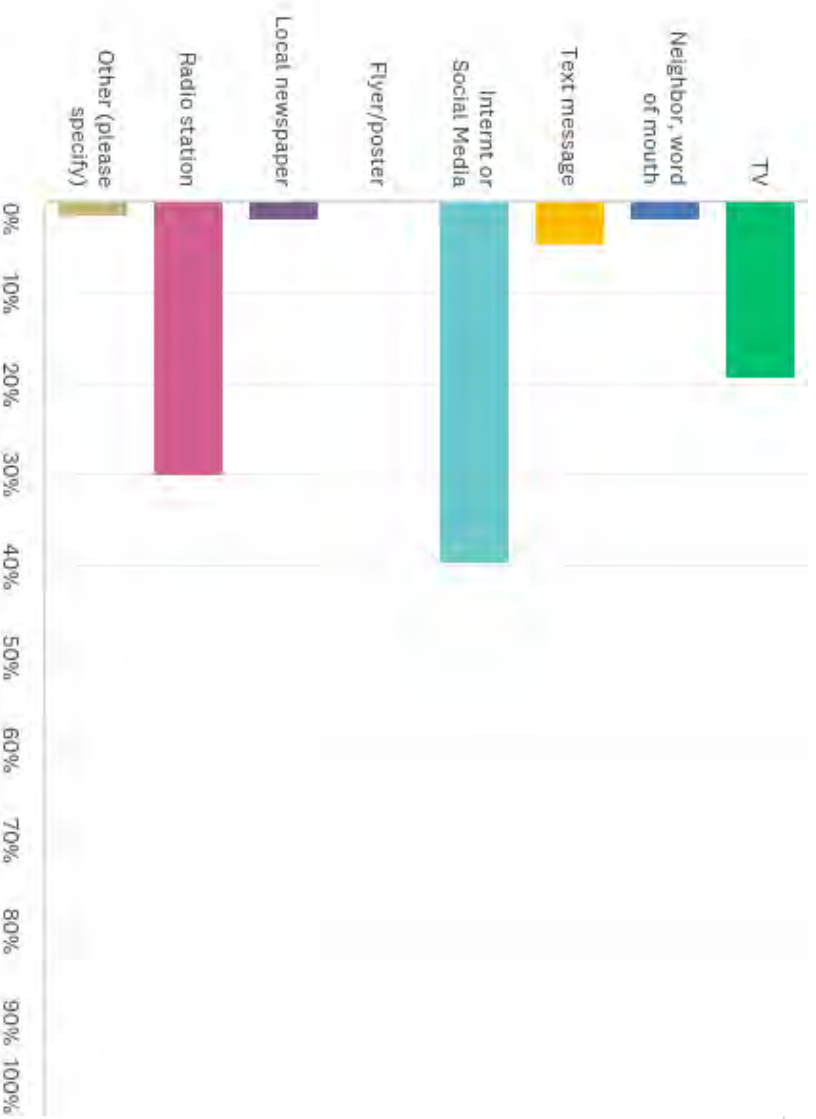
Q33: Does your household currently have a 7 day supply of medication for each person who takes prescribed meds?

Answered: 781 Skipped: 2



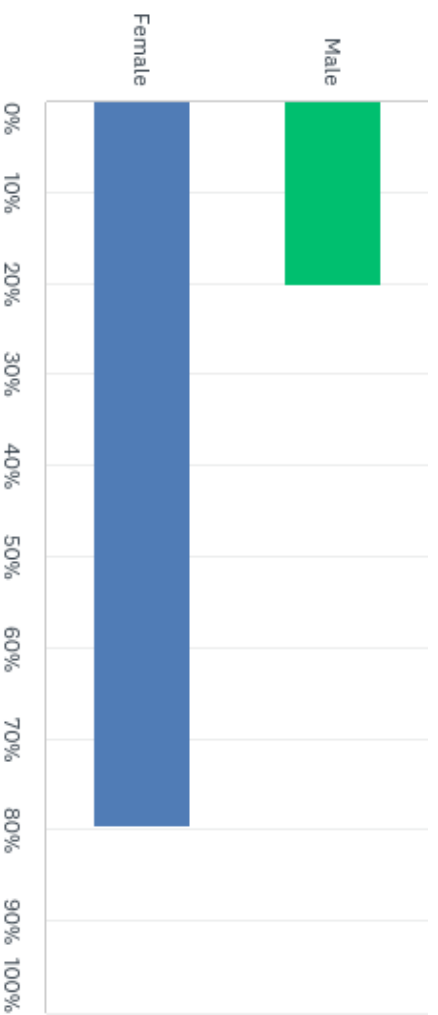
Q34: Where would you first look for reliable information regarding a disaster?

Answered: 778 Skipped: 5



Q37: Sex

Answered: 772 Skipped: 11



Q38: Ethnic group you most identify with

Answered: 780 Skipped: 3

