HSHS St Elizabeth's Hospital

Community Health Needs Assessment 2018

May 30, 2018

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An assessment of St. Clair County, Illinois was conducted jointly by HSHS St. Elizabeth's Hospital, **St Clair County Health Department and two Barnes Jewish Christian (BJC) hospitals, Memorial Hospital and Memorial Hospital East.**

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. Elizabeth's Hospital 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 FY2018 (July 1, 2017 through June 30, 2018), HSHS St. Elizabeth's Hospital 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. HSHS St Elizabeth's serves four counties; however, the focus of this CHNA is St. Clair County. Data collected throughout the assessment process was supplemented with a community asset review, qualitative data gathered through a CHNA Steering Committee with broad community representation, and local leader input. The internal work group also reviewed data provided by the St Clair County IPLAN.

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

1. Mental Health and Substance Abuse
2. Nutrition
3. Infant Mortality

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. 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. Elizabeth's Hospital-O'Fallon is a regional referral hospital located in St. Clair County, Illinois. For more than 143 years, the hospital has been the leader in health and wellness in St Clair County. HSHS St. Elizabeth's Hospital provides a wide range of specialties, including emergency and pediatric emergency services, surgical services, pulmonary, cardiac and cardiovascular specialties, laboratory with full spectrum imaging services. In addition the hospital offers women and infant specialty, wound care, pain management, cancer care, and sleep disorders services and along with acute comprehensive physical rehabilitation. HSHS St. Elizabeth's also offers a variety of outpatient specialties to include infusion therapy, physical, occupational, speech therapy, cardiac rehabilitation, and home health and hospice care.

HSHS St. Elizabeth's Hospital 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 (HSHS), a highly-integrated health care delivery system serving more than 2.6 million people in rural and midsized communities in Illinois and Wisconsin. HSHS generates 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 for 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 program including health professions education, subsidized health services, research and community building activities. In FY2017, the hospital's community benefit contributions totaled more $197 million.

Current Hospital Services and Assets

Major Centers & Services	Statistics	New Services & Facilities
• Emergency Care • Heart and Vascular Center • Hospitalists Services • Intensivists Services • Laboratory • Women and Infant • O'Fallon Medical Building • Outpatient Infusion Services • Outpatient Pain	• Total Beds: 144 • Total Colleagues: 1200 • Bedside RNs: 337 • Inpatient admissions: 7,990 • ED visits: 33,477 • Births: 747 • Inpatient surgeries: 1,586 • Outpatient surgeries: 2,888 • Case Mix Index-	• Opened a 144 bed replacement hospital in O'Fallon with an adjacent Medical Office Building in November 2017 • Belleville Health Center services continued, including Physical Therapy, Imaging and Lab • The Commission on

Management • Spiritual Care • Physical Therapy • Radiology/Imaging • Comprehensive Physical Rehabilitation • Sleep Disorders Center • Support Groups • Surgical Services • Urgicare • Women's Health Therapy • Wound Care Center	1.5343 • Physicians on Medical Staff: 480 • Volunteers: 76 • Community Benefit: $197.5 million	Cancer (CoC) Accreditation – named by the American College of Surgeons (ACS), HSHS St. Elizabeth's Hospital was granted three-year Accreditation in July 2017.

Hospital Accreditations and Awards –

Joint Commission -St. Elizabeth's Hospital is accredited by The Joint Commission- the nation's preeminent hospital accreditation body. This accreditation, which was recently renewed in September 2016, is granted following Joint Commission's evaluation of the hospital's performance in patient safety, quality of care and other key areas.

The Commission on Cancer (CoC) Accreditation – named by the American College of Surgeons (ACS), HSHS St. Elizabeth's Hospital was granted three-year Accreditation in July 2017. As a CoC-accredited cancer center, St. Elizabeth's takes a multidisciplinary approach to treating cancer to improve patient outcomes. When patients receive care at a CoC facility, they have access to information on clinical trials and new treatments, genetic counseling, and patient centered services including psycho-social support, a patient navigation process, and a survivorship care plan that documents the care each patient receives and seeks to improve cancer survivors 'quality of life.

Blue Distinction® Center+ for Cardiac Care - St. Elizabeth's Hospital is designated by Blue Cross and Blue Shield of Illinois as a Blue Distinction® Center+ for Cardiac Care, part of the Blue Distinction Specialty Care program. Blue Distinction Centers are nationally designated health care facilities shown to deliver improved patient safety and better health outcomes, based on objective measures that were developed with input from the medical community

Blue Distinction® Center+ for Maternity Care - St. Elizabeth's Hospital is designated by Blue Cross and Blue Shield of Illinois as a Blue Distinction® Center+ for Maternity Care, part of the Blue Distinction Specialty Care program. Blue Distinction Centers are nationally designated health care facilities shown to deliver improved patient safety and better health outcomes, based on objective measures that were developed with input from the medical community.

Chest Pain Center Accreditation - St. Elizabeth's Hospital is accredited by the Society of Chest Pain Centers, a professional organization focused on improving care for patients with

acute coronary syndromes and teaching the public to recognize and react to the early symptoms of a possible heart attack.

Echocardiography Accreditation - St. Elizabeth's Hospital is accredited by the Intersocietal Accreditation Commission (IAC), which grants accreditation to those facilities that are found to be providing quality patient care, in compliance with national standards through a comprehensive application process including detailed case study review.

EDAP, Emergency Department Approved for Pediatrics, is a designation from the Illinois Department of Public Health noting the Emergency Department is equipped to care for critically ill or injured patients and is designed specifically for children. Staff are specially trained to care for the special needs of children in an emergency setting.

Emergent Stroke Ready Hospital, is a designation from the Illinois Department of Public Health noting that St. Elizabeth's Hospital is adhering to written emergency stroke protocols and has the ability, 24 hours a day, 365 days a year to provide immediate, advanced stroke treatments and interventions.

Intersocietal Commission for the Accreditation of Vascular Laboratories - St. Elizabeth's Hospital Vascular Laboratory achieved accreditation by the Intersocietal Commission for the Accreditation of Vascular Laboratories (ICAVL) for its commitment to providing a high level of patient care and quality testing for the diagnosis of vascular disease.

CARF - St. Elizabeth's 40-bed in-patient rehabilitation unit is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), a nonprofit organization conducts thorough evaluations of rehabilitation centers to ensure they conform to nationally recognized service standards, meet rigorous guidelines for service and quality, and focus on delivering the most favorable results for their patients.

Laboratory Accreditations - The hospital's Pathology Lab is certified by the College of American Pathologists and licensed by CMS. The Blood Gases Lab is certified by COLA, a physician-directed organization that promotes excellence in laboratory medicine and patient care.

Vascular Lab - The Vascular Lab at St. Elizabeth's Hospital, which treats patients for vascular diseases, is accredited by the Intersocietal Commission for the Accreditation of Vascular Laboratories.

American College of Radiology (ACR) Accreditation for our mammography program.

Outpatient Therapy

*IL Workman's Comp
*MO Workman's Comp

Community Served by the Hospital

Although HSHS St. Elizabeth's Hospital serves multiple counties, Clinton, Monroe, Madison and St Clair, for the purposes of the CHNA, the hospital defined its primary service area and populations as those individuals residing in St. Clair County. The secondary data collection and analysis included Clinton, Monroe, Madison and St Clair Counties, therefore references to other counties in the data collection may be included. This reference will help demonstrate the intention to focus on St Clair County. The hospital's patient population includes all who receive care without regard to insurance coverage or eligibility for assistance.

Demographic Profile of St. Clair County

Characteristics*	IL 2016	St. Clair County 2016	St. Clair County 2010	% Change for County
Total Population	12,801,539	262,479	270,056	-2.81
Median Age (years)	37	37.5	36.9	+1.63
Age				
Under 5 years	768,092 (6.0%)	16,536 (6.3%)	18,331 (6.9%)	-9.79
Under 18 years	2,931,552 (22.9%)	62,470 (23.8%)	72,065 (25.8%)	-13.31
65 years and over	1,869,025 (14.6%)	38,321 (14.6%)	33,244 (12.5%)	+15.27
Gender				
Female	6,515,983 (50.9%)	135,702 (51.7%)	140,080 (51.9%)	-3.13
Male	6,285,556 (49.1%)	126,777 (48.3%)	129,976 (48.1%)	-2.46
Race and Ethnicity				
White (non-Hispanic)	7,898,550 (61.7%)	162,999 (62.1%)	174,458 (64.6%)	-6.57
Black or African American	1,881,826 (14.7%)	79,794 (30.4%)	82,302 (30.5%)	-3.05
Native American or Alaska Native	76,809 (0.6%)	262 (0.1%)	652 (0.2%)	-59.82
Asian	704,085 (5.5%)	3,675 (1.4%)	3,276 (1.2%)	+12.18
Hispanic or Latino	2,176,262 (17%)	10,499 (4.0%)	8,785 (3.3%)	+19.51
Hmong	N/A	N/A	N/A	N/A
Speaks language other than English at home^	2,905,949 (22.7%)	12,599 (4.8%)		
Median household income	$59,196	$50,006	$48,562	+2.97
Percent below poverty in the last 12 months^	1,664,200 (13%)	40,422 (15.4%)	41,859 (15.5%)	-3.43
High School graduate or higher, percent of persons age 25+^	11,303,759 (88.3%)	237,543 (90.5%)	236,029 (87.4%)	+0.64

*Unless otherwise indicated, the data source is U.S. Census Quick Facts.
^Source: U.S. Census Bureau, 2010-2014 and 2006-2010 American Community Survey 5 Year estimates (through Fact Finder).-

– Additional data that is related to the Priority needs is located in the priority needs section of this document

Veteran Status: A higher proportion of the population in the St. Elizabeth service area are veterans than compared to the state as a whole. Out of the total population of residents in the report area over the age of 18 *461, 822), 55,938 are veterans.

Report Area	% of Population who are Veterans
St. Clair County	13.97%
Illinois	6.8%

Data Source: US Census Bureau, American Community Survey: 2011-2015. Accessed via Community Commons.
Source geography: County.

Disability Status: The St. Elizabeth service area has a higher proportion of the population who are disabled compared to the state as a whole.

Report Area	% of Population who are Disabled
St. Clair County	12.61%
Illinois	10.73%

Data Source: US Census Bureau, American Community Survey: 2011 to 2015. Accessed via Community Commons.
Data geography: County.

Social Determinants of Health

Health Insurance Status: Of the four counties included in the St. Elizabeth service are, all have a lower uninsured rate than the state. However, St. Clair County has a higher rate of uninsured children, a lower percentage of privately insured residents, and a higher rate of publicly insured residents when compared to the state rate.

Report Area	% Uninsured (all) †	% Uninsured (Under 18) †	% Uninsured (18-64) †	% Privately Insured (of those insured) *‡	% Publically Insured (of those insured) * ‡
St. Clair County	9.2%	3.5%	13.4%	66.0%	36.8%
Illinois	11%	2.89%	14%	68%	31%

†Data Source: US Census, American Fact Finder, American Community Survey. Selected Characteristics of Health Insurance Coverage, 2011-16 S2701
‡Data Source: US Census, American Fact Finder, American Community Survey. 2010-16 Public/Private Insurance: Public Health Insurance Coverage by Type S2704, Private Health Insurance Coverage by Type S2703

*Private and public insurance coverage is not mutually exclusive in the American Community Survey. Coverage type sums may exceed 100%. Private insurance is defined as insurance provided by an employer or union, purchased as an individual from a private company, and TRICARE and other military insurance plans. Public insurance is defined as insurance provided by Medicaid, Medicare, the VA, or state programs.

Access to Care

Usual Source of Care: The most recent Illinois Behavioral Risk Factors Surveillance System county level data indicate that the proportion of residents who report having a usual source of medical care than the state rate of 82.6%.

Report Area	% Indicating a Usual Medical Provider
St. Clair County	87%
Illinois	82.6%

Dentist Access

Report Area	Ratio of Population to Dentists
St. Clair County	1459:1
Illinois	1380:1

Data Source: Area Health Resource File, 2015 data via the County Health Rankings. Source geography: County.

*****Mental Health Providers Access:*** **In St. Elizabeth's service area, there is less access to mental health providers than compared to the state as a whole.**

Report Area	Ratio of Population to Mental Health Providers
St. Clair County	1211:1
Illinois	580:1

Mental Health Providers include psychiatrists, psychologists, licensed clinical social workers and counselors, and advanced practice nurses specializing in mental health.

Data Source: Center for Medicare and Medicaid Services, National Provider Identification, 2016, via the County Health Rankings. Source geography: County.

Other Primary Care Providers*: The residents of St. Clair County have more access to other care providers such as nurse practitioners (NPs), physician assistants (PAs), and clinical nurse specialists than compared to the state.

Report Area	Ration of Population to Other Primary Care Providers
St. Clair County	1562:1
Illinois	1741:1

Data Source: Area Health Resource File, 2016 data via the County Health Rankings. Source geography: County and Service Area.

**Other Primary Care Providers is the ratio of the county population to the number of other primary care providers. Other primary care providers include nurse practitioners (NPs), physician assistants (PAs), and clinical nurse specialists.*

Clinical Care

Proportions of Hospitalizations due to Acute Conditions: Pneumonia was the most common cause of hospitalization due to an acute condition.

Acute Condition	St. Clair County	Illinois
Acute Renal Failure	16.6%	10.8%
Adult Respiratory Failure	7.1%	5.2%
Chest Pain	8.9%	8.9%

*Less than 10 cases per county
Note: This indicator is compared with the state average. Not all acute conditions are shown; percentages may not equal 100%. Data Source: Illinois Department of Public Health's IQUERY, 2014 data. Source geography: County.

Hospitalizations due to Chronic Disease:

Chronic Condition	St. Clair County	Illinois
Acute Myocardial Infarction	9.9%	6.8%
Congestive Heart Failure	18.2%	12.0%
Coronary Artery Disease	6.0%	4.7%
Diabetes with Complications	9.5%	8.0%
Hypertension	1.7%	1.1%
Irregular Heart Beat	10.5%	8.5%

*Less than 10 cases per county
Note: This indicator is compared with the state average. Not all chronic conditions are shown; percentages may not equal 100%. Data Source: Illinois Department of Public Health's IQUERY, 2014 data. Source geography: County.

Behavioral Factors

Smoking: In the St. Elizabeth service area, the percentage of female and male residents who smoke exceed the state rate in all four counties.

Report Area	Male	Female
St. Clair County	25.5%	20.7%
Illinois	21.9%	17.7%

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.

Physical Activity: This data focuses on the BRFSS question "During the past month, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?" The rate in the St. Elizabeth service area was lower than the state rate.

Report Area	Do You Get Any Exercise? (Male)	Do You Get Any Exercise? (Female)	Gets Exercise (All Adults)	Does Strengthening Exercises (All Adults)
St. Clair County	66.8%	65.4%	66.1%	39.6%
Illinois	75.9%	74.5%	75.2%	44.5%

Data Source: Illinois Behavioral Risk Factors Surveillance System 2010-2014 series.

Chronic Disease Prevalence and Mortality-Overall

Heart Disease Mortality: In the St. Elizabeth service area, heart disease mortality rates for both men and women are higher than the state rate.

Report Area	Male-Per 100,000	Female-per 100,000	All Adults-per 100,000
St. Clair County	162.4	85.7	118.4
Illinois	138.7	74.8	102.3

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

Cerebrovascular Disease Mortality: In the St. Elizabeth service area, the rate of cerebrovascular disease mortality surpass the state rate.

Report Area	Male-Per 100,000	Female-Per 100,000	All Adults-Per 100,000
St. Clair County	48.3	41.9	44.8
Illinois	38.8	36.7	37.9

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

Chronic Lower Respiratory Disease Mortality: In the St. Elizabeth service area the rates of lung disease mortality for St. Clair County exceeds the state rate.

Report Area	Male-Per 100,000	Female-Per 100,000	All Adults-Per 100,00
St. Clair County	59.3	49.3	53.2
Illinois	44.7	35.8	39.2

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

Cancer Screening Adherence, Incidence, and Mortality

***All Cancer Mortality*:** Between 2010 and 2014, the all cancer mortality rates for all adults were higher than the state rate in Madison County and St. Clair County.

Report Area	Male-Per 100,000	Female-Per 100,000	All Adults-Per 100,000
St. Clair County	228.4	162.5	189.0
Illinois	208.5	150.3	173.8

Note: This indicator is compared with the state average. Data Source: Illinois State Cancer Registry. Source geography: County.

Access to Exercise Opportunities: The St. Elizabeth service area had exercise opportunities compared to the state as a whole.

Report Area	Percentage of Population With Adequate Access to Locations for Physical Activity
St. Clair County	83%
Illinois	89%

Note: This indicator is compared with the state average. Data Source: Source geography: Business Analyst, Delorme map data, ESRI, & US Census Tigerline Files, 2014 data via the County Health Rankings. Source geography: County.

Child and Adolescent Health Supplement

Demographics and Social Determinants of Health

Child and Family Population: In St. Clair County, the proportion of the population under the age of 18 is higher than the state, as is the proportion of the households with children. Additionally, the percentage of single parent households is considerably higher in St. Clair County.

Report Area	*Population Aged 0-17 (% of Total Population)* †	*Households with Own Children (% of Total Households)* †	*Single Parent Households (% of Family Households)* ‡
St. Clair County	24.37%	32.59%	44%
Illinois	23.49%	31.94%	32%

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

‡ Data Source: US Census Bureau, American Community Survey. 2011-15. Accessed via County Health Rankings & Roadmaps. Source geography: Tract.

Child Population by Race/Ethnicity: Children in St. Clair County are more racially and ethnically diverse than compared to Clinton or Monroe County.

Report Area	White	African American	Asian	Other	Multi-Racial	Hispanic
St. Clair County	65.19%	29.91%	1.31%	0.75%	2.63%	3.69%
Illinois	66.3%	16.0%	4.5%	8.2%	4.8%	24.0%

Rows will not be equal to 100% as Hispanic is considered an ethnicity while other categories are considered races Therefore, individuals may be both white and Hispanic.

Note: This indicator is compared with the state average.

Data Source: US Census Bureau, American Community Survey, 2011-2015 data. Accessed via Community Commons. Source geography: County.

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NCES - Common Core of Data. 2014-15. Accessed via Community Commons. Source geography: Address.

Process and Methods Used to Conduct the Assessment

HSHS St. Elizabeth's Hospital led the planning, implementation and completion of the Community Health Needs Assessment in partnership with St. Clair County Health Department, BJC Memorial and BJC Memorial East.

Internal

HSHS St. Elizabeth's Hospital undertook a 10-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 and external steps:

HSHS St Elizabeth's senior leadership engaged Southern Illinois School of Medicine Survey Research Office, Springfield, Illinois, to provide quantitative and secondary data and community health data on the HSHS St Elizabeth's service area. In addition, the team, along with members of the community benefits committee identified additional data set to review and discuss. Additional data included the top 10 emergency department discharge diagnosis, the top 10 inpatient diagnosis and a review of two of the surveys that were conducted as part of the St Clair County MAPP process (Mobilizing Action through Process and Partnerships). In addition they also took into serious consideration the information provided by the stakeholder community leader focus group. The team also reviewed the FY15 CHNA.

A core group of HSHS St Elizabeth's colleagues provided valuable input for this CHNA. This focus group discussed the data, shared insights from their perspective vantage point and identified their top three healthcare areas of focus.

The management team receives ongoing education on community benefit and provides documentation that supports their community benefit work and those of their team members. This documentation is submitted for review to the Community Benefit Director for review and submission into CBISA.

External

HSHS St. Elizabeth's Hospital 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 working in concert with the St Clair County Health Department IPLAN process. In anticipation of the HSHS St Elizabeth's CHNA, the hospital worked collaboratively with the St Clair County Health Department as a partner to lead one aspect of the MAPP process. In addition the hospital fully supported all aspects of the IPLAN development. St Clair County hosted their annual Healthcare Policy Summit with

keynote speaker Tyler Norris and a panel of regional health care leaders. The summit generated collective energy around the county health rankings and an unprecedented commitment by community leaders to get involved. This increased awareness by a broad section of the community offers great potential for further collaboration throughout the county.

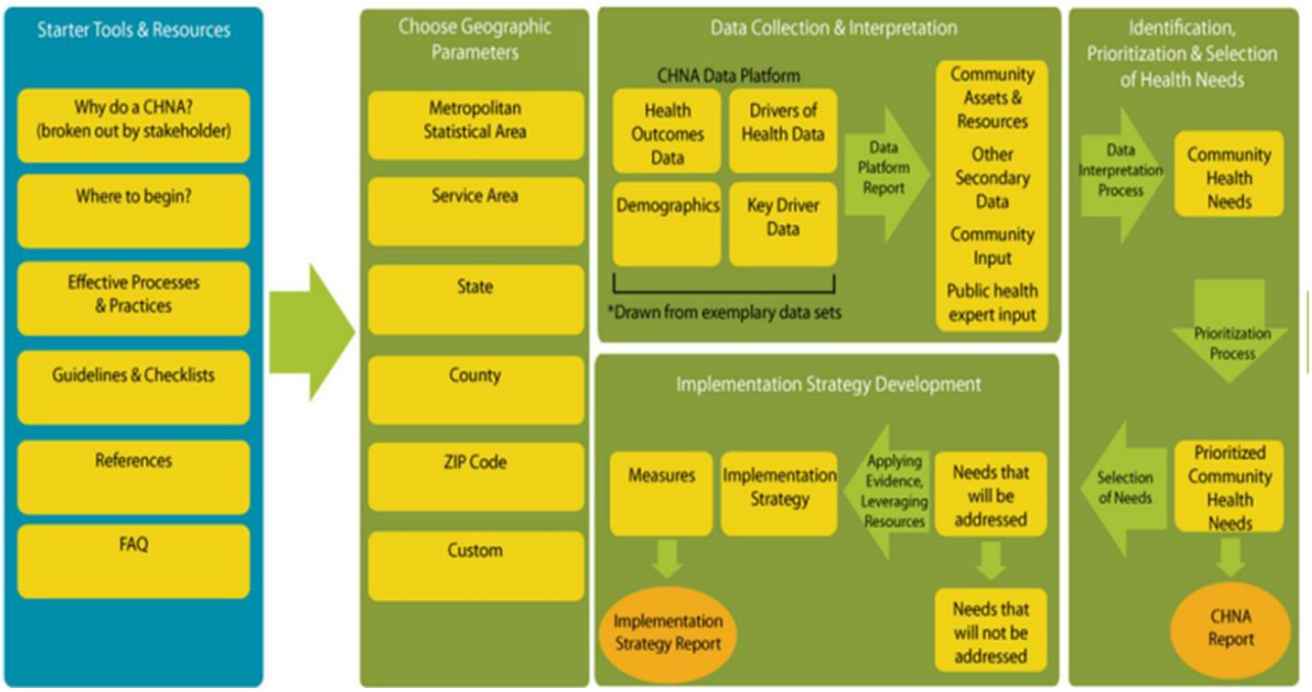
For the first time, two other local hospitals partnered with HSHS St Elizabeth's to conduct a focus group on the perceptions of the health needs of St Clair County residents from the perspective of community leaders. Community leaders were invited based on their awareness and expertise in the needs of our community. There was particular attention afforded to those who work with the underserved, low income, and minority populations.

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 below:



Data Sources

The CHNA process utilizes both primary data including hospital data, focus groups and key stakeholder meetings as well 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. In addition, this data was supplemented with data from:

- Feed America
- Area Health Resource File
- Center for Medicare and Medicaid Services
- Dartmouth Atlas of Health Care
- Illinois Department of Public Health IQUERY
- USDA Food Environment Atlas
- Uniform Crime Reporting-FBI
- Diabetes Interactive Atlas
- National Center for Health Statistics
- CDC Wonder
- National Center for HIV/AIDS, Viral Hepatitis, and TB Prevention
- Safe Drinking Water Information System (EPA)
- Illinois Youth Survey
- Illinois DCFS
- Pediatric Nutrition Surveillance (county level data provided by IDPH)
- Health Indicators Warehouse
- OneSource Global Business Browser (county Health Rankings)
- National Center for Educational Statistics(NCES)
- Institute for Health Metrics and Evaluation Statistics (IHME)
- Meditech Data

The data was gathered, presented, and shared with community members at the key stakeholder meeting. Community benefit members were also presented the information along with these key stakeholders. The data shared sparked dialogue and discussion among the community leaders. As part of the discussion they were asked to rank the identified need as well as the ability to collaborate to meet the health need.

Input from Persons Who Represent the Broad Interests of the Community

HSHS St. Elizabeth's Hospital 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 three identified community health needs: Nutrition and Wellness, Access to Care, Cardiac/Cardiovascular Disease. 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 on human, material and financial resources.

Input from Community Stakeholders

Because of the partnership with the county to execute the MAPP process and the overlap of the IPLAN and the hospital's CHNA, the shared data captured by the county to assess the community along with completing a community leader focus group were key aspects for the review committee.

The two surveys that were completed by community members were the "Quality of Life Survey" and the "Forces of Change" Survey.

Under the direction of the MAPP Assessment Team, a **'Quality of Life'** survey was administered among a sample population of St. Clair County residents to assess the overall quality of life and to identify community concerns, themes and strengths. The survey replicated the 2005 and 2010 Quality of Life questionnaire and added additional items for access to healthy, affordable foods and opportunities for recreation. Between the months of May 2017 and July 2017, Health Care Commission Members collected 846 surveys from St. Clair County residents (ages 18 years and older) were collected through the following outlets:

- Health Department staff and Board of Health members
- Get Up & Go! Board members
- YMCA Board members
- St. Clair County Youth Board membership list
- 200+ participants who attended the Summit (who live, work and play in SCC)
- Scott AFB Partnership Network
- SWIL American Cancer Society Network
- Ogle Neighborhood Association

Key findings of the Quality of Life survey showed the following:

- Minority citizens reported a lower quality of life related to safety, access to healthy food, tolerance, growing old, raising kids and community involvement.
- Those living in Region A reported a lower quality of life related to economy, access to healthy food, tolerance and community involvement.
- Those with less education reported a lower quality of life related to tolerance, safety, community involvement, raising kids and the economy..
- Younger citizens reported a lower quality of life related to the economy, raising children, growing old, health care and safety. All age groups reported a high level of dissatisfaction with the economy.
- Healthcare was the only category where differences in quality of life were reported by gender.
- Safety for citizens appeared as a recurring theme.
- Creating pedestrian friendly neighborhoods with trails and sidewalks was identified as a need in Region B.

- Access to transportation services were concerns reported among Region C and Region A citizens.
    - (Region A represents urban areas, Region B suburban areas, Region C –rural areas)

Seven key challenges were identified from the Community Themes and Strengths Assessment. They include:

- Inadequate resources for mental and emotional needs;
- Improvements in land use and accessibility for walking;
- Access to transportation and housing for older adults;
- Public safety
- Availability of health education and youth services
- Opportunities for civic engagement
- Improved access to resources and services for disabled individuals and senior adults (i.e. legal, financial, business)

The second survey conducted by the county was the **Forces of Change Survey**. The purpose of the Forces of Change Assessment is to identify forces that are occurring or will occur that affect the community or the local public health system. By design, this assessment allows the community health planning team to focus on broader community issues and their influence (direct or indirect) on health. These include:

- Uncontrollable factors that impact the environment in which the local public health system operates.
- An inventory of social, economic, demographic, educational, cultural, and other major system characteristics that pose opportunities or challenges to improving the health of the community.

A survey instrument was developed based upon a review and revision to the Forces of Change Survey instrument used in 2010. This review affirmed that many of the potential forces impacting the health of the community five years ago continue to be relevant. Additional issues were added to the instrument and respondents were able to add their own issues

After the survey instrument was completed, key informants were identified, contacted, and asked to identify and rank the forces that provided the greatest opportunity for improving community health as well as those that pose a threat. In addition to asking key informants to complete the survey, it was also posted on-line and the general public was invited to submit their responses as well.

Survey responses were received from 275 community representatives. Response rates were calculated for each of the 22 potential forces defined on the survey instrument.

Opportunities (in rank order)
1. Expanding availability to health care services
2. Strengthening the educational preparation of young people

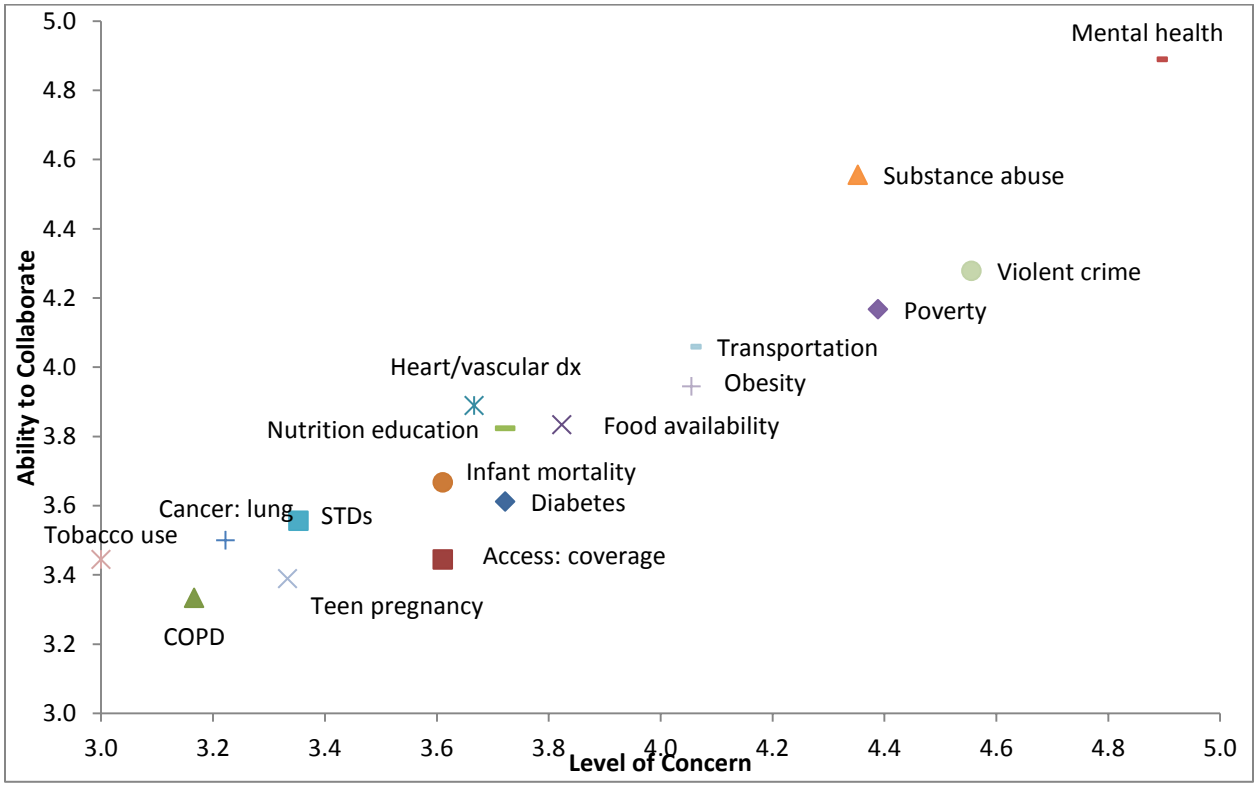
3. Access to Healthy Foods
4. New business expansion

Health Care Reform Challenges (in rank order)
1. Alcohol, tobacco and other substance abuse
2. Violence (domestic, child abuse, crime)
3. Aging of the population (greater number of people >65 yrs needing more health care)
4. Economy-livable wage
5. Uncertainty of Health Care Reform

A force of change can pose both a challenge and an opportunity, depending on one's perspective and how a community chooses to respond to a force. An analysis of the responses to the forces of change assessment reveals that the forces that pose the greatest opportunities for improving the health of the community, also pose the greatest challenge

Twenty one community leaders actively participated in a focus group for the CHNA process involving three hospitals. During this conversation the stakeholders were asked to review the secondary data, assess both hospitals FY15 CHNAs and determine if they felt these needs are still a priority. The presentation also included the list of needs that were not being specifically addressed or measured in the FY15 CHNAs.

At the end of the presentation, the community stakeholders were asked to rate the identified needs based on their perceived level of concern in the community, and the ability of the community to collaborate around them. The following chart represents the results of the discussion and how the community leaders prioritize the county health needs.



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

- St. Clair County Public Health Department
- HSHS St. Elizabeth's Hospital
- BJC Memorial Belleville
- BJC Memorial East
- Catholic Urban Programs*
- St Vincent DePaul- Est St Louis*
- Scott Air Force Base
- East Side Aligned*
- Programs and Services for Older People*
- YMCA
- City of O'Fallon
- City Of Belleville
- O'Fallon Chamber of Commerce
- St Clair County 708 Mental Health Board*
- 932nd Reserve Unit
- Southern Illinois Health Foundation (FQHC)
- McKendree University
- St Clair County State's Attorney
- Touchette Regional Hospital
- Age Smart
- St Clair Regional Office of Education
- Karla Smith Foundation*
- BEACON Ministries*
- HSHS Southern Illinois Division
- BJC Health Care

**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. Elizabeth's Hospital 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 Catholic Urban programs, St. Vincent DePaul East St. Louis, BEACON ministries, Karla Smith Foundation, St. Clair County 708 Mental Health Board, East Side Aligned, Programs and Services for Older Persons, and Age Smart. These organizations serve the under-resourced in our community, including low-income seniors, adults and children living in poverty, and persons with mental illness and substance abuse. 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

An internal work group composed to HSHS colleagues and members of our Community Benefits committee met to review and assess the information and data gathered over the course of the past several months. The team reviewed the FY15 CHNA, the secondary data analysis, the key stakeholder focus comments and internal hospital data to determine our priority health needs. The group included HSHS Southern Illinois Executive Physician, our behavior health nurse practitioner, a social worker, community benefits director, a member of our financial team, a HSHS Divisional marketing manager, construction manager who is an RN, and three members of the Community Benefits Committee. These colleagues represent HSHS St Elizabeth's and the HSHS system as liaisons in the community.

The group prioritized their top three health needs. The group also referred to the chart that was created from the stakeholder meeting. Using this chart they stated that the community needs can be worked collaboratively. For example, mental health, substance abuse, violent crime, and poverty have significant overlap; these topics are grouped together in the upper left hand corner of the chart. In addition the priority health need of nutrition is located central in the chart and can encompass diabetes, obesity, food accessibility and nutrition education. The group felt that infant mortality is a result of the other needs. The internal work group only added one additional need: resources needed for the elderly. Each priority level (1.2.3) was given a numeric value to delineate the top three needs. Based on the priority level the top needs were easily identified.

As part of the discernment process the group was aware of the priority health areas identified in the recently published 2017 St. Clair County IPLAN. Members of the team were engaged in the MAPP process, aware of the county's priority focus areas, and St. Clair County health ranking (100 out of 102). Early efforts around collective impact to address the county priority healthy needs are underway although not formalized. To be transparent, the St. Clair County priority health issues include:

1. Community Safety
    a. Infant and Child Mortality
    b. Crime Prevention
    c. Strengthening Social Ties
2. Mental Health/Substance Abuse
    a. Suicide Prevention
    b. Substance Abuse Treatment and Prevention

3. Education
    a. Educational Achievement/Vocational Readiness
    b. Prevention-based Health Education/Promotion across the Lifespan

Based on the above information and review of the data, 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. Mental Health and Substance Abuse
2. Nutrition
3. Infant Mortality

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:**

- Resources for the Elderly- Although HSHS St. Elizabeth's is not focusing on this need in the CHNA, we continue to collaborate with those agencies that assist this population

Overview of Priorities

When addressing the top three health needs for St. Clair County, poverty and violent crime impacts and overlaps all three areas.

Population in Poverty (100% FPL and 200% FPL): Of the four counties comprising the St. Elizabeth service area, only St. Clair County, at 18.23%, has a poverty rate higher than the state rate. This indicator is revealed because poverty creates barriers to access including health services, nutritional food, and other necessities that contribute to poor health status.

Report Area	Total Population	Population Below 100% FPL	Population Below 200% FPL
St. Clair County	262,974	47,946 (18.23%)	92,923 (35.34%)
Illinois	12,571,110	1,801,118 (14.33%)	3,970,713 (31.59%)

Data Source: US Census Bureau, American Community Survey. 2011-15. Accessed via Community Commons. Source geography: Tract. *noted increase if 1% more persons living in poverty since last FY15 CHNA.

Children in Poverty: St. Clair County had a higher percentage of children below the poverty level as well as a higher percentage of children who are food insecure than compared to the state.

St. Clair County has a comparable rate of children eligible for free lunch than compared to the state.

Report Area	% of Children Below 100% FPL†	% of Children Who Are Food Insecure‡	% of Children Eligible for Free Lunch¥
St. Clair County	28.3%	22.36%	54.16%
Illinois	20.26%	21.28%	54.09%

†Note: This indicator is compared with the state average. Data Source: American Community Survey, 2011-2015. Accessed via Community Commons. Source geography: County.
‡Note: This indicator is compared with the state average. Data Source: Feeding America. 2014. Accessed via Community Commons. Source geography: County.
¥Note: This indicator is compared with the state average. Data Source: National Center for Education Statistics, NCES - Common Core of Data. 2014-15. Accessed via Community Commons. Source geography: Address.

Violent Crime Rate: The violent crime rate in the St Elizabeth report area is higher than the state rate. Violent crime is defined as offenses involving face-to-face confrontation (e.g. assault, rape, robbery, etc.). This indicator is important because it assesses community safety.

Report Area	Violent Crime Rate per 100,00
St. Clair County	749.2
Illinois	397

Data Source: Federal Bureau of Investigation, FBI Uniform Crime Reports. Additional analysis by the National Archive of Criminal Justice Data. Accessed via Community Commons. 2010-12. Source geography: County.

Mental Health and Substance Abuse

Mental health and Substance abuse is not only a county health issue but a national epidemic. The following data supports the impact of mental health and substance abuse on St. Clair County. The team believed that poverty plays a factor in substance abuse.

Depression: The percent of Medicare Beneficiaries diagnosed with depression in the St. Elizabeth service area was higher than the state rate.

Report Area	Total Medicare Beneficiaries	Beneficiaries with Depression	Percent with Depression
St. Clair County	29,375	5,125	17.4%
Illinois	1,451,929	219,143	15.1%

Mentally Unhealthy Days: The average number of mentally unhealthy days in the past month in St. Clair County was nearly the same as the state rate.

Report Area	Average Number of Mentally Unhealthy Days in the Past Month
St. Clair County	3.5
Illinois	3.4

Note: This indicator is compared with the state average. Data Source: Behavioral Risk Factors Surveillance System, 2010-2014 data via the County Health Rankings. Source geography: County.

Suicide and Self-Inflicted Injury Mortality: Suicide rates in St. Clair Counties were all higher than the state rate.

Report Area	Age-Adjusted Rate Per 100,00
St. Clair County	11.6
Illinois	9.7

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

Establishments that Sell Liquor; Compared to the statewide density, there is a higher ratio of bars and drinking establishments per 100,000 people in the St. Elizabeth service area than the state a whole. However, the data suggests that there are fewer beer, wine, or liquor stores in the St. Elizabeth service area.

Report Area	Bars and Drinking Establishments per 100,000	Beer, Wine, and Liquor Stores per 100,000
St. Clair County	31.63	5.18
Illinois	20.6	10.33

Data Source: 2015 County Business Patterns from the US Census Bureau accessed via American Fact Finder. Source geography: County.

Establishments that Provide Accommodations or Food Service: St. Clair County have a higher density of establishments that provide accommodations or food service per 100,000 people than compared to statewide density.

Report Area	Establishments per 100,000
St. Clair County	495.0
Illinois	201.8

Note: This indicator is compared with the state average. Data Source: 2015 County Business Patterns from the US Census Bureau, 722. Source geography: County.

Any Substance Use in the Past Year: The St. Elizabeth service area has a higher percentage of students using substances than compared to the state averages.

Report Area	8th Grade	10th Grade	12th Grade
St. Clair County	32%	46%	67%
Illinois	27%	46%	62%

*Substances include alcohol, cigarettes, marijuana and inhalants. Note: This indicator is compared with the state average. Data Source: Illinois Youth Survey 2016 data. Source geography: County.

Alcohol Use in Past Year: The percentage of alcohol use among the students in the St. Elizabeth report area is comparable to or slightly higher than the state averages.

Report Area	8th Grade	10th Grade	12th Grade
St. Clair County	23%	42%	62%
Illinois	23%	42%	58%

Note: This indicator is compared with the state average. Data Source: Illinois Youth Survey 2016 data. Source geography: County.

Marijuana Use in Past Year: By 12th grade, the percentage of marijuana use among the students in the St. Elizabeth report area is higher in Madison County and St. Clair County.

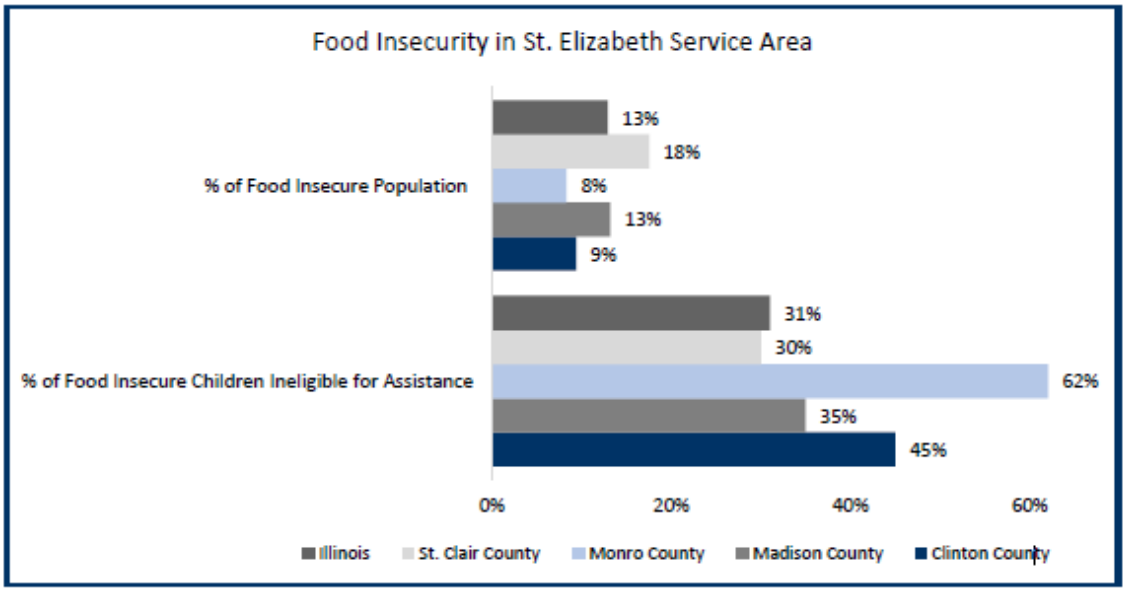
Report Area	8th Grade	10th Grade	12th Grade
St. Clair County	18%	21%	41%
Illinois	9%	22%	36%

Note: This indicator is compared with the state average. Data Source: Illinois Youth Survey 2016 data. Source geography: County.

Nutrition

The focus of nutrition impacts multiple areas of health to include diabetes, obesity, food insecurity, food accessibility, and impact of diet on other chronic diseases such as heart and cardiovascular disease.

Food Insecurity: This indicator reports the estimated percentage of the total population and the population under age 18 that experienced food insecurity at some point during the report year, but are ineligible for State or Federal nutrition assistance. The rate of food insecurity in children in the St. Elizabeth service area was higher than the state rate in every county except St. Clair County.



Data Source: Feeding America. Map the Meal Gap 2017: 2015 Child Food Insecurity: Data by County & Congressional District in Each State. Source geography: County

Households Receiving Supplemental Nutrition Assistance Program (SNAP) benefits: Of the St. Elizabeth service area, the percentage of residents in St. Clair County who receive SNAP benefits is higher than the overall percentage for the state.

Report Area	% Receiving SNAP Benefits
St. Clair County	16.0%
Illinois	13.1%

Data Source: US Census Bureau, American Community Survey: 2011 to 2015. Accessed via Community Commons.
Source geography: County

Adult Obesity: The rate of adult obesity in each county in the St. Elizabeth service area exceeds the state rate.

Report Area	Percent Males Obese	Percent Females Obese
St. Clair County	31.6%	33.8%
Illinois	26.3%	27.6%

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, CDC Diabetes Interactive Atlas, 2009-2013. Source geography: County.

***Fruit and Vegetable Intake*:** While the rate for the women of Madison County who report eating five or more servings of fruits and vegetables a day was just slightly higher than the state average (the rate of St. Elizabeth service area was lower than the state rate).

Report Area	5+ Fruits and Vegetables per Day (Men)	5+ Fruits and Vegetables per Day (Women)	5+ Fruits and Vegetables per Day (All Adults)
St. Clair County	11.6%	20.6%	16.4%
Illinois	18.8%	26.2%	22.6%

Note: This indicator is compared with the state average. Data Source: Illinois Behavioral Risk Factors Surveillance System 2007-2009 series. Source geography: County.

Diabetes: Of the four counties in the St. Elizabeth service area, only residents in Clinton County had a lower rate of diabetes than compared to the state.

Report Area	Total Population 20+	Population with Diagnosed Diabetes	Percent Adults with Diagnosed Diabetes
St. Clair County	195,304	24,965	11.6
Illinois	9,511,847	864,658	8.5

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

***High Cholesterol & High Blood Pressure**:* All four counties in the St. Elizabeth service area has a higher rate of high cholesterol and high blood pressure than compared with the state rate.

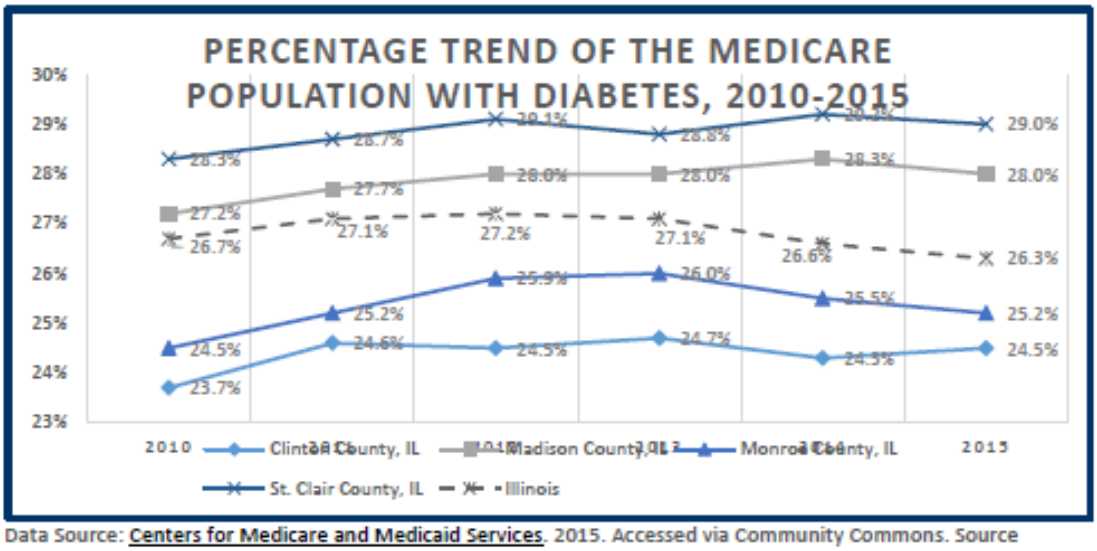
Report Area	High Cholesterol	High Blood Pressure
St. Clair County	39.6%	38.1%
Illinois	36.0%	30.8%

Note: This indicator is compared with the state average. Data Source: Illinois Behavioral Risk Factors Surveillance System 2010-2014 series. Source geography: County.

Diabetes: As seen in the following data, the rate of Medicare beneficiaries diagnosed with diabetes St. Clair Counties were greater than the state rate.

Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with Diabetes	Percent with Diabetes	Total Medicare Fee-for-Service Beneficiaries
St. Clair County	29,375	8,518	29%
Illinois	1,451,929	381,457	26.27%

Data Source: Centers for Medicare and Medicaid Services. 2015. Accessed via Community Commons. Source geography: County.



Data Source: Centers for Medicare and Medicaid Services. 2015. Accessed via Community Commons. Source geography: County.

High Cholesterol & Hypertension Prevalence – Medicare Population: The rates of high cholesterol and hypertension in the Medicare population exceeds the state rate.

Report Area	High Cholesterol	Hypertension
St. Clair County	48.9%	62.0%
Illinois	46.2%	56.4%

Data Source: Centers for Medicare and Medicaid Services. 2015. Source geography: County

Food Environment Index: The food environment index in St. Clair County (6.2) and Madison County (7.2) was lower than the state level of 8 out of 10. This index weighs two indicators related to access to healthy food and food insecurity (access to a reliable source of food). This index is on a scale of 0 to 10 (best).

Report Area	Food Environment Index
St. Clair County	6.2
Illinois	8

Note: This indicator is compared with the state average. Data Source: USDA Food Environment Atlas, 2010 & 2014 data. Accessed via County Health Rankings and Roadmaps. Source geography: County.

Food Access: This indicator reports the percentage of the population living in census tracts designated as food deserts; 37.39% of Madison County residents, 33.5% of Monroe County residents, and 31.86% of St. Clair County residents have low food access.

Report Area	Percent Population with Low Food Access
St. Clair County	31.86%
Illinois	19.36%

Note: This indicator is compared with the state average.
Data Source: US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas. 2015. Accessed via Community Commons. Source geography: Tract

Fruit and Vegetable Consumption: Among the students in the St. Elizabeth report area, most report eating fewer servings of fruits and veggies per day than when compared to the state averages.

Report Area	8th Grade (4+ servings of fruit/day)	8th Grade (4+ servings of veggies/day)	10th Grade (4+ servings of fruit/day)	10th Grade (4+ servings of veggies/day)	12th Grade (4+ servings of fruit/day)	12th Grade (4+ servings of veggies/day)
St. Clair County	21%	9%	8%	6%	4%	3%
Illinois	16%	11%	11%	8%	9%	7%

Note: This indicator is compared with the state average. Data Source: Illinois Youth Survey 2016 data. Source geography: County.

Infant Mortality

Infant Mortality: This indicator reports the rate of deaths to infants less than one year of age per 1,000 births. The rate for St. Clair County was 8.2 per 100,000; during this same time period the state rate was 7 per 1,000 live births. The Healthy People 2020 objective for infant mortality rate is 6.0 per 1,000 live births.

Report Area	Infant Mortality per 1,000 Live Births
St. Clair County	8.2
Illinois	7

Note: This indicator is compared with the state average. Data Source: CDC, Health Indicators Warehouse, 2007-2013 data. Accessed via County Health Rankings & Roadmaps. Source geography: County.

Low Birthweight: The percentage of low birthweight births, at 9.4%, was higher in St. Clair County than the state percentage of 8.4%. With respect to the Healthy People 2020 objective of 7.8% of births having low birthweight.

Report Area	& of Live Births with Low Birthweight (<2500 grams)
St. Clair County	9.4%
Illinois	8.4%

Note: This indicator is compared with the state average.
Data Source: US Department of Health & Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Vital Statistics System, CDC WONDER. 2006-12. Accessed via County Health Rankings & Roadmaps. Source geography: County

Births by Gestation Age: The proportion of babies born at full term in the St. Elizabeth service area was similar to the state rate.

Report Area	% of Birth (<27 Weeks)	& of Births 27-36 Weeks	% of Births >37 Weeks
St. Clair County	0.8%	8.9%	90.1%
Illinois	0.7%	9.8%	89.2%

Note: The most recent data for this topic on IQUERY is from 2008. This indicator is compared with the state average. Data Source: Illinois Department of Public Health IQUERY system, 2008 data. Source geography: County.

Infants Born to Mothers Who Smoke: In the St. Elizabeth service area, a significantly higher rate of infants was born to mothers who smoke than compared to the state rate. However, it should be noted that the data offered by the Illinois Department of Public Health has not been updated since 2008.

Report Area	Infants Born to Mothers Who Smoke (Age-Adjusted Rate per 100,000)
St. Clair County	202.2
Illinois	89.9

Note: The most recent data for this topic on IQUERY is from 2008. This indicator is compared with the state average. Data Source: Illinois Department of Public Health IQUERY system, 2008 data. Source geography: County.

Prenatal Care: In St. Clair County, 6.18% of mothers had late or no prenatal care. This is higher than the state rate of 5.4% of pregnant women who received late or prenatal care.

Report Area	Percentage of Mother With Late or No Prenatal Care
St. Clair County	6.18%
Illinois	5.4%

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System, CDC WONDER. Centers for Disease Control and Prevention, Wide-Ranging Online Data for Epidemiologic Research. 2007-10. Accessed via Community Commons. Source geography: County

Teen Births: The teen birth rate per 1,000 females aged 15-19 for St. Clair County was 50 per 1,000. The statewide rate was 30 per 1,000.

Report Area	Births per 1,000 Female Population (15-19 years old)
St. Clair County	50
Illinois	30

Note: This indicator is compared with the state average.
Data Source: US Department of Health & Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Vital Statistics System, 2008-2014. Accessed via County Health Rankings. Source geography: County.

Sexually Transmitted Disease (STDs): The sexually transmitted disease prevalence rates in St. Clair County for chlamydia, gonorrhea, and syphilis were much higher than the state rate.

Report Area	HIV (per 100,000) †	Chlamydia (per 100,000) ‡	Gonorrhea (per 100,000) ‡	Primary/Secondary‡ Syphilis (per 100,000)
St. Clair County	314	786.7	310.2	12.9
Illinois	323	540.4	133.1	8.4

†Note: This indicator is compared with the state average. Data Source: National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2013. Accessed via County Health Rankings & Roadmaps.
‡Note: This indicator is compared with the state average. Data Source: Illinois Department of Public Health IQUERY system, 2015 data. Source geography: County.

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 Medical Group
- BJC Memorial Belleville
- BJC Memorial East
- Touchette Regional Hospital
- SIHF Healthcare
- BJC Memorial Medical Group
- SSM Health Cardinal Glennon

Other Community Organizations and Government Agencies:

Mental Health/Substance Abuse

- Alcoholics Anonymous
- Chestnut Health System
- Centerstone
- Gateway Foundation Alcohol and Drug Treatment
- New Visons
- Narcotics Anonymous Metro East
- Recovery 360
- Intensive Outpatient Program Centers
- Treatment Alternatives for Safe Communities
- Comprehensive Behavioral Health Center
- Provident Life Crisis services
- St Clair County 708 Mental Health Board
- Violence Prevention Center
- Scott Air Force Base
- Partnership for Drug Free Communities

Nutrition

- Make Health Happen
- America Heart Association
- Local food pantries
- University of Illinois
- East Side Health District
- St. Clair County Health Department
- Scott Air Force Base

Infant Mortality

- St. Clair County Health Department
- Eastside Health Department
- March of Dimes
- Ever Thrive
- Children's Home and Aid society
- Racial Harmony

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 30, 2018.