

2022

Community Health Needs Assessment



midwest
MEDICAL CENTER

TABLE OF CONTENTS

INTRODUCTION.....	5
Executive Summary.....	6-10
Background.....	10-11
Midwest Medical Center Services.....	12-14
Local Impact of COVID.....	14-15
 ESTABLISHING THE CHNA INFRASTRUCTURE AND PARTNERSHIPS.....	 17
 DATA COLLECTION.....	 17-25
Secondary Data.....	17-19
Primary Data.....	19-25
 DATA ANALYSIS.....	 27-73
Demographics.....	27-30
Social Determinants of Health.....	31-50
Health and Wellness Indicators.....	59-73
- Chronic Illness.....	59-67
- Substance Use.....	68-69
- Mental and Behavioral Health.....	70-72
Emergency Preparedness.....	73

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IDENTIFICATION AND PRIORITIZATION OF NEEDS.....	75-76
Process.....	75
Description of the Community Health Needs Identified.....	76
 RESOURCES AVAILABLE TO MEET PRIORITY HEALTH NEEDS.....	 79
Hospital Resources.....	79
Healthcare Partners or other Resources including Telemedicine.....	79
Community Resources.....	79
 DOCUMENTING AND COMMUNICATING RESULTS.....	 81
 IMPLEMENTATION STRATEGY.....	 83-87
Planning Process.....	83
Implementation Strategy.....	83-87
 REFERENCES AND APPENDIX.....	 89-91



Early Childhood



Adolescents



Adults



Seniors

INTRODUCTION

Midwest Medical Center has been serving the healthcare needs of the surrounding area since 2008. Midwest Medical Center's commitment – and impact – is seen in the growth and progress it is experiencing that is very different from many national rural health trends.

At Midwest Medical Center, the mission is:



A Healthy Community

Midwest Medical Center will provide the caring, competent, cost-effective healthcare every member of this great community deserves.

EXECUTIVE SUMMARY

Provisions in the Affordable Care Act (ACA) require charitable hospitals to conduct a Community Health Needs Assessment (CHNA). 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 assessment process results in a CHNA report which assists the hospital in planning, implementing, and evaluating hospital strategies and community benefit activities. This Community Health Needs Assessment was developed and conducted, in partnership with representatives from the community, by a consultant provided through the Illinois Critical Access Hospital Network (ICAHN).

ICAHN is a not-for-profit 501(c)(3) corporation established in 2003 for the purposes of sharing resources, education, promoting operational efficiencies, and improving healthcare services for member critical access and rural hospitals and their communities.

ICAHN, with 58 member hospitals, is an independent network governed by a nine-member board of directors, with standing and project development committees facilitating the overall activities of the network. ICAHN continually strives to strengthen the capacity and viability of its members and rural health providers.

This Community Health Needs Assessment will serve as a guide for planning and implementation of healthcare initiatives that will allow the hospital and its partners to best serve the emerging health needs of Galena and the surrounding area. The CHNA process was coordinated by the Executive Assistant.

Three focus groups met to discuss the state of overall health and wellness in the Midwest Medical Center service area and to identify health concerns and needs in the delivery of healthcare and health services in order to improve wellness and reduce chronic illness for all residents.

The focus groups included representation of healthcare providers, community leaders, community services providers, schools, a community college, faith-based organizations, local elected officials, public health, and others. Several members of these groups provide services to underserved and unserved persons as all or part of their roles.

The findings of the focus groups were presented, along with secondary data analyzed by the consultant, to a third group for identification and prioritization of the significant health needs facing the community. The group consisted of representatives of public health, community leaders, healthcare providers, and community services providers.



IDENTIFICATION AND PRIORITIZATION > ADDRESSING THE NEED

At the conclusion of their review and discussion, the identification and prioritization group advanced the following needs:



1. Improve access to mental healthcare

- Counselors and other providers and resources to improve access to behavioral mental healthcare
- Counselors and other providers and resources to improve access to care for substance use disorders

2. Improve access to physical healthcare

- Pain Clinic
- Cardiac care
- Dialysis
- Oncology

3. Improve access to available, flexible transportation

4. Increase information to the community about available local health and wellness activities

5. Increase resources for seniors

- Independent living opportunities
- Transitional senior housing
- Education about local resources, insurance, and Medicare – and supplemental and advantage plans – and Medicaid
- Screenings

The results of the assessment process were then presented to senior staff at Midwest Medical Center through a facilitated discussion for development of a plan to address the identified and prioritized needs.

ADDRESSING THE NEED > CREATING THE PLAN

The group addressed the needs with the following strategies:

- Midwest Medical Center will complete and maintain a web-based local resource guide for mental health services and other local medical resources
- Midwest Medical Center will construct a new outpatient wing that will include room for expanding behavioral health services
- Midwest Medical Center will explore and evaluate the possibility of adding inpatient mental health services
- Midwest Medical Center will continue to evaluate establishing a pain clinic
- Midwest Medical Center will create space for an infusion center and explore and evaluate adding oncology services at that location
- Midwest Medical Center will continue to evaluate the need for local dialysis services
- Midwest Medical Center will explore expansion of cardiac services
- Midwest Medical Center will explore collaboration with surrounding hospitals and providers to facilitate offering identified services locally
- Midwest Medical Center will explore and evaluate a third-party marketing consultant to assist with identifying and executing a more robust plan for marketing Midwest Medical Center, its services, and its partners

- Midwest Medical Center will expand its direct marketing campaign
- Regarding education, Midwest Medical Center will continue to explore partnerships with local groups and agencies for opportunities to expand education about local resources for insurance and assistance navigating Medicare and Medicaid
- Regarding health screenings, Midwest Medical Center will continue to explore partnerships with local groups and agencies for ways to expand access to health screenings, especially for seniors and underserved and unserved community members
- Regarding housing opportunities for seniors, although these issues are beyond the scope or capability of Midwest Medical Center to resolve, MMC will support any organized local government or community-based effort to address these needs to the extent it is reasonable and appropriate

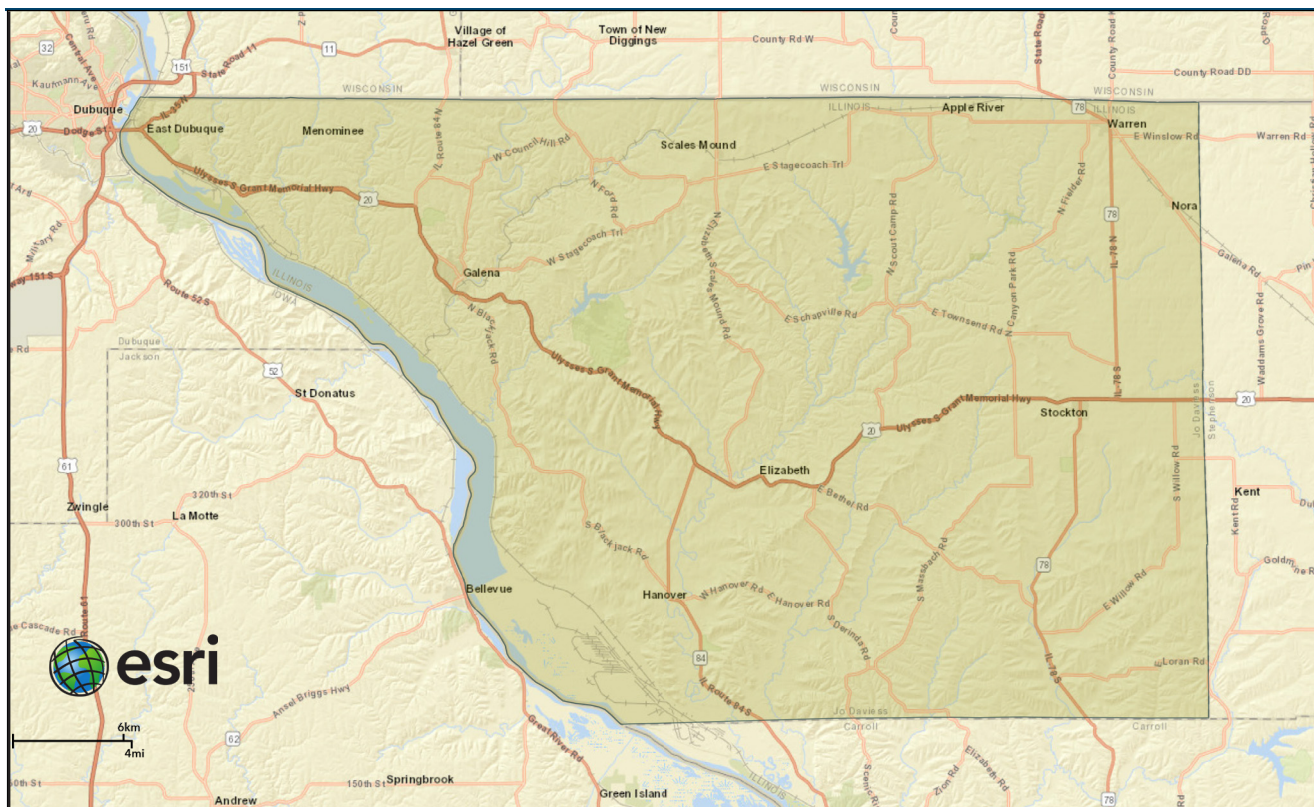
BACKGROUND

The Community Health Needs process is conducted every three years. In response to issues identified and prioritized and the implementation strategy developed to address them, Midwest Medical Center has taken the following steps since the last CHNA.

- Midwest Medical Center expanded its telehealth program to include adult and youth psychiatric care.
- Midwest Medical Center retained a fulltime Licensed Clinical Social Worker (LCSW) to the hospital and clinic.
- Midwest Medical Center developed a community marketing program around "Brain Health."
- Midwest Medical Center explored grant opportunities to provide community mental health education and information.
- Midwest Medical Center educated healthcare providers about available local mental health services.
- Midwest Medical Center continued participation in the countywide ad hoc committee to address EMS issues.

- Midwest Medical Center continues to explore in-house, non-emergency transportation options.
- Midwest Medical Center expanded chronic care management.
- Midwest Medical Center continued participation in the Illinois Rural Community Care Organization (IRCCO).
- Midwest Medical Center expanded wellness and nutrition education.
- Midwest Medical Center expanded reduced fee lab work and free blood pressure check programs to provide more opportunities for information and access to services.
- Midwest Medical Center was unable to explore offering Mental Health First Aid, due to COVID challenges.
- Midwest Medical Center was unable to explore hospital involvement as a volunteer sponsor or employer of EMS, due to COVID challenges.
- Midwest Medical Center was unable to explore collaboration with the Chamber of Commerce and large employers to provide staff for ambulances, due to COVID challenges.
- Midwest Medical Center was unable to expand "Welcome to Medicare" programs to include additional topics, due to COVID challenges.
- Midwest Medical Center was unable to educate local healthcare providers about local services for seniors, due to COVID challenges.
- Midwest Medical Center was unable to support the continued expansion of Jo Daviess Transit, due to COVID challenges.

AREA SERVED BY Midwest Medical Center



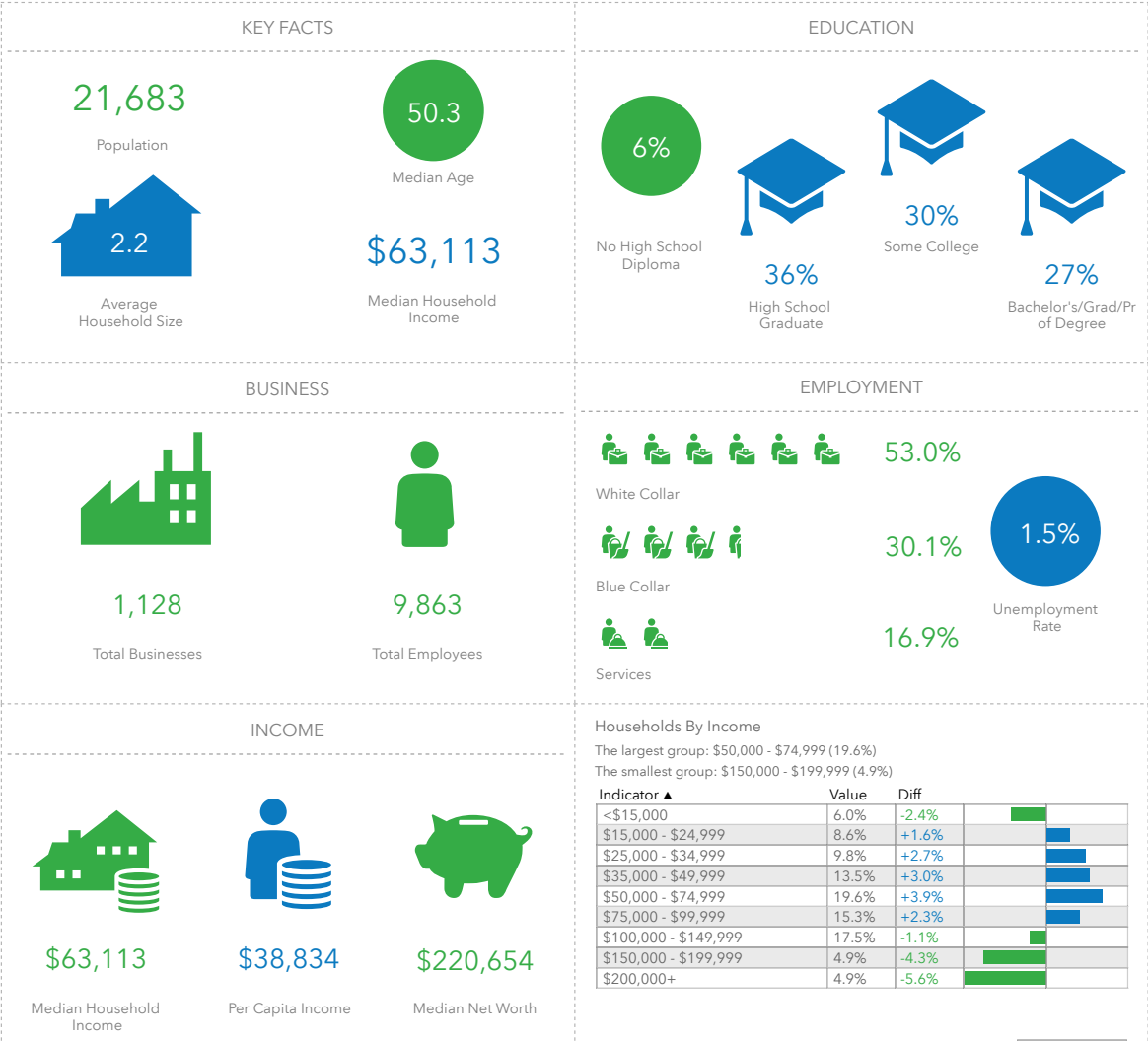
For the purpose of this CHNA, Midwest Medical Center has defined its primary service area and population as the general population within the geographic area in Jo Daviess County. A total of 21,588 people live in the 600.91 square mile report area defined for this assessment, according to the U.S. Census Bureau American Community Survey 2015-19 5-year estimates. The population density for this area, estimated at 36 persons per square mile, is less than the national average population density of 92 persons per square mile.

The service area includes seasonal and part-time housing related to recreation and tourism in the following census designated places: The Galena Territory and Apple Canyon Lake.

The following communities are located in the service area:

Galena	Stockton	Scales Mound
Menominee	Warren	Hanover
East Dubuque	Elizabeth	Nora
	Apple River	

Midwest Medical Center Service Area – Key Facts



The infographic above highlights some of the key facts of that data and provides a snapshot of the population served by Midwest Medical Center. The data on the following pages will take a deep dive into the demographics of Midwest Medical Center's service area and will offer insight to both the commonality and complexity of the Midwest Medical Center audience.

The average household size in the area, at 2.2, is lower than both Illinois (3.0) and the U.S. (2.5) overall average. Median age is 50.3 years, which is higher than Illinois (38.6) and the U.S. (38) benchmark. The largest level of education is high school graduate, followed by some college.

The area's unemployment rate of 1.5%. Median family household income in the service area is \$63,113, which is lower than the statewide average (\$65,886) and slightly higher than the U.S. (\$62,843).

LOCAL IMPACT OF COVID

COVID-19 Confirmed Cases and Mortalities

The COVID-19 epidemic has overshadowed many local health functions since March 2020. It has dramatically impacted overall health of the communities and the delivery of healthcare and health-related services. The broad impact has been seen throughout the communities, changing the way people work, shop, learn, and communicate. This indicator reports incidence rate of confirmed COVID-19 cases per 100,000 population. Data for this indicator are updated daily and derived from the Johns Hopkins University data feed. In the service area, there have been 4,321 total confirmed cases of COVID-19. Data are current as of 6/24/2022.

Report Area	Total Population	Total Confirmed Cases
Midwest Medical Center Service Area 2022	21,366	4,321
Illinois	12,741,080	3,401,516
United States	326,262,499	85,012,446

Confirmed COVID-19 Cases

*Note: This indicator is compared to the state average.
Data Source: Johns Hopkins University. Accessed via ESRI.
Additional data analysis by CARES. Source geography: County*

In the service area, there have been 36 total deaths among patients with confirmed cases of the coronavirus disease COVID-19. Data are current as of 6/24/2022.

Report Area	Total Population	Total Deaths
Midwest Medical Center Service Area 2022	21,366	36
Illinois	12,741,080	34,054
United States	326,262,499	996,534

COVID-19 Mortalities

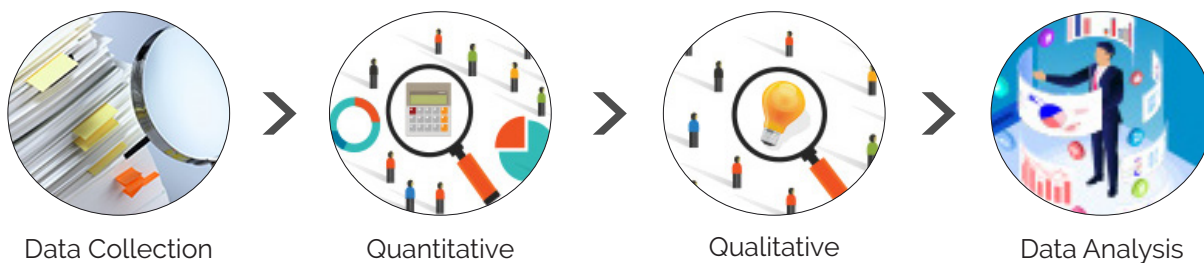
*Note: This indicator is compared to the state average.
Data Source: Johns Hopkins University. Accessed via ESRI.
Additional data analysis by CARES. Source geography: County*

COVID-19 Fully Vaccinated Adults

This indicator reports the percent of adults fully vaccinated for COVID-19. Data is updated daily from the CDC API. Vaccine hesitancy is the percent of the population estimated to be hesitant towards receiving a COVID-19 vaccine. The Vaccine Coverage Index is a score of how challenging vaccine roll-out may be in some communities compared to others, with values ranging from 0 (least challenging) to 1 (most challenging). Data are current as of 6/24/2022.

Report Area	Percent of Adults Fully Vaccinated	Estimated Percent of Adults Hesitant About Receiving COVID-19 Vaccination	Vaccine Coverage Index	Last Update
Midwest Medical Center Service Area 2022	90.60%	9.09%	0.31	06/16/2022
Illinois	76.50%	7.95%	0.37	06/16/2022
United States	73.64%	10.29%	0.44	06/16/2022

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention and the National Center for Health Statistics, CDC - GRASP, 2022. Source geography: County



ESTABLISHING THE CHNA INFRASTRUCTURE AND PARTNERSHIPS

Data Collection

SECONDARY DATA

Description of Data Sources – Quantitative

Quantitative (secondary) data is collected from many resources including, but not restricted to, the following:

Source	Description
Behavioral Risk Factor Surveillance System	The BRFSS is the largest, continuously conducted telephone health survey in the world. It enables the Center for Disease Control and Prevention (CDC), state health departments, and other health agencies to monitor modifiable risk factors for chronic diseases and other leading causes of death.
SparkMap	SparkMap is an online mapping and reporting platform powered by the Center for Applied Research and Engagement Systems (CARES) at the University of Missouri.
US Census	National census data is collected by the US Census Bureau every 10 years.
Centers for Disease Control	Through the CDC's National Vital Statistics System, states collect and disseminate vital statistics as part of the US's oldest and most successful intergovernmental public health data sharing system.

Source	Description
County Health Rankings	Each year, the overall health of each county in all 50 states is assessed and ranked using the latest publicly available data through a collaboration of the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute.
American Communities Survey	The American Community Survey (ACS), a product of the U.S. Census Bureau, helps local officials, community leaders, and businesses understand the changes taking place in their communities. It is the premier source for detailed population and housing information about our nation.
Illinois Department of Employment Security	The Illinois Department of Employment Security is the state's employment agency. It collects and analyzes employment information.
National Cancer Institute	The National Cancer Institute coordinates the National Cancer Program, which conducts and supports research, training, health information dissemination, and other programs with respect to the cause, diagnosis, prevention, and treatment of cancer, rehabilitation from cancer, and the continuing care of cancer patients, and the families of cancer patients.
Illinois Department of Public Health	The Illinois Department of Public Health is the state agency responsible for preventing and controlling disease and injury, regulating medical practitioners, and promoting sanitation.
HRSA	The Health Resources and Services Administration of the US Department of Health and Human Services develops health professional shortage criteria for the nation and uses that data to determine the location of Health Professional Shortage Areas and Medically Underserved Areas and Populations.
Local IPLANS	The Illinois Project for Local Assessment of Needs (IPLAN) is a community health assessment and planning process that is conducted every five years by local health jurisdictions in Illinois.
ESRI	ESRI (Environmental Systems Research Institute) is an international supplier of Geographic Information System (GIS) software, web GIS and geodatabase management applications. ESRI allows for specialized inquiries at the zip code, or other defined, level.
Illinois State Board of Education	The Illinois State Board of Education administers public education in the state of Illinois. Each year, it releases school "report cards" which analyze the makeup, needs, and performance of local schools.
USDA	USDA, among its many functions, collects and analyzes information related to nutrition and local production and food availability.

Secondary data is initially collected through the SparkMap and/or ESRI systems and then reviewed. Questions raised by the data reported from those sources are compared with other federal, state, and local data sources in order to resolve or reconcile potential issues with reported data.

PRIMARY DATA

Three focus groups were convened at Midwest Medical Center on May 17, 2022. The groups included representation of healthcare providers, community leaders, community services providers, schools, faith-based organizations, local elected officials, public health, and others. Several members of this group provided services to underserved and unserved persons as all or part of their roles.

In response to a request to identify positive developments in health and healthcare in the service area of Midwest Medical Center, the groups put forward the following:

Focus Group One – Medical Professionals and Partners, Community Members, and Law Enforcement

- Midwest Medical Center and Jo Daviess County Health Department collaborated very well to address COVID-related needs for the communities
- Midwest Medical Center has improved access to its facility and services
- There is discussion of possible expansion of physical therapy and fitness
- Midwest Medical Center has increased local access to specialty care
- Communities rallied to provide for services to youth required by COVID
- There is a new meal program at the Workshop
- Jo Daviess Health Department expanded services and outreach during COVID
- Midwest Medical Center and JDHD cooperated to meet special needs of first responders during COVID
- Heart monitors for Galena Territory and Scales Mound EMS are being upgraded

- The call center was developed for COVID
- Virtual care and services emerged during COVID
- Midwest Medical Center expanded mental health services
- Volunteerism is strong across the communities
- Midwest Medical Center continued to grow and plan during COVID



“Our communities are intimate. There is empathy here, and people take care of one another. They pulled together and worked together during COVID.”

The group was then asked to identify needs that continue to exist in the areas of health, wellness, and the delivery of healthcare and health services for all residents of the service area. The group identified:

- Cancer of all types seems high
- Increase access to local services at Midwest Medical Center
- Address the declining fulltime population
- Increase mental health services for acute cases in the Emergency Room
 - Create access to local beds
 - Improve transportation access for distant beds
 - Increase access to available distant beds, including access for substance use disorders
 - Alternatives to the emergency room and the jail
- Identify services for the homeless
- Address affordable housing issues
- Identify poverty in the community and look for ways to reduce it
- Plan for retention and replacement of key staff at MMC
- Transportation for distant tertiary care
- Dental services for unserved and underserved residents
- Reliable and flexible transportation to medical appointments and services

- Address area workforce shortages
- Review locations of satellite services for ultimate usage and possible expansion
- Affordable and accessible access to services on all levels for persons with substance use disorders
- Address staffing needs for local ambulances
- Local services for enrollment in Medicaid and related services
- Expand access to in-home care, medical, and custodial
- Expand available staffing for in-home care of complex patients
- Improve community awareness of services at Midwest Medical Center
- Plan for sustainable long-term funding for ambulance services
- Expand local access for services for memory care
- Expand wellness awareness among youth and young adults
- Expand access to affordable day care throughout the service area

Focus Group Two – Medical Professionals and Partners and Community Leaders, Public Health, Agencies, and Organizations

The second group identified positive developments in the last three to five years:

- Stigma around mental health issues has been reduced
- Jo Daviess Health Department responded strongly to COVID with emerging and expanded services
- Midwest Medical Center expanded surgical staff and surgical services
- Communities came together in collaboration on many fronts during COVID
- Telehealth
- COVID-related funding allowed several expanded resources for youth
- Midwest Medical Center has expanded critical care services
- The pandemic led to new and expanded collaboration among area healthcare providers
- Outdoor dining during COVID led to new avenues for socialization

- The pandemic led to creative solutions for existing and new community and health issues
- Mental health/brain health services at Midwest Medical Center
- Improved access and expanded services at Midwest Medical Center has built community confidence
- Virtual services for education
- Ingenuity in response to the pandemic
- Midwest Medical Center turns no one away – increasing access to services and creating community pride
- Diabetes and chronic care management in the Clinic has improved significantly as a result of inter-departmental cooperation and staff growth
- Overall growth of activity in the community

The group was then asked to identify needs and gaps that continue to exist in the areas of health, wellness, and the delivery of healthcare and health services for all residents of the service area. The group identified:

- Improve access to chronic pain care
- Recruit and retain local mental healthcare providers at all levels
- Identify youth with developmental disabilities and provide services for them
- Improve flexibility of transportation to and from local appointments and services
- Community resource guide that is well publicized and easily accessed
- Address healthcare staffing services
- Improve access to transportation to distant mental health services
- Increase resources and support for persons with substance use disorders
- Improve access to transportation for distant mental health beds
- Affordable housing
- Access to dental care for unserved and underserved residents
- Addiction treatment

- Housing alternatives for persons leaving care or services in circumstances where returning to a previous environment would not serve them well
- Expand collaboration with services in Dubuque
- Identify poverty and focus local services and education resources about health and wellness to those persons and locations
- Daycare
- Create opportunities for low/no cost opportunities for recreation, exercise, and wellness education
- Increase access to healthy foods for unserved and underserved residents
- Expand access to urgent care outside of Galena
- Improve local access to support services for seniors
- Improve local access to memory care
- Staffing for EMS
- Develop consistent advanced directive forms, policies, and practices
- Access to referrals for Medicaid patients
- Improve education for persons returning home from services

Focus Group Three – Medical Professionals and Partners and Community

Leaders, Public Health, Agencies, and Organizations

The third group identified positive developments in the last three to five years:

- Expansion of services at Midwest Medical Center, including telepsychiatry
- Importance of Midwest Medical Center to the community became even more evident during the pandemic
- Midwest Medical Center Clinic at Elizabeth and Dr. Harmston
- Cooperation between Midwest Medical Center and EMA to COVID
- Ease of access to services at Midwest Medical Center
- Midwest Medical Center responded to the demand related to critically ill patients during the pandemic
- “The quality of local physicians here seems better than our former urban physicians”

- Emergency Room staff is caring, competent, and empathetic
- Collaboration among Midwest Medical Center, Jo Daviess Health Department, Jo Daviess EMA, EMS, and other providers strengthened during COVID and continues post-pandemic
- Midwest Medical Center met the pandemic head on and delivered quality care for every patient
- Midwest Medical Center has improved access for specialty care and services
- The Physical Therapy Department at Midwest Medical Center is "just wonderful"
- The physical therapy fitness center provides opportunities for exercise
- Midwest Medical Center collaborates with schools for sports physicals and trainers
- The food at Midwest Medical Center is good

The group was then asked to identify needs and gaps that continue to exist in the areas of health, wellness, and the delivery of healthcare and health services for all residents of the service area. The group identified:

- The level of community collaboration achieved during the pandemic needs to continue
- Turn lane from highway into Midwest Medical Center
- Improve access to the next bed for acute mental health patients in the emergency room
- Address criticism of Midwest Medical Center on social media and spread word of mouth
- Explore gaps in specialty services
- Address space and staffing needs for expanding services at Midwest Medical Center
- Improve efforts to prevent substance abuse
- Improve access to treatment for substance use disorders

- Local access to cancer care
- Midwest Medical Center needs to be better at “tooting its own horn”
- Improve access to mental health services, inpatient and outpatient
- Improve education for navigating Medicaid
- Local access to dialysis
- Improve efforts to prevent suicide and other deaths of despair
- Flexible transportation to and from appointments
- Improve local access to senior services
- Improve local access for in-home care





Age Group



Ethnicity



Race



Disability

DATA ANALYSIS

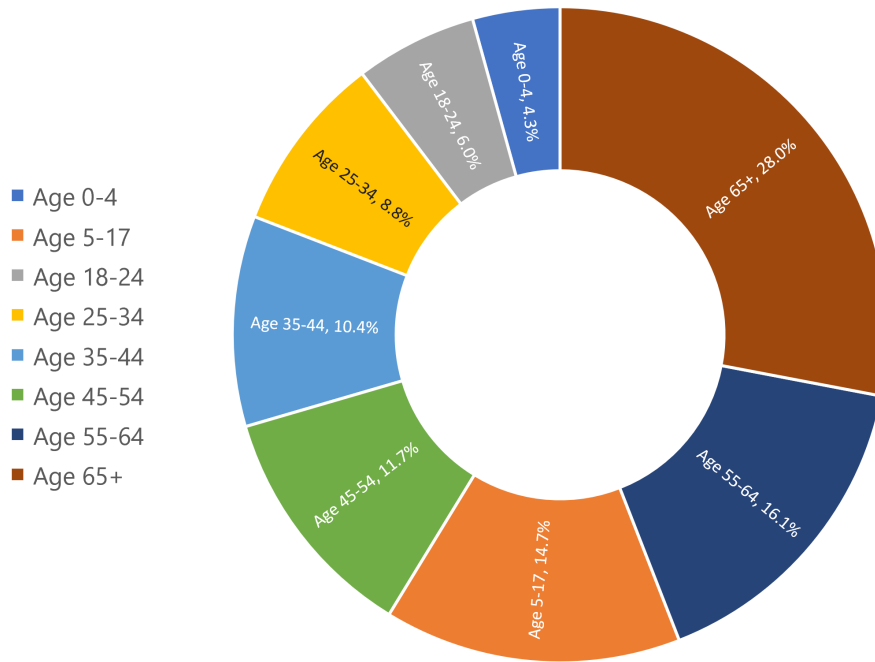
DEMOGRAPHICS

Total Population by Age Group

Report Area	Age 0-4	Age 5-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+
Midwest Medical Center Service Area 2022	923	3,142	1,291	1,886	2,225	2,517	3,446	5,999
Illinois	755,518	2,099,915	1,174,031	1,763,829	1,638,700	1,636,992	1,656,753	1,990,426
United States	19,650,192	53,646,546	30,435,736	45,485,165	41,346,677	41,540,736	42,101,439	52,362,817

Data Source: US Census Bureau, American Community Survey. 2016-20. Source Geography: Tract

Total Population by Age Groups, Midwest Medical Center Service Area



Total Population Change, 2010-2020

According to the United States Census Bureau Decennial Census, between 2010 and 2020, the population in the service area fell by -643 persons, a change of -2.84%. A significant positive or negative shift in total population over time impacts healthcare providers and the utilization of community resources.

Report Area	Total Population, 2010 Census	Total Population, 2020 Census	Population Change, 2010-2020	Population Change, 2010-2020, Percent
Midwest Medical Center Service Area 2022	22,678	22,035	-643	-2.84%
Illinois	12,830,633	12,812,508	-18,125	-0.14%
United States	312,471,161	334,735,155	22,263,994	7.13%

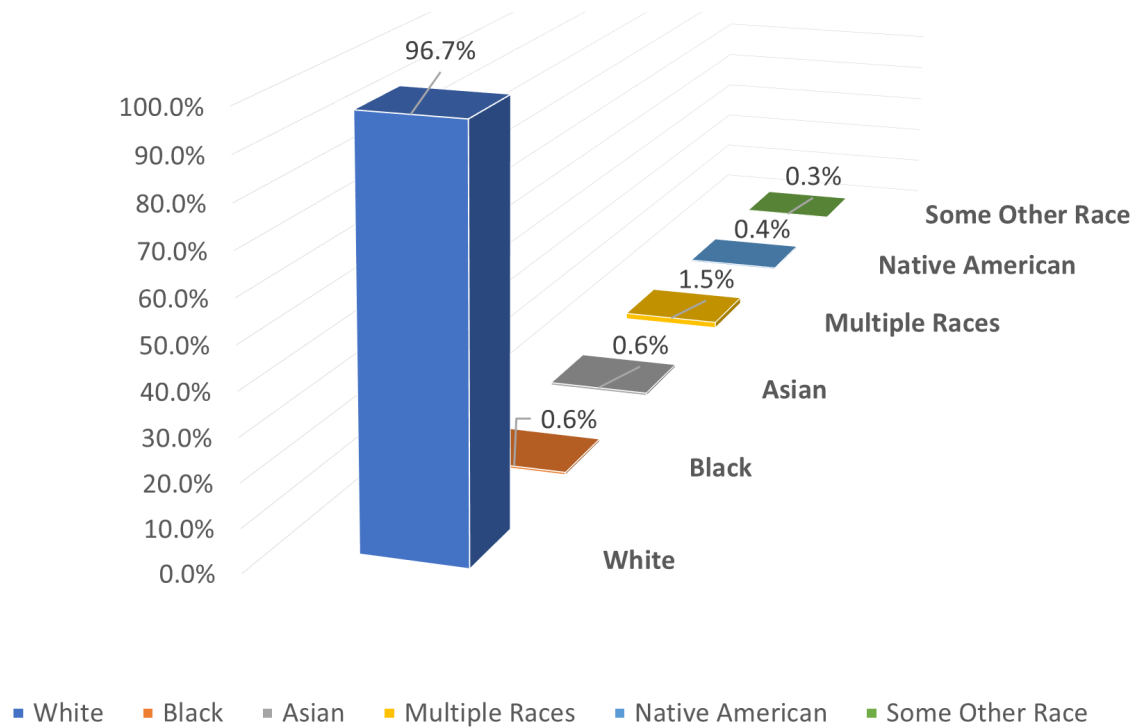
Data Source: US Census Bureau, American Community Survey. 2016-20. Source geography: Tract

Total Population Change by Race, 2010-2020

Report Area	Non-Hispanic White	Non-Hispanic Black	Non-Hispanic American Indian or Alaska Native	Non-Hispanic Asian	Non-Hispanic Native Hawaiian or Pacific Islander	Non-Hispanic Some Other Race	Non-Hispanic Multiple Race	Hispanic or Latino
Midwest Medical Center Service Area 2022	-6.12%	14.00%	6.90%	33.33%	-14.29%	766.67%	202.30%	40.56%
Illinois	-8.51%	-3.13%	-12.14%	28.71%	-0.60%	181.61%	125.52%	15.28%
United States	-2.60%	5.98%	0.20%	35.62%	29.16%	179.59%	127.07%	20.61%

Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract

Total Population by Race Alone, Midwest Medical Center Service Area



Population with any Disability

This indicator reports the percentage of the total civilian non-institutionalized population with a disability. The report area has a total population of 21,276 for whom disability status has been determined, of which 3,047 or 14.32% have any disability. This indicator is relevant because disabled individuals comprise a vulnerable population that requires targeted services and outreach by providers.

Report Area	Total Population (For Whom Disability Status Is Determined)	Population with a Disability	Population with a Disability, Percent
Midwest Medical Center Service Area 2022	21,276	3,047	14.32%
Illinois	12,536,614	1,404,151	11.20%
United States	321,525,041	40,786,461	12.69%

Data Source: US Census Bureau, American Community Survey. 2016-20. Source geography: Tract



SOCIAL DETERMINANTS OF HEALTH

The data and discussion on the following pages will take a look into the social determinants in the Midwest Medical Center service area and will offer insight into the complexity of circumstances that impact physical and mental wellness for the Midwest Medical Center audience. The infographic on Page 33 provides a snapshot of the at-risk population served by Midwest Medical Center.

The CDC describes social determinants of health as conditions in the places where people live, learn, work, and play that affect a wide range of health and quality of life risks and outcomes. Healthy People 2030 uses a place-based framework that outlines five key areas of SDoH:

- Healthcare access and quality, including:
 - Access to healthcare
 - Access to primary care
 - Health insurance coverage
 - Health literacy
- Education access and quality, including:
 - High school graduation
 - Enrollment in higher education
 - Educational attainment in general
 - Language and literacy
 - Early childhood education and development
- Social and community context – within which people live, learn work and play, including:
 - Civic participation
 - Civic cohesiveness
 - Discrimination
 - Conditions within the workplace
- Economic stability, including:
 - Income
 - Cost of living
 - Socioeconomic status
 - Poverty

- Employment
- Food security
- Housing stability
- Neighborhood and built environment, including:
 - Quality of housing
 - Access to transportation
 - Availability of healthy food
 - Air and water quality
 - Crime and violence

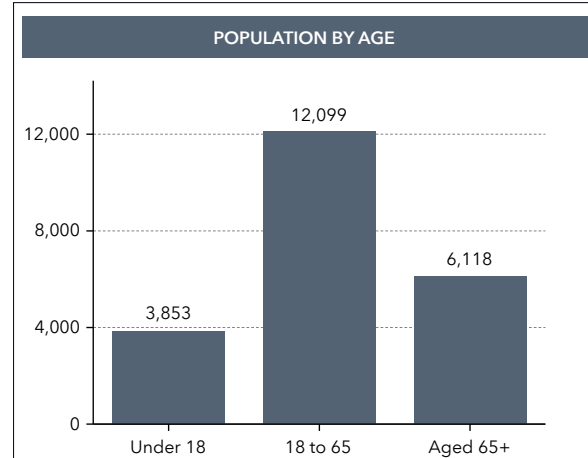
Some of the social determinant indicators reflected in the data include:

- 2,795 households with disability
- 979 households below the poverty level
- Median household income is \$63,113, which is lower than Illinois (\$65,886) and slightly higher than the U.S. (\$62,843).

Midwest Medical Center Service Area

AT RISK POPULATION PROFILE

Geography: County



21,683 Population
9,730 Households
2.21 Avg Size Household
50.3 Median Age
\$63,113 Median Household Income
\$169,773 Median Home Value
88 Wealth Index
144 Housing Affordability
20 Diversity Index

AT RISK POPULATION



2,795

Households With Disability



6,118

Population 65+



539

Households Without Vehicle

POVERTY AND LANGUAGE



10%

Households Below the Poverty Level



979

Households Below the Poverty Level



0

Pop 65+ Speak Spanish & No English

POPULATION AND BUSINESSES



19,663

Daytime Population



1,128

Total Businesses



9,863

Total Employees

Language Spoken (ACS)	Age 5-17	18-64	Age 65+	Total
English Only	2,972	10,980	5,854	19,806
Spanish	162	256	78	496
Spanish & English Well	161	167	58	386
Spanish & English Not Well	1	73	20	94
Spanish & No English	0	16	0	16
Indo-European	5	62	35	102
Indo-European & English Well	5	56	35	96
Indo-European & English Not Well	0	0	0	0
Indo-European & No English	0	6	0	6
Asian-Pacific Island	3	64	17	84
Asian-Pacific Isl & English Well	3	64	17	84
Asian-Pacific Isl & English Not Well	0	0	0	0
Asian-Pacific Isl & No English	0	0	0	0
Other Language	0	3	15	18
Other Language & English Well	0	1	12	13
Other Language & English Not Well	0	2	3	5
Other Language & No English	0	0	0	0

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Economic Stability – Income and Economics

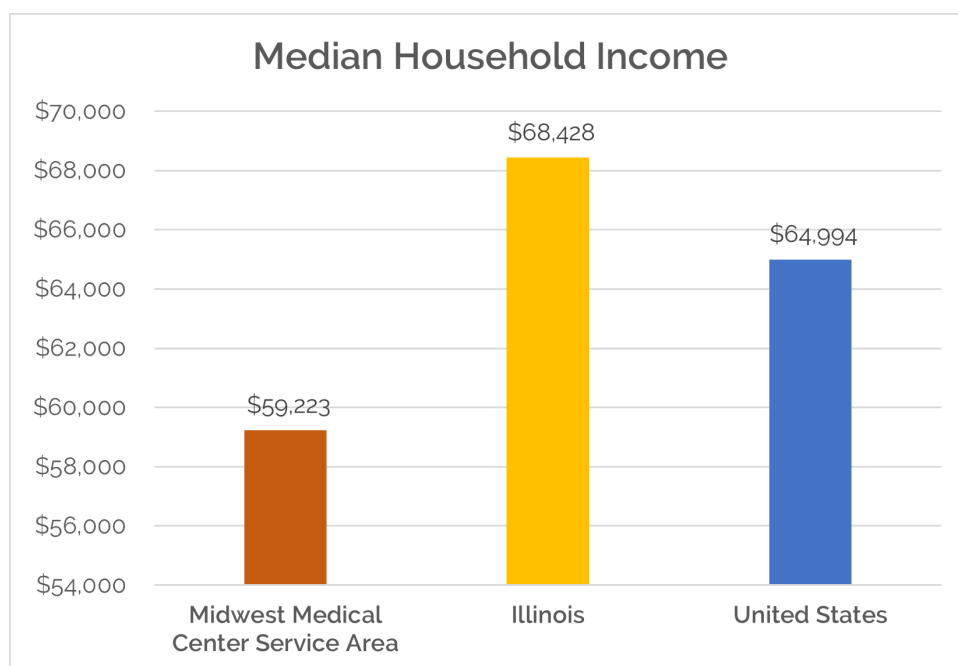
Economic and social insecurity often are associated with poor health. Poverty, unemployment, and lack of educational achievement affect access to care and a community's ability to engage in healthy behaviors. Without a network of support and a safe community, families cannot thrive. Ensuring access to social and economic resources provides a foundation for a healthy community.

Income – Median Household Income

This indicator reports median household income based on the latest 5-year American Community Survey estimates. This includes the income of the householder and all other individuals 15 years old and over in the household, whether they are related to the householder or not. Because many households consist of only one person, average household income is usually less than average family income.

Report Area	Total Households	Average Household Income	Median Household Income
Midwest Medical Center Service Area 2022	10,069	\$75,120	\$59,223
Illinois	4,884,061	\$95,115	\$68,428
United States	122,354,219	\$91,547	\$64,994

*Note: This indicator is compared to the state average.
Data Source: US Census Bureau, American Community Survey. 2016-20. Source geography: Tract*



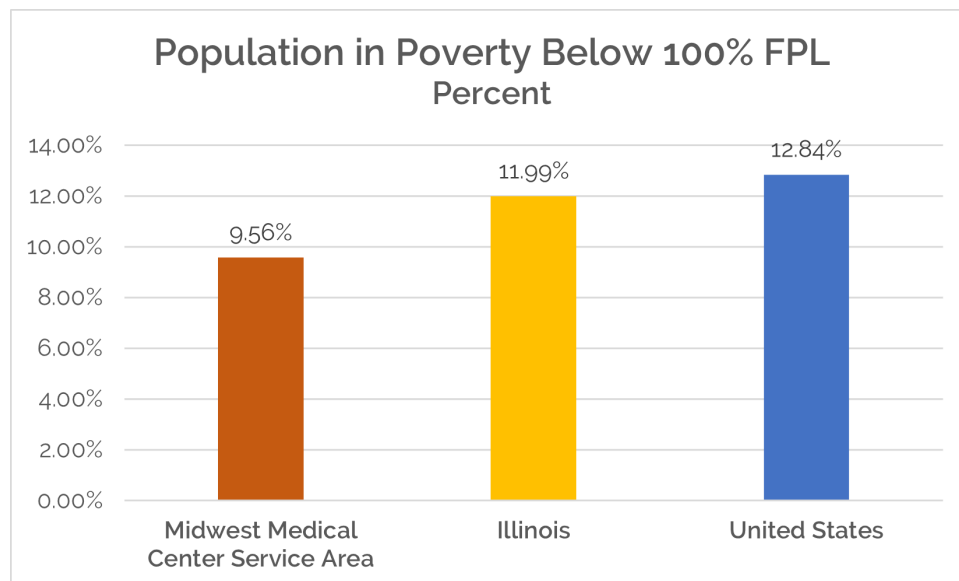
Poverty – Population Below 100% FPL

Poverty is considered a key driver of health status. Within the service area, 9.56% or 2,031 individuals for whom poverty status is determined are living in households with income below 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.

Note: The total population measurements for poverty reports are lower, as poverty data collection does not include people in group quarters.

Report Area	Total Population	Population in Poverty	Population in Poverty, Percent
Midwest Medical Center Service Area 2022	21,241	2,031	9.56%
Illinois	12,418,504	1,488,670	11.99%
United States	318,564,128	40,910,326	12.84%

*Note: This indicator is compared to the state average.
Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract*

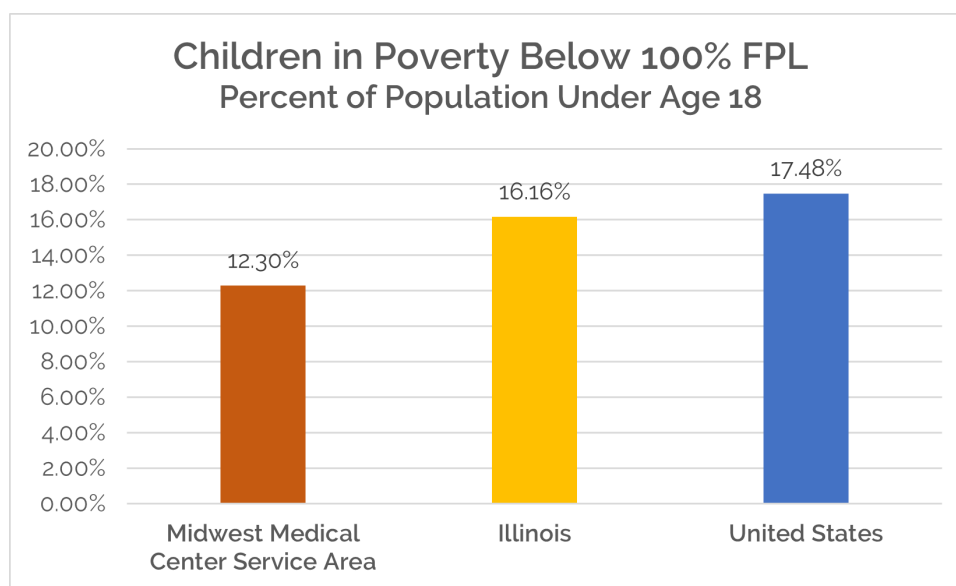


Poverty – Children Below 100% FPL

In the service area, 12.30% or 495 children aged 0-17 are living in households with income below 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.

Report Area	Total Population	Population Under Age 18	Population Under Age 18 in Poverty	Percent Population Under Age 18 in Poverty
Midwest Medical Center Service Area 2022	21,241	4,026	495	12.30%
Illinois	12,418,504	2,813,715	454,654	16.16%
United States	318,564,128	72,065,774	12,598,699	17.48%

*Note: This indicator is compared to the state average.
Data Source: US Census Bureau, American Community Survey, 2016-20. Source geography: Tract*

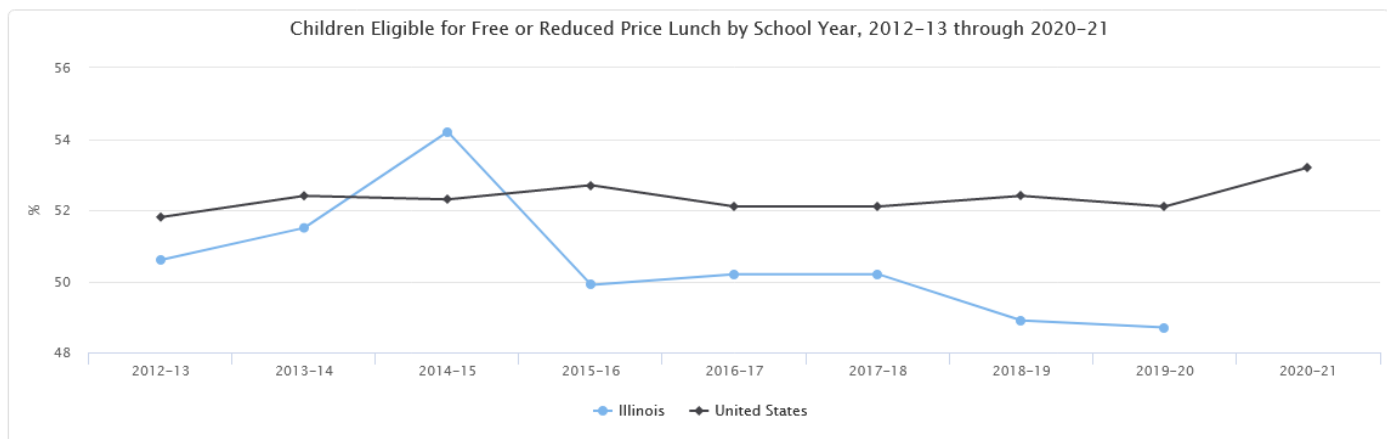


Poverty – Children Eligible for Free/Reduced Price Lunch

Free or reduced price lunches are served to qualifying students in families with income between under 185% (reduced price) or under 130% (free lunch) of the U.S. federal poverty threshold as part of the federal National School Lunch Program (NSLP). *Note: The states below have more than 80% public schools labeled as “not reported” in 2020-2021. For consistency, these states still have their values calculated with the limited records on all geographic levels (unless there is not a single record reported in the selected area). Use with caution when comparing to other years. For 2020-2021, watch out for Alaska, Arizona, Delaware, District of Columbia, Illinois, Massachusetts, Montana, Ohio, Oregon, Tennessee, Virginia, American Samoa, and the Northern Mariana Islands.*

Report Area	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21
Midwest Medical Center Service Area 2022	33.8%	32.5%	38.8%	35.7%	30.6%	30.6%	33.6%	34.0%	No data
Illinois	50.6%	51.5%	54.2%	49.9%	50.2%	50.2%	48.9%	48.7%	No data
United States	51.8%	52.4%	52.3%	52.7%	52.1%	52.1%	52.4%	52.1%	53.2%

Note: This indicator is compared to the state average. Data Source: National Center for Education Statistics, NCES - Common Core of Data, 2019-20. Source geography: Address

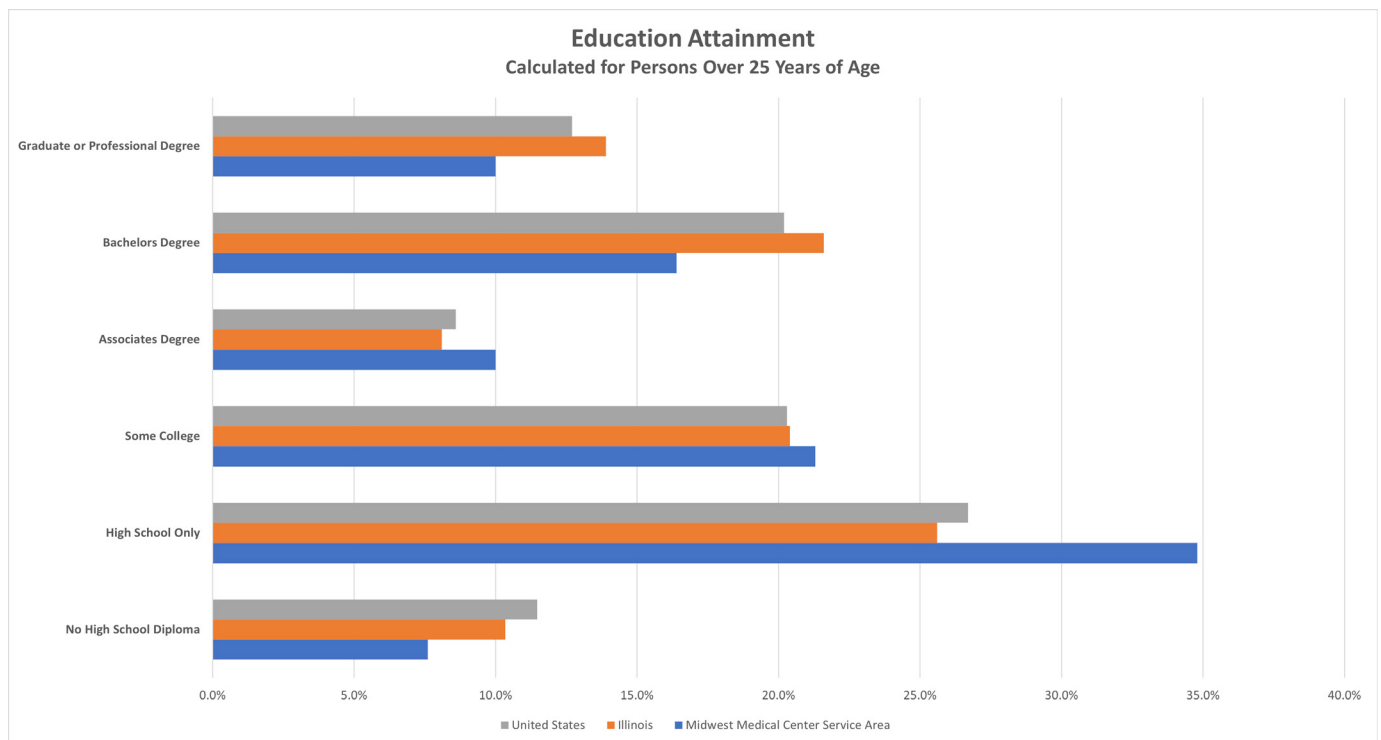


Education Attainment

This category contains indicators that describe the education system and the educational outcomes of the service area populations. Education metrics can be used to describe variation in population access, proficiency, and attainment throughout the education system, from access to pre-kindergarten through advanced degree attainment. These indicators are important because education is closely tied to health outcomes and economic opportunity. For the service area, 16.4% have at least a college bachelor's degree, while 34.8% stopped their formal education attainment after high school.

Report Area	No High School Diploma	High School Only	Some College	Associates Degree	Bachelors Degree	Graduate or Professional Degree
Midwest Medical Center Service Area 2022	7.61%	34.8%	21.3%	10.0%	16.4%	10.0%
Illinois	10.34%	25.6%	20.4%	8.1%	21.6%	13.9%
United States	11.47%	26.7%	20.3%	8.6%	20.2%	12.7%

*Note: This indicator is compared to the state average.
Data Source: US Census Bureau, American Community Survey. 2016-20. Source geography: County*

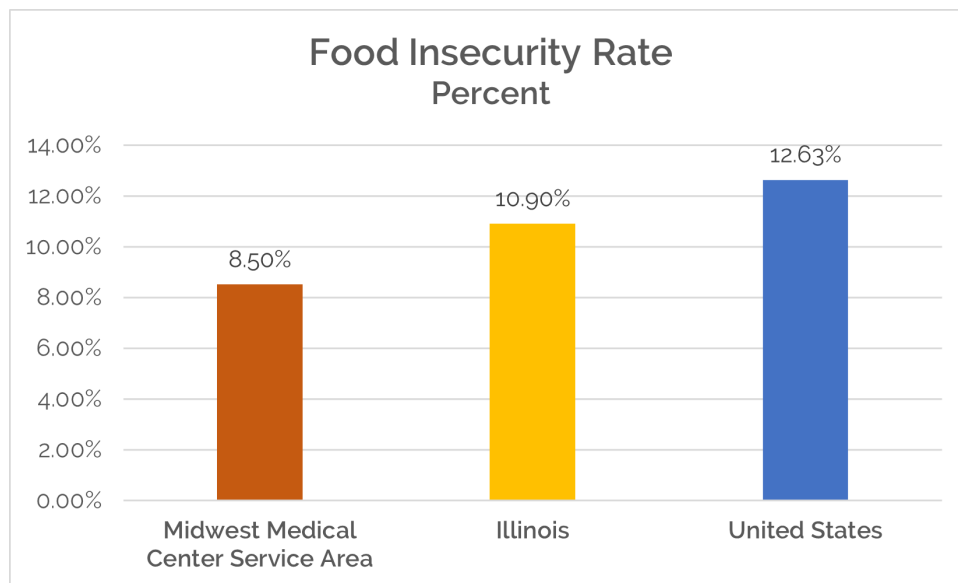


Food Insecurity Rate

Economic and social insecurity often are associated with poor health. Poverty, unemployment, and a lack of educational achievement affect access to care and a community's ability to engage in healthy behaviors. Without a network of support and a safe community, families cannot thrive. Ensuring access to social and economic resources provides a foundation for a healthy community. This indicator reports the estimated percentage of the population 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.

Report Area	Total Population	Food Insecure Population, Total	Food Insecurity Rate
Midwest Medical Center Service Area 2022	22,118	1,880	8.50%
Illinois	12,807,064	1,395,970	10.90%
United States	325,717,422	41,133,950	12.63%

*Note: This indicator is compared to the state average.
Data Source: Feeding America, 2017. Source geography: County*

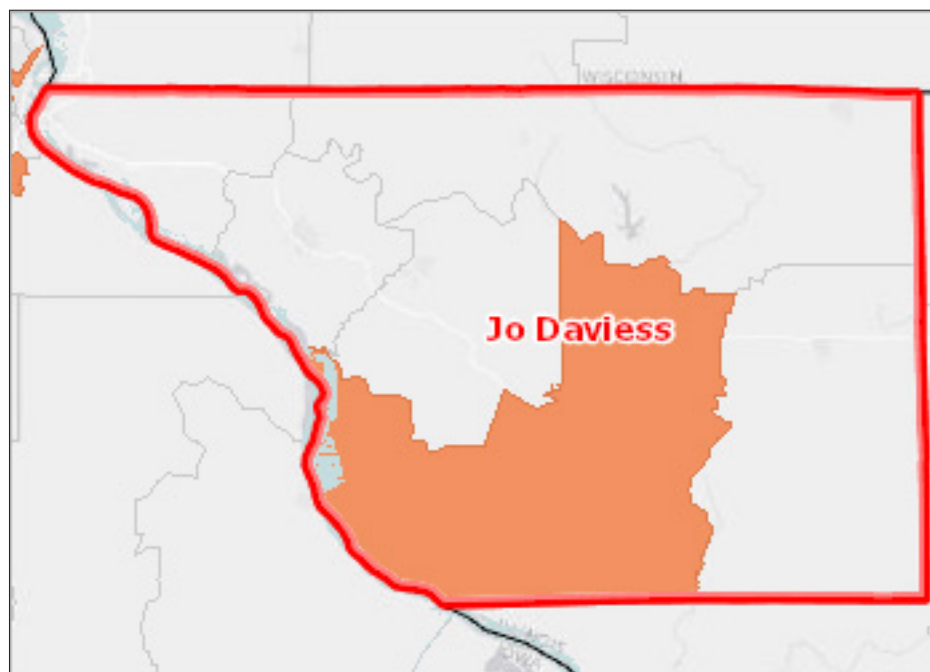


Food Environment – Food Desert Census Tract

This indicator reports the number of neighborhoods in the service area that are within food deserts. The USDA Food Access Research Atlas defines a food desert as any neighborhood that lacks healthy food sources due to income level, distance to supermarkets, or vehicle access. The service area has a population of 3,102 people living in food deserts and a total of one census tract classified as a food deserts by the USDA.

Report Area	Total Population (2010)	Food Desert Census Tracts	Other Census Tracts	Food Desert Population	Other Population
Midwest Medical Center Service Area 2022	22,678	1	5	3,102	3,248
Illinois	12,830,632	319	2,796	1,242,939	3,697,926
United States	308,745,538	9,293	63,238	39,074,974	81,328,997

Note: This indicator is compared to the state average. Data Source: U.S. Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas, 2019. Source geography: Tract



Food Desert Census Tracts, 1 Mi. / 10 Mi. by Tract, USDA - FARA 2019

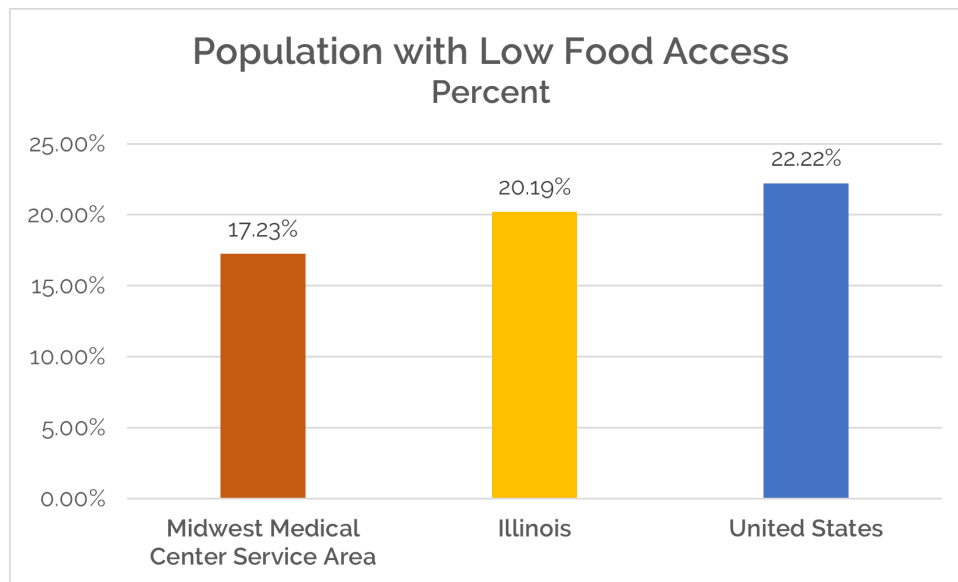
- Food Desert
- Not a Food Desert
- No Data
- Midwest Medical Center Service Area 2022

Food Environment – Low Food Access

This indicator reports the percentage of the population with low food access. Low food access is defined as living more than one-half mile from the nearest supermarket, supercenter, or large grocery store. Data are from the April 2021 Food Access Research Atlas dataset. This indicator is relevant because it highlights populations and geographies facing food insecurity. Within the service area, 17.23% of the total population have low food access. The total population in the service area with low food access is 3,907.

Report Area	Total Population (2010)	Population with Low Food Access	Percent Population with Low Food Access
Midwest Medical Center Service Area 2022	22,678	3,907	17.23%
Illinois	12,830,632	2,589,942	20.19%
United States	308,745,538	68,611,398	22.22%

Note: This indicator is compared to the state average. Data Source: U.S. Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas, 2019. Source geography: Tract.

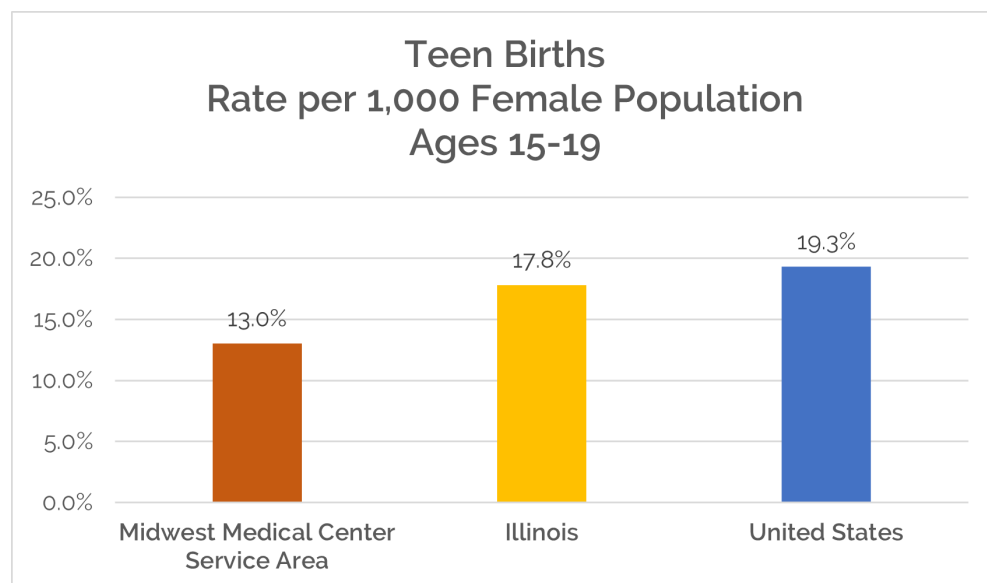


Teen Births

This indicator reports the seven-year average number of births per 1,000 female population age 15-19. Data were from the National Center for Health Statistics - Natality Files (2014-2020) and are used for the 2022 County Health Rankings. In the service area, of the 3,843 total female population age 15-19, the teen birth rate is 13.0 per 1,000, which is less than the state's teen birth rate of 19.4. *Note: Data are suppressed for counties with fewer than 10 teen births in the timeframe.*

Report Area	Female Population Age 15-19	Teen Births, Rate per 1,000 Female Population Age 15-19
Midwest Medical Center Service Area 2022	3,843	13.0
Illinois	5,721,550	17.8
United States	144,216,216	19.3

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via County Health Rankings, 2014-2020. Source geography: County

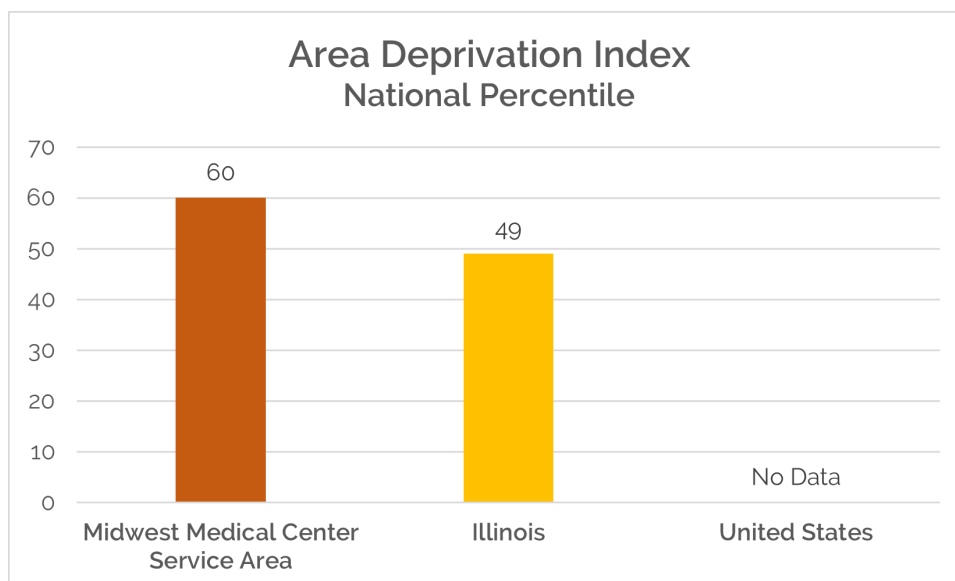


Area Deprivation Index

This indicator reports the average (population weighted) Area Deprivation Index (ADI) for the selected area. The Area Deprivation Index ranks neighborhoods and communities relative to all neighborhoods across the nation (national percentile) or relative to other neighborhoods within just one state (state percentile). The ADI is calculated based on 17 measures related to four primary domain (education, income and employment, housing, and household characteristics). The overall scores are measured on a scale of 1 to 100, where 1 indicates the lowest level of deprivation (least disadvantaged) and 100 is the highest level of deprivation (most disadvantaged).

Report Area	Total Population (2020)	State Percentile	National Percentile
Midwest Medical Center Service Area 2022	22,035	60	60
Illinois	12,609,277	No data	49
United States	327,872,361	No data	No data

Note: This indicator is compared to the state average. Data Source: University of Wisconsin-Madison School of Medicine and Public Health, Neighborhood Atlas, 2021. Source geography: Block Group.



Housing and Families

This category contains indicators that describe the structure of housing and families, and the condition and quality of housing units and residential neighborhoods. These indicators are important because housing issues like overcrowding and affordability have been linked to multiple health outcomes including infectious disease, injuries, and mental disorders. Furthermore, housing metrics like home ownership rates and housing prices are key for economic analysis.



Homeless Children & Youth

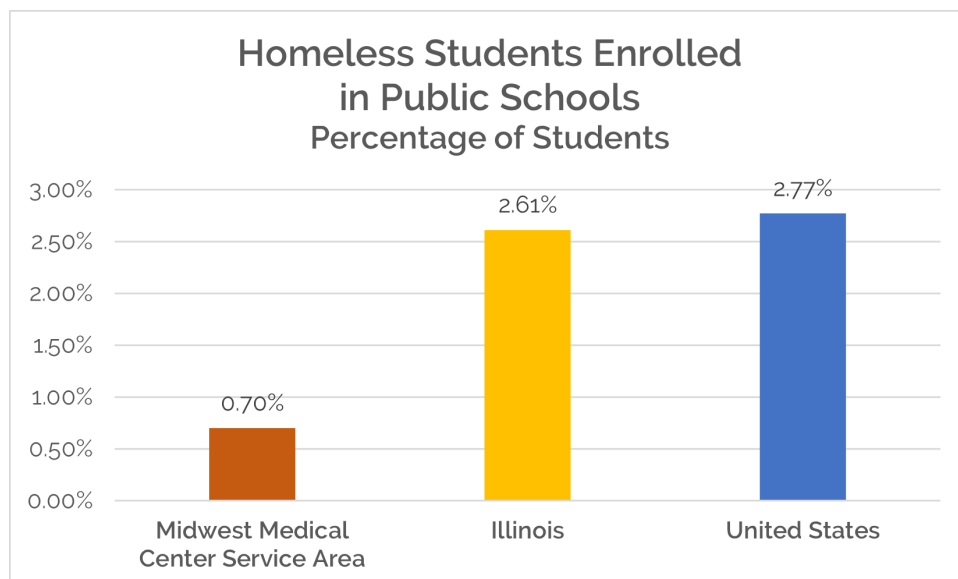
This indicator reports the number of homeless children and youth enrolled in the public school system during the school year 2019-2020. According to the data source definitions, homelessness is defined as lacking a fixed, regular, and adequate nighttime residence. Those who are homeless may be sharing the housing of other persons, living in motels, hotels, or camping grounds, in emergency transitional shelters, or may be unsheltered.

Data are aggregated to the report area level based on school district summaries where three or more homeless children are counted.

In the service area, of all the 1,488 students enrolled during the school year 2019-2020, there were 10 or .70% homeless students, which is lower than the statewide rate of 2.61%. *Note: Data are available for 60.0% of school districts in the service area, representing 74.90% of the public school student population.*

Report Area	Students in Reported Districts	Homeless Students	Homeless Students, Percent	Districts Reporting	Students in Reported Districts
Midwest Medical Center Service Area 2022	1,488	10	0.70%	60.00%	74.90%
Illinois	1,855,033	48,332	2.61%	88.90%	97.51%
United States	47,386,316	1,311,089	2.77%	86.95%	97.47%

Note: This indicator is compared to the state average. Data Source: U.S. Department of Education, EDData. Additional data analysis by CARES, 2019-2020. Source geography: School District

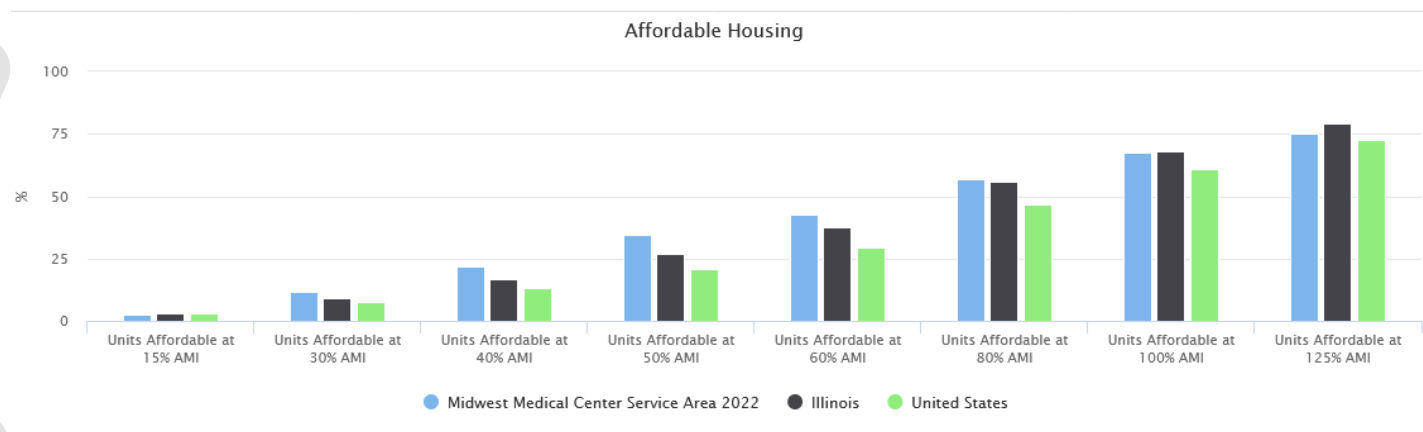


Affordable Housing

This indicator reports the number and percentage of housing units affordable at various income levels. Affordability is defined by assuming that housing costs should not exceed 30% of total household income. Income levels are expressed as a percentage of each county's area median household income (AMI).

Report Area	Units Affordable at 15% AMI	Units Affordable at 30% AMI	Units Affordable at 40% AMI	Units Affordable at 50% AMI	Units Affordable at 60% AMI	Units Affordable at 80% AMI	Units Affordable at 100% AMI	Units Affordable at 125% AMI
Midwest Medical Center Service Area 2022	2.49%	11.49%	21.81%	34.41%	42.45%	57.10%	67.64%	75.09%
Illinois	3.20%	9.07%	16.73%	27.10%	37.62%	55.59%	68.26%	79.30%
United States	3.15%	7.78%	12.96%	20.62%	29.46%	46.88%	60.68%	72.77%

Note: This indicator is compared to the state average. Data Source: U.S. Census Bureau, American Community Survey, 2015-2019. Source geography: Tract



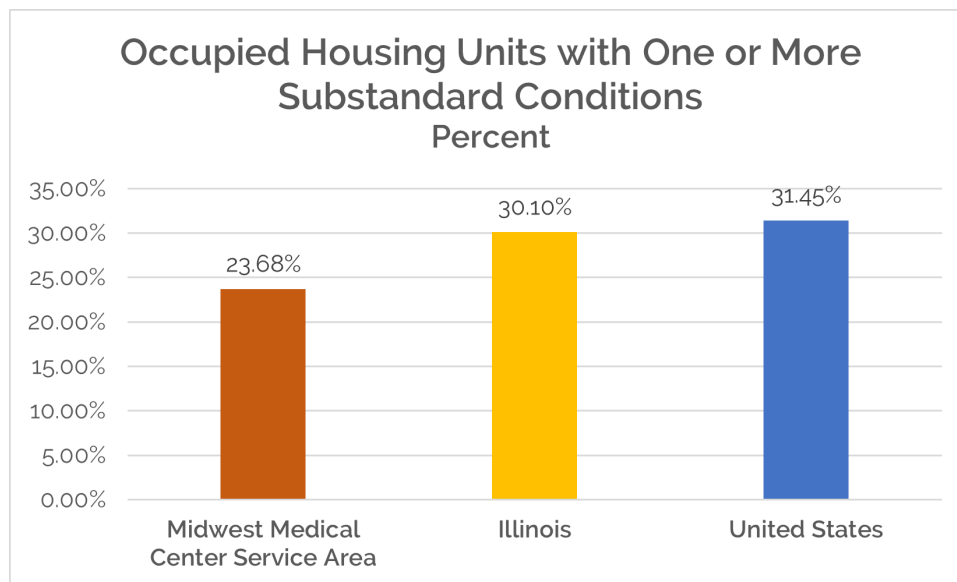
Housing Quality – Substandard Housing

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 one 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%.

Selected conditions provide information in assessing the quality of the housing inventory and its occupants. This data is used to easily identify homes where the quality of living and housing can be considered substandard. Of the 10,069 total occupied housing units in the service area, 2,384 or 23.68% have one or more substandard conditions.

Report Area	Total Occupied Housing Units	Occupied Housing Units with One or More Substandard Conditions	Occupied Housing Units with One or More Substandard Conditions, Percent
Midwest Medical Center Service Area 2022	10,069	2,384	23.68%
Illinois	4,884,061	1,469,859	30.10%

Note: This indicator is compared to the state average. Data Source: U.S. Census Bureau, American Community Survey, 2016-2020. Source geography: Tract



Households With No Computer

This indicator reports the percentage of households who don't own or use any types of computers, including desktop or laptop, smartphone, tablet, or other portable wireless computer, and some other type of computer, based on the 2016-2020 American Community Survey estimates. Of the 10,069 total households in the service area, 1,017 or 10.10% are without a computer.

Report Area	Total Households	Households with No Computer	Households with No Computer, Percent
Midwest Medical Center Service Area 2022	10,069	1,017	10.10%
Illinois	4,884,061	415,473	8.51%
United States	122,354,219	9,955,693	8.14%

Note: This indicator is compared to the state average. Data Source: U.S. Census Bureau, American Community Survey, 2016-2020. Source geography: Tract

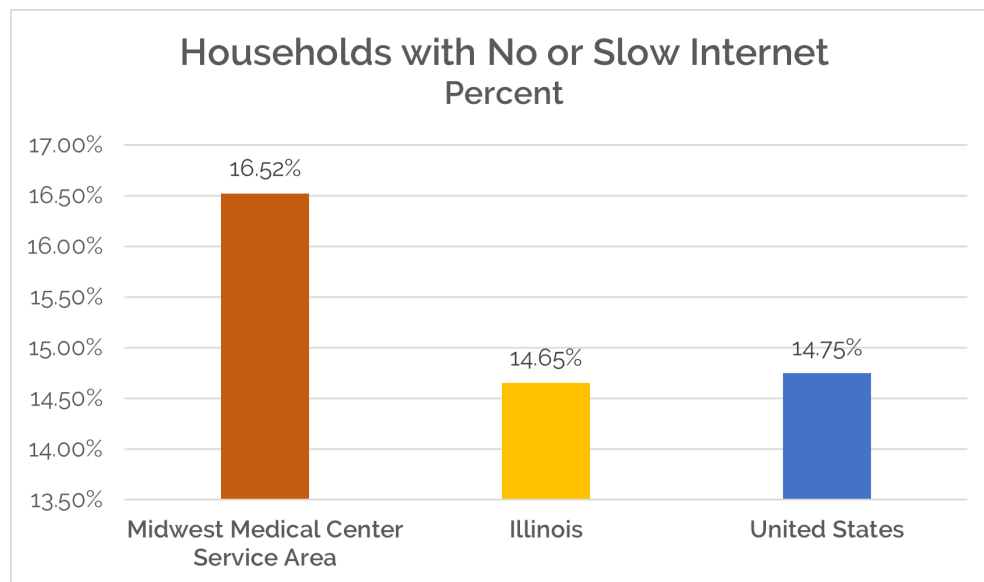


Households With No or Slow Internet

This indicator reports the percentage of households who either use dial-up as their only way of internet connection, or have internet access but don't pay for their service, or have no internet access in their home, based on the 2016-2020 American Community Survey estimates. Of the 10,069 total households in the service area, 1,663 or 16.52% have no or slow internet. *Note: The ACS2016-20 questions about internet/computer usage are not asked for the group quarters population, so data do not include people living in housing such as dorms, prisons, nursing homes, etc.*

Report Area	Total Households	Households with No or Slow Internet	Households with No or Slow Internet, Percent
Midwest Medical Center Service Area 2022	10,069	1,663	16.52%
Illinois	4,884,061	715,325	14.65%
United States	122,354,219	18,051,460	14.75%

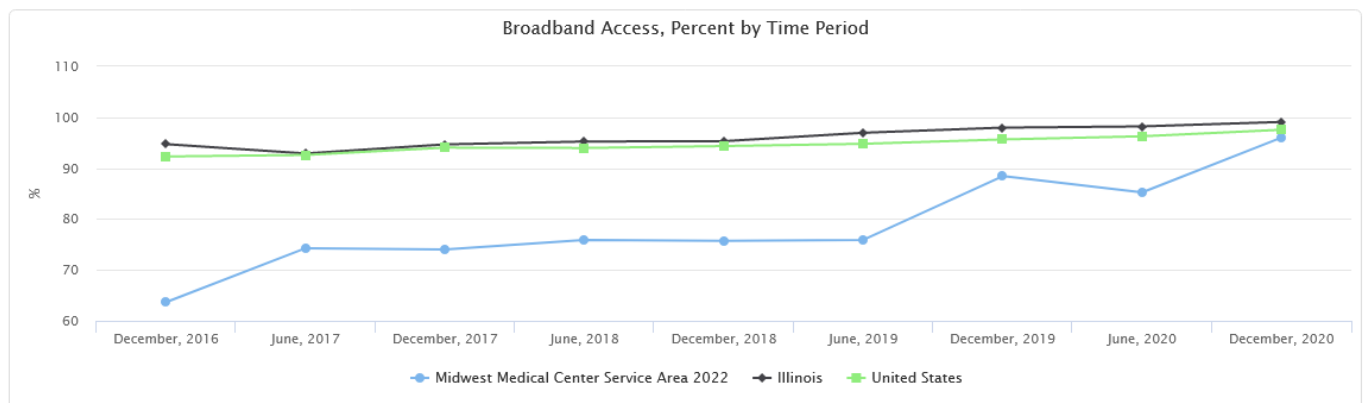
Note: This indicator is compared to the state average. Data Source: U.S. Census Bureau, American Community Survey, 2016-2020. Source geography: Tract



Broadband Access – Percent by Time Period

The table below displays temporal trends in high-speed internet availability as the percent of the population with access to broadband in the service area.

Report Area	December, 2016	June, 2017	December, 2017	June, 2018	December, 2018	June, 2019	December, 2019	June, 2020	December, 2020
Midwest Medical Center Service Area 2022	63.68%	74.27%	74.01%	75.88%	75.73%	75.91%	88.42%	85.23%	96.01%
Illinois	94.71%	92.88%	94.67%	95.23%	95.30%	96.95%	97.96%	98.20%	99.08%
United States	92.29%	92.59%	94.03%	93.96%	94.34%	94.78%	95.64%	96.26%	97.54%



Healthcare Workforce

A lack of access to care presents barriers to good health. The supply and accessibility of facilities and physicians, the rate of uninsurance, financial hardship, transportation barriers, cultural competency, and coverage limitations affect access. Rates of morbidity, mortality, and emergency hospitalizations can be reduced if community residents access services such as health screenings, routine tests, and vaccinations. Prevention indicators can call attention to a lack of access or knowledge regarding one or more health issues and can inform program interventions.

Access to Care – Dental Health

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. Within the service area, there are 13 dentists. This represents 61.2 dentists per 100,000 total population.

Report Area	Estimated Population	Number of Dentists	Ratio of Dental Providers to Population (1 Provider per x Persons)	Dentists, Rate (Per 100,000 Population)
Midwest Medical Center Service Area 2022	21,239	13	1,633.8	61.2
Illinois	25,147,639	20,614	1,219.9	82
United States	657,985,269	471,070	1,396.8	71.6

Note: This indicator is compared to the state average. Data Source: U.S. Department of Health & Human Services, Health Resources and Services Administration, HRSA - Area Health Resource File. Accessed via County Health Rankings, 2017. Source geography: County

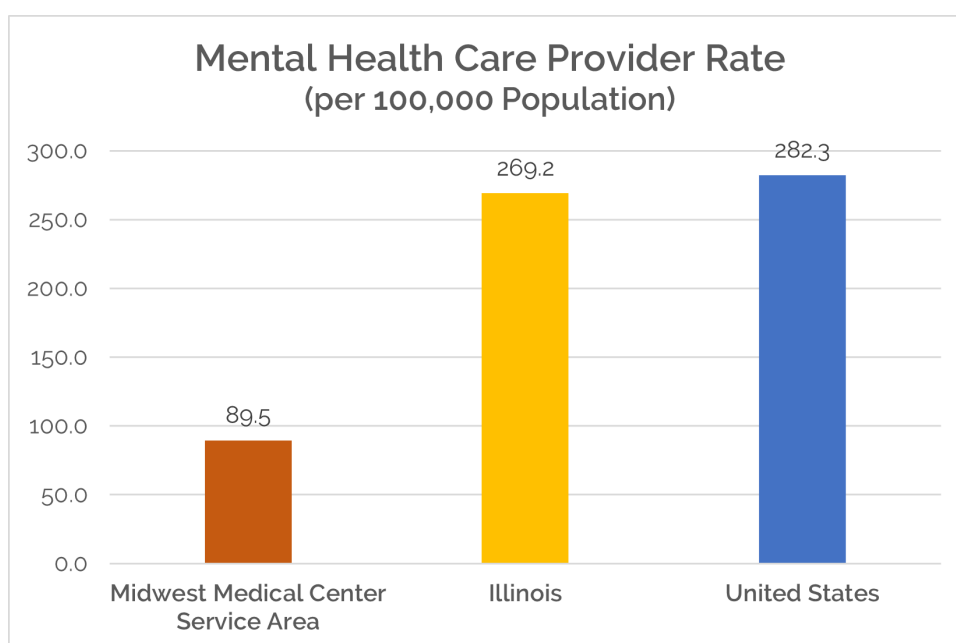
Access to Care – Mental Health

This indicator reports the number of mental health providers in the service area as a rate per 100,000 total area population. Mental health providers include psychiatrists, psychologists, clinical social workers, counselors, marriage and family therapists, and mental health providers that treat alcohol and other drug abuse as well as advanced practice nurses specializing in mental healthcare.

Data from the 2020 Centers for Medicare and Medicaid Services (CMS) National Provider Identifier (NPI) downloadable file are used in the 2021 County Health Rankings. Within the service area, there are 19 mental health providers with a CMS National Provider Identifier (NPI). This represents 89.5 providers per 100,000 total population.

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)
Midwest Medical Center Service Area 2022	21,239	19	1,117.8	89.5
Illinois	25,125,712	67,641	371.5	269.2
United States	657,959,282	1,857,394	354.2	282.3

Note: This indicator is compared to the state average. Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES), Accessed via County Health Rankings, 2020. Source geography: County

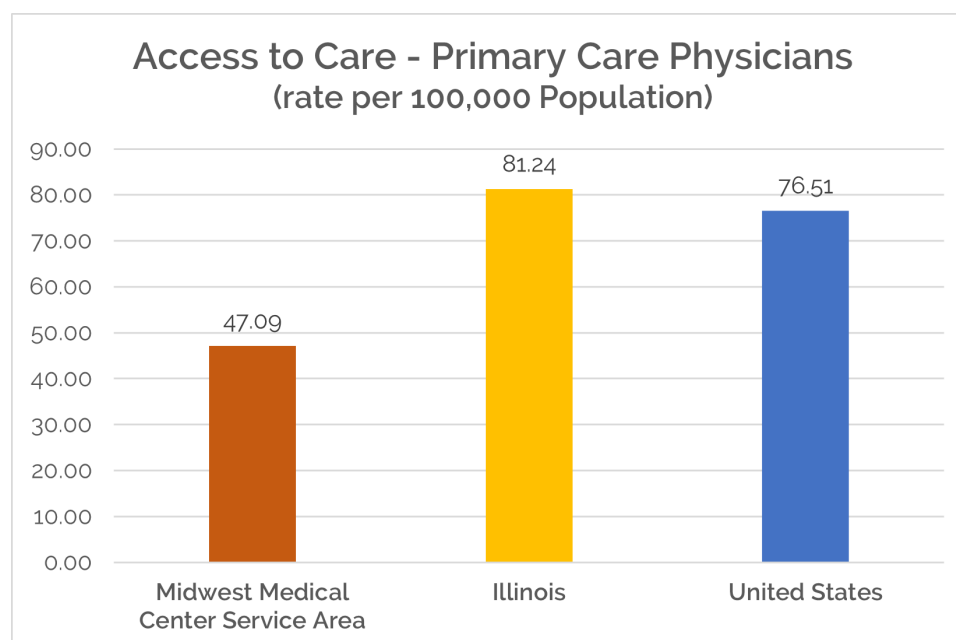


Access to Care – Primary Care

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 subspecialties within the listed specialties are excluded. This indicator is relevant because a shortage of health professionals contributes to access and health status issues. Within the service area, there are 10 primary care physicians. This represents 47.09 providers per 100,000 total population.

Report Area	Total Population	Primary Care Physicians	Primary Care Physicians, Rate per 100,000 Population
Midwest Medical Center Service Area 2022	21,235	10	47.09
Illinois	12,671,821	10,295	81.24
United States	328,239,523	251,126	76.51

Note: This indicator is compared to the state average. Data Source: U.S. Department of Health & Human Services, Health Resources and Services Administration, HRSA - Area Health Resource File. Accessed via County Health Rankings, 2017. Source geography: County

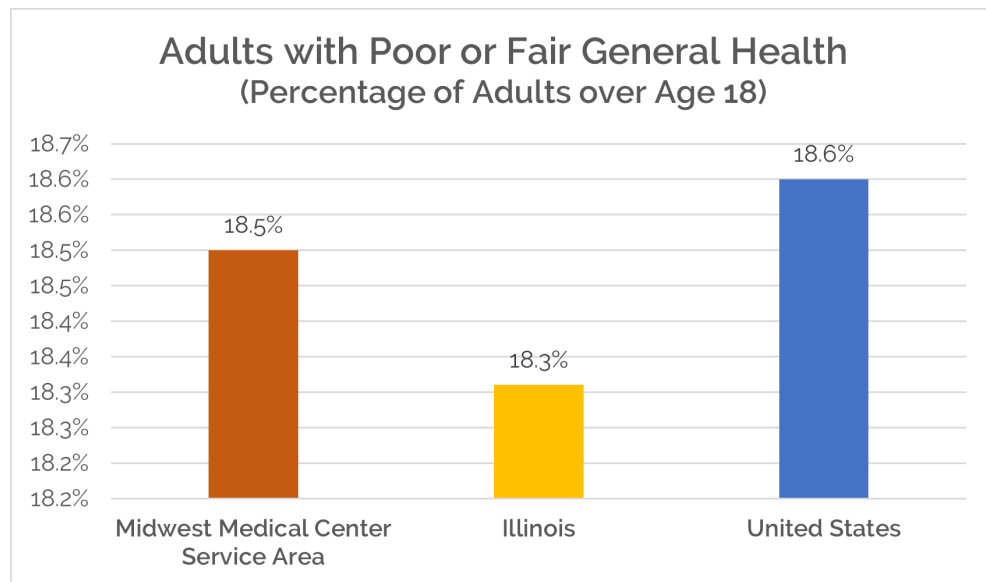


Poor or Fair Health

This indicator reports the percentage of adults age 18 and older who self-report poor or fair health (age-adjusted to the 2000 standard). Data were from the 2020 Behavioral Risk Factor Surveillance System (BRFSS) annual survey and are used for the 2021 County Health Rankings. This indicator is relevant because it is a measure of general poor health status. Within the service area, the estimated prevalence of fair or poor health among adults aged 18 years and older was 18.50%. This value is based on the crude number of adults who self-report their general health status as “fair” or “poor.”

Report Area	Total Population (2019)	Adults with Poor or Fair General Health (Crude)	Adults with Poor or Fair General Health (Age-Adjusted)
Midwest Medical Center Service Area 2022	21,235	18.50%	15.90%
Illinois	12,671,821	18.31%	17.80%
United States	328,239,523	18.60%	17.80%

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention: Behavioral Risk Factor Surveillance System. Accessed via the 500 Cities Data Portal, 2019. Source geography: Tract

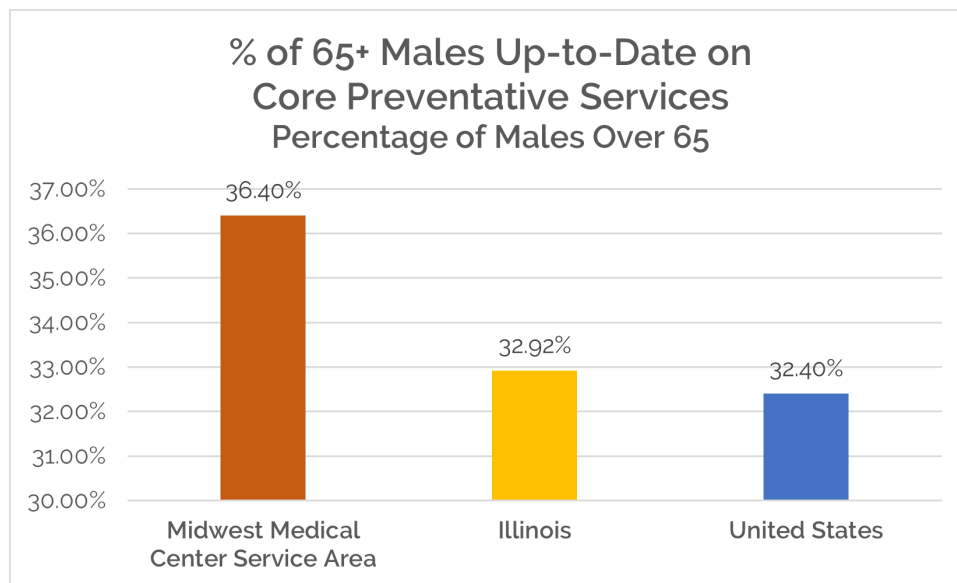


Prevention – Core Preventative Services for Men

This indicator reports the percentage of males age 65 and older who report that they are up-to-date on a core set of clinical preventative services. Services include: an influenza vaccination in the past year, a pneumococcal vaccination (PPV) ever, and either a fecal occult blood test (FOBT) within the past year, a sigmoidoscopy within the past five years and an FOBT within the past three years, or a colonoscopy within the past 10 years. Within the service area, there are 36.40% men age 65 and older who had core preventative services in the last one to 10 years of the total population.

Report Area	Total Population (2018)	Percentage of Males age 65+ Up to Date on Core Preventative Services
Midwest Medical Center Service Area 2022	21,366	36.40%
Illinois	12,741,080	32.92%
United States	327,167,434	32.40%

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Accessed via the 500 Cities Data Portal, 2018. Source geography: Tract

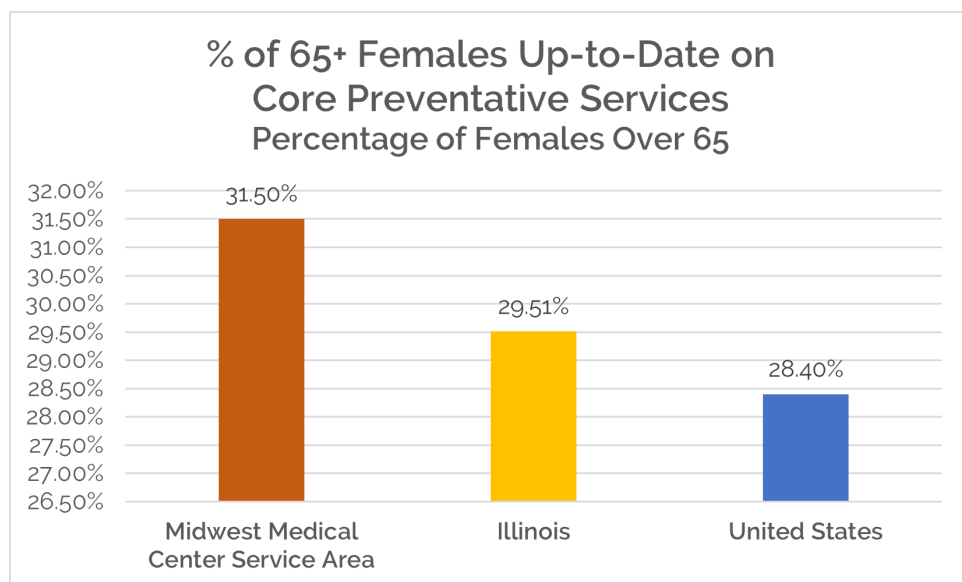


Prevention – Core Preventative Services for Women

This indicator reports the percentage of females age 65 and older who report that they are up-to-date on a core set of clinical preventative services. Services include: an influenza vaccination in the past year, a pneumococcal vaccination (PPV) ever, and either a fecal occult blood test (FOBT) within the past year, a sigmoidoscopy within the past five years and an FOBT within the past three years, or a colonoscopy within the past 10 years, and a mammogram in the past two years. Within the service area, there are 31.50% women age 65 and older who had core preventative services in the last one to 10 years of the total population.

Report Area	Total Population (2018)	Percentage of Females age 65+ Up to Date on Core Preventative Services
Midwest Medical Center Service Area 2022	21,366	31.50%
Illinois	12,741,080	29.51%
United States	327,167,434	28.40%

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Accessed via the 500 Cities Data Portal, 2018. Source geography: Tract



Insurance – Insured Population and Provider Type

Health insurance coverage is considered a key driver of health status. In the service area, 20,185 total civilians have some form of health insurance coverage. Of those, 78.95% have private insurance, e.g. insurance purchased through an employer or union, through direct purchase (e.g. on a health exchange) or have Tricare or other military health insurance.

In addition, 42.77% have a form of public health insurance. Public health coverage includes the federal programs: Medicare, Medicaid, and VA Health Care (provided through the Department of Veterans Affairs), as well as the Children's Health Insurance Program (CHIP). This indicator is relevant because insurance provides access to healthcare including regular primary care, specialty care, and other health services that prevent poor health status. *Note: Percentages may exceed 100% as individuals may have more than one form of health insurance.*

Report Area	Total Population (For Whom Insurance Status is Determined)	Population with Health Insurance	Percentage with Private Insurance	Percentage with Public Insurance
Midwest Medical Center Service Area 2022	21,276	20,185	78.95%	42.77%
Illinois	12,536,614	11,682,181	75.80%	36.13%
United States	321,525,041	293,466,138	74.57%	38.65%

Note: This indicator is compared to the state average. Data Source: U.S. Census Bureau, American Community Survey, 2016-2020. Source geography: Tract

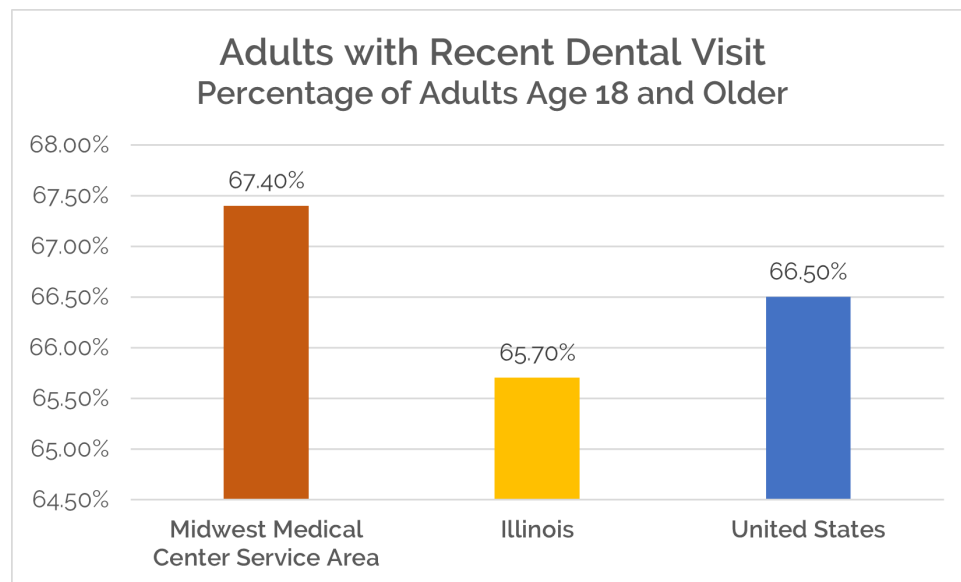


Dental Care Utilization

This indicator reports the percentage of adults age 18 and older who report having been to the dentist or dental clinic in the previous year. Within the service area, there are 66.50% of adults who went to the dentist in the past year of the total population.

Report Area	Total Population (2018)	Adults with Recent Dental Visit (Crude)	Adults with Recent Dental Visit (Age-Adjusted)
Midwest Medical Center Service Area 2022	21,366	67.40%	66.50%
Illinois	12,741,080	65.7%	65.5%
United States	163,583,717	66.5%	66.2%

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal, 2018.



Health Outcomes

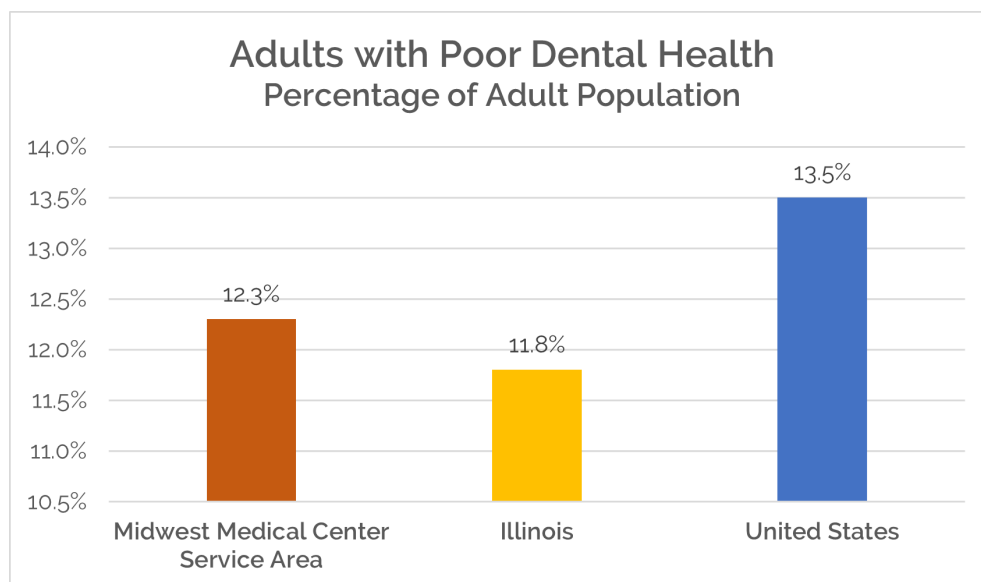
Measuring morbidity and mortality rates allows assessing linkages between social determinants of health and outcomes. By comparing, for example, the prevalence of certain chronic diseases to indicators in other categories (e.g., poor diet and exercise) with outcomes (e.g., high rates of obesity and diabetes), various causal relationships may emerge, allowing a better understanding of how certain community health needs may be addressed.

Poor Dental Health

This indicator reports the number and percentage of adults age 18 and older who report having lost all of their natural teeth because of tooth decay or gum disease. Within the service area, there were 16.5% of adults age 18 and older who reported losing all natural teeth of the total population and 12.30% reporting poor dental health in general.

Report Area	Total Population (2018)	Adults with Poor Dental Health (Crude)	Adults with Poor Dental Health (Age-Adjusted)
Midwest Medical Center Service Area 2022	21,366	12.30%	12.60%
Illinois	12,741,080	11.8%	12.0%
United States	327,167,434	13.5%	13.9%

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Accessed via the PLACES Data Portal, 2018.



Top Five Most Commonly Diagnosed Cancers

The table below shows counts and age-adjusted incidence rates of the five most common newly diagnosed cancers by site for the five-year period of 2014-2018.

Area Name	Cancer Site	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Population)
Jo Daviess County, Illinois	1 - Lung & Bronchus (All Stages^), 2014-2018	25	61.4
Jo Daviess County, Illinois	2 - Prostate (All Stages^), 2014-2018	21	101.6
Jo Daviess County, Illinois	3 - Breast (All Stages^), 2014-2018	21	121.7
Jo Daviess County, Illinois	4 - Colon & Rectum (All Stages^), 2014-2018	13	33.5
Jo Daviess County, Illinois	5 - Melanoma of the Skin (All Stages^), 2014-2018	10	28.3
Illinois	1 - Breast (All Stages^), 2014-2018	10,389	133.7
Illinois	2 - Lung & Bronchus (All Stages^), 2014-2018	9,538	63
Illinois	3 - Prostate (All Stages^), 2014-2018	8,174	111.5
Illinois	4 - Colon & Rectum (All Stages^), 2014-2018	6,243	42.1

Chronic Conditions – Asthma Prevalence (Adult)

This indicator reports the percentage of adults age 18 and older who answer "yes" to both of the following questions: "Have you ever been told by a doctor, nurse, or other health professional that you have asthma?" and the question "Do you still have asthma?" Within the service area, there were 8.80% of adults 18 and older who reported having asthma of the total population.

Report Area	Total Population (2019)	Adults with Asthma (Crude)	Adults with Asthma (Age- Adjusted)
Midwest Medical Center Service Area 2022	21,235	8.80%	9.10%
Illinois	12,671,821	8.7%	8.7%
United States	328,239,523	8.9%	8.9%

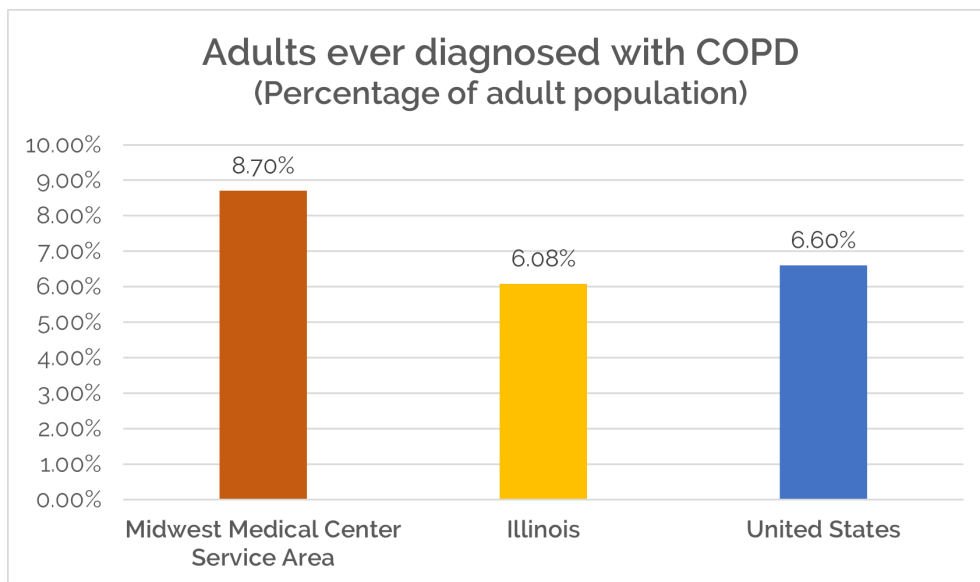
Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Accessed via the PLACES Data Portal, 2019. Source geography: Tract

Chronic Conditions – Chronic Obstructive Pulmonary Disease (Adult)

This indicator reports the percentage of adults age 18 and older who report ever having been told by a doctor, nurse, or other health professional that they had chronic obstructive pulmonary disease (COPD), emphysema, or chronic bronchitis. Within the service area, there were 8.70% of adults 18 and older who reported having chronic obstructive pulmonary disease of the total population.

Report Area	Total Population (2019)	Percentage of Adults Ever Diagnosed with Chronic Lower Respiratory Disease
Midwest Medical Center Service Area 2022	21,235	8.70%
Illinois	12,671,821	6.08%
United States	328,239,523	6.60%

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Accessed via the PLACES Data Portal, 2019. Source geography: Tract



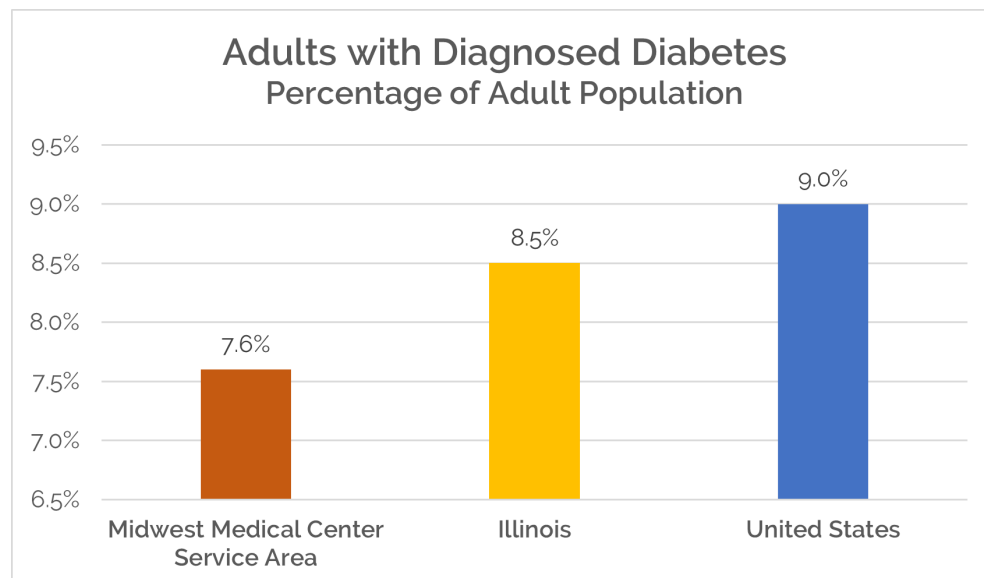
Chronic Conditions – Diabetes (Adult)

This indicator reports the number and percentage of adults age 20 and older who have ever been told by a doctor that they have diabetes. This indicator is relevant because diabetes is a prevalent problem in the U.S. It may indicate an unhealthy lifestyle and puts individuals at risk for further health issues. Within the service area, 1,838 of adults age 20 and older have diabetes. This represents 7.6% of the total survey population.

Note: In 2021, the CDC updated the methodology used to produce estimates for this indicator. Estimated values for prior years (2004-2017) have been updated in this platform to allow comparison across years. Use caution when comparing with saved assessments generated prior to November 10, 2021.

Report Area	Population Age 20+	Adults with Diagnosed Diabetes	Adults with Diagnosed Diabetes, Age-Adjusted Rate
Midwest Medical Center Service Area 2022	16,862	1,838	7.6%
Illinois	9,545,729	913,727	8.5%
United States	239,919,249	24,189,620	9.0%

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2019. Source geography: County

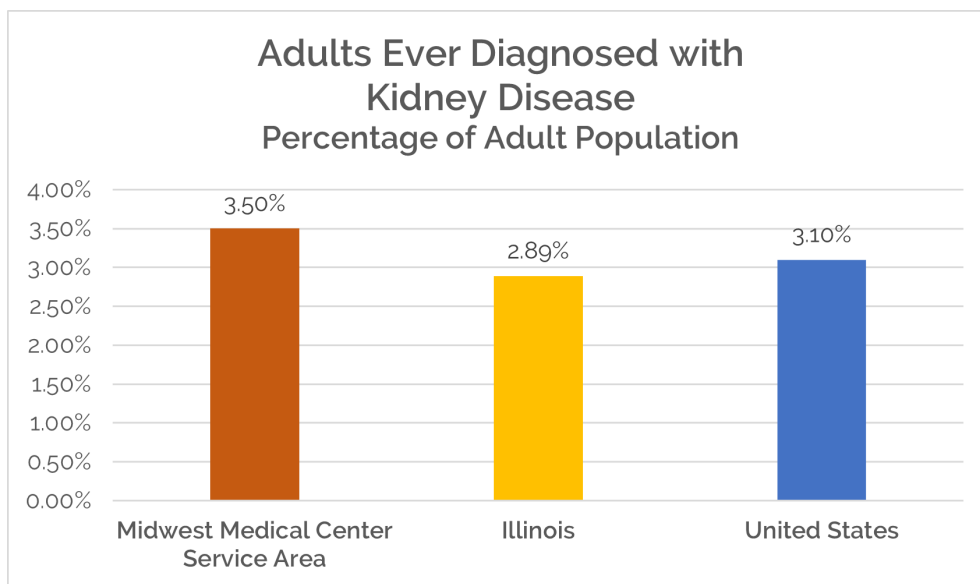


Chronic Conditions – Kidney Disease (Adult)

This indicator reports the number and percentage of adults age 18 and older who report ever having been told by a doctor, nurse, or other health professional that they have kidney disease.

Report Area	Total Population (2019)	Percentage of Adults Ever Diagnosed with Kidney Disease
Midwest Medical Center Service Area 2022	21,235	3.50%
Illinois	12,671,821	2.89%
United States	328,239,523	3.10%

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Accessed via the PLACES Data Portal, 2019; Source geography: Tract

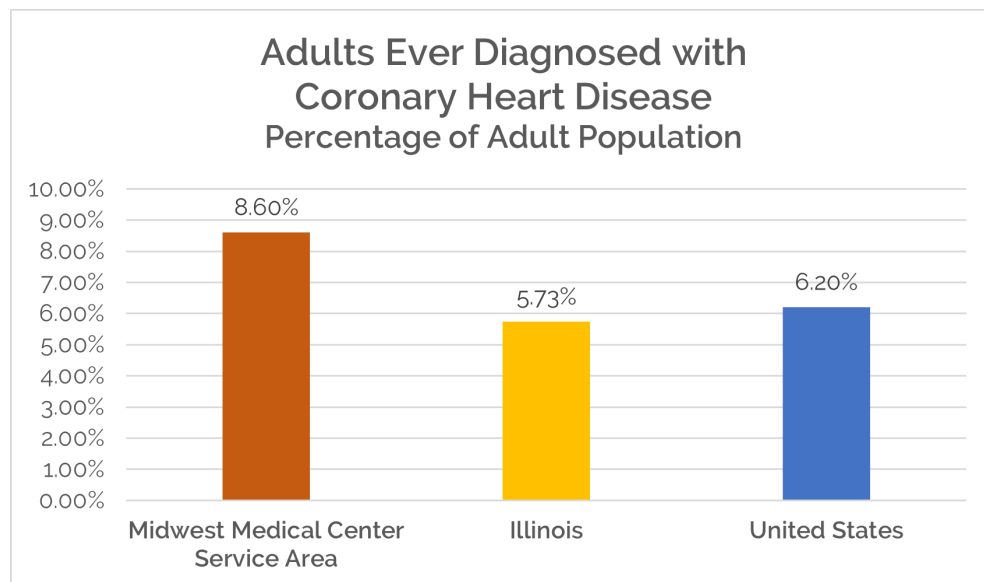


Chronic Conditions – Coronary Heart Disease (Adult)

This indicator reports the percentage of adults age 18 and older who report ever having been told by a doctor, nurse, or other health professional that they had angina or coronary heart disease. Within the service area, there were 8.60% of adults 18 and older who reported having coronary heart disease of the total population.

Report Area	Total Population (2019)	Adults Ever Diagnosed with Coronary Heart Disease (Crude)	Adults Ever Diagnosed with Coronary Heart Disease (Age-Adjusted)
Midwest Medical Center Service Area 2022	21,235	8.60%	5.40%
Illinois	12,671,821	5.73%	5.17%
United States	328,239,523	6.20%	5.40%

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Accessed via the PLACES Data Portal, 2019. Source geography: Tract

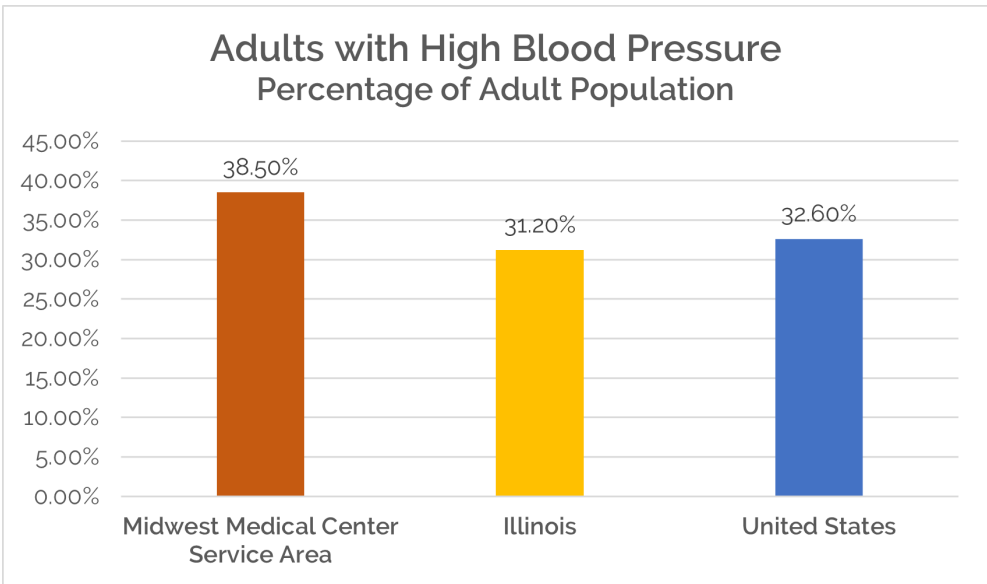


Chronic Conditions – High Blood Pressure (Adult)

This indicator reports the percentage of adults age 18 and older who report ever having been told by a doctor, nurse, or other health professional that they have high blood pressure. Women who were told high blood pressure only during pregnancy and those who were told they had borderline hypertension were not included. Within the service area, there were 38.50% of adults 18 and older who reported having coronary heart disease of the total population.

Report Area	Total Population (2019)	Percentage of Adults with High Blood Pressure
Midwest Medical Center Service Area 2022	21,235	38.50%
Illinois	12,671,821	31.2%
United States	328,239,523	32.6%

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Accessed via the PLACES Data Portal, 2019. Source geography: Tract

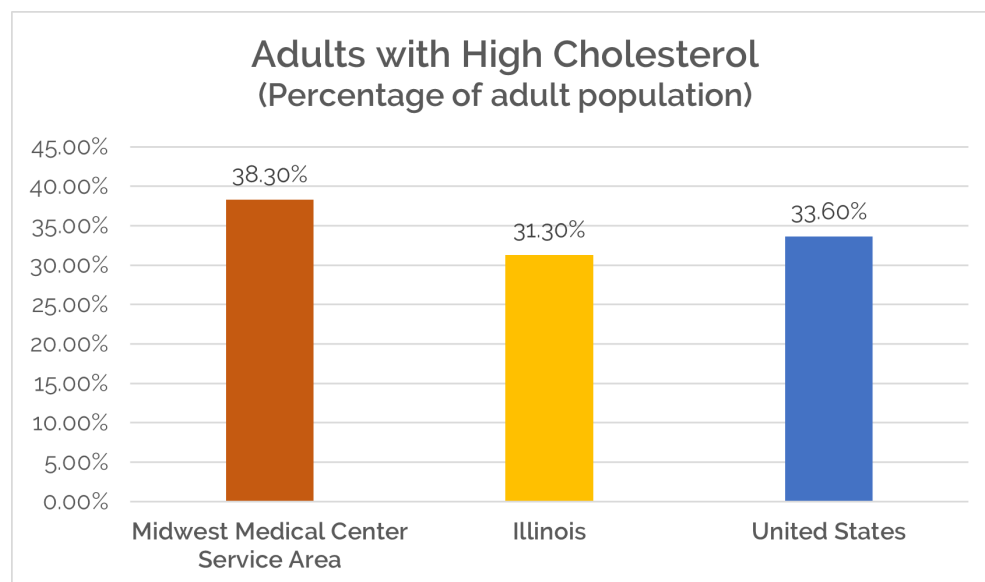


Chronic Conditions – High Cholesterol (Adult)

This indicator reports the percentage of adults age 18 and older who report having been told by a doctor, nurse, or other health professional that they had high cholesterol. Within the service area, there were 38.30% of adults age 18 and older who reported having high cholesterol of the total population.

Report Area	Total Population (2019)	Percentage of Adults with High Cholesterol
Midwest Medical Center Service Area 2022	21,235	38.30%
Illinois	12,671,821	31.3%
United States	328,239,523	33.6%

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Accessed via the PLACES Data Portal, 2019. Source geography: Tract

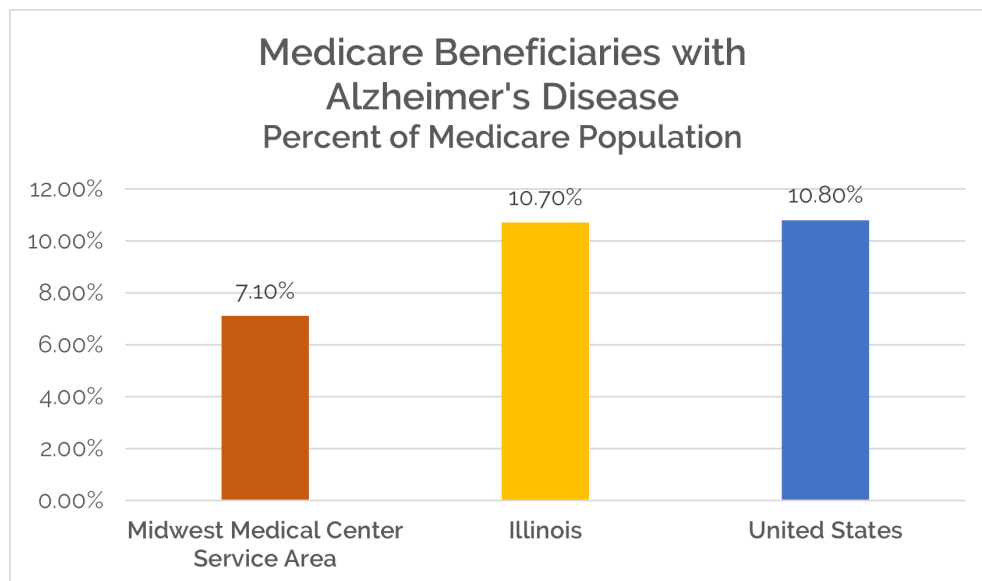


Chronic Conditions – Alzheimer's Disease (Adult)

This indicator reports the number and percentage of Medicare fee-for-service population with Alzheimer's Disease. Data are based upon Medicare administrative enrollment and claims data for Medicare beneficiaries enrolled in the fee-for-service program. Within the service area, there were 211 beneficiaries with Alzheimer's Disease based on administrative claims data in the latest report year.

Report Area	Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with Alzheimer's Disease	Beneficiaries with Alzheimer's Disease, Percent
Midwest Medical Center Service Area 2022	2,963	211	7.1%
Illinois	1,443,297	153,730	10.7%
United States	33,499,472	3,610,640	10.8%

Note: This indicator is compared to the state average. Data Source: Centers for Medicare & Medicaid Services, CMS - Chronic Conditions Warehouse, 2018. Source geography: County



SUBSTANCE USE

Alcohol – Heavy Alcohol Consumption

In the service area, 3,979 or 23.13% of adults self-report excessive drinking in the last 30 days, which is less than the state rate of 22.95%. Data for this indicator were based on survey responses to the 2019 Behavioral Risk Factor Surveillance System (BRFSS) annual survey and are used for the 2022 County Health Rankings.

Excessive drinking is defined as the percentage of the population who report at least one binge drinking episode involving five or more drinks for men and four or more for women over the past 30 days, or heaving drinking involving more than two drinks per day for man and more than one per day for women, over the same time period. Alcohol use is a behavioral health issue that is also a risk factor for a number of negative health outcomes, including: physical injuries related to motor vehicle accidents, stroke, chronic diseases such as heart disease and cancer, and mental health conditions such as depression and suicide.

Note: There are a number of evidence-based interventions that may reduce excessive/binge drinking. Examples include raising taxes on alcoholic beverages, restricting access to alcohol by limiting days and hours of retail sales, and screening and counseling for alcohol abuse (Centers for Disease Control and Prevention, Preventing Excessive Alcohol Use, 2020).

Report Area	Population Age 18+	Adults Reporting Excessive Drinking	Percentage of Adults Reporting Excessive Drinking
Midwest Medical Center Service Area 2022	17,200	3,979	23.13%
Illinois	9,884,020	2,267,968	22.95%
United States	255,778,123	50,612,058	19.79%

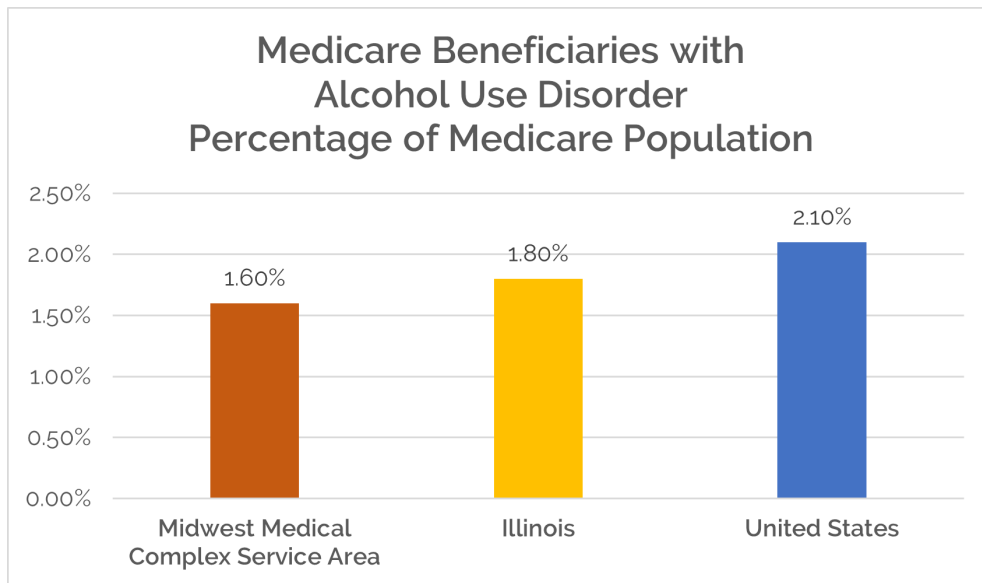
Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Accessed via County Health Rankings, 2019. Source geography: County

Alcohol Use Disorder (Medicare)

Within the service area, there were 46 beneficiaries with alcohol use disorder based on administrative claims data in the latest report year. This represents 1.6% of the total Medicare fee-for-service beneficiaries.

Report Area	Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with Alcohol Use Disorder	Percentage with Alcohol Use Disorder
Midwest Medical Center Service Area 2022	2,963	46	1.6%
Illinois	1,443,297	25,874	1.8%
United States	33,499,472	696,555	2.1%

Note: This indicator is compared to the state average. Data Source: Centers for Medicare and Medicaid Services, CMS - Chronic Conditions Warehouse, 2018. Source geography: County



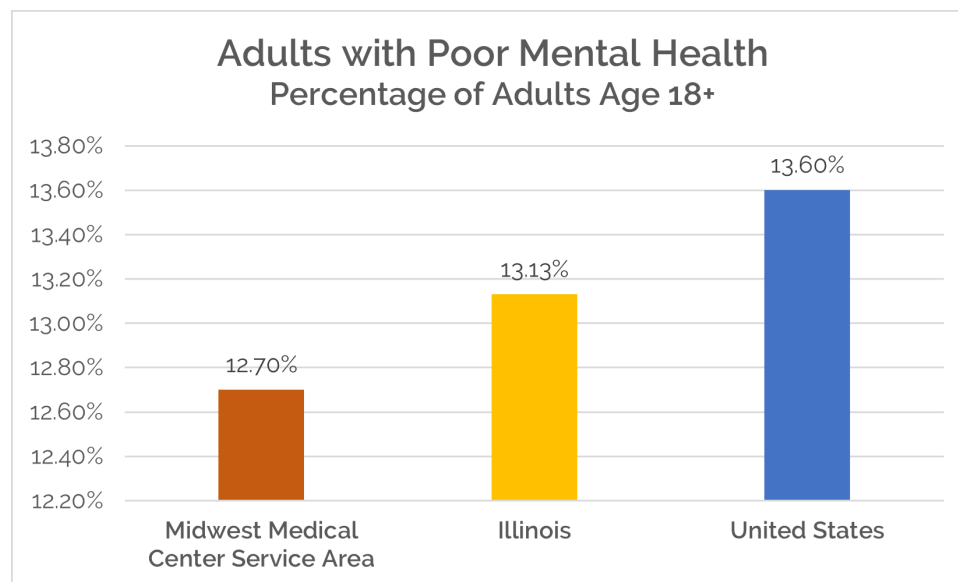
MENTAL AND BEHAVIORAL HEALTH

Poor Mental Health

Health behaviors such as poor diet, a lack of exercise, and substance abuse contribute to poor health status. This indicator reports the percentage of adults age 18 and older who report 14 or more days during the past 30 days during which their mental health was not good. Data were from the 2019 Behavioral Risk Factor Surveillance System (BRFSS) annual survey. Within the service area, there were 12.70% of adults 18 and older who reported poor mental health in the past month of the total population.

Report Area	Total Population (2019)	Adults with Poor Mental Health (Crude)	Adults with Poor Mental Health (Age-Adjusted)
Midwest Medical Center Service Area 2022	21,235	12.70%	14.60%
Illinois	12,671,821	13.13%	13.37%
United States	328,239,523	13.60%	13.90%

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention: Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal, 2019. Source geography: Tract



Mortality – Suicide

This indicator reports the 2016-2020 five-year average rate of death due to intentional self-harm (suicide) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are summarized for service areas from county level data, only where data is available.
Note: Data are suppressed for counties with fewer than 20 deaths in the timeframe.

Report Area	Total Population, 2016-2020 Average	Five Year Total Deaths, 2016-2020 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
Midwest Medical Center Service Area 2022	21,441	18	No data	No data
Illinois	12,720,799	7,178	11.3	10.9
United States	326,747,554	233,972	14.3	13.8

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention; National Vital Statistics System. Accessed via CDC WONDER: 2016-2020. Source geography: County

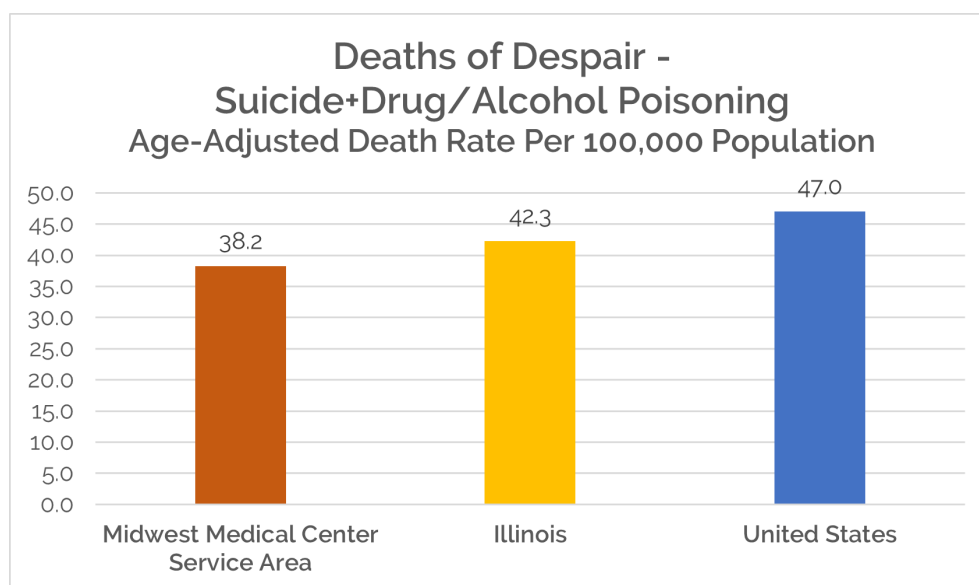


Deaths of Despair (Suicide + Drug/Alcohol Poisoning)

This indicator reports average rate of death due to intentional self-harm (suicide), alcohol-related disease, and drug overdose, also known as “deaths of despair,” per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for service areas from county level data, only where data is available. This indicator is relevant because deaths of despair is an indicator of poor mental health. Within the service area, there were 42 deaths of despair. This represents an age-adjusted death rate of 38.2 per every 100,000 total population.

Report Area	Total Population, 2016-2020 Average	Five Year Total Deaths, 2016-2020 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
Midwest Medical Center Service Area 2022	21,441	42	39.2	38.2
Illinois	12,720,799	28,231	44.4	42.3
United States	326,747,554	806,246	49.4	47.0

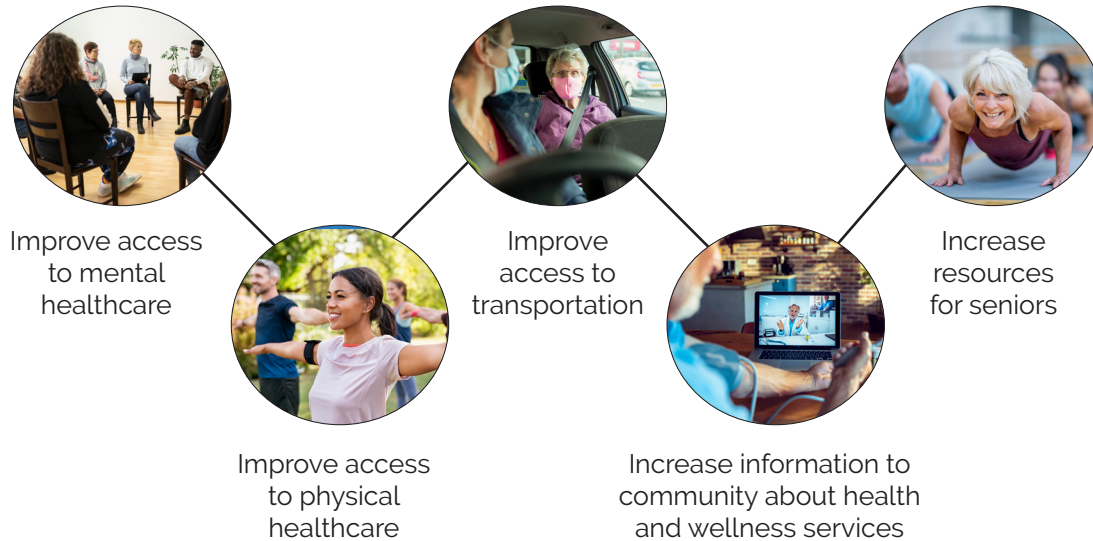
Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, National Vital Statistics System, Accessed via CDC WONDER, 2016-2020. Source geography: County



EMERGENCY PREPAREDNESS

Midwest Medical Center works with the US-HHS ASPR, the Illinois Department of Public Health, county health departments, the Illinois Emergency Management Agency, and other state, regional, and local partners to plan, exercise, and equip for emergency preparedness and to ensure the ability to address a wide range of potential emergencies, ranging from disasters of all causes to pandemics and terrorism.





IDENTIFICATION AND PRIORITIZATION OF NEEDS

PROCESS

The steering group, comprised of representatives from both focus groups – including a local public health department and schools – including members serving persons likely to be unserved, underserved or otherwise experiencing unmet needs, met on May 24, 2022 to identify and prioritize significant health needs.

The group reviewed notes from the focus groups and summaries of data reviewed by the consultant which included SparkMaps, ESRI, Illinois Department of Public Health, CDC, USDA, Illinois Department of Labor, HRSA, County Health Rankings and Roadmaps, National Cancer Institute and other resources. Following the review, the group identified and then prioritized the following as being the significant health needs facing the Midwest Medical Center service area.

DESCRIPTION OF THE COMMUNITY HEALTH NEEDS IDENTIFIED

At the conclusion of their review and discussion, the identification and prioritization group advanced the following needs as being the significant community health needs facing the Midwest Medical Center service area:

1. **Improve access to mental healthcare**
 - Counselors and other providers and resources to improve access to behavioral mental healthcare
 - Counselors and other providers and resources to improve access to care for substance use disorders
2. **Improve access to physical healthcare**
 - Pain Clinic
 - Cardiac care
 - Dialysis
 - Oncology
3. **Improve access to available, flexible transportation**
4. **Increase information to the community about available local health and wellness activities**
5. **Increase resources for seniors**
 - Independent living opportunities
 - Transitional senior housing
 - Education about local resources, insurance, and Medicare – and supplemental and advantage plans – and Medicaid
 - Screenings





Resources



Partners



Volunteers



Government

RESOURCES AVAILABLE TO MEET PRIORITY HEALTH NEEDS

HOSPITAL RESOURCES

Services at Midwest Medical Center

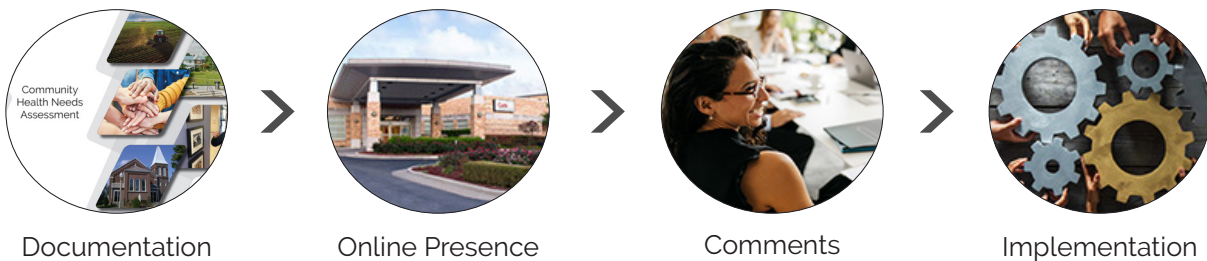
- Administration
- Clinic
- Providers
- Clinic Director
- Marketing

HEALTHCARE PARTNERS OR OTHER RESOURCES, INCLUDING TELEMEDICINE

- Jo Daviess Health Department
- Surrounding hospitals and providers
- EMS providers
- Marketing Consultant
- Other partners

COMMUNITY RESOURCES

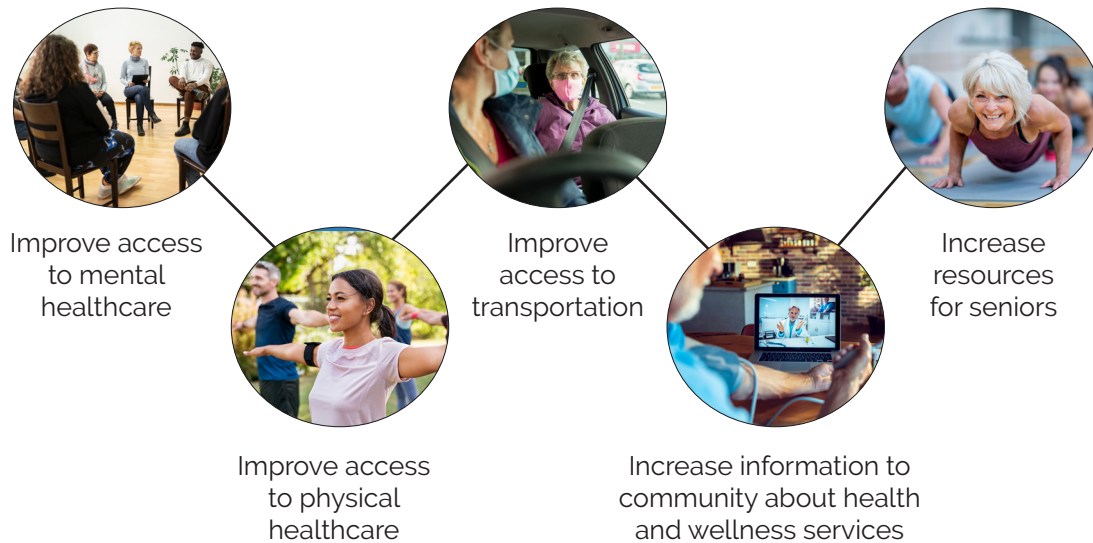
- Jo Daviess County Sheriff
- 708 Board
- Jo Daviess Transit
- Senior Resource Center
- Local insurance brokers/financial planners
- Other interested organizations or persons



DOCUMENTING AND COMMUNICATING RESULTS

This CHNA Report will be available to the community on the hospital's public website, www.midwestmedicalcenter.org. A hard copy may be reviewed at the hospital by inquiring at the information desk at the main entrance.

No written comments were received concerning the hospital facility's most recently conducted CHNA nor on the most recently adopted Implementation Strategy. A method for retaining written public comments and responses exists, but none were received.



IMPLEMENTATION STRATEGY

PLANNING PROCESS

The results of the assessment process were presented to senior staff through a facilitated discussion for development of a plan to address the identified and prioritized needs on May 25, 2022.

The group reviewed the needs assessment process completed to that point and considered the prioritized significant needs and supporting documents. They recounted some of the steps taken to address previous Community Health Needs Assessments. They also considered internal and external resources potentially available to address the current prioritized needs.

The group then considered each of the prioritized needs. For each of the three prioritized needs, actions the hospital intends to take were identified, along with the anticipated impact of the actions, the resources the hospital intends to commit to the actions, and the external collaborators the hospital plans to cooperate with to address the need. The plan will be evaluated by periodic review of measurable outcome indicators in conjunction with annual review and reporting.

IMPLEMENTATION STRATEGY

The group addressed the needs with the following strategies:

1. Improve access to mental healthcare

- Counselors and other providers and resources to improve access to behavioral mental healthcare
- Counselors and other providers and resources to improve access to care for substance use disorders

Actions the hospital intends to take to address the health need:

- Midwest Medical Center will complete and maintain a web-based local resource guide for mental health and other local medical resources.
- Midwest Medical Center will explore cooperative transport programs with South Central Transit.
- Midwest Medical Center will construct a new outpatient wing that will include room for expanding behavioral health services.
- Midwest Medical Center will explore and evaluate the possibility of adding inpatient mental health services.

Anticipated impacts of these actions:

Midwest Medical Center anticipates that the actions set out above will address key needs identified and will lead to further resolution with time.

Programs and resources the hospital plans to commit to address health need:

- Administration
- Clinic
- Providers

Planned collaboration between the hospital and other facilities:

- 708 Board

2. Improve access to physical healthcare

- Pain Clinic
- Cardiac care
- Dialysis
- Oncology

Actions the hospital intends to take to address the health need:

- Midwest Medical Center will continue to evaluate establishing a pain clinic.
- Midwest Medical Center will create space for an infusion center and explore and evaluate adding oncology services at that location.
- Midwest Medical Center will continue to evaluate the need for local dialysis services.
- Midwest Medical Center will explore expansion of cardiac services.
- Midwest Medical Center will explore collaboration with surrounding hospitals and providers to facilitate offering identified services locally.

Anticipated impacts of these actions:

Midwest Medical Center anticipates that the actions identified will lead to significant resolution of the issues presented.

Programs and resources the hospital plans to commit to address health need:

- Administration
- Clinic Director

Planned collaboration between the hospital and other facilities:

- Surrounding hospitals and providers

3. Improve access to available, flexible transportation

Actions the hospital intends to take to address the health need:

Midwest Medical Center will explore and evaluate the components of the transportation issues and work internally and with external partners to find solutions.

Anticipated impacts of these actions:

Midwest Medical Center anticipates that the identified action will clarify the scope of transportation needs, allow for cooperative discussion, and then, collaboration to resolve these issues.

Programs and resources the hospital plans to commit to address health need:

- Administration

Planned collaboration between the hospital and other facilities:

- Jo Daviess Transit
- Jo Daviess Health Department
- Jo Daviess Sheriff
- EMS providers

4. Increase information to the community about available local health and wellness activities

Actions the hospital intends to take to address the health need:

- Midwest Medical Center will engage a third-party marketing consultant to assist with identifying and executing a more robust plan for marketing Midwest Medical Center, its services, and its partners.
- Midwest Medical Center will expand its direct marketing campaign

Anticipated impacts of these actions:

Midwest Medical Center anticipates that the steps to be taken will address the identified needs in a short time.

Programs and resources the hospital plans to commit to address health need:

- Administration
- Marketing

Planned collaboration between the hospital and other facilities:

- Consultant
- Jo Daviess Health Department

5. Increase resources for seniors

- Independent living opportunities
- Transitional senior housing
- Education about local resources, insurance, and Medicare – and supplemental and advantage plans – and Medicaid
- Screenings

Actions the hospital intends to take to address the health need:

- Regarding education, Midwest Medical Center will continue to explore partnerships with local groups and agencies for opportunities to expand education about local resources for insurance and assistance navigating Medicare and Medicaid.
- Regarding health screenings, Midwest Medical Center will continue to explore partnerships with local groups and agencies for ways to expand access to health screenings, especially for seniors and the underserved and unserved community members.
- Regarding housing opportunities for seniors, although these issues are beyond the scope or capability of Midwest Medical Center to resolve, MMC will support any organized local government or community-based effort to address these needs to the extent it is reasonable and appropriate.

Anticipated impacts of these actions:

Midwest Medical Center anticipates that a collaborative effort to address each of these issues will result in the best opportunity for increasing education and screening for seniors and others and for realizing solutions to local housing needs.

Programs and resources the hospital plans to commit to address health need:

- Administration

Planned collaboration between the hospital and other facilities:

- Jo Daviess Health Department
- Senior Resource Center
- Local insurance brokers/financial planners
- Other interested organizations or persons



Focus Groups



Administration



Organizations



Business

REFERENCES AND APPENDIX

Focus Group One

- Barb Hocker, Galena Area Chamber of Commerce
- Beth Kropp, 24 Hour Care
- Melissa Niemann, 24 Hour Care
- Brianne Van Hemert, Administrator, Midwest Senior Care
- Cheri Martensen, Imaging Director, Midwest Medical Center
- Dave Kizior, Board Member, Midwest Medical Center
- Donna Ferry, Board Member, Midwest Medical Center
- Dr. Barb Sloan, Board Chair, Midwest Medical Center
- Helen Kilgore, Board Member, Midwest Medical Center
- Jennifer Berning, Physical Therapy Director, Midwest Medical Center
- Kevin Turner, Jo Daviess County Sheriff
- Officer Keith Brandel, Jo Daviess County
- Mark Moran, City of Galena Administrator
- Matthew Carroll, Board Member – MMC
- Sandra Schleicher, Jo Daviess County Health Department

Focus Group Two

- Ann Heim, Illinois Program Director, Riverview Center
- Renee Smith, Riverview Center
- Colleen Farrell, President, 708 Mental Health Board
- Deb Borley, East Dubuque School Nurse
- Dr. Elizabeth Gullone, Family Practice Physician
- Dr. Cullen Kehoe, Emergency Medicine Physician
- Dr. Matthew Gullone, Family Medicine Physician
- Dr. Nicole Jedlicka, Podiatry Physician
- Dr. Ralph Losey, Emergency Medicine Physician
- Dr. Kenneth Schiffman, Orthopedic Surgeon
- Dr. William Farrell, Orthopedic Surgeon
- Jamie Petras, Stockton Dental Center
- Kristen Timmerman, Pharmacist
- Katie Meusel, Midwest Health Clinic Director, Midwest Medical Center
- Kelli Jackson, Controller, Midwest Medical Center
- Marie Schumacher, DON, Midwest Medical Center
- Samantha Rojemann, Jo Daviess Health Department
- Tracy Bauer, CEO, Midwest Medical Center

Focus Group Three

- Bill Caron, Director, CTE Academy
- Kathy Gereau, The HOPE Foundation
- Jill Muehleip, Principal, Galena Primary School
- Kristen Patterson, HR Director, Midwest Medical Center
- Mike Simmons, Emergency Manager, Jo Daviess County
- Terry Renner, Mayor of Galena

Identification and Prioritization Group

- Jamie Petras, Stockton Dental Center
- Lori Stangl, Jo Daviess Health Department
- Samantha Rojemann, Jo Daviess Health Department
- Donna Ferry, Board Member, Midwest Medical Center
- Helen Kilgore, Board Member, Midwest Medical Center
- Brianne Van Hemert, Administrator, Midwest Senior Care
- Dr. Richard Farrell, Internal Medicine Physician
- Tracy Bauer, CEO, Midwest Medical Center

Strategy and Implementation Group

- Tracy Bauer, CEO, Midwest Medical Center
- Kristen Patterson, HR Director, Midwest Medical Center
- Kelli Jackson, Controller, Midwest Medical Center
- Deb Hoppman, CNO, Midwest Medical Center



midwest
MEDICAL CENTER

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