

**McDonough County
Illinois Project Local Assessment of Needs
(IPLAN)
2010-2015**

McDonough County Health Department

For
Illinois Department of Public Health
Springfield, Illinois

August 28, 2011

Priorities:

- 1. Cardiovascular Disease**
- 2. Obesity**
- 3. Respiratory Disease**

Focus Area:

- 4. Access to Mental Health**

Acknowledgements

The McDonough County Health Department sincerely thanks the Community Health Committee members for the time that they devoted to the process. A special thank you to Jennifer Chancay, McDonough County Health Department's (MCHD) intern, for the countless hours she spent on compiling the information for this process.

Table of Contents

- I. Letters of Approval
- II. Community Health Needs Assessment
- III. Community Health Plan
- IV. Appendix 1
 - a. Organizational Capacity Assessment
 - b. Organization's Strengths
 - c. Organization's Weaknesses
 - d. Organization's Action Plan Worksheet
- V. Appendix2
 - a. Health Problem Analysis Worksheets
 - b. Community Health Plan Worksheet
 - c. List Health Priority/Strategic Issue Worksheet
- VI. Appendix 3 Meeting Agendas and Meeting Minutes
- VII. Appendix 4 Community Health Data

COMMUNITY HEALTH NEEDS ASSESSMENT

I. COMMUNITY HEALTH NEEDS ASSESSMENT STATEMENT OF PURPOSE

The purpose of the Community Health Needs Assessment is to identify health problems requiring attention. Analysis of current health problems, selection of focus areas in collaboration with community partners, setting measurable outcomes and objectives and the monitoring and evaluation of progress toward our goals will help to improve the health of McDonough County residents.

No one agency can address or resolve all the issues that face the County. The assessment will show where further cooperation between agencies could be useful to improve the health status of McDonough County residents.

II. COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

The process of IPLAN for McDonough County began in August 2010. The Community Health Committee, which was established in 2004 during the 2005 IPLAN process, was reconvened. In order to recruit additional members, press releases were put in local newspapers and invitations were sent to local community agencies.

III. COMMUNITY PARTICIPATION PROCESS

The IPLAN Community Health Committee included prior IPLAN members (from IPLAN 2005) as well as new members. The previous by-laws remain in effect.

Six agencies sent representatives to the meetings. These agencies included: McDonough County Health Department, McDonough District Hospital, University of Illinois Extension, Department of Health Services (Western Illinois University), Illinois Institute of Rural Affairs, and Eagle View Community Health Systems.

The meetings began process began in November 2010 and ended with the priority selection in August 2011. In all there were 8 meetings of the Community Health Committee. During this time, the committee evaluated the previous IPLAN, reviewed current data, and community perceptions of health needs in the county. The Committee utilized the Nominal Group Process to select the health priorities.

IV. ANALYSIS OF COMMUNITY HEALTH DATA

Demographic and Socioeconomic Characteristics

McDonough County has a disproportionately large population of adolescents/adults aged 15-24 (31%) compared to the state average (13%) due to the location of Western Illinois University in the county seat, Macomb (US Census, 2000).

According to the Social IMPACT Research Center 2010 Report on Illinois Poverty, approximately 21% of the population of McDonough County is below poverty level, which is significantly higher than the Illinois rate of 12% and the national rate of 13%.

General Health and Access to Care

According to the IPLAN Data System, the top 5 leading causes of death in McDonough County are: heart disease, coronary heart disease, malignant neoplasms, cerebrovascular disease and lung cancer. These results mirror the results at the state level.

Maternal and Child Health

The percentage of mothers who report smoking during pregnancy is high in McDonough County. In 2006, the last year for which data is available, 16.6% of pregnant women reported smoking in McDonough County compared to 9% of mother's in Illinois. This is a significant problem since smoking during pregnancy is associated with low birth weight babies and increased exposure to secondhand smoke in childhood is associated with increased incidence of respiratory disease in children (PLAN Data System).

Chronic Disease

The heart disease crude mortality rate of 184.8/100,000 in McDonough County in 2006 was higher than both the rate for Illinois (149.0/100,000) and the *Healthy People 2010 Objective* (166/100,000) Heart disease has been a priority area for both the 1994 and 1999 IPLANs.

While no recent statistics are available, tobacco use has historically also been high. According to the 2003 Round 3 BRFSS data, tobacco use in McDonough County was 23.9%. As previously mentioned, the rate of pregnant women reporting tobacco use in McDonough County is higher than the state and national averages.

The IPLAN Data System Report indicates that 20.4% of McDonough County's population was obese in 1998. The most recent data in the 2007-2009 Behavioral Risk Factor Surveillance Survey, Round 4 indicates that the current level of obesity has risen to 22.6% of the adult population. This is lower than the Illinois rate (26.8%) and national baseline used in the Healthy People 2020 objectives (34.0%). It is important to note that the BRFSS data is self-reported and in national prevalence studies like the National Health and Nutrition Examination Survey (NHANES) where BMI data is collected on

each participant, rather than self-reported, the results were up to seven percentage points higher.

Infectious Disease

The rates of sexually transmitted diseases that pertain to Chlamydia (2009 incidence rate 291.1), Gonorrhea (2006 incidence rate 40.7), and Syphilis (2006 incidence rate of 0) as reported by the Communicable Disease Coordinator at the McDonough County Health Department are lower than the Illinois rate. McDonough County has a Western Illinois University and Spoon River College inside the county borders. The data does show peaks and valleys for all three of the sexually transmitted disease. There is neither a steady increase nor a decrease in the amount of cases.

Since, Western Illinois University has an international student population there is an increased chance of Tuberculosis cases because it could be prevalent in the country that they are traveling from. Also, some professors, residents, and students do travel to areas of the world that TB is prevalent. The data that was reviewed Communicable Disease Coordinator at the McDonough County Health Department indicates an occasional case of TB within the county. Since the county is a smaller county one case of TB might appear to be a drastic increase in cases. The data does indicate that there are zero cases of TB within the county.

In the past six years McDonough County has at least 75% up to 91% of two years old population receive their basic vaccinations. However, the statistics do indicate a significant drop from 2000 to 2001. There was a 20% decline in the number of two year olds that had their basic vaccinations.

It is important to note that when reviewing the foodborne illness statistics that McDonough County has a low incident rate of Salmonella or Campylobacter in the county. The county in all but one of the years from 1995-2001 is below the Illinois and the United States rates.

Environmental/ Occupational Health

The most recent county data, which was 2002, for McDonough County indicates that 6.71% of the homes in McDonough County are on a private/semi-private well. 93.29% of the homes are on Public Water. Of the public water supply 91.41% is Community, 7.11% is Non-Community/Non-Transient, and 1.48% Non-Community/Transient.

According to the latest Air Pollution by toxin data which was for 2002 over 4,000 pounds are suspected respiratory or reproductive toxicants. Those toxicants are closely followed by six other that can affect the kidneys, immune system, nervous system, GI/liver, skins, organs, and blood. There is no county specific data available for any more recent years.

After analyzing the data on lead there has been an increase in the number of cases of elevated blood lead levels for the 10-14mcg/dl range in the last four years of statistical data for the 2006, 2007, 2008, and 2009. The number of children with higher lead levels than 14mcg/dl has fluctuated during the last four years but remain relatively low.

According to the motor vehicle accident data McDonough County has a higher rate of crashes in the younger population from 1998-2002 than the senior population. As mentioned previously there is a higher rate of younger individuals living in McDonough County because of the college student population at the University.

The latest crime data for McDonough County indicates that the county has a significantly low rate of crime in compared to the state's rate of crime. It should be noted that the robbery rates for McDonough County have fallen over the last eight years.

Sentinel Events

The latest Sentinel Event data available for McDonough County is 2001. The majority of the data indicates increases and decrease over the years of dehydration, asthma, TB, and late cervical cancer. The data indicated that a case of rheumatic fever was reported in McDonough County during a seven year time span. Uncontrolled hypertension for the most part shows an increase in the rates except for a couple of years. The statistics for one of those years shows a dramatic decline of cases from ten to two cases. The In-Situ Breast Cancer data showed an increase in the number of cases over the five year average age-adjusted rates beginning in 1991. The data does indicate that there was a decrease in the five year time span of 1996-2000 in the number of In-Situ Breast Cancer Rates.

COMMUNITY HEALTH PLAN

COMMUNITY HEALTH PLAN STATEMENT OF PURPOSE

The Community Health Plan serves two purposes. For one, it fulfills the requirement for recertification as a local health department. Secondly, it serves as a blue print for what the McDonough County Health Department and its collaborative partners, as represented by the Community Health Committee, can do to improve the health and quality of life of McDonough County residents based on local data analysis and a group decision-making process.

COMMUNITY HEALTH PLAN PROCESS

The first step taken in the development of the Community Health Plan was to collect and analyze local health indicator data. The data was compiled and presented to community members representing hospitals, government agencies, nonprofit organizations, schools, the faith community and others. The community members then discussed the data as well as their experiences working in the county and selected three health priority areas and a focus area. The health priority areas selected are heart disease/cardiovascular disease, obesity, and respiratory disease. The focus area is mental health.

HEALTH PRIORITIES

I. Heart Disease/ Cardiovascular Disease

Description of the Health Problem

Heart disease killed 631,636 Americans in 2006. It accounted for 26% of deaths overall, or more than one in four deaths in the United States, making it the leading cause of mortality and morbidity in the US. Information from the IPLAN Data System Report indicates that heart disease is also the leading cause of death for McDonough County as well as the fourth leading cause of potential years of life lost. Heart disease is chronic and is expected to continue to plague the residents of McDonough County in the future. Studies show that prevention is key to alleviating the social and financial costs of heart disease.

The heart disease crude mortality rate of 184.8/100,000 in McDonough County in 2006 was higher than both the rate for Illinois (149.0/100,000) and the *Healthy People 2010 Objective* (166/100,000). Heart disease has been a priority area for both the 1994 and 1999 IPLANs. The McDonough County Community Health Committee (CHC) believes strides have been made but much remains to be done, as evidenced by the high rate of heart disease mortality. The previous goals and objectives for heart disease have been rewritten and revised to better reflect the current status of McDonough County.

Target Population

- Health Priority: Increase blood pressure testing and awareness of results
- Target population: prehypertensive adults aged 18 and older

- Health Priority: cholesterol screening
- Target population: prehypertensive adults aged 18 and older

Relationship to Healthy People 2010 or 2020

- Health Priority: Increase blood pressure testing and awareness of results
- HP 2020 Objective: HDS-4 Increase the proportion of adults who have had their blood pressure measured within the preceding 2 years and can state whether their blood pressure was normal or high.

- Health Priority: cholesterol screening
- HP 2020 Objective: HDS-6 Increase the proportion of adults who have had their blood cholesterol checked within the preceding 5 years

Risk Factors

Major risk factors identified by the CHC include: high blood pressure, high cholesterol, obesity, heredity, and tobacco use.

Contributing Factors

Contributing factors include: stress, exercise/diet, utilization of medications, peer pressures, motivation/time, associated costs, lack of insurance, and availability of services. According to the Round 4 BRFSS Data (2006), McDonough County has

relatively high rates of high blood pressure (25.2%) and obesity (22.6%). While no recent statistics are available, tobacco use has historically also been high. According to the 2003 Round 3 BRFSS data, tobacco use in McDonough County was 23.9%. As noted above, obesity is another risk-factor associated with heart disease as well as other serious health problems. This committee has decided to continue to address obesity as its own priority area.

The outcome objectives, impact objectives and intervention strategies below were designed to address the problem of heart disease and the risk factors of smoking and high blood pressure.

Outcome Objective

By 2015, reduce the crude death rate of heart disease to 166/100,000 population. (Baseline: 2006: 184.8/100,000, IPLAN Data System Report).

Impact Objective

By 2013, decrease the percentage of population age 45-64 with high blood pressure to 33.4%. (Baseline: 37.1% had high blood pressure according to BRFSS Round 4 Data 2007-2009. Target setting method: 10% reduction).

Intervention Strategy

- a. Blood Pressure Screening.
 - a. McDonough County Health Department, the McDonough District Hospital, Eagle View Community Health Systems, Beu Student Health Services at WIU and private doctors' offices will offer blood pressure screening and education for adults.
 - b. The Community Health Committee (CHC) will develop a work group of agencies with similar missions to plan, implement, market, and evaluate measures to increase the number of sites offering blood pressure screening, education and control activities.

Community Resources Available: American Heart Association, McDonough County Health Department, McDonough District Hospital, University of Illinois Extension, Illinois Rural Health Association, Eagle View Community Health System, Western Illinois University, Spoon River College, Mosaic, CDC, service organizations, and local media.

Estimated Funding Needs: \$5,000 annually

Anticipated Sources of Funding for Interventions: IDPH Office of Women's Health, McDonough District Hospital, and existing McDonough County Health Department funding.

In-Kind Funding Sources (labor, supplies, space, etc.): Volunteers, service organizations, local businesses, nursing students, and senior sites.

Impact Objective

By 2013, decrease the percentage of population aged 45-64 with high cholesterol to 42.7%. (Baseline: 47.4% had high blood pressure according to BRFSS Round 4 Data 2007-2009. Target setting method: 10% reduction).

Intervention Strategies

- b. Cholesterol Screening.
 - a. McDonough County Health Department, the McDonough District Hospital, Eagle View Community Health Systems, Beu Student Health Services at WIU and private doctors' offices will offer cholesterol screening and education for adults.
 - b. The Community Health Committee (CHC) will develop a work group of agencies with similar missions to plan, implement, market, and evaluate measures to increase the number of sites offering cholesterol pressure screening, education and control activities.

Community Resources Available:

“Read My Lipids” is a cholesterol screening and education program offered at McDonough County Hospital. This program will continue to be offered at the hospital and will be offered around the community at health fairs and other community events.

Health Check is a program at the McDonough County Health Department. Currently individuals can use the program on Monday and Tuesday mornings for a total of four and a half hours. The program offers an individual the opportunity to participate in different screenings such as a complete metabolic panel, a lipid panel, a complete blood count with differential, hemoglobin A1c, thyroid panel, or a prostate specific antigen. The goal of the health department is to expand the number of days that the health check clinics are available to at least four days a week and to offer additional screenings that individuals can receive during Health Check.

The Hy-Vee Grocery Store in Macomb has employed a dietitian. The dietitian does a variety of programs at that location. Some of the monthly programs include hour long grocery store tours on “Heart-Healthy Options”, “Diabetes”, and Nu-Val Nutrition System” are just a few of multiple store tours offered at the Macomb location. The classes focus on reading the nutritional labels and how to decipher what you are reading.

Estimated Funding Needs: \$25,000 annually.

Anticipated Sources of Funding for Interventions: IDPH's Office of Health and Wellness Promotion, existing and future McDonough County Health Department funding, fee for service, Hy-Vee Grocery Store, existing and future funds at McDonough District Hospital, and IDPH's Office of Women's Health.

Completed Health Analysis Worksheet: see Appendix 2

II. Obesity

Description of the Problem

Obesity is becoming an increasingly important health issue facing millions of Americans. 72,000,000 million Americans are obese and, indeed, obesity is the third leading cause of preventable death in the U.S. Obese adults are at increased risk for many serious health conditions, including coronary heart disease, hypertension, stroke, type 2 diabetes, certain types of cancer and premature death. Obesity is also associated with reduced quality of life, social stigmatization and discrimination. Finally, the cost of obesity is crippling. In 2006, costs associated with obesity were estimated at as much as \$147 billion (CDC, 2009).

The IPLAN Data System Report indicates that 20.4% of McDonough County's population was obese in 1998. The most recent data in the 2007-2009 Behavioral Risk Factor Surveillance Survey, Round 4 indicates that the current level of obesity has risen to 22.6% of the adult population. This is lower than the Illinois rate (26.8%) and national baseline used in the Healthy People 2020 objectives (34.0%). It is important to note that the BRFSS data is self-reported and in national prevalence studies like the National Health and Nutrition Examination Survey (NHANES) where BMI data is collected on each participant, rather than self-reported, the results were up to seven percentage points higher.

Target Population

- Reduce proportion of population that is obese
- Target population: children 2-19 and adults 20 and over.

Relationship to Healthy People 2010 or 2020

- Reduce proportion of population that is obese
 - HP 2020 Objective: NWS-9 Reduce the proportion of adults who are obese.
 - NWS-10.4 Reduce the proportion of children and adolescents aged 2-19 who are considered obese.

Risk Factors

The risk factors for obesity, as identified by the CHC are: sedentary lifestyle, poor diet as well as cultural and environmental factors.

Contributing Factors

Contributing factors include: sedentary work environments and leisure-time activities, abundance of convenience/fast foods, generally low socioeconomic status of area, and lack of consistent nutrition education.

To evaluate nutrition and physical activity in the county, the CHC looked to the BRFSS and noted that according to the Round 4 BRFSS data, only 12% of the McDonough County adult population eats the recommended Five-A-Day servings of fruits and vegetables. As for physical activity, less than 13.8% of the population of McDonough County report a sedentary lifestyle and 42.2% report participating in regular moderate physical activity.

The outcome objectives, impact objectives, and intervention strategies were created with *Healthy People 2020 Objectives* in mind to address the problem of obesity and the risk factors of sedentary lifestyle and diet.

Outcome Objective

By 2015, reduce the percent of the McDonough County adult population who is obese to 20%. (Baseline: 22.6% were obese according to BRFSS Round 4 Data 2007-2009. Target setting method: 10% reduction).

Impact Objective

By 2013, increase the proportion of adults who engage in moderate physical activity 5 times a week for 30 minutes on each occasion to 46.2% (Baseline 42.2% according to BRFSS Round 4 Data 2007-2009. Target setting method: 10% increase).

Impact Objective

By 2013 Increase the proportion of adults who engage in vigorous physical activity 3 or more days to 49% (Baseline: 44.5% according to BRFSS Round 4 data 2007- 2009. Target setting method: 10% increase).

Intervention Strategies

McDonough District Hospital is one organization in McDonough County that offers fitness testing. The fitness testing is designed to provide an individual baseline information. The screening will determine whether a person is overweight or obese as well through body fat percentage, body mass index, waist/hip proportions, flexibility, and grip strength. Once when an individual has made changes to lead a healthier lifestyle their information can be reevaluated to determine the progress that was made towards a healthier lifestyle.

The CHC will work with other agencies, businesses, and organizations with similar missions to plan, implement, evaluate and market community physical activity programs as well as to identify locations which may be used by residents for that purpose. Agencies involved may include McDonough County Health Department, fitness clubs, WIU Campus Recreation, Western Illinois University Kinesiology Department and Dietetics, Fashion Merchandising, and Hospitality

Department, University of Illinois Extension, McDonough County Schools, McDonough District Hospital, McDonough County Park Districts, and the YMCA.

IDPH's Office of Women's Health has grant opportunities available to counties either for a one year or six month time frame that focus on women or girls. The McDonough County Health Department applies for one or more of those grants each year in the hopes of being awarded at least one of those grants. The grants focus on various aspects of women's health. A couple of the grants do focus on how to increase one's knowledge on fitness and/or nutrition. The implementation of those programs into the community could help to reduce the obesity rates in women and young girls. One of the grant programs focuses on implementing a twelve week walking program into a woman's life. Another grant program is ten weeks long that focuses on a variety of topic that Sessions on a variety of women's health topics including but not limited to cardiovascular health, nutrition, and physical activity. The grant that targets teens is nine weeks in lengths and helps to educate the adolescent girls on the risks of cardiovascular disease and how important nutrition and physical activity should be in their lives.

Hy-Vee's dietitian offers weight management programs to the community. An individual can meet with the dietitian by the hour and receive a nutritional plan based upon their individual needs. Also, the dietitian offers a ten-week weight management program that provides participants with weekly weigh-ins, individualized meal plans, grocery store tours, exercise instructions, portion distortion, healthy cooking, dining out and much more. The program helps the individual to understand how nutrition and physical activity can affect their life so that they can lead a happier and healthier life.

For Western Illinois University students that qualify they can use the services provided by the Bella Hearst Diabetes Institute. Participants can receive free lab services which include a hemoglobin A1C screenings, glucose screening, blood lipid panel screening, body fat analysis, cardiovascular fitness testing, and resting metabolic rate testing. Participants will be providing nutrition education that includes diabetes education, medical nutrition therapy, diabetes management supplies, and personal training.

Community Resources Available: local governments, American Obesity Association, American Heart Association, American Dietetic Association, McDonough County Health Department, McDonough District Hospital, IDPH's Office of Women's Health, University of Illinois Extension, Hy-Vee Grocery Store, Eagle View Community Health System, Beu Health Center, Illinois Rural Health Association, CDC, local media.

Estimated Funding Needs: \$20,000.

Anticipated Sources of Funding for Interventions: existing funding from the McDonough County Health Department, University of Illinois, Western Illinois University, Hy-Vee Grocery Store, and the Illinois Department of Public Health.

In-kind Funding (labor, supplies, space): volunteers, service organizations, faith community, students, fraternities, and sororities.

Impact Objective-should we set it to 28%

By 2013, increase the proportion of persons aged 2 years and older who consume the recommended servings of fruits or vegetables per day to 20%. (Baseline: 17.9% reported eating Five A Day, BRFSS Round 3 Data. Target setting method: 10% increase).

Intervention Strategies

- a. The CHC will work with other agencies to plan, implement, and evaluate and market additional community nutrition education classes and information. Agencies involved may include McDonough County Health Department, McDonough District Hospital, grocery stores, University of Illinois Extension, McDonough County Schools, Eagle View Community Health System, Head Start/PACT, Senior centers, and Western Illinois University.

Community Resources Available: American Heart Association, WIC, WIU (Dietetics Department), USDA, CDC, local media, Spoon River College, McDonough County Health Department, McDonough District Hospital, University of Illinois Extension and Eagle View Community Health System.

Estimated Funding Needs: \$5,000 annually.

Anticipated Sources of Funding for Interventions: user fees from the McDonough County Health Department user fees, University of Illinois Extension, and McDonough District Hospital.

In-Kind Funding Sources (labor, supplies, space): volunteers, service organizations, youth organizations, faith community, fraternities, and sororities.

- b. The CHC will pursue collaborative funding opportunities to bring obesity prevention activities, classes and information for individuals and families in the county. This will focus on education of families in both realms of physical activity and nutrition. Agencies involved may include University of Illinois Extension, fitness clubs, Campus Recreation, McDonough County Park Districts, McDonough County Health Department, YMCA, Western Illinois University, and McDonough County Schools/Day Cares.

Community Resources Available: McDonough County Park Districts, Campus Recreation, McDonough County YMCA, WIU, American Heart Association, CDC, local media and Illinois Institute of Rural Affairs.

Estimated Funding Needs: \$4,500 annually.

Anticipated Sources of Funding for Interventions: Illinois Health and Wellness Initiatives, University of Illinois-Rockford Medical Education Program, University of Illinois Extension user fees and existing McDonough County Health Department funding.

In-Kind Funding (labor, supplies, space, etc.): volunteers, service organizations, local businesses, faith community, fraternities and sororities.

- c. The CHC will collaborate with other like-minded agencies and organizations to plan, implement, evaluate and market a health education campaign, focusing on physical activity and nutrition information, ideas, recipes, etc. The information will be distributed to the public on a monthly basis via local media, school and organization newsletters. Agencies involved may include McDonough County Health Department, McDonough District Hospital, University of Illinois Extension, Eagle View Community Health System, Regional Office of Education, McDonough County schools/day cares, fitness clubs, Western Illinois University, senior centers, and Beu Health Center.

Community Resources Available: American Heart Association, American Obesity Association, American Diabetes Association, American Dietetic Association, physicians, local media, CDC, NIH and Illinois Rural Health Association.

Estimated Funding Needs: \$3,500.

Anticipated Sources of Funding for Interventions: IDPH's Office of Health Promotion, existing McDonough County Health Department funding, and local businesses.

In-Kind Funding (labor, supplies, space): local media, volunteers, service organizations, fraternities and sororities and schools.

Completed Health Analysis Worksheet : see Appendix 2

III. Respiratory Disease/Asthma

Description of the Problem

Asthma is a chronic lung disease that causes inflammation of the lower airway and airway obstruction. In 2007, 34 million Americans (11.5%) had been diagnosed with asthma and 9.6 million (13.8%) of them were 18 years or younger (CDC, 2011). According to the American Lung Association, asthma is the most common chronic disorder in children in the United States (2007).

According to the Behavioral Risk Factor Surveillance Survey (4th Round 2007-2009) in 21.6% of adults in McDonough County had been told by a doctor that they have asthma. In fact, McDonough County had the third highest asthma rate among the 102 counties in Illinois. This rate is almost twice as high as the Illinois “Rural Rest of State” average of 11.1% in 2001.

Asthma is caused by both genetic and environmental factors. The primary environmental factors associated with asthma incidence include: exposure to secondhand smoke, pollen and/or allergens.

Target Population

- Health Priority: Smoking cessation
- Target population: parents, caregivers and pregnant women

- Health Priority: Reduce exposure to secondhand smoke
- Target Population: children aged 3 to age 18.

Relationship to Healthy People 2010 or 2020

- Smoking Cessation
- HP 2020 objective: TU-1 Reduce tobacco use by adults
 - TU-1.1 Cigarette Smoking

- Reduce exposure to secondhand smoke
- HP 2020 objective: TU-11 Reduce the proportion of nonsmokers exposed to secondhand smoke
 - TU-11.1 Children aged 3 to 11 years
 - TU-11.2 Adolescents aged 12 to 17 years.

Risk Factors

Risk factors for asthma include environmental triggers including: secondhand smoke, pollen and allergens. Other risk factors include poverty and obesity (IDPH, 2009).

Contributing Factors

Contributing factors include: secondhand smoke, lack of parent education about the harm of secondhand smoke to children, indoor and outdoor air quality, accessibility and availability of medical care, accessibility to smoking cessation programs.

The outcome objectives, impact objectives, and intervention strategies were created with *Healthy People 2020 Objectives* in mind to address the problem of support for tobacco cessation and prevention of secondhand smoke hazards.

Outcome Objectives

By 2015, reduce to 32.22% the proportion of adults (aged 25-44) who smoke. (Baseline: In 2007, 35.8% of McDonough County residents reported smoking according to the BRFSS Round 3 Data).

Impact Objective:

By 2013, 50 smokers will have participated in an evidence-based smoking cessation program.

Intervention Strategies

“Freedom from Smoking” is a smoking cessation program designed by the American Lung Association and offered by McDonough District Hospital. The program is facilitated by McDonough District Hospital health educators.

“Break the Habit” is a program that is offered to the residents of McDonough County to aid individuals while they quit smoking. Each year, the health department aims to have 25 smokers participate in the evidence-based smoking cessation program, and at least 300 call the Illinois Tobacco Quitline.

Community Resources Available: American Lung Association, American Heart Association, American Cancer Society, Tobacco Quit Line, McDonough County Health Department, McDonough District Hospital, Western Illinois University, Eagle View Community Health System, CDC, physicians, faith community, and local media.

Estimated Funding Needs: \$25,000 annually.

Anticipated Sources of Funding for Interventions: IDPH Office of Health and Wellness Promotion Tobacco Free Communities Grant, McDonough District Hospital, existing McDonough County Health Department funding, and cessation class fee.

In-Kind Funding (labor, supplies, space): volunteers, service organizations, and youth organizations.

Completed Health Analysis Worksheet : see Appendix 2

Focus Area: Mental Health

During the 2005-2010 IPLAN period, great stride were made in improving access to medical and dental care for low-income and uninsured populations in McDonough County. In 2008, the Eagle View Community Health System, a Federally Qualified Community Health Center (FQHC), opened in Macomb, Illinois, offering medical and dental services to the medically underserved. While access to medical and dental services has improved for low-income and uninsured populations in the county, access to care remains a challenge. The ongoing primary care physician/provider shortage in rural areas

continues to affect the ability to find qualified dentists and primary care physicians/providers for the McDonough County Hospital, Beu Health Center at Western Illinois University and Eagle View alike.

Since the opening of the Eagle View clinic, an issue that has surfaced for discussion by the Eagle View Advisory Group/Macomb Community Medical Committee is the lack of mental health services in the county and whether it is possible for Eagle View Clinic to offer mental health services. In the US mental illness affects 25% of the population in any given year and 50% of the population during their lifetime.¹ Fourteen percent of the population suffers from moderate to severe mental illness and 10% of children have serious mental or emotional disorders.^{2,3} Unfortunately, rural areas in the US often do not have qualified staff or other resources to care for this population. The Community Health Committee would like to conduct a needs assessment related to mental health services in McDonough County, and if adequate need is found, begin to address access to mental health services in this IPLAN.

The Community Health Committee also remains committed to distributing information about existing medical, dental and mental health services as well as educating the public and other interested parties on upcoming changes to the health care system as a result of the Health Care Reform Act.

Outcome Objective

By 2015, increase the percentage of the population who has a usual health care provider to 95% (Baseline: 86% BRFSS Round 4 (2007-2009). Target Setting Method: 10% improvement).

Impact Objective

By 2013, the CHC and the Macomb Community Medical Committee will address and recommend strategies in resolving the issues related to access to care.

Intervention Strategies

- a. The CHC and the Macomb Community Medical Committee will cooperate with similar organizations and agencies to identify and evaluate current medical, dental and mental health services. Agencies involved may include McDonough County Health Department, McDonough District Hospital, physicians, Illinois Institute of Rural Affairs, Colchester Community Connections, Go West, Beu Health Center, Eagle View Community Health Systems, North Central Behavioral Health Systems, Western Illinois University and American Red Cross.

Resources Available: Illinois Rural Health Association, Illinois Primary Health Care Association, Illinois Institute of Rural Affairs, University of Illinois Extension and University of Illinois-Rockford Medical Education Program.

Estimated Funding Needed: \$5,500.

Potential Funding Sources: Existing funding from the McDonough County Health Department, McDonough District Hospital, physicians, Illinois Institute of Rural Affairs, Colchester Community Connections, Go West, Beu Health Center, Eagle View Community Health Systems, North Central Behavioral Health System, Western Illinois University and American Red Cross.

In-Kind Funding (labor, supplies, space): local media, volunteers, service organizations, fraternities and sororities and schools.

- b. The CHC will work with like-minded agencies and organizations to distribute medical service information to the public. Information may be related to health care reform, available Medicaid vendors, transportation options, and funding sources. This information will also be provided to other agencies and organizations through Interagency Council meetings and via local media sources, including the Internet. Agencies involved may include McDonough County Health Department, McDonough District Hospital, Eagle View Community Health System Volunteer Now, Mosaic, American Red Cross, McDonough County YMCA, New Parent Program, North Central Behavioral Health System, Western Illinois University, and Beu Health Center.

Resources Available: Illinois Rural Health Association, Illinois Primary Health Care Association, Illinois Institute of Rural Affairs, University of Illinois Extension, University of Illinois-Rockford Medical Education Program and local media.

Estimated Funding Needed: \$2,500.

Potential Funding Sources: IDPH Health and Wellness Initiatives Grant, existing McDonough County Health Department funding and local businesses.

In-Kind Funding (labor, supplies, space): local media, volunteers, service organizations, fraternities and sororities and schools.

Completed Health Analysis Worksheet-See Appendix 2

Evaluation The IPLAN document is a plan of action for McDonough County. However, the process must not stop there and the objectives must be monitored and evaluated on a regular basis. Follow-up and documentation is essential to the success of the initiatives set forth by the objectives. The Community Health Committee will meet on a quarterly basis and regularly monitor state and county indicators and programs in order to gauge McDonough County's progress towards a healthier community. The quarterly meetings will focus on one of the health priorities or the focus area, the progress being made towards the health priorities, determine if any of the programs/resources have changed, and to monitor our progress towards achieving our objectives.

References

CDC. Abortion Surveillance. Available at http://www.cdc.gov/reproductivehealth/data_stats/Abortion.htm.

CDC. Asthma: Data and Surveillance. *Asthma FastFACTS*. Last Updated May 11, 2011. Available at <http://www.cdc.gov/asthma/asthmadata.htm>. Accessed August 24, 2011.

Illinois Behavioral Risk Factor Surveillance System. Round 4 (2007-2009). Last Updated October 7, 2010. Available at <http://app.idph.state.il.us/brfss/default.asp>.

Department of Children and Family Services. Child Abuse and Neglect Statistics Annual Report – FY 2002. Available at <http://www.state.il.us/DCFS/docs/CANTS2002.pdf>

Department of Children and Family Services. Child Abuse and Neglect Statistics Annual Report – FY 2003. Available at http://www.state.il.us/dcf/library/com_communications_cants2003.shtml

Department of Children and Family Services. Child Abuse and Neglect Statistics Annual Report – FY 2004. Available at <http://www.state.il.us/DCFS/docs/CANTS2004.pdf>

Department of Children and Family Services. Child Abuse and Neglect Statistics Annual Report – FY 2005. Available at <http://www.state.il.us/DCFS/docs/CANTS2005.pdf>

Department of Children and Family Services. Child Abuse and Neglect Statistics Annual Report – FY 2006. Available at <http://www.state.il.us/DCFS/docs/CANTS2006.pdf>

Department of Children and Family Services. Child Abuse and Neglect Statistics Annual Report – FY 2007. Available at <http://www.state.il.us/DCFS/docs/CANTS2007.pdf>

Department of Children and Family Services. Child Abuse and Neglect Statistics Annual Report – FY 2008. Available at <http://www.state.il.us/DCFS/docs/CANTS2008.pdf>

Illinois Department of Healthcare and Family Services. (2001). *Number of persons enrolled in McDonough County*. Available at <http://hfs.illinois.gov/about/enrolled/mcdonough.html>.

Illinois Department of Healthcare and Family Services. (2001). *Number of persons enrolled in entire state*. Available at <http://hfs.illinois.gov/about/enrolled/state.html>.

Illinois Department of Public Health, Adverse Pregnancy Outcomes Reporting System, February 2007. Available at <http://www.idph.state.il.us/about/epi/apors.htm>.

Illinois Department of Public Health. (2009). *Burden of Asthma in Illinois 2000-2007*. Retrieved from <http://www.idph.state.il.us/about/chronic/ILAsthmaBurdenReport2007.pdf>.

Illinois Department of Public Health, *Deaths by County of Residence: Illinois, 2000-2007*. Available at <http://www.idph.state.il.us/health/bdmd/death00-09.htm>.

Illinois Department of Public Health, *Divorces and Annulments Occurring in Illinois, 2000-2009*. Available at http://www.idph.state.il.us/health/bdmd/divorce00_09.htm.

Illinois Department of Public Health, *Illinois Abortion Statistics*. Available at <http://www.idph.state.il.us/health/bdmd/leadingdeaths07.htm>.

Illinois Department of Public Health. (2010). *Illinois Behavioral Risk Factor Surveillance*

System. Retrieved from <http://app.idph.state.il.us/brfss/countydata.asp>.

Illinois Department of Public Health, Infant Mortality Numbers by County, 2005-2007. Available at <http://www.idph.state.il.us/health/infant.infmort0507.htm>.

Illinois Department of Public Health, Leading Causes of Death. Available at <http://www.idph.state.il.us/health/abortion/Abortion73-current.htm>.

Illinois Department of Public Health, Marriages Occurring in Illinois, 2000-2009. Available at http://www.idph.state.il.us/health/bdmd/marr00_09.htm.

Illinois Department of Public Health, Reportable Communicable Disease Cases, 2000-2009. Available at http://www.idph.state.il.us/health/infect/communicabledisease00_09.htm.

National Vital Statistics Reports, Vol. 54, No. 2, September 8, 2005. Available at <http://www.cdc.gov/nchs/nvss.htm>.

National Vital Statistics Reports, Vol. 55, No. 1, September 29, 2006. Available at <http://www.cdc.gov/nchs/nvss.htm>.

National Vital Statistics Reports, Vol. 56, No. 6, December 5, 2007. Available at <http://www.cdc.gov/nchs/nvss.htm>.

National Vital Statistics Reports, Vol. 57, No. 7, January 7, 2009. Available at <http://www.cdc.gov/nchs/nvss.htm>.

The Social IMPACT Research Center at Heartland Alliance. 2010 Report on Illinois Poverty. Available at <http://www.heartlandalliance.org/whatwedo/advocacy/reports/2010-report-on-illinois-poverty.html>.