COMMUNITY HEALTH NEEDS ASSESSMENT

MCLEAN COUNTY/ILLINOIS 2022











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I. Introduction from the McLean County Community Health Council's Executive Steering Committee

The formation of the McLean County Community Health Council, and the decision for the four entities to collaborate to produce a joint community health needs assessment (CHNA) and joint community health improvement plan (CHIP), in April 2015, marked an important milestone for community health in McLean County. Prior to the formation of the Council, the two hospitals in McLean County and the McLean County Health Department each conducted their own community health needs assessment, resulting in three separate community health plans for the county. At the same time, United Way of McLean County conducted a broad-based community needs assessment. To better serve the community, the four organizations listed above decided to collaborate and develop a joint 2016 McLean County CHNA Report and joint McLean County 2017 – 2019 CHIP.

For the 2019 and 2022 McLean County Community Health Needs Assessment, Chestnut Health Systems joined as a collaborative partner for the joint reports. Chestnut Health Systems, like the hospitals, is required by federal guidelines to complete a community health needs assessment every three years.

a) Philosophy and Development of Collaborative

All four organizations are members of the McLean County Community Health Council, which is dedicated to improving the health of the community and strongly believes in the philosophy of collaboration. Collaborating in a more effective manner was identified as the primary learning opportunity from the previous community health needs assessments. The involved organizations determined that the community health needs assessment for McLean County could be conducted more efficiently and effectively by pooling resources. Collaborating was also identified as the key for a successful implementation plan that would make impactful and sustainable community health improvements in McLean County. For the above reasons, the McLean County Community Health Council was formed for the creation of a joint community health needs assessment followed by one community health implementation plan for McLean County.

b) Community Health Needs Assessment Report Approval

Carle BroMenn Medical Center and OSF St. Joseph Medical Center are utilizing this joint CHNA Report, in conjunction with the McLean County Health Department and Chestnut Health Systems, to meet their 2022 Community Health Needs Assessment requirements under 501(r) added to the Internal Revenue Code by the Patient Protection and Affordable Care Act. The McLean County Health Department will also utilize this report and subsequent community health implementation plan to meet IPLAN requirements for local health department certification by the Illinois Department of Public Health. Chestnut Health Systems is utilizing this report to meet the Health Resources & Services Administration's compliance expectation that Federally Qualified Health Centers complete a needs assessment at least once every three years for the purposes of informing and improving the delivery of health center services.

Carle BroMenn Medical Center, the McLean County Health Department, OSF St. Joseph Medical Center and Chestnut Health Systems are the primary organizations responsible for guiding the 2023 – 2025 Community Health Improvement Plan that will be developed based upon this 2022 community health needs assessment. Like the 2020 - 2022 McLean County Community Health Improvement Plan, the 2023 – 2025 McLean County Community Health Improvement Plan will be developed in partnership with other community social service agencies and organizations.

This plan was approved by Chestnut Health Systems' Board of Directors on July 27, 2022, Carle BroMenn Medical Center and Carle Eureka Hospital's Governing Council on July 19, 2022, the McLean County Board of Health on July 13, 2022 and OSF HealthCare System's Board of Directors on July 25, 2022.

II. Executive Summary

Carle BroMenn Medical Center, Chestnut Health Systems, the McLean County Health Department and OSF St. Joseph Medical Center collaborated to conduct the 2022 McLean County Community Health Needs Assessment (CHNA) and to adopt a joint CHNA Report, just as they did in 2019. This exciting and unique opportunity was possible, according to the final Treasury regulations adopted to implement 501(r), which was added to the Internal Revenue Code by the Patient Protection and Affordable Care Act, as all four entities define their service area as McLean County.

The goals of this collaborative effort are as follows:

- Analyze data collectively in conducting the CHNA
- Prioritize the significant health needs
- Generate the joint 2022 CHNA Report
- Work collaboratively to generate the joint 2023 2025 McLean County Community Health Improvement Plan addressing each of the significant health needs or explaining why a significant health need is not being addressed.

One member from each of the four organizations sits on the Executive Steering Committee that oversees all aspects of the Community Health Needs Assessment and Community Health Improvement Plan. The Executive Steering Committee falls under the umbrella of the McLean County Community Health Council which consists of 64 individuals representing 46 organizations from the following sectors:

- County and city government
- Education
- Public health
- Business/economic development
- Social services
- Faith
- Transportation
- Law enforcement
- Housing
- Civic organizations/service clubs
- Healthcare.

In the fall and winter of 2021 - 2022, the Executive Steering Committee analyzed the primary and secondary data, accumulated from a variety of sources, presented in this report. By considering the criteria below, the Executive Steering Committee identified the significant health issues to present to the McLean County Community Health Council for prioritization.

- Size of the issue
- Rates worse than Illinois counties or state rate
- Disparities by race/ethnicity, age and gender
- Disparities by ZIP code
- Percent of indicators trending unfavorably in a statistically significant direction
- Does not meet Healthy People (HP) 2020 or HP 2030 target
- Does working on the issue impact other issues for collective impact?

a) Seven Significant Health Needs Identified for Prioritization

The seven significant health needs presented to the McLean County Community Health Council by the Executive Steering Committee for prioritization were:

Access to Care

- Behavioral Health (mental health and substance use)
- Healthy Eating and Active Living (exercise, nutrition, obesity and food access/insecurity)
- Diabetes
- Heart Disease
- Oral Health
- Respiratory Disease.

McLean County Community Health Council Prioritization Meetings

The Executive Steering Committee facilitated three virtual meetings, due to the COVID-19 pandemic, of the McLean County Community Health Council to prioritize the health needs derived from the data analysis:

January 27, 2022

The purpose of the first meeting was to explain the collaborative nature of the joint 2022 Community Health Needs Assessment with Carle BroMenn Medical Center, the McLean County Health Department, OSF St. Joseph Medical Center and Chestnut Health Systems and the end goal of producing a joint community health improvement plan for McLean County. Annual Report highlights from 2020 and 2021 for the 2020 - 2022 McLean County Community Health Improvement Plan were reviewed with the council.

February 10, 2022

During the second meeting, the Executive Steering Committee presented data on the significant health needs identified for prioritization. Age, gender, race/ethnicity and ZIP code disparities were shared when available. Data for the social determinants of health was also reviewed with the council. Questions from council members were addressed throughout the data presentation. At the conclusion of the meeting, data summaries for the top seven health needs were emailed to the council members, in addition to the presentation given by the Executive Steering Committee during the meeting.

February 24, 2022

During the final prioritization meeting, a prioritization method was used for the McLean County Community Health Council to the select the three significant health needs for the 2022 McLean County Community Health Needs Assessment and around which the 2023 - 2025 McLean County Community Health Improvement Plan will be developed.

Health Needs Selected

The following three significant health needs were selected by the McLean County Community Health Council to be addressed in the 2023-2025 McLean County Community Health Improvement Plan:

- Access to Care
- Behavioral Health (including mental health and substance abuse)
- Healthy Eating/Active Living (exercise, nutrition, obesity and food access/insecurity)

Health Needs Not Selected

The four health needs that were not selected were diabetes, heart disease, oral health and respiratory disease. The council acknowledged the importance of all four of these issues, but the prioritization scores for the three selected issues were higher than those for the issues not selected.

b) Priority Action Teams Assembled

In April and May 2022, three priority action team meetings were held to establish a high-level goal for each health priority. Priority action teams consisted of key community stakeholders with an interest or expertise in the prioritized significant health need. Cross-sector representation was sought for each priority action team. Priority action teams included current members working on interventions for the 2020 – 2022 McLean County Community Health Improvement Plan and additional new members who will work on interventions for the 2023 – 2025 McLean County Community Health Improvement Plan.

The goals for each of the health priorities identified are listed below:

2023 - 2025 Health Priority Goals

Access to Care

Advance and advocate for equitable and affirming access to care and other resources, which address social
determinants of health, to improve the health and well-being of our diverse community by 2026.

Behavioral Health

• Further equitable, inclusive, and integrated systemic community approaches to behavioral health and well-being for our diverse community by 2026.

Healthy Eating/Active Living

• Promote equitable opportunities for healthy eating and active living to strengthen the health and well-being of our diverse community by 2026.

In the fall of 2022, the priority action teams will meet to determine the resources, interventions and outcome metrics for each of the three health priorities. The 2023 - 2025 McLean County Community Health Improvement Plan will again be a joint plan for the entire county and consist of interventions and resources from the hospitals, health department, Chestnut Family Health Center and numerous social services or other community organizations.

III. Acknowledgements -

a) McLean County Community Health Executive Steering Committee

Representatives from the four organizations that comprise the McLean County Community Health Council's Executive Steering Committee are listed below:

Carle BroMenn Medical Center: Sally Gambacorta, MS, MA, Community Health Director

Carle BroMenn Medical Center, a 200-bed hospital in Normal, Illinois, serves four central Illinois counties with a total population of more than 227,000. Among the nearly 2,000 team members are more than 100 doctors and advanced providers practicing within one of the top-five largest regional employers. Carle BroMenn Medical Center holds Magnet® designation for nursing excellence and is designated as a Primary Stroke Center. Carle BroMenn Medical Center is a part of Carle Health, an integrated system of healthcare services based in Urbana, Illinois, which includes five hospitals with 806 beds, multi-specialty physician group practices with more than 1,000 doctors and advanced practice providers, and health plans including FirstCarolinaCare and Health Alliance. Carle Health combines clinical care, health insurance, research and academics in a way that solves real-world problems today with an eye toward the future.

Supported by a deep philanthropic spirit, Carle is dedicated to doing what it takes to make life better for as many as possible.

Sally Gambacorta is the Community Health Director at Carle BroMenn Medical Center and Carle Eureka Hospital. Both hospitals are in central Illinois. She has worked for Carle BroMenn Medical Center for 27 years in Wellness and Community Health. Sally holds a Bachelor of Science degree in Business Administration from Augustana College, a Master of Science degree in Industrial/Organizational Science from Illinois State University and a Master of Arts degree in Leisure Studies with a concentration in Corporate Fitness and Health Promotion from the University of Iowa. In her community health role, Ms. Gambacorta is responsible for the community health needs assessment and community benefits at both hospitals. She has extensive experience in collaborating with community partners to improve the health of the community. Ms. Gambacorta is a member of the McLean County Community Health Council Executive Steering Committee and facilitates the McLean County Behavioral Health Priority Action Team. She is also a member of the McLean County Mental Health First Aid Collaborative and is the Vice President/Chair for the Partnership for a Healthy Community Board for Woodford, Tazewell and Peoria Counties.

Chestnut Health Systems: Dietra Kulicke, Vice President of Integrated Care, BS, CHCEF

Chestnut Health Systems™ offers prevention education, substance use disorder treatment for adults and adolescents, mental health counseling, primary care, services for military veterans and their families, and housing. Chestnut's Lighthouse Institute is a leader in substance use-related research. Chestnut was established in a house on West Chestnut Street in Bloomington, Illinois, in 1973. It started with two employees and offered a single healthcare service – addiction treatment for adults. In the years since, Chestnut has added four service lines, eight locations in central and southern Illinois and in Missouri, and 700 employees. Chestnut believes that people who are underinsured and uninsured deserve the same high quality care as those with greater access to resources. To that end, Chestnut Family Health Center, a Federally Qualified Health Center (FQHC), provides integrated primary and behavioral health care to persons living at or below 200 percent of Federal Poverty Guidelines. Chestnut has earned The Joint Commission's (TJC) Gold Seal of Approval®, which reflects the organization's commitment to providing safe and effective care. TJC has continuously accredited Chestnut since 1973.

Dietra Kulicke has over 30 years of experience in the healthcare industry. Ms. Kulicke has worked for Chestnut Health Systems since 1991 and has held a variety of clinical and non-clinical positions during her tenure. Ms. Kulicke was the Director of Chestnut Family Health Center from 2011 to 2019 before her transition into the vice president position. She is responsible for leadership and directing the provision of integrated medical, behavioral and dental services at Chestnut Health Systems' locations in Bloomington, Normal, Peoria and Joliet. Ms. Kulicke received her Bachelor of Science degree in Business Education from Bowling Green State University in Bowling Green, Ohio, in 1991. She completed the 11-month Community Health Center Executive Management Fellowship program through the University of Kansas Medical Center Department of Health Policy and Management in November 2012.

McLean County Health Department: Cathy Coverston Anderson, RN, BSN, SM, Assistant Administrator and Luisa Gomez, BS, Health Promotion Program Manager

Since 1946, the McLean County Health Department has worked to protect and promote the health and wellness of McLean County citizens. The department serves the largest geographic county in Illinois, with more than 172,052 residents. Many people may never walk through the doors of the health department, but they all benefit from the various services offered as well as from the enforcement of local and state regulations that protect individuals and communities through the control of infectious diseases, sewage management, assurance of drinkable water and provision of accurate health information. The mission of the McLean County Health Department is to protect and promote health. This is accomplished through the provision of public health leadership, convening and collaborating with community partners and assuring strong business practices to create healthy people and healthy places.

Cathy Coverston Anderson is a registered nurse and has been the Assistant Administrator for the McLean County Health Department since 2009. She has over 30 years of experience in public health and has served on various boards and

councils at the local, regional and state level. Ms. Coverston Anderson has a Master of Science degree from Harvard University School of Public Health and a Bachelor of Science degree in Nursing, as well as a Bachelor of Arts degree in English from the University of Minnesota. She oversees the community health needs assessment and community health improvement plan processes, Occupational Health and Safety Administration (OSHA) activities and the department's emergency preparedness program. She has extensive experience collaborating with local, regional and state partners to protect and promote health for McLean County residents.

Luisa Gomez is the Health Promotion Program Manager for McLean County Health Department. Ms. Gomez joined the health department in July 2021. While her tenure with the agency is relatively new, Ms. Gomez has stepped into her position as a member of the community health needs assessment steering committee. Luisa earned her Bachelor of Science degree in Sociology with a minor in Women and Gender Studies from Illinois State University. Since relocating to Bloomington in 2000, Ms. Gomez has been an involved community member and activist. Currently, Ms. Gomez serves on the West Bloomington Revitalization Project Board.

OSF St. Joseph Medical Center: Erin Kennedy, BS, MS, Center for Healthy Lifestyles Manager

OSF St. Joseph Medical Center is a 149-bed acute care facility. The medical center has been serving Bloomington - Normal and the surrounding communities since 1880. OSF HealthCare is a Catholic, 13-hospital health system serving Illinois and the Upper Peninsula of Michigan, driven by the mission to serve with the greatest care and love. OSF St. Joseph Medical Center is fully accredited by The Joint Commission, an independent organization established to set the standards for measuring healthcare quality. OSF St. Joseph Medical Center is a designated Magnet® hospital. OSF St. Joseph Medical Center is part of OSF HealthCare System, an integrated health system owned and operated by The Sisters of the Third Order of St. Francis. In the spirit of Christ and the example of Francis of Assisi, the mission of OSF HealthCare is to serve persons with the greatest care and love in a community that celebrates the gift of life.

Erin Kennedy is the Manager of the Center for Healthy Lifestyles at OSF St. Joseph Medical Center. With over 20 years of experience in the healthcare field, Ms. Kennedy's focus has been on improving the health and well-being of the community through education, prevention, and chronic disease management. Ms. Kennedy's primary responsibilities include program development through the Center for Healthy Lifestyles, community health needs assessment and improvement planning, and community benefit reporting for OSF St. Joseph Medical Center. Her favorite part of the job is her involvement with forming interagency collaborations to make a positive impact on the overall health of the community. Ms. Kennedy facilitates the Worksite Wellbeing Committee, Healthy Eating/Active Living Committees, and is active with the BN (Bloomington – Normal) Parents Coalition, Women Empowered, the Boys and Girls Club of the Bloomington-Normal Board of Directors, Leadership McLean County Steering Committee, McLean County Community Health Council, and Illinois State University Kinesiology and Recreation Advisory Board. Ms. Kennedy received her Bachelor and Master degrees in Exercise Science and Exercise Physiology from Illinois State University.

b) 2022 McLean County Community Health Council Members

The Executive Steering Committee would like to acknowledge and thank the following individuals and organizations that contributed their time as members of the McLean County Community Health Council to this joint Community Health Needs Assessment Report for McLean County.

Organization	Name	Stakeholder Role
Black Business Association Bloomington Housing Authority Bloomington Normal Boys & Girls Club	Tony Jones Jeremy Hayes Jenny Hall	Civic organization/service club Housing Social service/youth
Bloomington Normal Economic Development Council	Patrick Hoban	Business development
Bloomington Normal Faith in Action	Doretta Herr	Social service/seniors

Organization	Name	Stakeholder Role
Bloomington Township	Deborah Skillrud	City government
Carle BroMenn Medical Center	Logan Frederick	Healthcare
Carle BroMenn Medical Center	Sally Gambacorta	Healthcare
Carle BroMenn Medical Center	Christine McNeal	Healthcare/faith
Carle BroMenn Medical Center	Theresa Prosser	Healthcare
Carle Cancer Institute Normal	Joseph Prosser	Healthcare/cancer
Chestnut Health Systems	Dietra Kulicke	Healthcare
Children's Home + Aid	Jeannie Higdon	Social service/youth
City of Bloomington	Eric West	Fire department
City of Bloomington	Kimberly Smith	City government
Connect Transit	David Braun	Transportation
District 87	Diane Wolf	Education/schools
	Leslie Blockman	
District 87	Lesile Biockman	Education/schools
East Central Illinois Area Agency on Aging	Mike O'Donnell	Social service/seniors
East Central Illinois Area Agency on Aging	Susan Real	Social service/seniors
EasterSeals of Central Illinois	Amber Gruenloh	Social services/youth
ForeFront	Holly Ambuehl	Government/policy
Heartland Community College	Jennifer O'Connor	Education/schools
Home Sweet Home Ministries	Matt Burgess	Social service/homeless
Illinois Farm Bureau	Devon Flamming	Business
Illinois Farm Bureau	Betsy Bradford	Business
Illinois State University	Jackie Lanier	Education/schools
Illinois State University	Susan Lynch	Education/schools
Illinois State University Mennonite College of Nursing	Judy Neubrander	Education/schools
Illinois State University School of Social Work	Karen Stipp	Education/schools
Illinois Wesleyan University	Deborah Halperin	Education/schools
Integrity Counseling	Donald Mahannah	Social service
Marcfirst	Coleen Moore	Social Service
Marcfirst SPICE	Christy Kosharek	Social service
McLean County Center for Human	•	
Services	Joan Hartman	Social service/behavioral health
McLean County Government	Taylore Davis	County government, behavioral health
McLean County Government	Vanessa Granger-Belcher	County government/behavioral health
McLean County Health Department	Kim Anderson	Public health; maternal/child health
McLean County Health Department	Cathy Coverston Anderson	Public health
McLean County Health Department	Luisa Gomez	Public health
McLean County Health Department	Jessica McKnight	Public health
McLean County Health Department	Maureen Sollars	Public health
McLean County Regional Planning		
Commission	Raymond Lai	County government/planning

Organization	Name	Stakeholder Role
McLean County Regional Planning Commission	Teresa Anderson	County government/planning
McLean County Sheriff	Jon Sandage	Law enforcement
Mid Central Community Action	Tami Foley	Social services
NAACP of Bloomington Normal	Willie Holton-Halbert	Civic organization
OSF HealthCare System	Dawn Tuley	Healthcare
OSF St. Joseph Medical Center	Alexandra Schwartz	Healthcare
OSF St. Joseph Medical Center	Erin Kennedy	Healthcare
Project Oz	Joanne Glancy	Social service/youth
Regional Office of Education	Mark Jontry	Education/schools
Regional Office of Education	Trisha Malott	Education/schools
Town of Normal	Doug Damery	Parks & Recreation
Town of Normal	Mick Humer	Fire department
Town of Normal	Rick Bleichner	Law enforcement
The Baby Fold	Dianne Schultz	Social service
The Black Nurses Association of Central Illinois	Elaine Hardy	Civic organization
The Links Incorporated	Elaine Hardy	Civic organization
Unit 5	Dayna Brown	Education/schools
Unit 5	Michelle Lamboley	Education/schools
United Way of McLean County	Kathleen Lorenz	Social services
University of Illinois	Len Meyer	Education/school
West Bloomington Revitalization Project	Deborah Halperin	Social services/civic organization
Western Avenue Community Center	Mary Tackett	Social service
YMCA	Patrick Mainieri	Social service
Youth Build	Tracey Polson	Education/schools
YWCA	Anne Taylor	Social service

IV. Summary of the 2019 McLean County Community Health Needs Assessment and the 2020 - 2022 McLean County Community Health Improvement Plan

a) Community Definition

For the 2019 McLean County Community Health Needs Assessment, the McLean County Community Health Council defined the community as McLean County, the primary service area for Carle BroMenn Medical Center, then operating under the name Advocate BroMenn Medical Center and hereafter referred to as Carle BroMenn Medical Center, the McLean County Health Department, OSF St. Joseph Medical Center and Chestnut Family Health Center. This area includes the following cities and towns: Anchor, Arrowsmith, Bellflower, Bloomington, Carlock, Chenoa, Colfax, Cooksville, Danvers, Downs, Ellsworth, Gridley, Heyworth, Hudson, Le Roy, Lexington, McLean, Merna, Normal, Saybrook, Stanford and Towanda.

b) Communities with Highest SocioNeeds Index Values

Social and economic factors are strong determinants of health outcomes. Six factors are utilized by Conduent Healthy Communities Institute to create SocioNeeds county rankings (1 - 5) and national index values (1 - 100) for all the ZIP codes in McLean County. The six factors include:

- Poverty
- Education
- Unemployment
- Occupation
- Income
- Language.

High values are associated with the highest socioeconomic need, which is correlated with preventable hospitalizations and premature death. For the 2019 McLean County Community Health Needs Assessment, McLean County had one ZIP code with a ranking of 5 and eight ZIP codes with a ranking of 4, which represented the areas with the highest socioeconomic need in McLean County. See Exhibit 1 below.

Exhibit 1: High SocioNeeds ZIP Codes in McLean County, 2018

City/Town	ZIP Code	SocioNeeds Ranking	Population
Bloomington	61701	5	34,385
Normal	61761	4	53,564
Colfax	61726	4	2,259
Funks Grove/McLean	61754	4	1,114
Saybrook	61770	4	995
Stanford	61774	4	911
Bellflower	61724	4	460
Cooksville	61730	4	333
McLean	61754	4	1,114

Source: Conduent Healthy Communities Institute, Claritas, 2018.

In addition to 61701, Bloomington has two other ZIP codes, 61704 and 61705, both of which had a SocioNeeds ranking of 1 (low socioeconomic need).

c) Summary of Assessment Process

Carle BroMenn Medical Center, the McLean County Health Department, OSF St. Joseph Medical Center and Chestnut Health Systems produced a 2019 joint community health needs assessment for McLean County. The assessment process for the 2019 McLean County Community Health Needs Assessment consisted of the following:

- Evaluate membership of the 2016 McLean County Community Health Council and invite new and continuing members for the 2019 council
- Analyze data collectively
- Prioritize and select the top three significant health needs for McLean County
- Generate a joint community health needs assessment for McLean County
- Work collaboratively on a joint community health implementation plan addressing each of the top three health priorities with other key community stakeholders.

d) Needs Identified and Priorities Selected

The Executive Steering Committee facilitated three meetings of the McLean County Community Health Council to prioritize the health needs for the 2019 McLean County Community Health Needs Assessment.

January 31, 2019

At the first meeting, the Committee explained the collaborative nature of the 2019 McLean County Community Health Needs Assessment with Carle BroMenn Medical Center, the McLean County Health Department, OSF St. Joseph Medical Center and Chestnut Health Systems, and the end goal of producing a joint community health needs assessment report and community health improvement plan for McLean County. Highlights from 2017 and 2018 for the 2017 - 2019 McLean County Community Health Improvement Plan were also reviewed with the council.

February 14, 2019

During the second meeting, the Executive Steering Committee presented detailed data on the six significant health needs identified for prioritization. Age, gender, race/ethnicity and ZIP code disparities were shared when available. A group discussion was facilitated on the health issues presented.

February 28, 2019

During the final prioritization meeting, the Hanlon Method of prioritization was used to select the three significant health needs for the 2019 McLean County Community Health Needs Assessment and around which the 2020 - 2022 McLean County Community Health Improvement Plan was developed.

e) Health Needs Selected

Access to Care

Access to care was selected as a significant health need to be addressed by the McLean County Community Health Council not only because of its high priority score (160.3), but for other reasons, as well. Access to care is an important issue that affects many health outcomes. Improving access in certain areas and for certain populations can have a widespread impact on a variety of health outcomes ranging from oral health to respiratory disease. Data presented to the council also indicated that there are significant geographic and racial/ethnic disparities in McLean County that may be related to access to care. Research and subject matter expertise suggested that there are a variety of factors that can improve access to care ranging from increased hours of operation for urgent care clinics and primary care offices, to transportation and education of both consumers and providers. Access to care was also selected as a health priority for the 2016 McLean County Community Health Needs Assessment.

Behavioral Health (Mental Health and Substance Abuse)

Behavioral health was selected as a significant health need to be addressed by the McLean County Community Health Council for several reasons. Behavioral health received the highest priority score (162.5), clearly indicating the need for further improvements. There are numerous health disparities in Bloomington ZIP code 61701 for both mental health and substance abuse. There has also been a great deal of public support and momentum behind mental health in McLean County for the last several years. McLean County is well situated to continue to build momentum on addressing mental health due to the ongoing efforts of numerous organizations and the McLean County Government. Mental health was also previously selected as a key health priority for the 2016 McLean County Community Health Needs Assessment.

Healthy Eating/Active Living

Healthy eating/active living was selected as a significant health need to be addressed by the McLean County Community Health Council because it ranked as number three according to its priority score of 158.1. Additionally, the council felt that by focusing on healthy eating/active living, many other health outcomes such as heart disease, cancer and diabetes

could be positively impacted. Additionally, obesity is a widespread issue that does not discriminate and affects many people. Related issues of food insecurity and food access are also areas needing improvement in McLean County. Obesity was selected as a health priority for the 2016 McLean County Community Health Needs Assessment.

f) Health Needs Not Selected

Heart Disease

Heart disease was not selected as a significant health need because it was ranked fourth according to its priority score of 111.1 and the McLean County Community Health Council did not feel that there was a compelling reason to eliminate one of the health issues that ranked in the top three. The council did discuss that improving access to care may also improve health outcomes for heart disease, particularly in areas of high socioeconomic needs.

Oral Health

Although oral health was deemed an extremely important issue in McLean County, the McLean County Community Health Council agreed to address the three needs that received the highest priority scores. Oral health ranked fifth with a score of 107.7. The council discussed the fact that oral health is also an access issue and can fit under access to care initiatives. The opening of a new dental clinic at the Community Health Care Clinic in early 2019 for individuals without health insurance may assist in improving oral health care access.

Respiratory Disease

Respiratory disease was given a priority score of 81.1 (ranking of sixth). The McLean County Community Health Council did not feel that there was a compelling reason to eliminate one of the health concerns that ranked in the top three. The council did discuss that improving access to care may also improve health outcomes for respiratory disease, particularly in areas of high socioeconomic needs.

g) Priority Action Teams Assembled

In April and May 2019, three priority action team meetings were held to establish a high-level goal for each significant health need/health priority. Priority action teams consisted of key community stakeholders with an interest or expertise in the prioritized significant health need. Cross-sector representation was sought for each priority action team. The goals for each of the health priorities identified are listed below:

2020 - 2022 Health Priority Goals

Access to Care

• Ensure appropriate access to care to improve the health and well-being of our residents, neighborhoods and county by 2023.

Behavioral Health

• Advance a systemic community approach to enhance behavioral health and well-being by 2023.

Healthy Eating/Active Living

Promote healthy eating and active living to strengthen the health and well-being of our community by 2023.

In the fall of 2019, the priority action teams met to determine the resources, interventions and outcome metrics for each of the three health priorities. The 2020 - 2022 McLean County Community Health Improvement Plan was created

as a joint plan for the entire county and consisted of interventions and resources from the hospitals, health department, family health center and numerous social services or other community organizations.

h) Summary of 2020 - 2022 McLean County Community Health Improvement Plan Key Accomplishments

A summary of accomplishments for 2020 and/or 2021 from the McLean County Community Health Improvement Plan are listed below. At the time of this report, the interventions for the 2022 McLean County Community Health Improvement Plan were in progress. Accomplishments for 2022 will be included in the 2022 McLean County Community Health Improvement Plan Annual Progress Report. A chart that easily identifies each organization's particular role and actions for 2020 and 2021 is provided in Appendix 1.

2020 and 2021 Access to Care Key Accomplishments

Highlights for steps taken in 2020 and 2021, as a part of the 2020 - 2022 McLean County Community Health Improvement Plan to address access to care are listed below:

Linkage/Navigation/Care Management/Primary Medical Care

- Carle BroMenn Medical Center and OSF St. Joseph Medical Center collaborated with the Community Health Care Clinic for Coordinating Appropriate Access to Comprehensive Health Care (CAATCH) which launched in July 2017. CAATCH is an emergency room navigation program for engaging those without a primary care home. In 2020, 248 patients were served and in 2021, 353 patients were served by navigators/care coordinators. The 30-day hospital readmission rate for CAATCH patients in both 2020 and 2021 was zero. There was also an 80% reduction in emergency room visits post involvement in CAATCH during 2020 and an 89% reduction in 2021. In 2020, there was an estimated annual cost savings of \$2,119,500 and \$1,116,000 savings in 2021.
- Chestnut Health Systems received a five-year Substance Abuse Mental Health Services Administration (SAMHSA)
 grant. The grant focused on connecting patients who access behavioral health services with a primary care medical
 home and coordinated, whole-person care. In 2020, Chestnut enrolled 34 patients in a medical home and in 2021,
 56 patients were enrolled.
- Chestnut Family Health Center, in partnership with the Illinois Primary Health Care Association, provided two pandemic health navigators to assist in engaging individuals in care, obtaining vaccines and tracking COVID-19 cases.
- In 2021, the Community Health Care Clinic received funding through the Illinois State University Mennonite College of Nursing CAUSE project to add a second CAUSE nurse (bi-lingual) to increase care management capacity.
- In 2020 and 2021, Carle BroMenn Medical Center and OSF St. Joseph Medical Center continued to provide support for the Community Health Care Clinic (CHCC). The CHCC is a free clinic that provides services to the medically underserved population of McLean County to help ensure that all populations in the community have access to healthcare. All emergency room visits, diagnostic testing and hospital services are provided free of charge by Carle BroMenn Medical Center and OSF St. Joseph Medical Center to CHCC patients. Carle BroMenn Medical Center also owns the building where the clinic is located and provides maintenance for the clinic at no charge. OSF HealthCare provides human resources support for the clinic.
- The Community Health Care Clinic (CHCC) received a \$30,000 grant from the Institute for Healthcare Improvement (IHI) to participate in its Pursuing Equity Initiative. The 18-month program will help CCHC examine their current practices and develop policies and procedures in alignment with IHI's Pursuing Equity five-component framework.
- Chestnut Health Systems' Chestnut Family Health Center added 1.0 full time equivalent (FTE) family practice physician and 1.0 FTE mental health advanced practice registered nurse in 2020 to expand access to integrated primary care/behavioral health care services.
- In 2020, Chestnut Health Systems received \$224,436 in Health Resources & Services Administration COVID Cares Grant funding to purchase personal protective equipment, maintain access to services during the COVID-19

pandemic and add COVID-19 testing capacity at the Chestnut Family Health Center Bloomington site with a focus on services for persons living at or below 200% of Federal Poverty Guidelines.

- In 2020 and 2021, Carle BroMenn Medical Center continued to lead the monthly LGBTQ+ Advisory Council meetings which began in December 2019. The council fosters increased access to care by giving a voice to the LGBTQ+ community and allies in order to provide sensitive and respectful care.
- OSF HealthCare Medical Group continued using an integrated care model in all local primary care offices to improve
 access to care. This is accomplished through team-based care, in which physicians, advanced care providers, nurses,
 behavioral health specialists, dietitians, pharmacists and social workers coordinate to provide the most appropriate
 level of care for patients.
- OSF St. Joseph Medical Center employed an emergency room navigator who assists patients with referrals to primary care providers and other services in the community.
- In 2020 and 2021, OSF HealthCare continued its contract with the State of Illinois, offering the Pandemic Health Worker program, which was renamed Digital Health Worker program. This program provided care and assistance to individuals with COVID-19 symptoms so they could remain in the comfort and safety of their homes while recovering. This helped reduce the potential influx of non-emergent patients into local emergency departments.
- In 2020 and 2021, COVID-19 vaccinations and education were provided to the community to improve the health of our community.

Dental Services

- In 2021, The Community Health Care Clinic, which is partially supported by Carle BroMenn Medical Center and OSF St. Joseph Medical Center, increased volunteer dentists from 0.5 FTE to 1.0 FTE for their dental clinic. The clinic provided 604 patients (increase of 37 percent over 2020) with 1,466 oral health visits (increase of 2 percent over 2020) in 2021. In 2021, the clinic secured funding to support an additional full day of dental services per week in 2022.
- In 2021, the McLean County Health Department provided 2,014 routine dental visits (increase of 7.8 percent over 2020) and 580 (26 percent decrease from 2020) acute dental visits.
- In 2021, Carle West Physician Group primary care/pediatric practices performed fluoride applications for 501 pediatric patients. Seventy-five patients received fluoride applications from July 1 December 31, 2020.
- In 2021, Chestnut Family Health Center secured funding for infrastructure, capital improvements and equipment to support opening dental services from the John M. Scott Health Care Commission, Delta Dental, Health Resources & Services Administration (HRSA) American Recovery Funds, and the Illinois Department of Healthcare and Family Services Transformation Project funding in collaboration with OSF Healthcare.
- In 2021, 275 patients received fluoride applications in the OSF Medical Group Pediatric office.

Virtual Services

- The onset of the pandemic caused a rapid and fluid transition by Carle West Physician Group, Chestnut Family
 Health Center, a federally qualified health center (FQHC) and OSF Medical Group to virtual services in 2020. The
 primary care practices and FQHC worked quickly to identify and solidify cost effective models for providing
 telehealth visits. During 2021 virtual services started transitioning back to in-person visits but virtual visits remained
 an option.
- The McLean County Health Department Dental Clinic in 2020 provided telehealth services for dental clinic clients in order to triage emergencies.

Cancer Services

• In June 2021, Carle BroMenn Medical Center staff began meeting with community members, the American Cancer Society, and Carle Cancer Institute Normal staff to discuss a Commission on Cancer standard focusing on increasing mammograms in the Black or African American community.

- In 2021, OSF St. Joseph Medical Center held a grand opening for the Cancer Center located at the Center for Health. It offers a full array of services for patients through a multidisciplinary approach from diagnosis through treatment and survivorship.
- In 2021, Carle Cancer Institute Normal created a multidisciplinary clinic and tumor board that allowed patients to see a breast surgeon, medical oncologist, radiation oncologist and nurse navigator on the same day. Patients receive tumor board recommendations for treatment within a week of their appointment. The clinic shortened the wait time for patients newly diagnosed with breast cancer to begin treatment.

Mobile Health Services

- In 2020, Chestnut Health Systems utilized Health Resources & Services Administration COVID-19 Cares Grant funding
 to purchase a mobile unit for use by Chestnut Family Health Center staff to expand access to health services. Initial
 focus was placed on COVID-19 testing.
- In April 2021, the Carle Mobile Health Clinic west Bloomington pilot launched. Clinics occurred once a month from April December, 2021. One hundred and forty-eight patients were seen during the nine month pilot held in the parking lot of one of the Bloomington Housing Authority's buildings. OSF St. Joseph Medical Center provided nutrition information and distributed 166 Smart Meals. The McLean County Health Department provided Diabetes Prevention Program information and the Tinervin Foundation distributed food boxes.
- In 2021, the Carle Mobile Health Clinic provided on-site school physicals for 89 Normal West High School students and 108 Bloomington Junior High School students.

HIV and Sexual Health Services

• In 2021, Carle BroMenn Medical Center, UnityPoint Health and Prairie Pride Coalition helped bring Central Illinois Friends to the Community Health Care Clinic, expanding access to HIV and sexual health services.

Orthopedic Services

- McLean County Orthopedics joined Carle Health on August 29, 2021. This expanded access to care to orthopedics, podiatry, pain and sports medicine care for Medicaid patients.
- Great Plains Orthopedics joined OSF HealthCare in the fall of 2021 and increased access to care.

Peace Meal

- In 2021, OSF HealthCare sponsored the Peace Meal Senior Nutrition Program and delivered 112,846 meals to seniors living in McLean County. Annual assessments were completed in which referrals were made for those who needed additional social services and medical resources.
 - Total number clients served in 2021: 2,850 (1,655 Home Delivered Meal Clients, 1,195 Congregate Meal Clients)

Number of clients 75+ years of age: 1,589

Number of low income clients: 1,291

John M. Scott Health Care Commission Grants

- Carle BroMenn Medical Center's Community Health Director and OSF St. Joseph's Center for Healthy Lifestyles Manager served on the John M. Scott Health Care Commission's grant committee in 2021.
- The following organizations received grants related to access to care implementation in 2020 from the City of Bloomington's John M. Scott Health Care Commission. The grants are tied to the health priorities selected through the 2019 McLean County Community Health Needs Assessment.
 - The Center for Human Services
 - The Community Health Care Clinic

- Children's Home & Aid
- o Faith in Action
- Heartland Head Start
- McLean County Health Department
- Marcfirst
- Mid Central Community Action
- Project Oz
- OSF Healthcare Peace Meal
- The following organizations received grants related to access to care implementation in 2021 from the City of Bloomington's John M. Scott Health Care Commission. The grants are tied to the health priorities selected through the 2019 McLean County Community Health Needs Assessment.
 - Chestnut Health Systems
 - o The Children's Home & Aid
 - o Faith in Action
 - Heartland Head Start
 - Marcfirst

Additional access to care interventions are listed in the 2020 - 2022 McLean County Community Health Improvement Plan at https://carle.org/about-us/community-health-needs-assessments and on the websites of Chestnut Health Systems, McLean County Health Department and OSF St. Joseph Medical Center.

2020 and 2021 Behavioral Health Key Accomplishments

Highlights for steps taken or programs offered in 2020 and 2021, as a part of the 2020 - 2022 McLean County Community Health Improvement Plan to address behavioral health, are listed below:

Mental Health First Aid

- Mental Health First Aid (MHFA) is an evidence-based program designed to increase awareness of mental health issues and decrease the stigma related to mental health. The McLean County Health Department is the lead organization for the MHFA collaborative. Carle BroMenn Medical Center, OSF St. Joseph Medical Center, McLean County Center for Human Services and the Central Illinois Area Health Education Center are part of the collaborative. In 2020 and 2021, 454 community members were trained in MHFA with 29 courses offered.
- In 2021, three courses each were hosted by Carle BroMenn Medical Center and OSF St. Joseph Medical Center.
- In 2021, District 87 had 105 staff trained in Youth MHFA.
- In 2021, Heartland Head Start held an MHFA training for their staff and family members.
- In 2021, two MHFA Instructor Training courses were offered by the McLean County MHFA Collaborative. This resulted in 8 youth instructors and eight adult instructors for McLean County. Discounted registration fees were provided by Central Illinois Area Health Education Center and the McLean County Health Department for 16 participants (\$250 versus \$1,800 fee).

Behavioral Health in Schools

- The National Alliance on Mental Illness's Ending the Silence program was implemented in 20 public schools by Project Oz in 2020 and 2021 for a total of 6,065 students.
- An average of 11% of students in 2020 and 2021 reached out for help as a direct result of Ending the Silence.
- Too Good for Drugs was implemented in eight public school districts by Project Oz in 2020 and 2021 for a total of 4,836 students.
- In 2017 the Embedded School and Community Based Services Pilot began in two rural school districts Olympia CUSD 16 and Ridgeview CUSD 19, funded in part by the McLean County Health Department Board of Health and through billable services. The McLean County Center for Human Services and Chestnut Health Systems each

provided one clinician to be embedded in the school districts. The goal of the pilot was to increase care access points to improve children's behavioral health status through embedded community behavioral health services. Increasing identified students' coping mechanisms was one of many objectives for the program. The program has expanded each year to include more schools. In 2021, mental health counselors were in five school districts and one school. Nine-hundred and twenty-eight students received services.

• In December 2020, Bloomington District 87 was awarded a five-year, \$1.5 million grant to expand on embedding mental health counselors in schools and providing training to teachers and staff in Mental Health First Aid.

Frequent Users System Engagement

- McLean County Government offers a program called Frequent Users System Engagement (FUSE). FUSE is a program
 designed to break the cycle of homelessness and crisis among individuals with complex medical and behavioral
 health challenges who are intersecting the justice, homeless or emergency systems of care frequently.
- In 2020 there were six participants in FUSE. In 2021, there was an average of 10 participants.
- The 2020 outcomes pre-FUSE (18 months prior to joining FUSE) versus post-FUSE are as follows:
 - o 33 mental health emergency department visits pre-FUSE versus two post-FUSE
 - o 26 justice contacts pre-FUSE versus six post-FUSE
 - 1,006 shelter bed days pre-FUSE versus zero post-FUSE
 - The 2021 outcomes pre-FUSE (18 months prior to joining FUSE) versus post-FUSE are as follows:
 - o 60 mental health emergency department visits pre-FUSE versus 13 post-FUSE
 - 46 justice contacts pre-FUSE versus eight post-FUSE
 - o 2,502 shelter bed days pre-FUSE versus 662 post-FUSE

Triage Center

- McLean County Government opened The Triage Center, an innovative pilot program for McLean County, in March 2020. It is a 24-hour, seven days a week walk-in-option for individuals experiencing a behavioral health crisis. The first full year of outcomes, 2021, are listed below:
 - o 297 visits for 104 unduplicated encounters
 - 61 percent were self-referrals
 - 45 percent were 41 50 years of age
 - o Frequented fairly evenly every day of the week
 - Most common arrival times were between 7:30 am and 3:30 pm

Behavioral Health Forum

- In 2020 and 2021, McLean County Government hosted community Behavioral Health Forums virtually.
- In 2020 22 sessions were held over seven months from November 2020 May 2021.
 - o 770 people registered for the sessions and 405 attended.
- In 2021 seven sessions were held over six weeks beginning in October 2021.
 - o 258 people registered for the sessions and 142 people attended.

PEARLS

- The Program to Encourage Active, Rewarding Lives (PEARLS) is a national evidence-based program for late-life depression. PEARLS brings high-quality mental health care into community-based settings that reach vulnerable older adults.
 - o In 2020 37 people were served for 424 units/hours.
 - o In 2021 54 people were served for 654 units/hours.

2020 and 2021 Behavioral Health Community Health Improvement Plan Related Accomplishments

- In October 2020, Carle BroMenn Medical Center opened a \$4.8 million newly renovated space for inpatient behavioral health. The hospital contributed \$4.35 million towards the renovation with the rest coming from private and corporate donations. With the new space configuration, potential capacity in the mental health area increased from 13 to 19 beds. The hospital continued to actively recruit psychiatrists in 2020 and 2021, and when successful, will utilize the additional beds. This will increase access to services for the community as Carle BroMenn Medical Center has the only inpatient mental health unit in McLean County. The Addiction Recovery service line provides inpatient medical detox as well as outpatient levels of treatment. The outpatient levels available include in-person partial hospitalization, intensive outpatient and continuing care services. Additionally, an onsite psychiatrist and addictionologist provide consultation to the medical team for inpatient dual treatment needs.
- In 2020 Project Oz received a Healing Illinois grant. Healing Illinois is a statewide initiative of the Illinois Department of Human Services in partnership with The Chicago Community Trust. Funds built on our existing Youth Empowered Schools (YES) program and expanded the use of restorative practices and bringing racial healing circles to students in McLean County.
- In November and December 2020, United Way held a three-part behavioral health series at their Town Hall meetings focused on coping with COVID-19.
- The Recovery Oriented Systems of Care (ROSC) Council is made up of individuals representing a cross sector of McLean County including social service agencies, individuals with lived experience with substance use (SUD) or mental health (MH) disorders, health care, and local businesses. In 2020, the council launched three new community support groups for SUD, mental and behavioral health; 1) BRIDGES family and new to treatment focus, 2) SMART cognitive behavioral therapy focus and 3) LGBTQ+ for those that identify as LGBTQ+. The ROSC Council also offered three behavioral health webinars to eradicate stigma; 1) Intimate Partner Violence, 2) Caregiver to Child Dynamics and 3) Relationships and Recovery as well as hosting a spirituality panel to introduce people to different spiritual pathways and how to get involved locally and nationally.
- In October 2020, the US Department of Housing and Urban Development awarded the City of Bloomington a \$2.3 million grant to remove lead paint and other hazardous materials in lead homes in Bloomington with a focus on ZIP code 61701. Carle BroMenn Medical Center, OSF St. Joseph Medical Center and the McLean County Health Department are partnering organizations with the City for this program.
- McLean County Health Department's Behavioral Health Program started the Intellectual and Developmental
 Disability Collaborative and partnered with Heartland Head Start to participate in the 2021 Behavioral Health
 Training Institute through the National Council for Mental Wellbeing.
- In 2021, Children's Home & Aid received a Family Violence Prevention and Services/ Specialized Services for Abused Parents and their Children demonstration grant, allowing expansion of clinical services for children impacted by violence. The program was formerly only able to serve Bloomington/Normal residents, but can now provide therapy services for children and families in McLean, Ford, Livingston, Logan and Woodford counties.
- In 2021, Carle BroMenn Medical Center accomplished the following related to behavioral health
 - Carle BroMenn Medical Center Addiction Recovery began offering Partial Hospitalization Programming, (PHP) again in conjunction with Intensive Outpatient Programming (IOP) and After Care Programming. This is a group-based outpatient treatment that meets Monday through Friday for five hours per day. While programming is individualized, typical length of stay is 10 to 15 days. Patients learn core recovery principles, relapse prevention strategies and coping skills to implement into a recovery lifestyle. Licensed therapists, dietitians, chaplains and members of the recovery community are available to assist patients with their recovery plans following partial hospitalization treatment.
 - In August 2021, Carle BroMenn Medical Center's behavioral health therapists began hosting a weekly stroke support group at the Carle Health and Fitness Center. Curriculum is created around a holistic approach; with the addition of hosting medical and community experts on a scheduled basis. Direct referrals will be made for all patients with a stroke diagnosis discharged from Carle BroMenn Medical Center.
 - On June 21, Carle BroMenn Medical Center and Eureka Hospital Delegate Church Association hosted a virtual meeting for the community. A presentation on mental health and resilience was given by a staff member from the McLean County Center for Human Resources. Carle BroMenn Medical Center donated

- eight registrations to Mental Health First Aid classes hosted by Carle BroMenn Medical Center and the Carle Health and Fitness Center in June and July 2021.
- o In July 2021, Carle BroMenn Medical Center Behavioral Health began offering counseling services for patients of Carle Cancer Institute Normal and in May 2021, for hospital patients in Acute Rehab. Carle BroMenn Medical Center Acute Rehab Services treats patients who require inpatient rehabilitation services resulting from a variety of conditions including stroke, traumatic and non-traumatic brain and spinal cord injury, neurological disorders, hip fracture, amputation, burns, arthritis, joint replacement and other conditions.
- In 2021, YWCA of McLean County prevention educators provided both virtual and in-person trainings, teaching Erin's Law and Healthy Relationship curriculums (K-12) along with sexual harassment trainings for adults in the community.
- Regional Office of Education (ROE) #17 accomplished the following in 2021:
 - In September, ROE #17 created an introductory mental health training video for paraprofessionals in regional school districts.
 - In October, ROE #17 assisted more than seven regional districts (four within McLean County) in applying for ISBE funding to support social-emotional initiatives within their districts.
 - o In November, ROE #17 started an educator support group to support teachers' emotional well-being.
 - o In December, ROE #17 began a monthly behavioral health professional development series.
- Project Oz accomplished the following in 2021:

Youth Empowered Schools Program

 Received funds through a state R3 grant to expand restorative schools' partnership with District 87, placing full-time, embedded restorative school counselors in two elementary schools and one junior high school, bringing the total to six counselors between District 87 and Unit 5.

Services for Homeless Youth

- Temporarily increased transitional living beds by 50%, and increased placements in emergency shelter by approximately 30%.
- Participated in a national study conducted by the Family and Youth Services Bureau, that analyzed outcomes and helped identify best practices for providing transitional housing and related services to young people.
- Worked with other providers across the country and the national Runaway and Homeless Youth Training and Technical Assistance Center to create a virtual training for youth workers covering best practices for youth who have experienced or are at-risk for trafficking and commercial sexual exploitation.

Ending the Silence

- Created and shared a 10-minute video titled "COVID-19: Navigating Quarantine and High School," featuring student interviews, educational content, the importance of healthy coping skills, and available resources.
- Chestnut Health Systems accomplished the following in 2021:
 - Chestnut Health Systems received a two-year Substance Abuse and Mental Health Services Administration (SAMHSA) grant to support community mental health services. This grant enabled Chestnut Health Systems to continue to provide mental health and substance use disorder treatment and recovery support programs for children and adults that have experienced economic setbacks as a result of the pandemic.
 - As part of the SAMHSA grant above, Chestnut Health Systems partnered with University of Colorado to provide supportive programming for staff around the 8 Dimensions of Wellness. The goal was to increase the mental wellbeing of the staff. The programming began in 2021 and will continue until 2023.
 - Chestnut Health Systems received several grants to provide financial support for individuals who are at risk
 of homelessness. The first grant was provided by Molina (managed care) at the beginning of the pandemic.
 That grant also provided financial support to Home Sweet Home Ministries and the Boys and Girls Club.
 Additional funding is provided annually by the Department of Mental Health through the Continuum of
 Care.
 - Chestnut Health Systems partnered with Heartland Community College to develop a work ready program to train peer recovery support staff to work with individuals with mental health and/or substance use disorders. The program provides both the training hours (CEUs) and an opportunity for a yearlong

apprenticeship so participants can qualify for certification as a recovery support specialist. The program admitted its first cohort of students in the fall semester of the 2021-22 academic year.

- The McLean County Recovery-Oriented System of Care (ROSC) participated in the Racial Diversity in Recovery panel
 discussion and co-launched the Re-entry Council, which includes the Illinois State University department of Criminal
 Justice, YWCA Labyrinth Outreach Services to Women, Treatment Alternatives for Safe Communities (TASC), Prairie
 State Legal Services and the Bloomington Library.
 - OSF Healthcare and/or OSF St. Joseph Medical Center accomplished the following in 2021:OSF HealthCare provided SilverCloud, a secure, immediate access to online supported cognitive behavioral therapy programs to the community. SilverCloud focuses on improving depression and anxiety levels among adult individuals.
 - o In 2021, OSF St. Joseph Medical Center employed a behavioral health navigator to assist patients with referrals to primary care providers and other services in the community.
 - In 2021, OSF St. Joseph Medical Center screened 5,283 patients for social determinants of health and 867 patients were referred for educational opportunities, community-based organizations, or care management program for behavioral health concerns.

John M. Scott Health Care Commission Grants

- Carle BroMenn Medical Center's Community Health Director and OSF St. Joseph's Center for Healthy Lifestyles Manager served on the John M. Scott Health Care Commission's grant committee in 2021.
- The following organizations received grants related to behavioral health implementation in 2020 from the City of Bloomington's John M. Scott Health Care Commission. The grants are tied to the health priorities selected for the 2019 McLean County Community Health Needs Assessment.
 - The McLean County Center for Human Services
 - Integrity Counseling
 - o Mid Central Community Action
 - Project Oz
 - o Youthbuild of McLean County
 - The Center for Youth and Family Solutions
 - o Children's Home and Aid
- The following organizations received grants related to behavioral health implementation in 2021 from the City of Bloomington's John M. Scott Health Care Commission. The grants are tied to the behavioral health priorities selected for the 2019 McLean County Community Health Needs Assessment.
 - The Boys and Girls Club
 - YouthBuild of McLean County
 - Integrity Counseling
 - Project Oz
 - The Center for Youth and Family Solutions

Additional behavioral health interventions are listed in the 2020 - 2022 McLean County Community Health Improvement Plan at https://carle.org/about-us/community-health-needs-assessments and the websites of Chestnut Health Systems, McLean County Health Department and OSF St. Joseph Medical Center.

2020 and **2021** Healthy Eating/Active Living Key Accomplishments

Highlights for steps taken or programs offered in 2020 and 2021, as a part of the 2020 - 2022 McLean County Community Health Improvement Plan to address healthy eating/active living, are listed below:

Food Insecurity/Access

• On December 1, 2020, OSF HealthCare began sponsoring Peace Meals Senior Nutrition Program in seven counties, one of which is McLean County.

- o In 2021, 112,846 meals were provided for seniors in McLean County.
- Survey results for 2021:
 - ❖ The person who delivers the meals is friendly and respectful: 99.2 percent
 - ❖ I eat a healthier variety of foods because I receive Peace Meals: 88.9 percent
 - As a result of receiving home delivered meals, I believe my health has improved and I feel better: 73.5 percent
 - Because I receive home delivered meals, I can continue to live in my own house: 89.6 percent
 - Because I receive home delivered meals, I feel I am better prepared to make healthful and nutritious choices: 94.6 percent
- District 87 offered free lunch meals during school to all students in 2020 and 2021.
 - o Free meals were provided to 572,933 kids and families in the community.
- Mid Central Community Action sponsored \$20,000 to provide healthy snacks to The Boys and Girls Club and Western Avenue Center.
- In 2021, Carle Home Health/Hospice and OSF HealthCare began screening patients for food insecurity. Carle and OSF St. Joseph Medical Center refer patients to local food pantries.
- In 2020 and 2021, OSF St. Joseph Medical Center donated 3,444 SmartMeals food kits to help educate individuals regarding the ease of making healthy and affordable meals. In 2021, education was provided to 1,541 people about the program and how to prepare the meals appropriately.
- In 2020 and 2021, OSF St. Joseph Medical Center donated 1,110 pounds of produce to Home Sweet Home Ministries Bread for Life pantry.
- Bloomington Farmer's Market
 - Six-hundred and ninety-five transactions took place between May and October 2021, totaling \$17,209 in sales.
 - Two-hundred and eighty-two customers were served through Link/SNAP/EBT with a Link match of \$14,037.
- In 2020 and 2021 various community gardens in McLean County donated 6,482 pounds of produce. The Veggie Oasis donated 2,400 pounds that were gleaned from the Bloomington Farmers' Market.
- In 2021, the Illinois Extension Office distributed 286 garden bags to McLean County residents as part of the Garden in a Bag program.
- In 2020 and 2021, United Way was a leading facilitator in providing over 300,000 meals to the community. United Way partnered with restaurants, food banks and the Tinervan Foundation to provide and distribute food.
- In 2021, several food pantries provided education materials and tagged "green lights" on healthier options. Partners included the hospitals, Illinois Extension Office and local agencies.
- In October 2020, Carle BroMenn Medical Center collected \$295 in grocery store gift cards from employees and volunteers to donate to the Center for Hope and Temba Food Pantries. Staff at the pantries used the gift cards to purchase fresh produce and other fresh food for clients during the winter months. The hospital supplemented the gift cards with a \$1,000 in-kind donation.
- OSF HealthCare donated 264 pounds of produce to Home Sweet Home Ministries from an employee fresh food drive in October 2020.
- The Healthy Eating/Active Living Priority Action Team partnered with the Illinois Extension Office to form a Food Pantry Committee made up of five local food pantries, Carle BroMenn Medical Center, OSF St. Joseph Medical Center and dietitians to provide guidance and education to promote healthier food choices at food pantries.
- Heartland Head Start donated 12,325 free meals (breakfast, lunch and snacks) to children under age 18 between March 17 and June 20, 2020.
- PNC Bank sponsored an \$18,500 grant to Heartland Head Start to provide family meal boxes for COVID-19 relief.
- In 2020, Spiritual Care at Carle BroMenn Medical Center gave 16 food boxes to food insecure patients. The food boxes were donated by Eastview Christian Church.

Healthy Eating and Physical Activity

- In 2020, Chestnut Family Health Center offered a six-month virtual diabetes MESSAGES program to five adult
 patients. A wellness coach provided support and accountability to assist clients with making physical activity and
 healthy eating behavior changes.
- OSF St., Joseph Medical Center offered the following related accomplishments in 2021:
 - In 2020 and 2021, OSF HealthCare sponsored weekly Student Health 101 emails to all students attending Normal Community West and Normal Community High School. The weekly emails promoted overall health and well-being education and resources for parents and students.
 - OSF HealthCare sponsored 'Girls on the Run' program for Bloomington-Normal schools for \$5,000 total in spring 2020 and 2021. Eighty total elementary school-aged girls from three Bloomington-Normal schools participated in 2020 and 2021.
 - OSF HealthCare donated 300 water bottles to BN Parents to distribute to junior high school students in Unit
 5 to promote drinking water to stay healthy. Five-hundred educational handouts were donated.
 - OSF HealthCare sponsored seven healthy eating/active living commercials through PBS that aired in McLean County in 2021. The Center for Healthy Lifestyles team developed the content and was featured on the commercials.
 - The Center for Healthy Lifestyles educated 1,078 individuals on healthy eating and active living in 2021. Over
 4,000 individuals were educated on healthy behaviors in 2021.
 - o In 2021, 17 individuals completed the Healthy Kids U program through the Center for Healthy Lifestyles. The program consisted of weekly exercise and education sessions.
 - OSF St. Joseph Medical Center provided free, 3 series, six-week education sessions to their patients who struggled with chronic diseases/illnesses. Education was provided by the Center for Healthy Lifestyles staff and a physician assistant. The program was based on lifestyle medicine in 2021.
 - In 2020 and 2021, the Center for Healthy Lifestyles partnered with The Links Inc. to provide recorded nutrition education for The Links website, specific to health concerns associated with the Black/African American population.
 - In 2020 and 2021, the Center for Healthy Lifestyles offered free education series to the Boys and Girls Club focused around healthy eating and active living, including food demonstrations with ingredients to make healthy snacks.
 - o In 2021, OSF St. Joseph Medical Center provided fitness center membership access to 37 adults for free.
 - Ninety-two free community events promoting physical activity were held in 2020 and 2021 for a total of 40,810 participants. This includes Matter of Balance courses (three) and Healthy Kids U.
- One-hundred and seventy-eight free workplace programs/events promoting physical activity were held in 2020 and 2021 for 2,256 participants. Partners included schools, hospitals, and businesses or agencies.
- The Partnership for Health pilot program began in April 2017. The program is a private-public partnership to improve
 the health and fitness of people with developmental and intellectual disabilities, and their support workers. Partners
 include Carle Health and Fitness Center, Marcfirst, Carle Center for Philanthropy, the McLean County Health
 Department and the McLean County Board for the Care and Treatment of Persons with a Developmental Disability
 (377 Board).
 - o In 2020, the program served 46 individuals. 2020 outcomes were as follows:
 - 26 percent of participants decreased their blood pressure
 - 37 percent of participants improved their waist circumference
 - 30 percent of participants improved their body mass index.
 - In 2021, the program served an average of 32 individuals. 2021 outcomes were as follows:
 - 47 percent of participants decreased their systolic blood pressure
 - 53 percent of participants decreased their diastolic blood pressure
 - 47 percent of participants improved or maintained their waist circumference
 - 59 percent of participants improved their body mass index.

John M. Scott Health Care Commission

- The following organizations received grants related to healthy eating/active living implementation in 2020 from the City of Bloomington's John M. Scott Health Care Commission. The grants are tied to the health priorities selected for the 2019 McLean County Community Health Needs Assessment.
 - Normal First United Methodist Church
 - Sarah Bush Lincoln
 - OSF HealthCare became the sponsor of Peace Meals on December 1, 2020.
 - West Bloomington Revitalization Project (WBRP)
- The following organizations received grants related to healthy eating/active living implementation in 2021 from the
 City of Bloomington's John M. Scott Health Care Commission. The grants are tied to the health priorities selected for
 the 2019 McLean County Community Health Needs Assessment.
 - Home Sweet Home Ministries
 - West Bloomington Revitalization Project
 - OSF HealthCare
- The following organizations received grants for HEAL implementation from the Invest Health team (City of Bloomington, Carle BroMenn Medical Center, Chestnut Health Systems, McLean County Health Department, OSF St. Joseph Medical Center and Mid Central Community Action) in 2020.
 - West Bloomington Revitalization Project
 - o Sunnyside Gardens

Additional healthy eating/active living interventions are listed in the 2020 - 2022 McLean County Community Health Improvement Plan at https://carle.org/about-us/community-health-needs-assessments and the websites of Chestnut Health Systems, McLean County Health Department and OSF St. Joseph Medical Center.

i) Input from the Community

For the 2019 McLean County Community Health Needs Assessment (CHNA), a mechanism for community members to provide feedback was provided. The joint CHNA Report was posted on the websites of both hospitals, the McLean County Health Departments and Chestnut Health Systems. The 2020 – 2022 McLean County Community Health Improvement Plan was posted either on each organizations' website or attached to the hospital's annual Form 990. Although feedback was not given by individuals in the community via these formal mechanisms, informal/verbal feedback was provided from key stakeholders and community service organizations. Consistently, stakeholders commented on the benefits of having a joint community health needs assessment and community health improvement plan. Several organizations utilized the information in the joint CHNA report to apply for grants to help further the work of their agencies. Feedback was received that the CHNA report has been of great value to McLean County.

j) Lessons Learned

A lesson learned from the 2019 McLean County Community Health Needs Assessment is that the time it took to conduct a CHNA, to complete a joint CHNA Report and to adopt a joint Community Health Improvement Plan was underestimated. It takes a firm and ongoing commitment from at least one key player from each Executive Steering Committee organization to prepare a joint CHNA report as well as provide cross-sector organizational support and community participation. A joint community health needs assessment has been conducted in McLean County for three cycles. With each cycle, more individuals from various organizations want to be a part of the process whether that means being a council member or a member of a priority action team. While it important to hear the voices of new community members, it proves more challenging and time consuming to manage larger groups. It is also challenging to share all of the robust data with the council, priority action teams and other interested groups.

V. 2022 McLean County Community Health Needs Assessment

a) Methodology

To complete the comprehensive community health needs assessment, multiple sources were examined. Secondary statistical data were used to assess the community profile, morbidity rates and causes of mortality. Additionally, based on a sample of 763 survey respondents from McLean County, a study was completed to examine perceptions of community health-related issues, healthy behaviors, behavioral health, food security, social determinants of health and access to healthcare.

When available, each section of the report provides prevalence or incidence rates, comparisons to state, national and Healthy People 2020 or 2030 targets, trends and/or prior values for McLean County and disparities data. Key findings can be found at the end of each major data category.

Secondary Data

Existing secondary data was used to develop an overall assessment of health-related issues in the community. The report contains the most recent data available at the time of data collection which was presented in February 2022 to the McLean County Community Health Council as part of the prioritization process for this community health needs assessment.

Much of the secondary data used for this assessment was acquired via Conduent Healthy Communities Institute, a centralized data platform purchased by Carle Health to help drive community health improvement efforts. Conduent Healthy Communities Institute operates as a repository for publicly available secondary data, hospital emergency room visits and hospitalization rates. The platform includes dashboards, Geographic Information System (GIS) maps, disaggregation at the ZIP code level, disparities information and effective practices for over 100 health-related issues. Conduent Healthy Communities Institute also supplies a colorful gauge to depict comparisons between McLean County, other counties in Illinois and US counties. See Exhibit 2 below.

Exhibit 2: Conduent Healthy Communities Institute Gauges

Green (Good): When a high value is good, community value is equal to or higher than the 50th percentile (median) -- **OR** – when a low value is good, community value is equal to or lower than 50th percentile **Yellow (Fair):** When a high value is good, community value is between 50th and 25th percentile –**OR** – when a low value is good, community value is between 50th and 75th percentiles

Red (Poor): When a high value is good, community value is less than 25th percentile – **OR** – when a low value is good, community value is greater than 75th percentile

Source: Conduent Healthy Communities Institute, 2022.

See Appendix 2 for a detailed explanation of additional icons and gauges used throughout this report. A comprehensive list of secondary data sources can be found in Appendix 3.

Primary Data

In addition to existing secondary data sources, primary survey data were also collected. See Appendix 4 to view the survey. This section describes the research methods used to collect, code, verify and analyze primary survey data.

Specifically, the research design used for this study includes: survey design, data collection and data integrity as outlined below.

Survey Instrument Design

Initially, all publicly available health needs assessments in the US were assessed to identify common themes and approaches to collecting community health needs data. By leveraging best practices from these surveys, a collaborative team was involved in survey design/approval through several factfinding sessions.

Additionally, several focus groups were used to collect the qualitative information necessary to design survey items. Specifically, for the community health needs assessment, eight specific sets of items were included:

- 1) Ratings of health issues in the community to assess the importance of various community health concerns. Survey items included assessments of topics such as cancer, diabetes, viruses (including COVID-19) and obesity.
- 2) Ratings of unhealthy behaviors in the community to assess the importance of various unhealthy behaviors. Survey items included assessments of topics such as violence, drug abuse and smoking.
- 3) Ratings of issues concerning well-being to assess the importance of various issues relating to well-being in the community. Survey items included assessments of topics such as access to healthcare, safer neighborhoods and effective public transportation.
- 4) Accessibility to healthcare to assess the degree to which residents could access healthcare when needed. Survey items included assessments of topics such as access to medical, dental and mental healthcare, as well as access to prescription medications.
- 5) Healthy behaviors to assess the degree to which residents exhibited healthy behaviors. The survey items included assessments of topics such as exercise, healthy eating habits and cancer screenings.
- 6) Behavioral health to assess community issues related to conditions such as anxiety and depression.
- 7) Food security to assess access to healthy food alternatives.
- 8) Social determinants of health to assess the impact that social determinants may have on the abovementioned topics.

Finally, demographic information was collected to assess background information necessary to segment markets in terms of the eight categories discussed above.

Item selection criteria for the final survey included validity, reliability and frequency measures based on responses from the pilot sample.

Sample Size

To provide a representative profile when assessing the aggregated population of McLean County, the general population was combined with a portion of the at-risk population. To represent the at-risk population as a percentage of the aggregate population, a random-number generator was used to select at-risk cases to include in the general sample. Additionally, efforts were made to ensure that the demography of the sample was aligned with population demographics according to U.S. Census data. This provided a total usable sample of 763 respondents for analyzing the aggregate population; 650 from the general population and 113 from the at-risk population.

Data Collection

To collect data in this study, two techniques were used. First, an online version of the survey was created. Second, a paper version of the survey was distributed. In order to be sensitive to the needs of respondents, surveys stressed assurance of complete anonymity. Both versions were translated into Spanish and collected from August through September 2021. See Appendix 4 for the survey instrument.

In addition to defining the community by geographic boundaries, this study targeted the at-risk population as an area of potential opportunity to improve the health of the community. Note that the at-risk population was defined as those individuals eligible to receive Medicaid based on the state of Illinois guidelines using household size and income level. To specifically target the at-risk population, surveys were distributed at homeless shelters, food pantries and other social service organizations. Since the at-risk population was specifically targeted as part of the data collection effort, this became a stratified sample, as no other groups were specifically targeted based on their socio-economic status.

It is important to recognize that the use of electronic surveys to collect community-level data may create a potential for bias from convenience sampling error. To recognize for potential bias in the community sample, a second control sample of data was collected. Specifically, the control sample consisted of random patients surveyed at a hospital, assuming that patients receiving care represent an unbiased representation of the community. All questions on the patient version of the survey pertaining to access to healthcare were removed, as these questions were not relevant to current patients. Data from the community sample and the control sample were compared using t-tests and tetrachoric correlations when appropriate. Results showed that the community sample did not exhibit any significant patterns of bias. If specific relationships exhibited a potential for bias between the community sample and the control sample, they were identified in the social-determinants sections of the analyses.

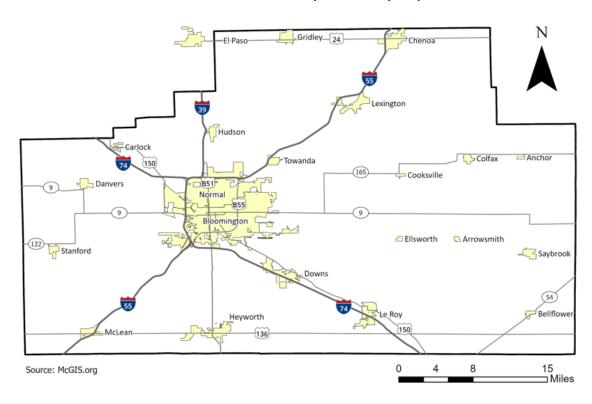
Comparisons with 2018 Community Health Needs Assessment Survey

Throughout the report, the 2021 McLean County Community Health Survey is compared to the 2018 McLean County Community Health Survey.

b) Community Description

The McLean County Community Health Council defined the community as McLean County, the primary service area for Carle BroMenn Medical Center, the McLean County Health Department, OSF St. Joseph Medical Center and Chestnut Family Health Center. This area includes the following cities and towns: Anchor, Arrowsmith, Bellflower, Bloomington, Carlock, Chenoa, Colfax, Cooksville, Danvers, Downs, Ellsworth, Gridley, Heyworth, Hudson, Le Roy, Lexington, McLean, Merna, Normal, Saybrook, Stanford and Towanda. See Exhibit 3 below for a map of McLean County.

Exhibit 3: McLean County Community Map



Source: McLean County Regional Planning Commission, 2022.

Population

McLean County consists of a total population of 174,090 (Conduent Healthy Communities Institute, Claritas, 2022). Bloomington has the largest population in the county with 77,962 and Normal has the second largest population with 54,742 (Conduent Healthy Communities Institute, U.S. Census Bureau, 2018). The population in McLean County increased by 2.66 percent from 2010 to 2022 (Conduent Healthy Communities Institute, Claritas, 2022).

Social Determinants of Health: Health Equity Index

The Health Equity Index (formerly called the SocioNeeds Index) is a Conduent Healthy Communities Institute (HCI) tool that measures socioeconomic need, which is correlated with poor health outcomes. The index is part of the Conduent's SocioNeeds Index® Suite, which provides analytics around social determinants of health to advance equitable outcomes for a range of topics. Conduent HCI's Health Equity Index considers validated indicators related to income, employment, education, and household environment to identify areas at highest risk for experiencing health inequities. The indicators are weighted to maximize the correlation of the index with premature death rates and preventable hospitalization rates. All ZIP codes, counties, and county equivalents in the United States are given an index value from 0 (low need) to 100 (high need). To help identify the areas of highest need within a defined geographic area, the selected ZIP codes are ranked from 1 (low need) to 5 (high need) based on their index value. These values are sorted from low to high and divided into five ranks using natural breaks. These ranks are used to color the map and chart for the Health Equity Index, with darker coloring associated with higher relative need.

McLean County has several communities that have a greater risk of experiencing health inequities or have a higher relative need compared to other communities in the county. The Health Equity Index for McLean County is illustrated in Exhibit 4. McLean County has two ZIP codes with a ranking of 5 and eight ZIP codes with a ranking of 4, which represent the areas with the highest relative need in McLean County. Normal, with a population of 52,707 is a major city in McLean County with a ranking of 3. Since it is not one of the highest Health Equity Needs ZIP codes in McLean County, data specific to Normal is not included in the table below or highlighted in this report.

Exhibit 4: High Health Equity Needs ZIP Codes - McLean County, 2021

City/Town	ZIP Code	Health Equity Ranking	Population
Bellflower	61724	5	488
Bloomington	61701	5	33,884
Stanford	61774	4	896
Ellsworth	61737	4	471
Chenoa	61726	4	2,505
Colfax	61728	4	1,395
Arrowsmith	61722	4	506
Gridley	61744	4	1,924
McLean	61754	4	1,121
Saybrook	61770	4	1,044

Out of the three Bloomington ZIP codes, 61704 and 61705, both have a Health Equity ranking of 1 (low socioeconomic need). Downs ZIP code 61736 also has a ranking of 1. The Health Equity Index for McLean County is illustrated below in Exhibit 5. Additionally, see Appendix 5 for county rankings and the national indexes for all ZIP codes in McLean County.

61744 61726 Gridley Chenoa 61728 Colfax 61737 61774 61770 Stanford Ellsworth Saybrook 61722 rrowsmith 61754 Bellflowe McLean

Exhibit 5: McLean County Health Equity Index, 2021

Source: Conduent Healthy Communities Institute, 2021

Throughout this report, available disparities will be highlighted for the ZIP codes with the highest county rankings (4 or 5) or high health equity needs.

MAP LEGEND greater need →

Demographics

Age and Gender

The median age in McLean County is 34.4 years of age. This is lower than the median age for Illinois (39.2 years). Approximately 22 percent of persons in McLean County are less than 18 years of age, 42 percent are 18 to 44 years, 22 percent are 45 to 64 years of age and 13.5 percent are over the age of 65. Forty-nine percent of the population in McLean County is male and 51 percent is female. Exhibit 6 depicts population by age group according to Conduent Healthy Communities Institute, Claritas, 2022.

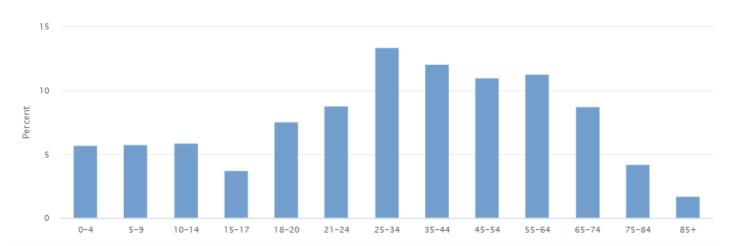


Exhibit 6: Population by Age - McLean County, 2022

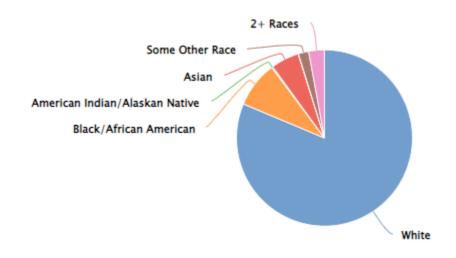
Population by Age Group	County: McLean	
Population by Age Group	Persons	% of Population
0-4	9,903	5.69%
5-9	10,048	5.77%
10-14	10,255	5.89%
15-17	6,488	3.73%
18-20	13,187	7.57%
21-24	15,339	8.81%
25-34	23,280	13.37%
35-44	21,045	12.09%
45-54	19,208	11.03%
55-64	19,659	11.29%
65-74	15,252	8.76%
75-84	7,381	4.24%
85+	3,045	1.75%

Source: Conduent Healthy Communities Institute, Claritas, 2022.

Race and Ethnicity

The population of McLean County by race is illustrated in Exhibit 7 by both pie chart and table. Population by ethnicity is illustrated in Exhibit 8.

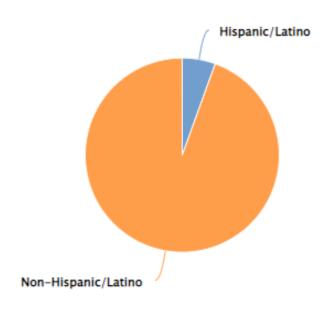
Exhibit 7: Population by Race - McLean County, 2022



Population by Race	County: McLean	
	Persons	% of Population
White	141,566	81.32%
Black/African American	14,686	8.44%
American Indian/Alaskan Native	396	0.23%
Asian	9,032	5.19%
Native Hawaiian/Pacific Islander	74	0.04%
Some Other Race	3,322	1.91%
2+ Races	5,014	2.88%

Source: Conduent Healthy Communities Institute, Claritas, 2022.

Exhibit 8: Population by Ethnicity - McLean County, 2022



Population by Ethnicity	County: McLean	
ropulation by Ethnicity	Persons	% of Population
Hispanic/Latino	9,650	5.54%
Non-Hispanic/Latino	164,440	94.46%

Source: Conduent Healthy Communities Institute, Claritas, 2022

Household/Family

There are 67,245 households in McLean County. The average household size is 2.43 persons (Conduent Healthy Communities Institute, Claritas, 2022). The percent of the households in McLean County that are single parent households is 22.2 percent. This is lower than the Illinois percentage (25 percent). In comparison to other counties in Illinois, the McLean County single parent household value is in the worst 50th – 75th percentile range (yellow indicator), but is trending favorably in a statistically significant direction (Conduent Healthy Communities Institute, American Community Survey, 2016 – 2020). The percentage of single parent households in Bloomington ZIP code 61701, one of the areas of high Health Equity Needs in McLean County, is 34.9 percent which is in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois (Conduent Healthy Communities Institute, American Community Survey, 2015 – 2019). See Exhibit 9 below.

Exhibit 9: Percent of Single Parent Households - McLean County versus Bloomington ZIP code 61701, 2016 - 2020

McLean County Bloomington 61701
22% 34.9%

IL Zip Codes

Source: Conduent Healthy Communities Institute, American Community Survey, 2016 - 2020.

The percent of people ages greater than 65 years living alone in McLean County is 29.1 percent. This is in the best 0 – 50th percentile (green indicator) compared to other counties in Illinois, is higher than the Illinois value (28.9 percent), is not statistically different from the prior value (28.5 percent) and is trending favorably, but not in a statistically significant direction (Conduent Health Communities Institute, American Community Survey, 2016 – 2020). The percent of people greater than 65 years of age living alone in Bloomington ZIP code 61701 is 41.3 percent. This is in the worst 25th percentile range (red indicator) in comparison to other ZIP codes in Illinois (Conduent Healthy Communities Institute, American Community Survey, 2015 - 2019). See Exhibit 10 below.

Exhibit 10: People 65+ Living Alone - McLean County versus Bloomington ZIP code 61701, 2016 - 2020

McLean County
29.1%
Bloomington - 61701
41.3%
IL Zip Codes

Source: Conduent Healthy Communities Institute, American Community Survey, 2016 - 2020.

Economics

Income

The median household income for McLean County is \$73,004. This is lower than the median household income for Illinois which is \$76,001 (Conduent Healthy Communities Institute, Claritas, 2022). Exhibit 11 below compares the median household incomes for McLean County and Bloomington ZIP code 61701, which is a Health Equity Needs area.

\$73,004 \$80,000 \$70,000 \$60,000 \$40,000 \$30,000 \$20,000 \$10,000 \$0 McLean County

Bloomington ZIP code 61701

Exhibit 11: Comparison of Median Household Income for McLean County and Bloomington 61701; 2022

Source: Conduent Healthy Communities Institute, Claritas, 2022.

People Living Below the Poverty Level

In addition to the median household income being lower, the percent of people living below the poverty level is higher in Bloomington ZIP code 61701 than McLean County overall. In McLean County, the percent of people living below the federal poverty line is 15.2 percent. This rate is in the worst $50^{th} - 75^{th}$ percentile range (yellow indicator) compared to other counties in Illinois, is higher than the Illinois value of 12 percent, is increasing significantly over time and does not meet the Healthy People 2030 target of eight percent (Conduent Healthy Communities Institute, American Community Survey, 2016 - 2020). In Bloomington ZIP code 61701, 21.1 percent of people live below the poverty level. This is in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois (Conduent Healthy Communities Institute, American Community Survey, 2015 - 2019). See Exhibit 12 below.

Exhibit 12: People Living Below the Poverty Level in McLean County - Bloomington ZIP code 61701, 2016 - 2020

McLean County
15.2%
Bloomington – 61701
21.1%

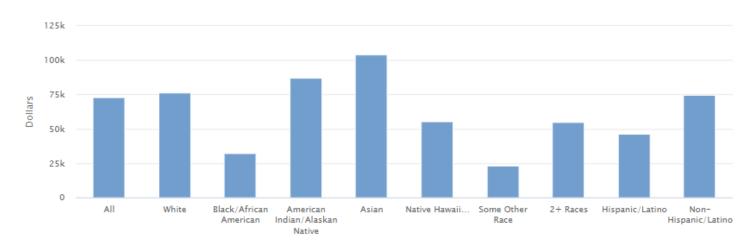
IL Counties
IL Zip Codes

Source: Conduent Healthy Communities Institute, American Community Survey, 2016 - 2020.

Income by Race/Ethnicity

Exhibit 13 below depicts median household income by race/ethnicity for McLean County. Within McLean County, the median household income varies with Asians having the highest median household income at \$103,819 and respondents indicating "Some Other Race" and Blacks/African American having the lowest at \$22,937 and \$32,263 respectively.

Exhibit 13: Median Household Income by Race/Ethnicity – McLean County, 2022.



Modine Hausahald Insome by Dage/Ethnicity	County: McLean
Median Household Income by Race/Ethnicity	Value
All	\$73,004
White	\$76,487
Black/African American	\$32,263
American Indian/Alaskan Native	\$86,919
Asian	\$103,819
Native Hawaiian/Pacific Islander	\$55,357
Some Other Race	\$22,937
2+ Races	\$55,125
Hispanic/Latino	\$46,132
Non-Hispanic/Latino	\$74,513

Source: Conduent Healthy Communities Institute, Claritas, 2022.

Employment

The percentage of the civilian labor force ages 16 years and over that is unemployed in McLean County is 2.8 percent. This is lower than the Illinois value of 5.18 percent. The percent of the civilian labor force that is unemployed in Bloomington ZIP code 61701 is 4.86 percent. The three common industries of employment are financial or insurance industry at 18.2 percent, educational services at 14.6 percent and healthcare at 12.6 percent (Conduent Healthy Communities Institute, Claritas, 2022).

Education

Educational Level

Ninety-five percent of the population ages 25 and over in McLean County possess a high school diploma or higher and 45.6 percent have a bachelor's degree or higher (Conduent Healthy Communities Institute, Claritas, 2022). Illinois State University, Illinois Wesleyan University and Heartland Community College are all located in McLean County.

High School Graduation Rates

The four-year high school graduation rate for McLean County is 91.6 percent and meets the Healthy People 2030 target of 90.7 percent. Over time, the McLean County value has increased, but not significantly. McLean County's high school graduation rate is higher than the graduation rate for Illinois of 85.4 percent (Conduent Healthy Communities Institute, County Health Rankings, 2017 - 2018). Updated data by school districts in McLean County (Illinois State Board of Education, Illinois Report Card, 2020-2021) is illustrated in Exhibit 14 below.

Exhibit 14: Graduation Rates by School District - McLean County, 2020 - 2021

Location	*Graduation Rates 2021	
Bloomington District	83%	
87		
Chenoa District 9	Data Not Available	
Heyworth CUSD 4	98%	
Leroy CUSD 2	96%	
Lexington CUSD 7	90%	
McLean Unit 5	89%	
Olympia CUSD16	94%	
Ridgeview CUSD 19	78%	
Tri-Valley CUSD 3	99%	
McLean County	90.9%	
Average		

^{*}Possible COVID-19 Impact to 2021 data.

Source: Illinois State Board of Education, Illinois Report Card, 2020 - 2021.

Student-to-Teacher Ratio

This indicator shows the average number of publicschool students per teacher in the region. It does not measure class size. According to the National Center for Education Statistics, larger schools tend to have higher student-teacher ratios. There are 14.5 students per teacher in McLean County (Conduent Healthy Communities Institute, National Center for Education Statistics, 2019 - 2020). This rate is in the worst 50th – 75th percentile range (yellow indicator) compared to other counties in Illinois. Over time the value is decreasing, but not significantly. See Exhibit 15 below.

Exhibit 151: Student to Teacher Ratio for McLean County, 2019-2020



Source: Conduent Healthy Communities Institute, National Center for Education Statistics, 2019 - 2020 Assistance with Education.

Healthcare Resources in the Defined Community

Type of Facility	Location
Hospital	Normal
Hospital	Bloomington
Federally Qualified Health Center (FQHC)	Bloomington
Community Clinic	Normal
County Health Department	Bloomington
	Hospital Federally Qualified Health Center (FQHC) Community Clinic

In the 2021 County Health Rankings, McLean County ranked second out of 102 Illinois counties for Clinical Care. This is in the best 0 – 50th percentile range (green) compared to other counties in Illinois. The ranking is based on a summary composite score calculated from the following measures: uninsured, primary care physicians, mental health providers, dentists, preventable hospital stays, diabetic monitoring, and mammography screening (Conduent Healthy Communities Institute, County Health Rankings, 2021).

Key findings: Community Description

- McLean County is a predominately White community with a nearly equal percent of males and females.
- McLean County's high school graduation rate is higher than the state.
- The median household income for McLean County is higher than that for Bloomington ZIP code 61701 and there
 is a higher percent of people living below the poverty level in Bloomington ZIP code 61701 in comparison to
 McLean County.
- The percentages of single parent households and people over the age of 65 years living alone in Bloomington ZIP code 61701 are both higher than the county percentages.
- McLean County ranked 2 out of 102 Illinois counties for Clinical Care.

c) Health Status

Mortality

Nationally, the top ten leading causes of death in 2020 were heart disease, cancer, COVID-19, accidents (unintentional injuries), stroke (cerebrovascular disease), chronic lower respiratory diseases (chronic obstructive pulmonary disease—COPD; chronic bronchitis; emphysema; asthma), Alzheimer's disease, diabetes, influenza and nephrotic syndrome and nephrosis (Centers for Disease Control and Prevention, National Center for Health Statistics, 2020) FastStats-Leading Causes of Death (cdc.gov).

In Illinois in 2020, heart disease, malignant neoplasms (cancer), COVID-19, accidents, cerebrovascular disease (stroke), chronic lower respiratory diseases, Alzheimer's disease, diabetes, kidney disease and flu/pneumonia were the top ten causes of death (Illinois Department of Public Health, Vital Statistics, Death Statistics, 2022). The first eight causes of death are in the same order as the national leading causes of death.

McLean County's leading causes of death follow the national and state pattern. Heart disease and malignant neoplasms (cancer) continued to be the leading causes of death in McLean County from 2013 through 2020. With the exception of 2020, when COVID-19 was added as the fourth leading cause of death that year, over the past eight years (2013 – 2020) the same six causes of mortality could be found in the top five leading causes of death each year in McLean County: heart disease, malignant neoplasms (cancer), chronic lower respiratory disease, accidents, Alzheimer's and cerebrovascular disease (stroke). The first three were present in the top five leading causes of death for each year (Illinois Department of Public Health, Vital Statistics, Death Statistics, 2022). See Exhibit 16 below.

For McLean County in 2020, there were a total of 1,429 deaths and 78.5 percent (rounded) of the deaths (1,120) were due to one of the top ten leading causes of death for that year (Illinois Department of Public Health, Vital Statistics, Death Statistics, 2022). See Exhibit 17 below.

Exhibit 16: Top Five Leading Causes of Death, All Ages - McLean County, 2013 - 2020

	2013	2014	2015	2016	2017	2018	2019	2020
1	Heart Disease							
2	Malignant Neoplasms							
3	Chronic Lower Respiratory Diseases	Chronic Lower Respiratory Diseases	Accidents	Chronic Lower Respiratory Diseases	Accidents	Alzheimers	Chronic Lower Respiratory Diseases	Alzheimer's Disease
4	Cerebrovas cular Diseases	Alzheimer's Disease	Chronic Lower Respiratory Diseases	Alzheimer's Disease	Cerebrovas cular Diseases	Chronic Lower Respiratory Diseases	Alzheimer's Disease	COVID-19
5	Accidents	Cerebrovasc ular Diseases	Alzheimer's Disease	Accidents	Chronic Lower Respiratory Diseases	Accidents	Accidents	Chronic Lower Respiratory Diseases

Source: Illinois Department of Public Health, Death Statistics, Statewide Leading Causes of Death by Resident County, Illinois Residents, 2013 – 2020, https://dph.illinois.gov/data-statistics/vital-statistics/death-statistics.html, May 2022.

Exhibit 17: Top Ten Leading Causes of Death - McLean County, 2020

Rank	Cause of Death	Number of Deaths	Percent of Total Deaths
1	Heart Diseases	337	23.6%
2	Malignant Neoplasms	260	18.2%
3	Alzheimer's Disease and Dementia	125	8.7%
4	COVID-19	110	7.7%
5	Chronic Lower Respiratory Diseases	81	5.7%
6	Unintentional Injuries/Accidents	78	5.5%
7	Cerebrovascular Diseases	54	3.8%
8	Diabetes	33	2.3%
9	Influenza	21	1.5%
10	Pneumonia	21	1.5%
TOTAL		1,120	78.5%

Source: Illinois Department of Public Health, Death Statistics, Statewide Leading Causes of Death by Resident County, Illinois Residents, McLean County, 2020, https://dph.illinois.gov/data-statistics/vital-statistics/death-statistics.html, May 2022.

A preliminary review of McLean County Health Department vital records data for January through November 2021 indicates a similar pattern in the leading causes of death: heart disease, malignant neoplasms, COVID-19 and chronic lower respiratory diseases (McLean County Health Department, Vital Records, preliminary data, 2021).

The State of Illinois tracks injury deaths, which includes three categories: 1) accidents (poisoning; firearm; falls; motor vehicle traffic; suffocation; drowning; fire), 2) suicide; and 3) homicide. Poisoning is the leading cause of injury death in Illinois with 3,462 deaths in 2020, followed by falls (1,356 deaths) and motor vehicle traffic (1,266 deaths) (Illinois Department of Public Health, Death Statistics, Injury Deaths, Illinois Residents, 2020).

In McLean County, deaths by injury (including accidents, suicide and homicide) from 2010 through 2020 ranged from a low of 46 (2011) in one year to a high of 111 (2020). Death by accidents ranged from a low of 30 (2011) to a high of 80 (2017). Death by suicide ranged from a low of 14 (2011) to a high of 26 (2013 and 2020). Death by homicide ranged from a low of 0 (2010) to a high of 11 (2018) (Illinois Department of Public Health, Death Statistics, Injury Deaths, Illinois Residents, 2010 - 2020). The number and type of injury deaths in McLean County are listed in Exhibit 18 below.

Exhibit 18: Number of Injury Deaths by Type - McLean County, 2010 - 2020

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Injury											
Accidents	53	30	75	44	61	79	59	80	64	75	78
Suicide	17	14	19	26	19	20	24	20	20	18	26
Homicide	0	2	4	3	2	0	5	6	11	3	4
TOTAL/AII											
Types	71	46	98	75	83	100	88	106	96	98	111

Source: Illinois Department of Public Health, Death Statistics, Injury Deaths by Resident County and Intent, Illinois Residents, McLean County, 2010 – 2020, https://dph.illinois.gov/data-statistics/vital-statistics/death-statistics.html, May 2022.

For McLean County, the University of Wisconsin Center for Population Health's County Health Rankings, released in 2022, reported an injury (planned and unplanned events) death rate of 58 deaths per 100,000 population. This rate is better than both the Illinois rate of 70 per 100,000 and the Top U.S. Performers rate of 61 per 100,000. County Health Rankings also reported a suicide rate of 13 deaths per 100,000 for McLean County, worse than both the Illinois rate (11 per 100,000) and U.S. Top Performers rate (11 per 100,000) (University of Wisconsin Center for Population Health, County Health Rankings, McLean County, Injury Deaths, 2016-2020).

Drug overdose deaths (from any drug) in McLean County have decreased since 2018 and 2019 when 32 overdose deaths were recorded in 2018 and 31 in 2019. In 2020, the number decreased to 20 (Illinois Department of Public Health, Death Statistics, Drug Overdose Deaths, Illinois Residents, by County, 2018 – 2020).

Child Mortality

In Illinois, the five leading causes of death in children ages one to 17 years has changed very little from 2016 through 2020. Accidents (unintentional injury), assaults (homicide), intentional self-harm (suicide), malignant neoplasms (cancer), and congenital malformations/deformations/chromosomal abnormalities have consistently been the top five leading causes of death (Illinois Department of Public Health, Vital Records, Death Statistics, Leading Causes of Death by Age Group, Illinois Residents, 2016 – 2020). See Exhibit 19 below.

Exhibit 19: Leading Causes of Mortality in Children, Ages One to 17 - Illinois, 2016 - 2020

2016	2017	2018	2019	2020
# Deaths = 550	# Deaths = 606	# Deaths = 539	# Deaths = 505	# Deaths = 552
Accidents	Accidents	Accidents	Accidents	Accidents
(Unintentional	(Unintentional	(Unintentional	(Unintentional	(Unintentional
Injury)	Injury)	Injury)	Injury)	Injury)
Assaults	Assaults	Assaults	Assaults	Assaults
(Homicide)	(Homicide)	(Homicide)	(Homicide)	(Homicide)
Malignant	Intentional Self-	Intentional Self-	Intentional Self-	Intentional Self-
Neoplasms	Harm	Harm	Harm	Harm
(Cancer)	(Suicide)	(Suicide)	(Suicide)	(Suicide)
Intentional Self-	Malignant	Malignant	Malignant	Malignant
Harm	Neoplasms	Neoplasms	Neoplasms	Neoplasms
(Suicide)	(Cancer)	(Cancer)	(Cancer)	(Cancer)
Congenital	Congenital	Congenital	Congenital	Congenital
Malformations,	Malformations,	Malformations,	Malformations,	Malformations,
Deformations and				
Chromosomal	Chromosomal	Chromosomal	Chromosomal	Chromosomal
Abnormalities	Abnormalities	Abnormalities	Abnormalities	Abnormalities

Source: Illinois Department of Public Health, Vital Records, Death Statistics, Leading Causes of Death, 2016 – 2020, https://dph.illinois.gov/data-statistics/vital-statistics/death-statistics.html, May 2022.

For McLean County, the University of Wisconsin Center for Population Health's County Health Rankings, released in 2022, reported a child mortality rate (the number of deaths occurring before age 18 per 100,000 population) of 40 per 100,000. This is better than the Illinois rate of 50 per 100,000 and the same as Top U.S. Performers (University of Wisconsin Center for Population Health, County Health Rankings, 2017 – 2020).

Life Expectancy at Birth

The life expectancy from birth is 80 years for McLean County. This is in the best 0 – 50th percentile range (green indicator) compared to other counties in Illinois, is better than the Illinois value of 79.4 years and not statistically different from the prior value of 80.2 years (Conduent Healthy Communities Institute, County Health Rankings, 2017 – 2019). See Exhibit 20 below.

Exhibit 20: Life Expectancy for McLean County, 2017 – 2019



80 years

Source: Conduent Healthy Communities Institute, County Health Rankings, 2017 – 2019.

Disparities

McLean County life expectancy, when viewed by race and ethnicity, shows significant differences, with Black or African American residents having a life expectancy of 75.1 years compared to Asian residents at 95.1 years, Hispanic or Latino residents at 89 years and an overall rate of 80 years. (Conduent Healthy Communities Institute, County Health Rankings, 2017 – 2019). See Exhibit 21 below.

Asian
Black/African American
Hispanic
White
Overall

0 20 40 60 80 100
years

Exhibit 21: Life Expectancy by Race/Ethnicity – McLean County, 2017 - 2019

Source: Conduent Healthy Communities Institute, County Health Rankings, 2017 – 2019.

Significantly worse than the overall valueNo significant difference with the overall value

Self-Perceptions of Health

In 2021, 14.8 percent of McLean County adults reported poor or fair to the question, "How is your general health?" This is in the best 0 - 50th percentile (green indicator) compared to other counties in Illinois and is lower than the United States value of 18.6 percent (Conduent Healthy Communities Institute, CDC - Places, 2019).

Twenty-one percent of respondents to the 2021 McLean County Community Health Survey reported having good overall physical health, while 62 percent rated themselves as having average health and 17 percent rated themselves as having poor physical health. See Exhibit 22 below.

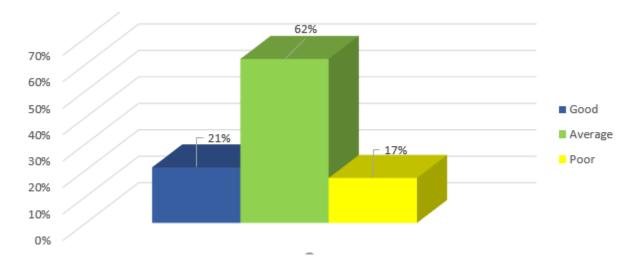


Exhibit 22: Self-Assessment of Overall Physical Health for McLean County, 2021

Source: McLean County Community Health Survey, 2021.

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's self-perception of health. The following relationships were found using correlational analyses:

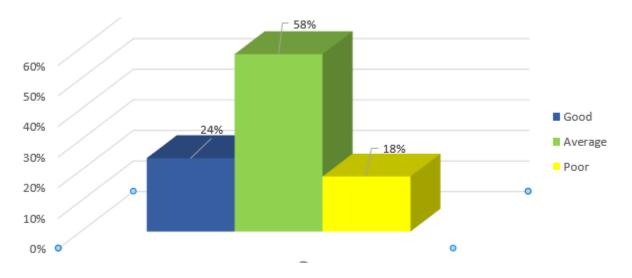
Overall physical health tends to be rated higher by those with higher education and income.

Comparison to the 2018 McLean County Community Health Survey

Compared to the 2018 McLean County Community Health Survey, there was a decrease in the percentage of adults reporting "good" physical health (from 27 percent in 2018 to 21 percent in 2021), an increase in the percentage of people reporting "average" physical health (60 percent in 2018 to 62 percent in 2021) and an increase in the percentage of people reporting "poor" physical health (from 13 percent in 2018 to 17 percent in 2021).

Twenty-four percent of respondents to the 2021 McLean County Community Health Survey reported having good overall mental health, while 58 percent rated themselves as having average mental health and 18 percent rated themselves as having poor mental health. See Exhibit 23 below.

Exhibit 23: Self-Assessment of Overall Mental Health - McLean County, 2021



Source: McLean County Community Health Survey, 2021.

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's self-perception of mental health. The following relationships were found using correlational analyses:

Overall mental health tends to be rated higher by older people, and those with higher education and income.

Comparison to the 2018 McLean County Community Health Survey

The percent of survey respondents indicating that they have good mental health decreased from 28 percent in 2018 to 24 percent in 2021. The percent of respondents indicating that they have average mental health decreased by two percent between survey years and the percentage of survey respondents indicating that they have poor mental health increased from 12 percent in 2018 to 18 percent in 2021.

Key findings: Health Status

- Heart disease remains the leading cause of death in McLean County, 2013 2020.
- Life expectancy for Blacks or African Americans is lower than the life expectancy for McLean County.
- The percentage of McLean County survey respondents who rated their overall physical health as poor increased from 2018 2021.
- The percentage of McLean Couny survey respondents who rated their mental health as poor increased from 2018 – 2021.
- Overall physical health tends to be rated higher by those with higher education and income.
- There was a decrease in the percentage of adults reporting "good" physical health, from the 2018 Community Health Survey (27 percent) to the 2021 survey (21 percent), and an increase in those reporting "poor" physical health, from 13 percent in 2018 to 17 percent in 2021.
- There was a decrease in the percentage of adults reporting "good" mental health, from the 2018 Community Health Survey (28 percent) to the 2021 survey (24 percent), and those reporting "poor" mental health increased from 12 percent to 18 percent.

d) Access to Care

Choice of Medical Care

The 2021 McLean County Community Health Survey respondents were asked to choose the type of healthcare they use when they are sick. Six options were available to select. Seventy-two percent of respondents selected clinic or doctor's office as their choice of medical care followed by urgent care at 19 percent, doesn't seek care at five percent, emergency department at four percent and the health department at one percent. See Exhibit 24.

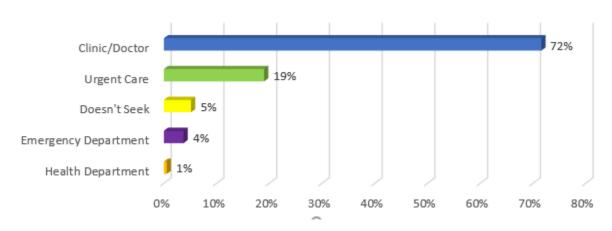


Exhibit 24: McLean County General Population Choice of Medical Care, 2021

Source: McLean County Community Health Survey, 2021.

Social Determinants of Health Correlations

Several characteristics show a significant relationship with choice of medical care. The following relationships were found using correlational analyses:

- **Clinic/Doctor's Office** tends to be used more often by women, older people, White people and those with higher education and income.
- Urgent Care tends to be used more often by women, younger people and White people.
- Emergency Department tends to be used more often by Black or African American people, those that are less educated, have a lower income and by people with an unstable (e.g. homeless) housing environment. Emergency Departments are used less often by White people.
- **Do Not Seek Medical Care** tends to be selected by younger people, those that are less educated and have a lower income.

Comparison to the 2018 McLean County Community Health Survey

The results for the 2021 survey were similar to the 2018 survey for the general population with a difference of two percent or less for all responses.

Choice of Medical Care for At-Risk Population

At-risk (defined as Medicaid eligible) survey respondents' choice of medical care was lower than the general population for the clinic or doctor's office at 57 percent compared to 72 percent. Visits to urgent care were the same for at-risk survey respondent and the general population, at 19 percent. Seven percent of the at-risk respondents do not seek medical attention when needed compared to five percent for the general population. Sixteen percent of survey

respondents for the at-risk population selected the emergency room as their primary choice of medical care in comparison to four percent for the general population. See Exhibit 25 below.

Clinic/Doctor
Urgent Care
ED
Doesn't Seek
7%
Health Department
2%
0%
10%
20%
30%
40%
50%
60%

Exhibit 25: McLean County At-Risk Population Choice of Medical Care, 2021

Source: McLean County Community Health Survey, 2021.

Comparison to the 2018 McLean County Community Health Survey

Compared to the 2018 McLean County Community Health Survey for the at-risk population, there was an increase in accessing medical care via clinic/doctor's office visits from 53 percent to 57 percent. There was a decrease in urgent care visits from 27 percent to 19 percent, a seven percent increase in "doesn't seek care when needed" and a reduction in emergency room as the primary choice for medical care from 19 percent to 16 percent.

Personal Physician

Eighty-nine percent of respondents from the 2021 McLean County Community Health Survey reported that they have a physician while 11 percent stated that they do not. See Exhibit 26 below.

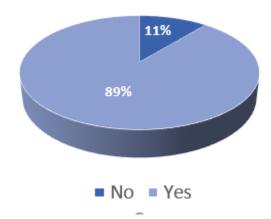


Exhibit 26: Primary Care Physician for McLean County Survey Respondents, 2021

Source: McLean County Community Health Survey, 2021

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's likelihood of having a primary care physician. The following relationships were found using correlational analyses:

• **Having a personal physician** tends to be rated higher by women, older people, and those with higher education and income levels.

Comparison to the 2018 McLean County Community Health Survey

Results were the same for the 2018 and 2021 survey.

Access to Health Services

Exhibit ___ below shows the percent of respondents from the 2021 McLean County Community Health Survey who were not able to receive medical care, prescription medication, dental care and/or counseling in the past year when needed. Respondents reported the following results respectively; 15 percent, 13 percent, 18 percent and 17 percent. See Exhibit 27 below for an illustration of this data.

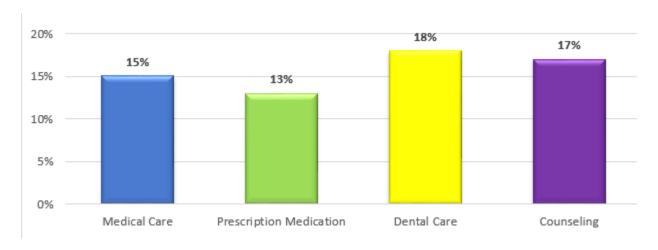


Exhibit 27: McLean County Survey Respondents Not Able to Access Care, 2021

Source: McLean County Community Health Survey, 2021.

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's ability to access care when needed. The following relationships were found using correlational analyses:

- Access to medical care tends to be higher for older people, and those with higher education and income.
- Access to prescription medications tends to be higher for White people, those with higher education and income, and those with a more stable housing environment (e.g., have housing and not worried about losing it).
- Access to dental care tends to be higher for White people, those with higher education and higher income.
 Access to dental care tends to be lower for Hispanic or Latino people.
- Access to counseling tends to be rated higher by women, older people and those with higher income.

Comparison to the 2018 McLean County Community Health Survey

Access to medical and dental care and counseling decreased from the 2018 to the 2021 survey. Survey respondents who needed medical care but were not able to receive it increased from 10 percent in 2018 to 15 percent in 2021. Lack of access for prescription medication increased from 11 percent in 2018 to 13 percent in 2021. Dental services were more accessible this year as the percentage of respondents not able to access dental care decreased from 19 percent in 2018 to 18 percent in 2021. The inability to access counseling services increased from ten percent in 2018 to 17 percent in 2021.

Access to Medical Care

The top three reasons for not being able to access medical care are: 1) Too long to wait (32 percent) 2) Could not afford co-pay (28 percent) and 3) No insurance (23 percent). See Exhibit 28 below.

32% 35 28% ■ Too Long to Wait 30 Could Not Afford Co-Pay 23% 25 No Insurance 20 ■ No Trust 15 8% Transportation 8% 7%

Discrimination

Exhibit 28: Causes of Inability to Access Medical Care for McLean County Survey Respondents, 2021

Source: McLean County Community Health Survey, 2021

Access to Prescription Medication

10

5

The top three reasons for not being able to access prescription medication are: 1) Could not afford co-pay (33 percent), 2) No insurance (20 percent), and 3) Pharmacy refused insurance (9 percent). See Exhibit 29 below.

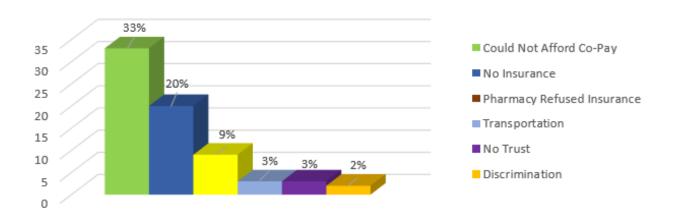


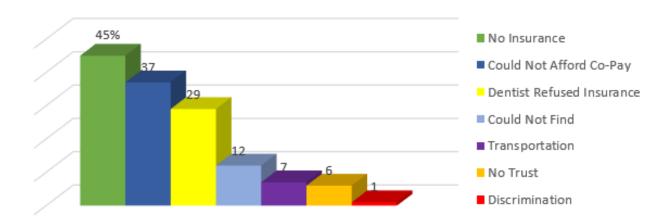
Exhibit 29: Causes of Inability to Access Prescription Medication for McLean County Survey Respondents, 2021

Source: McLean County Community Health Survey, 2021

Access to Dental Care

The top three reasons for the inability to access dental care are: 1) No insurance (45 percent), 2) Could not afford copay (37 percent), and 3) Dentist refused insurance (29 percent). See Exhibit 30 below.

Exhibit 30: Causes of Inability to Access Dental Care for McLean County Survey Respondents, 2021



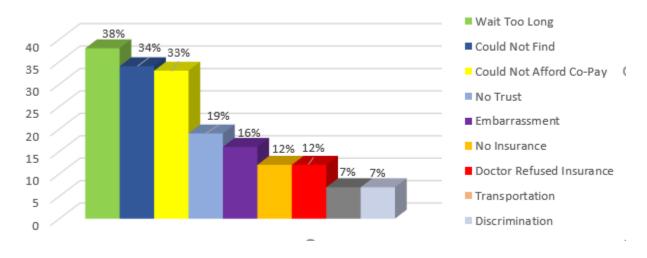
Source: McLean County Community Health Survey, 2021

Related to access to dental care, in McLean County there are 67 dentists per 100,000 population. This ratio is in the best $0-50^{th}$ percentile range (green indicator) compared to other counties in Illinois, but is worse than the Illinois ratio (81 dentists/100,000 population). It is not statistically different from the prior value (67 dentists/100,000 population) but is trending favorably in a statistically significant direction (Conduent Healthy Communities Institute, County Health Rankings, 2019).

Access to Counseling

The top three reasons for the inability to access counseling are: 1) Wait too long (38 percent), 2) Could not find (34 percent), and 3) Could not afford co-pay (33 percent). See Exhibit 31 below.

Exhibit 31: Causes of Inability to Access Counseling for McLean County Survey Respondents, 2021



Source: McLean County Community Health Survey, 2021

Medically Underserved Area

The Index of Medical Underservice (IMU) score for the McLean County Service Area is 49.2. The lowest score (highest need) is 0; the highest score (lowest need) is 100. To qualify for designation, the IMU score must be less than or equal to 62.0. This score applies to the Medically Underserved Area (MUA) or Medically Underserved Populations (MUP) as a whole, and not to individual portions of it (Human Resources and Services Administration, 2022).

Health Professionals Shortage Area

McLean County has multiple Health Professional Shortage Area (HPSA) scores in the disciplines of primary care, mental health and dental care. As a Federally Qualified Health Center (FQHC), Chestnut Health Systems has unique HPSA scores applicable only to Chestnut Family Health Center. The table below identifies HPSA scores for McLean County as posted on the Health Resources and Services Administration's (HRSA) site https://data.hrsa.gov/tools/shortage-area/hpsa-find as of May 4, 2022. See Exhibit 32 below for an illustration of this information. Please note that HRSA is in the process of reviewing and updating HPSA scores and that the scores reflected below should be confirmed on the HRSA site prior to use in any funding applications.

Exhibit 32: McLean County Health Professionals Shortage Area, 2022

Discipline	HPSA ID	HPSA Name	Designation Type	HPSA FTE	HPSA Score	Update Date
Primary Care	1172132184	Low-income – Bloomington / Normal	Low-income Population HPSA	.84	9	09/09/2021
Primary Care	11799917QB		Federally Qualified Health Center	0	17	09/09/2021
Dental Health	61799917A7	•	Federally Qualified Health Center	0	25	09/09/2021
Mental Health	717848486	McLean County	Geographic HPSA	8.22	16	09/09/2021
Mental Health	71799917HI		Federally Qualified Health Center	0	17	09/09/2021

Source: Health Resources and Services Administration, 2022.

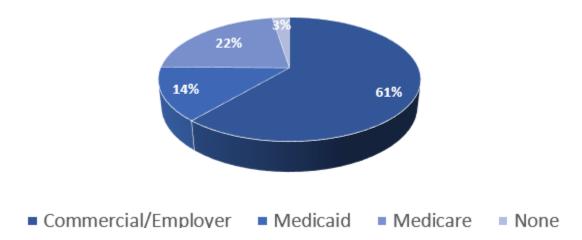
https://data.hrsa.gov/tools/shortage-area/hpsa-find

Healthcare Coverage

Nearly 80 million people are enrolled in Medicaid in 2022; this equates to 24.2 percent of the US population. In Illinois, three million people (25.8 percent) use Medicaid as their primary medical coverage. Additionally, 34,011 McLean County residents are enrolled in Medicare (Center for Medicare and Medicaid 2022, and Illinois Department of Healthcare and Family Services, 2021).

Ninety-seven percent of respondents of the 2021 McLean County Community Health Survey reported having either private insurance, Medicare or Medicaid, while three percent reported not having any insurance. Exhibit 33 shows the breakdown.

Exhibit 33: Types of Insurance Coverage for McLean County Survey Respondents, 2021



Source: McLean County Community Health Survey, 2021.

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's ability to access or have insurance. The following relationships were found using correlational analyses:

- Medicare tends to be used more frequently by women, older people, White people, Black people, and those
 with lower education and income.
- **Medicaid** tends to be used more frequently by women, Black people, and those with lower education and income, and those with an unstable (e.g. homeless) housing environment.
- Commercial/Employer Insurance is used more often by women, younger people, White people, those with higher education and income. Private insurance tends to be rated lower by Black people, and those with an unstable (e.g. homeless) housing environment.
- **No Insurance** tends to be reported more often by those with lower education and income, and those with an unstable (e.g. homeless) housing environment.

Comparison to the 2018 McLean County Community Health Survey

There was a decrease in the number of respondents reporting that they did not have insurance with 10 percent reporting that they did not have insurance in 2018 compared to three percent in 2021.

Preventive Screenings

Mammogram

Seventy-five percent of women from the 2021 McLean County Community Health Survey indicated they have had a mammography/breast exam within the last five years.

Social Determinants of Health Correlations

Several characteristics show a significant relationship with women's frequency of having had a mammography/breast exam. The following relationships were found using correlational analyses:

• Frequency of mammography/breast exams tends be rated higher by older women, White women, those with higher education and income. Frequency of breast exams tends to be rated lower by Black or African American women and those with an unstable (e.g. homeless) housing environment.

The percentage of women aged 50 - 74 in McLean County who have had a mammogram in the last two years is 72.9 percent. This is in the best $0 - 50^{th}$ percentile range (green indicator) compared to other counties in Illinois, but does not meet the Healthy People 2030 target (77.1 percent). Saybrook ZIP code 61770 is in the worst 25^{th} percentile range (red indicator) compared to other ZIP codes in Illinois with 72.2 percent of women aged 50 - 74 years who have had a mammogram in the past two years (Conduent Healthy Communities Institute, CDC – Places, 2018). See Exhibit 34 below.

Exhibit 34: Mammograms in Past Two Years (Ages 50 – 74 years) – McLean County versusSaybrook, 2018







McLean County 72.9%

Saybrook – 61770 72.2%

Source: Conduent Healthy Communities Institute, CDC – Places, 2018

Disparities

The lowest percentages for mammogram screenings for ages 54 – 74 years occur in:

• Saybrook - ZIP code 61770 (72.2 percent).

Cervical Exam/Screening

Forty-five percent of women from the 2021 McLean County Community Health Survey indicated they have had a cervical exam/pap smear within the last five years.

Social Determinants of Health Correlations

Several characteristics show a significant relationship with women's frequency of having a cervical exam/pap smear. The following relationships were found using correlational analyses:

• Frequency of cervical exams/pap smears_tends be rated higher by younger women, White women, those with higher education and income. Frequency of cervical exams /pap smears tends to be rated lower by Black or African American women and those with an unstable (e.g. homeless) housing environment.

The percentage of women aged 21 – 65 years in McLean County who have had a cervical cancer screening test is 83.2 percent. This is a Pap test every three years for women 21 - 29 years; and a Pap test every years years or an HPV test and Pap test every five years for women 30-65 years. This is in the best 0 – 50th percentile range (green indicator) compared to other counties in Illinois, but does not meet the Healthy People 2030 target (84.3 percent). Bloomington ZIP code 61701 is in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois with 82 percent of women aged 21 - 65 years who have had a cervical cancer screening test (Conduent Healthy Communities Institute, CDC – Places, 2018). See Exhibit 35 below:







McLean County 83.2%

Bloomington – 61701 82%

Source: Conduent Healthy Communities Institute, CDC – Places, 2018

Disparities

 The lowest percentages for cervical cancer screenings for ages 21 – 64 years occur in Bloomington ZIP code 61701 (82 percent)

Colorectal Screening

Forty-four percent of people over the age of 50 from the 2021 McLean County Community Health Survey indicated that they have had a colorectal screening within the last five years.

Social Determinants of Health Correlations

Several characteristics show a significant relationship with men's frequency of having a colorectal screening. The following relationships were found using correlational analyses

Frequency of colorectal exams tends be rated higher by older people, and those with higher income. Prostate Exam

Forty-three percent of men from the 2021 McLean County Community Health Survey indicated they have had a prostate exam within the last 5 years.

Social Determinants of Health Correlations

Several characteristics show a significant relationship with men's frequency of having a prostate exam. The following relationships were found using correlational analyses:

- Frequency of prostate exams tends be rated higher by older men and those with higher education and income.
- Frequency of prostate exams tends to be rated lower by those with an unstable (e.g. homeless) housing environment.

Key Findings: Access to Care

- Compared to the 2018 McLean County Community Health Survey:
 - There was an increase in accessing medical care via clinic/doctor's office visits from 53 percent to 57 percent. There was a decrease in urgent care visits from 27 percent to 19 percent, a seven percent

- increase in "doesn't seek care when needed" and a reduction in emergency room as the primary choice for medical care from 19 percent to 16 percent.
- Survey respondents who needed medical care but were not able to receive it increased from 10 percent in 2018 to 15 percent in 2021.
- The inability to access counseling services increased from ten percent in 2018 to 17 percent in 2021.
- Emergency room tends to be selected as a response for "choice of medical care" more often by Black people, those that are less educated, have a lower income and by people with an unstable (e.g. homeless) housing environment.
- Having a personal physician tends to be rated higher by women, older people and those with higher education and income levels.
- McLean County is in the best 0 50th percentile range (green indicator) for preventive cancer screenings.

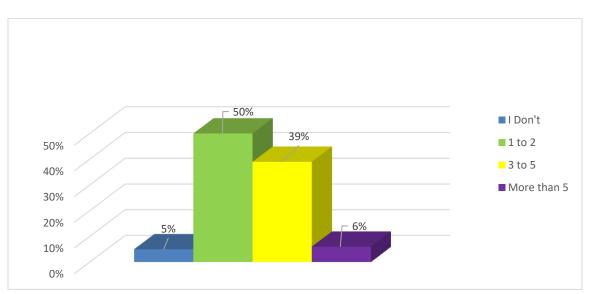
e) Nutrition, Weight and Exercise

Nutrition

2021 McLean County Community Health Survey

The 2021 McLean County Community Health Survey data show that 55 percent of McLean County residents report no consumption or low consumption (one to two servings per day or less) of fruits and vegetables (see Exhibit 36).

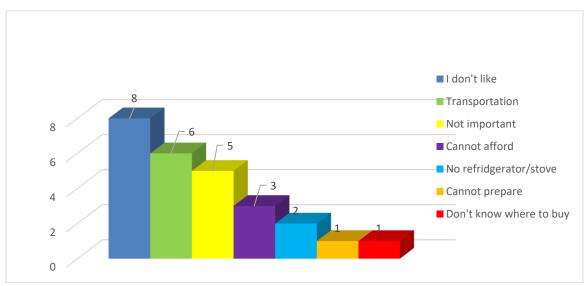
Exhibit 36: Responses for "On a typical day, how many servings of fruits and/or vegetables do you eat?" for McLean County Survey Respondents, 2021



Source: McLean County Community Health Survey, 2021

Of the respondents who indicated not eating fruits or vegetables, not liking them, and transportation issues were the two most frequently cited reasons for failing to consume fruits and vegetables. Note: The chart below is based on counts, not percentages, as there was a low number of responses for this question. See Exhibit 37 below.

Exhibit 37: Responses for "On a typical day, why don't you eat fruits and/or vegetables?" for McLean County Survey
Respondents, 2021



Source: McLean County Community Health Survey, 2021

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's frequency of fruit and vegetable consumption. The following relationships were found using correlational analyses:

 Frequency of eating fruits and vegetables tends to be higher for Whites and individuals with a higher education and income.

Comparison to the 2018 McLean County Community Health Survey

The 2021 McLean County Community Health Survey data for adult consumption of three or more serving of fruits and vegetables per day remains the same since 2018, at 45 percent. There was a small change from 2018 to 2021 in regards to why respondents don't eat fruits and vegetables. For both survey years, not liking them remains the same, however, not being able to afford them in 2018 was replaced with transportation issues in 2021.

Illinois Behavioral Risk Factor Surveillance System

According to the Illinois Behavioral Risk Factor Surveillance System, 13.7 percent of McLean County adults consume five or more servings of fruits and vegetables per day, fewer than the national rate of 23.4 percent (Conduent Healthy Communities Institute, Illinois Behavioral Risk Factor Surveillance Systems, 2007 - 2009).

Illinois Youth Survey

An average of 30 percent of eighth, tenth and twelfth graders ate fruit two times per day in the last seven days and an average of 12 percent ate three or more vegetables per day in the last seven days (Illinois Youth Survey, 2020).

Weight Status

Adults

Approximately 34 percent of McLean County residents are classified as obese. This is higher than the Illinois rate of 32 percent (County Health Rankings, 2022). Three of the high Health Equity Needs ZIP Codes in McLean County have percentages that are greater than one percent higher than the percentage for McLean County; Bloomington ZIP code

61701: 35.7 percent, Colfax ZIP code 61728: 36 percent and Ellsworth ZIP code 61737: 36 percent (Conduent Healthy Communities Institute, CDC – Places, 2019). All three ZIP codes are in the worst 50th – 75th percentile range (yellow indicator) compared to other ZIP codes in Illinois.

Eighth, Tenth and Twelth Graders

According to the 2020 Illinois Youth Survey, an average of ten percent of eigth, tenth and twelfth grade students are obese in McLean County. This is higher than the 2018 percent (9.6 percent). See Exhibit 38 below.

12 11% 10% 9% 8 4 4 2 2

Exhibit 38: Percent of 8th, 10th and 12th Grade Illinois Youth Survey Respondents who are Obese - McLean County, 2020

Source: Illinois Youth Survey, 2020.

0

Exercise

The percentage of McLean County adults (ages 20 and up) who did not participate in any leisure-time activities (physical activities other than their regular job) during the past month is 19.9 percent. This rate is in the best 0 - 50th percentile range (green indicator) when compared to other counties in Illinois, is trending favorably in a statistically significant direction and meets the Healthy People 2020 target of 32.6 percent (Conduent Healthy Communities Institute, County Health Rankings, 2019). See Exhibit 39 below for an illustration of this data.

■8th ■ 10th ■ 12th

Exhibit 39: Adults 20+ who are Sedentary - McLean County, 2008 - 2019





Obese



McLean County 19.9

Source: Conduent Healthy Communities Institute, County Health Rankings, 2019.

2021 McLean County Community Health Survey

Results from the 2021 McLean County Community Health Survey show that 24 percent of respondents indicated that they do not exercise at all, while 62 percent exercise one to two times per week or more. See Exhibit 40 below.

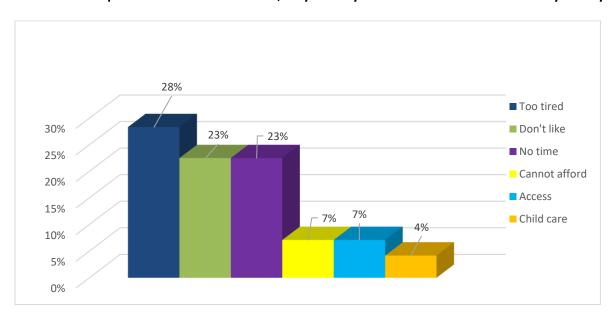
35%
24%
27%
1 to 2 days per week
25%
20%
14%
More than 5 per week
15%
10%
5%

Exhibit 402: Exercise Frequency for McLean County Survey Respondents, 2021

Source: McLean County Community Health Survey, 2021

Respondents who indicated that they do not exercise were asked to cite their reasons for not exercising. The most common reasons were being too tired, not liking exercise and not enough time to exercise. See Exhibit 41 below.

Exhibit 41: Responses for "In the last week, why didn't you exercise?" for McLean County Survey Respondents, 2021



Source: McLean County Community Health Survey, 2021

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's frequency of exercising. The following relationships were found using correlational analyses:

• **Frequency of exercise** tends to be rated higher people by with higher income.

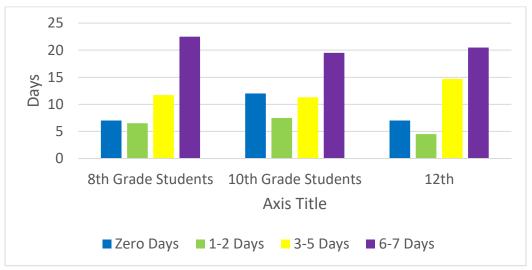
Comparison to the 2018 McLean County Community Health Survey

The percentage of adults not participating in any physical activity remains the same at 20 percent from 2018 to 2021. Also, the reasons remain the same from survey to survey year: too tired, not liking to exercise, and not enough time.

Illinois Youth Survey

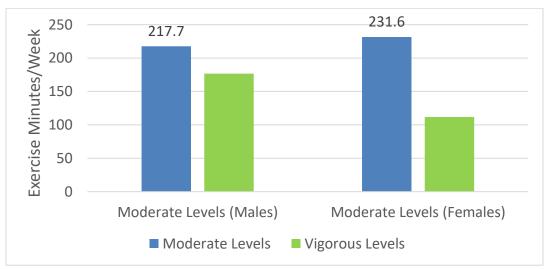
According to the 2020 Illinois Youth Survey, an average of 27 percent of McLean County eighth, tenth and twelfth graders were physically active for at least 60 minutes for five days during the past seven days. The average percent of eight, tenth and twelfth graders who were active zero days for at least 60 minutes in the last seven days was 8.6 percent (Illinois Youth Survey, 2020). Male students completed on average 217.7 minutes of moderate intensity exercise and 176.6 minutes of vigorous exercise. Female students completed on average 231.6 minutes of moderate intense exercise and 111.8 minutes of vigorous intense exercise. See Exhibits 42 and 43 below for an illustration of this data.

Exhibit 42: Responses for "How many days did you exercise in the last 7 days?" for Illinois Youth Survey Respondents – McLean County, 2020.



Source: Illinois Youth Survey, 2020

Exhibit 43: Completed Exercise Minutes based on Intensity Levels 8th, 10th and 12th Grade Illinois Youth Survey Respondents – McLean County, 2020.



Source: McLean County Illinois Youth Survey, 2020

Key findings: Nutrition, Weight and Exercise

- Six percent of the adult population consumes the recommended servings of fruits and vegetables a day.
- An average of 30 percent of eighth, tenth and twelfth graders ate fruit two times per day in the last seven days.
- Approximately 34 percent of McLean County residents are classified as obese. This is higher than the Illinois rate of 32 percent.
- Three areas in McLean County that have a high Health Equity Needs ZIP code, also report having a higher percentage of obesity.
 - \circ
 - o Colfax ZIP code 61728: 36 percent
 - o Ellsworth ZIP code 61737: 36 percent
- Approximately 9.6 percent of eighth, tenth and twelfth grade students are obese in McLean County.

- Twenty percent of the adult population indicated that they do not exercise at all.
- An average of 27 percent of McLean County eighth, tenth and twelfth graders were physically active for at least 60 minutes for five days during the past seven days.

f) Social Determinants of Health

Built Environment

Physical Activity

According to the Robert Wood Johnson Foundation, "the built environment describes physical or manmade features such as sidewalks, streetlights, traffic and parks that may promote or discourage activity." The built environment is important to consider when assessing physical activity as there is strong evidence suggesting an association between access to recreational resources, bikeability and walkability of neighborhoods as well as safe, aesthetically pleasing environments with increased physical activity and reduced obesity rates (Robert Wood Johnson Foundation, Built Environment and Physical Activity, 2007).

In McLean County, 83.9 percent of residents have access to exercise opportunities, meaning they live reasonably close to a park or recreational facility. McLean County falls in the best 0 - 50th percentile range (green indicator) when compared to other counties in Illinois for access to exercise opportunities, despite the county's rural expanse. It is lower than the Illinois value of 90.8 percent (Conduent Healthy Communities Institute, County Health Rankings, 2020).

According to the U.S. Department of Agriculture Food Environment Atlas, 2016, there are 0.12 recreation and fitness centers per 1,000 population in McLean County, more than the national average of 0.06 per 1,000 population.

Nationally, only 0.5 percent of American workers, 16 years and older, commute to work by bicycle. In Illinois the percent is 0.5 while the percent for McLean County is 0.6 (U.S. Census Bureau, 2016-2020 American Community Survey 5-Year Estimates).

Food Security and Access to Food

Food Environment Index

The food environment index combines two measures of food access: the percentage of the population that is low-income and has low access to a grocery store, and the percentage of the population that did not have access to a reliable source of food during the past year (food insecurity). The index ranges from 0 (worst) to 10 (best) and equally weights the two measures. The food environment index for McLean County is 8.1 which is in the best $0-50^{th}$ percentile range (green indicator) compared to other counties in Illinois. It is worse, however, than the Illinois index of 8.7 but better than the prior value for McLean County in 2018 of 7.7. The index for McLean County is trending favorably but is not statistically significant. (Conduent Healthy Communities Institute, County Health Rankings, 2021). See Exhibit 44 below.

Exhibit 44: Food Environment Index - McLean County, 2020 - 2021









McLean County 8.1

Source: Conduent Healthy Communities Institute, County Health Rankings, 2021.

Grocery Store Density

McLean County falls in the worst 50th – 75th percentile range (yellow indicator) in comparison to other counties in Illinois for grocery store density with 0.16 supermarkets and grocery stores per 1,000 population (Conduent Healthy Communities Institute, U.S. Department of Agriculture – Food Environment Atlas, 2016). This is the same as the 2014 value for McLean County. See Exhibit 45 below.

Exhibit 45: Grocery Store Density – McLean County, 2014 - 2016



Prior Value (0.16)

McLean County 0.16 Stores / 1,000 population

Source: Conduent Healthy Communities Institute, U.S. Department of Agriculture-Food Environment Atlas, 2016.

People with Low Access to a Grocery Store

The percentage of the general population living more than one mile from a supermarket or large grocery store if in an urban area, or more than 10 miles from a supermarket or large grocery store if in a rural area in McLean County is 27.4 percent. This is in the worst 25th percentile range (red indicator) compared to other counties in Illinois and equal to the prior value for McLean County of 27.4 percent (Conduent Healthy Communities, U.S. Department of Agriculture – Food Environment Atlas, 2015). See Exhibit 46 below. Additionally, an area located west of Main St. in Bloomington ZIP code 61701 was designated by the U.S. Department of Agriculture as a food desert (City of Bloomington Existing Conditions Report, 2014).

Exhibit 46: People with Low Access to a Grocery Store - McLean County, 2010 - 2015

Prior Value

(27.4%)



McLean County 27.4%

Source: Conduent Healthy Communities, U.S. Department of Agriculture – Food Environment Atlas, 2015.

Access to a Grocery Store for Low-income Adults

Low access is defined as living more than one mile from a supermarket or large grocery store if in an urban area and more than 10 miles from a supermarket or large grocery store if in a rural area. The percentage of low-income adults who do not have adequate access to a grocery store or supermarket in McLean County is 9.8 percent. McLean County is in the worst 25th percentile range (red indicator) for this measure when compared to other counties in Illinois. This is higher than the value of 8.2 percent for McLean County in 2010 (Conduent Healthy Communities Institute, U.S. Department of Agriculture – Food Environment Atlas, 2015). See Exhibit 47 below.

Exhibit 47: Access to a Grocery Store for Low-Income Adults in McLean County, 2010 - 2015



Prior Value (8.2%)

McLean County 9.8%

Source: Conduent Healthy Communities Institute, U.S. Department of Agriculture – Food Environment Atlas, 2015.

Supplemental Nutrition Assistance Program (SNAP) Certified Stores

SNAP, previously called the Food Stamp Program, is a federal assistance program that provides low-income families with electronic benefit transfers (EBTs) that can be used to purchase food. The purpose of the program is to assist low-income households in obtaining adequate and nutritious diets. According to the program, over 45 million people from over 20 million households receive SNAP benefits (Conduent Healthy Communities, 2022).

There are 0.7 stores/1,000 population in McLean County that are certified to accept SNAP benefits. This is in the worst 50th - 75th percentile range (yellow indicator) in comparison to other counties in Illinois. Over time, the McLean County value is increasing, but not significantly (Conduent Healthy Communities, U.S. Department of Agriculture – Food Environment Atlas, 2017).

Fast Food Restaurant Density

The fast food restaurant density is in the worst 25th percentile range (red indicator) compared to other counties in Illinois (see Exhibit 48) with 0.81 fast food restaurants per 1,000 in McLean County. It is trending unfavorably but is not statistically significant and is greater than the 2014 value for McLean County of 0.73 restaurants per 1,000 population. (Conduent Healthy Communities Institute, U.S. Department of Agriculture – Food Environment Atlas, 2016).

Exhibit 48: Fast Food Restaurant Density - McLean County, 2014 - 2016







McLean County
0.81
Restaurants / 1,000 population

Source: Conduent Healthy Communities Institute, U.S. Department of Agriculture – Food Environment Atlas, 2016.

Farmers' Market Density

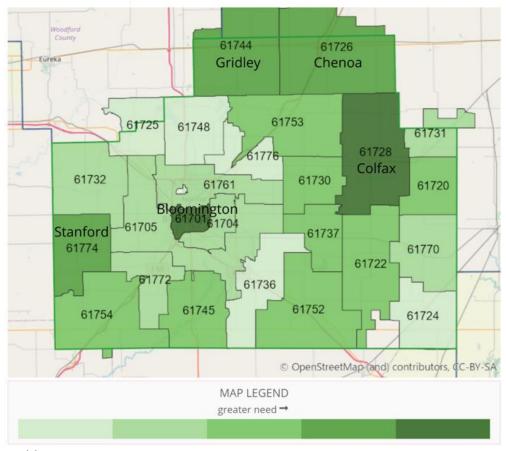
There are 0.02 Farmers' Markets per 1,000 population in McLean County (Conduent Healthy Communities Institute, U.S. Department of Agriculture – Food Environment Atlas, 2018). This is worse than the U.S. value of 0.03 markets/1,000 population. Over time the value is decreasing, but not significantly.

Food Insecurity

Food Insecurity Index

Conduent Healthy Communities Institute's Food Insecurity Index considers validated indicators related to income, household environment, and well-being to identify areas at highest risk for experiencing food insecurity. The national index value (from 0 to 100) is calculated for each ZIP code, census tract, and county in the U.S. Communities. The highest index values are estimated to have the highest food insecurity, which is correlated with household and community measures of food-related financial stress such as Medicaid and SNAP enrollment. Ranks and colors help to identify the relative level of need within a community or service area. The national index value for each location is compared to all other similar locations within the community area to assign a relative rank (from 1 to 5) locally. These ranks are used to color the map and chart for the Food Insecurity Index, with darker coloring associated with higher relative need (Conduent Healthy Communities Institute, 2021). See Exhibit 49 below for the Food Insecurity Index for McLean County.

Exhibit 49: Food Insecurity Index - McLean County, Conduent Health Communities Institute, 2021



Source: Conduent Healthy Communities, 2021

McLean County has two ZIP codes with a ranking of 5, or the highest relative need, in the county: Bloomington ZIP code 61701 and Colfax ZIP code 61728. Three other ZIP codes have a ranking of 4: Stanford ZIP code 61774, Gridley ZIP code 61744 and Chenoa ZIP code 61726. The above areas are estimated to have the highest food insecurity in McLean County.

Food Insecurity: Adults and Children

The percentage of the population that experienced food insecurity in McLean County at some point during 2019 is 9.5 percent (Conduent Healthy Communities Institute, Feeding America, 2019). This rate is in the best $0-50^{th}$ percentile range (green indicator) compared to other counties in Illinois and lower than the Illinois rate of 9.5 percent. It is, however, higher than the prior value for McLean County (2018) and is trending favorably albeit not statistically significant. See Exhibit 50 below for an illustration of the data stated above.

Exhibit 50: Food Insecurity Rate - McLean County, 2018 - 2019







McLean County 9.5%

Source: Conduent Healthy Communities, Feeding America, 2019.

The percentage of children (under 18 years of age) living in households that experienced food insecurity at some point during 2019 is 9.5 percent (Conduent Healthy Communities Institute, Feeding America, 2019). This is in the best 0 - 50th percentile range (green indicator) compared to other counties in Illinois, lower than the Illinois value of 12 percent and lower than the 2018 value of 10.7 percent.

The percent of food insecure children in households with incomes above 185 percent of the federal poverty level who are likely not income-eligible for federal nutrition assistance in McLean County is 31 percent. This is in the worst 25th percentile range (red indicator) in comparison to other counties in Illinois. It is also higher than the 2018 value of 23 percent (Conduent Healthy Communities Institute, Feeding America, 2019). See Exhibit 51 below for an illustration of this data.

Exhibit 51: Food Insecure Children Likely Ineligible for Assistance - McLean County, 2018 - 2019







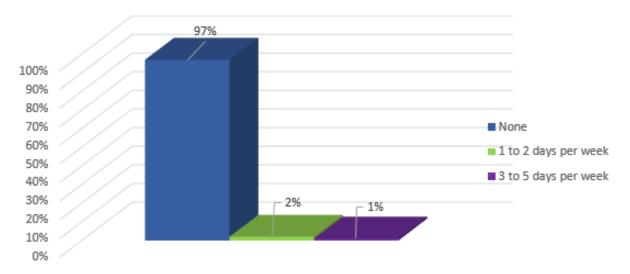
McLean County 31%

Source: Conduent Healthy Communities Institute, Feeding America, 2019.

McLean County Community Health Survey and Food Insecurity

Survey respondents for the 2021 McLean County Community Health Survey indicated that two percent go hungry one to two days/week and one percent go hungry three to five days/week. See Exhibit 52 below for an illustration for frequency of hunger.

Exhibit 52: Responses for "How Often Do You Go Hungry?" McLean County Survey Respondents, 2021



Source: McLean County Community Health Survey, 2021

Social Determinants of Health Correlations

Several characteristics show a significant relationship with frequency of hunger. The following relationships were found using correlational analyses:

• **Frequency of hunger** tends be rated higher by men, younger people, those with lower education and income and those with an unstable (e.g. homeless) housing environment.

Comparison to the 2018 McLean County Community Health Survey

In 2018, 96 percent of survey respondents reported that they did not go hungry. This is one percent lower than the 2021 survey results. Three percent reported that they go hungry one to two days/week which is one percent higher than in 2021. One percent reported that they go hungry three to five days/week which is equal to the 2021 results.

Housing

A few housing-related indicators, available in Conduent Healthy Communities, are listed below. For more in-depth data resources about McLean County pertaining to housing and other topics, explore the McLean County Regional Planning Commission (MCRPC) data dashboards and white papers. MCRPC shares analysis and data about demographic characteristics, housing and economic benchmarks, and transportation options for McLean County, Bloomington, and Normal (BN) at McLean County Regional Planning Commission | Home (mcplan.org). Note that the demographic data may differ slightly than the data in this report as different sources and/or timeframes are utilized. Data sets can also be downloaded.

BN Vitals: Socioeconomic and demographic indicators including employment, business, industry, real estate, taxes, equity and quality of place.

McLean County, IL Housing Data Dashboard: Housing types, tenure, value in McLean County and distribution in Bloomington-Normal.

BN Mobile: Transportation infrastructure, safety, public transit and mobility scores for walking, transit access and bicycling.

The MCRPC website also hosts a growing archive of local and regional plans, studies and datasets:

- MCRPC website: https://mcplan.org/
- BN Vitals: https://mcplan.org/data-and-maps/bn-vitals-dashboard
- BN Home, Regional Housing Study (2017):
 https://mcplan.org/file/493/2017 BN%20Home Regional%20Housing%20Study FINAL.pdf
- McLean County, IL Housing Data Dashboard: https://mcplan.org/projects-and-programs/bn-home-/mclean-county-housing-dashboard
- Affordable Housing White Papers: https://mcplan.org/projects-and-programs/bn-home-/research
- BN Mobile: https://mcplan.org/data-and-maps/bn-mobile-dashboard

Severe Housing Problems

The percentage of households in McLean County with at least one of the following four housing problems, 1) overcrowding, 2) high housing costs, 3) lack of kitchen, or 4) lack of plumbing facilities is 13.2 percent. This is in the worst 25th percentile range (red indicator) compared to other counties in Illinois. This is lower than the Illinois value of 16.9 percent and the prior value for McLean County of 13.8 percent. Over time, however, the McLean County value is increasing significantly (Conduent Healthy Communities Institute, County Health Rankings, 2013 - 2017). See Exhibit 53 below.

Exhibit 53: Severe Housing Problems - McLean County, 2013 - 2017









McLean County 13.2%

Source: Conduent Healthy Communities Institute, County Health Rankings, 2013 - 2017.

Homeownership

The percentage of all housing units that are occupied by homeowners in McLean County is 58.8 percent. This is in the worst 25th percentile range (red indicator) compared to other counties in Illinois. It is equal to the prior value for McLean County but worse than the Illinois value (59.7 percent). Over time, the value for McLean County is decreasing significantly (Conduent Healthy Communities Institute, American Community Survey, 2015-2019). In addition to McLean County, Bloomington ZIP code 61701 is also in the worst 25th percentile range (red indicator) for homeownership, compared to other ZIP codes in Illinois. The indicators are illustrated in Exhibit 54 shown below.

Exhibit 54: Homeownership - McLean County versus Bloomington - 61701, 2015 - 2019

McLean County

Bloomington - 61701

IL Counties

IL Zip Codes

47.9%

S

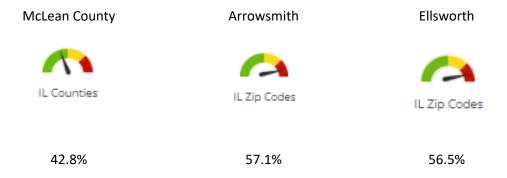
Source: Conduent Healthy Communities Institute, American Community Survey, 2015 - 2019.

Housing Affordability

Spending a high percentage of household income on rent can create financial hardship, especially for lower-income renters. With a limited income, paying a high rent may not leave enough money for other expenses, such as food, transportation and medical care. Moreover, high rent reduces the proportion of income a household can allocate to savings each month (Conduent Healthy Communities Institute, 2022).

In McLean County, 42.8 percent of renters are spending 30 percent or more of their income on housing or rent. This is in the best 0 – 50th percentile range (green indicator) compared to other counties in Illinois and is lower than the Illinois value of 47 percent. Over time the McLean County value is decreasing significantly (Conduent Healthy Communities Institute, American Community Survey, 2016 – 2020). Compared to other ZIP codes in Illinois, two high Health Equity Needs ZIP codes, Ellsworth ZIP code 61737 and Arrowsmith ZIP code 61722, are in the worst 25th percentile range (red indicator). Three high Health Equity Needs ZIP codes, Bloomington ZIP code 61701, McLean ZIP code 61754 and Saybrook ZIP code 61770 are in the worst 50th - 75th percentile range (yellow indicator) (Conduent Healthy Communities Institute, American Community Survey, 2015-2019). See Exhibit 55 below.

Exhibit 553: Percent of Income Spent on Rent - McLean County, 2015-2020



Source: Conduent Healthy Communities Institute, American Community Survey, 2016 - 2020.

Overcrowded Housing

The percent of overcrowded households in McLean County is .8 percent. This indicator shows the households where there are more people than rooms of all types, besides bathrooms. McLean County is in the best $0-50^{th}$ percentile range (green indicator) compared to other counties in Illinois and lower than the Illinois value of 2.5 percent (Conduent Healthy Communities Institute, American Communities Survey, 2015 – 2019). Over time, the McLean County value is decreasing, but not significantly.

Housing Security

According to the 2021 McLean County Community Health Survey, 85 percent of survey respondents reported that they have housing and are not worried about losing it. Four percent reported that they are homeless and ten percent reported that they have housing but are worried about losing it. See Exhibit 56 below.

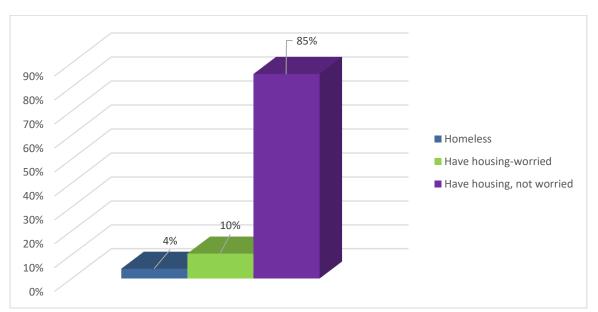


Exhibit 56: Living Arrangements for McLean County Survey Respondents, 2021

Source: McLean County Community Health Survey, 2021.

Social Determinant of Health Correlations

There are no correlations.

Comparison to the 2018 McLean County Community Health Survey

Compared to the 2018 survey results, the percent of homeless individuals decreased from 8 to 4 percent in 2021, however, the percent of people who have housing but are worried about losing it increased from seven to ten percent.

Transportation

Household without a Vehicle

The percent of households in McLean County that do not have a vehicle is 6.2 percent. This is in the worst 50 – 75th quartile range compared to other counties in Illinois. The percent of households without a vehicle in Bloomington ZIP code 61701 is 11.1 percent which is in the worst 25th percentile compared to other counties in Illinois. Over time the value is increasing, but not significantly (Conduent Healthy Communities Institute, American Community Survey, 2015 – 2019). See Exhibit 57 below.

Exhibit 574: Households without a Vehicle - McLean County versus Bloomington - 61701, 2015- 2019

McLean County

Bloomington - 61701

IL Counties

IL Zip Codes

11.1%

Source: Conduent Healthy Communities Institute, American Community Survey, 2015 - 2019.

Workers Commuting by Public Transportation

The percentage of workers ages 16 years and over in McLean County who commute to work by public transportation is 1.1 percent. This is in the best 0-50th percentile range (green indicator) compared to other counties in Illinois. It is, however, lower than the Illinois value of 9.5 percent and does not meet the Healthy People 2030 target of 5.3 percent. For Bloomington ZIP code 61701, 1.4 percent of workers ages 16 years and older commute to work by public transportation. (Conduent Healthy Communities, American Community Survey, 2015 - 2019).

Workers Who Drive Alone to Work

The percentage of workers ages 16 years and over in McLean County who get to work by driving alone is 80.8 percent. This is in the best 0 - 50th percentile range (green indicator) in comparison to other counties in Illinois. It is, however, higher than the Illinois value of 72.9 percent and is trending unfavorably but is not statistically significant (Conduent Healthy Communities Institute, American Community Survey, 2015 - 2019.

Public Safety and Prevention

Violent Crime Rate

Violent crimes include murder and non-negligent manslaughter, rape, robbery and aggravated assault. The violent crime rate in McLean County over time has decreased. See Exhibit 58 below for an illustration of this statistically significant trend (Conduent Healthy Communities Institute, County Health Rankings, Uniform Crime Reporting - FBI, 2006 - 2016).

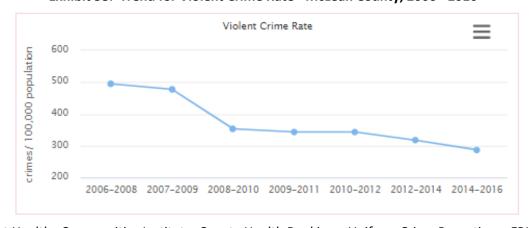


Exhibit 58: Trend for Violent Crime Rate - McLean County, 2006 - 2016

Source: Conduent Healthy Communities Institute, County Health Rankings, Uniform Crime Reporting – FBI, 2006 - 2016.

For the measurement period of 2014 - 2016, there were 287.3 crimes per 100,000 population. This is in the worst 50th – 75th percentile range (yellow indicator) compared to other counties in Illinois, but is better than the Illinois value of 403.1 crimes per 100,000 population and better than the prior value for McLean County (2012-2014) of 317.4 crimes per

100,000 population (Conduent Healthy Communities Institute, County Health Rankings, Uniform Crime Reporting – FBI, 2014 - 2016). See Exhibit 59 below.

Exhibit 59: Violent Crime Rate - McLean County, 2006 - 2016





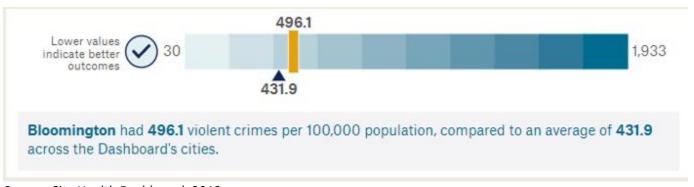


McLean County 287.3 Crimes / 100,000 population

Source: Conduent Healthy Communities Institute, County Health Rankings, Uniform Crime Reporting – FBI, 2014 - 2016.

According to the City Health Dashboard, which includes community data for 750 cities across the United States, Bloomington had 496.1 crimes per 100,0000 population compared to an average of 431.9 across the 750 cities dashboard in 2019 (City Health Dashboard, 2019). See Exhibit 60 below for an illustration of this data.

Exhibit 60: Violent Crime Rate - Bloomington, 2019



Source: City Health Dashboard, 2019.

Domestic Violence Offenses

There were 2,881 domestic violence offenses reported by law enforcement in 2019 for McLean County. This is higher than the previous year's value of 2,021 (Conduent Healthy Communities Institute, Illinois State Police, 2019). Over time, the McLean County value is increasing, but not significantly.

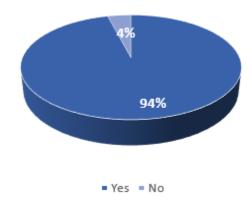
Hate Crimes

In 2019, McLean County had zero hate crime offenses reported by law enforcement. This is lower than the 2018 number of offenses of two (Conduent Healthy Communities Institute, Illinois State Police, 2019). Over time, the McLean County value is decreasing significantly.

Feeling Safe at Home

According to the 2021 McLean County Community Health Survey, 95 percent of survey respondents reported feeling safe where they live while five percent reported that they do not feel safe where they live. See Exhibit 61 below.

Exhibit 61: Responses for "Do you feel safe where you live?" for McLean County Survey Respondents, 2021



Source: McLean County Community Health Survey, 2021

Social Determinants of Health Correlations

Several characteristics show a significant relationship with perceptions of safety. The following relationships were found using correlational analyses:

Safety where you live tends to be rated lower by women, older people, and those with lower income.

Comparison to the 2018 McLean County Community Health Survey

There was a one percent increase in the percent of people reporting that they do not feel safe where they live from 2018 to 2021.

Transportation Safety

Alcohol-Impaired Driving Deaths

The percentage of motor vehicle crash deaths with alcohol involvement for McLean County is 31.8 percent. This is in the worst 50th - 75th percentile range (yellow indicator) compared to other counties in Illinois. It is also higher than the Illinois value of 31.1 percent and does not meet the Healthy People 2030 target of 28.3 percent (Conduent Healthy Communities Institute, County Health Rankings, 2015 - 2019). The overall value for McLean County is decreasing over time, but not significantly. See Exhibit 62 below.

Exhibit 62: Alcohol-Impaired Driving Deaths - McLean County, 2008 - 2019









McLean County 31.8%

Source: Conduent Healthy Communities Institute, County Health Rankings, 2015 - 2019.

Falls

Falls are the leading cause of unintentional injury and injury death. Falls commonly produce bruises, hip fractures and head trauma. These injuries can increase the risk of early death and can make it difficult for older adults to live independently. Most fatal falls occur among adults ages 65 or older (Conduent Healthy Communities Institute, 2022).

Age-Adjusted Death Rate due to Falls

There are 14 deaths per 100,000 population in McLean County due to falls. This is in the worst 50 – 75th percentile range (yellow indicator) compared to other counties in the United States. It is higher than the Illinois value of 8.1 deaths per 100,000 population and does not meet the Healthy People 2020 target of 7.2 deaths per 100,000 population (Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2018 – 2020). Over time the McLean County value is increasing significantly. See Exhibit 63 below for an illustration of this data.

Exhibit 63: Age-Adjusted Death Rate due to Falls – McLean County, 2007 - 2020









McLean County 14 deaths/100,000 population

Source: Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2007 - 2020.

Age-Adjusted Emergency Room Rate due to Unintentional Falls

The age-adjusted emergency room rate due to unintentional falls in McLean County is 192.7 emergency room visits per 10,000 population ages 18 years and older. This is in the best 0 - 50th percentile range (green indicator) in comparison to other counties in Illinois (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). Three high Health Equity Needs ZIP codes fall in the worst 25th percentile range compared to other ZIP codes in Illinois: Bloomington ZIP code 61701, Bellflower ZIP code 61724 and Chenoa ZIP code 61726.

Disparities

The highest emergency room rates due to unintentional falls occur in:

- individuals 65 years and older (394 emergency room visits per 10,000 population 18+)
- individuals 85 years and older (1,093 emergency room visits per 10,000 population 18+)
- females (225.4 emergency room visits per 100,000 population 18+)
- Blacks or African Americans (343.7 emergency room visits per 10,000 population 18+)
- Bloomington ZIP code 61701, Chenoa ZIP code 61726 and Bellflower ZIP code 61724

Age-Adjusted Hospitalization Rate due to Unintentional Falls

The age-adjusted hospitalization rate due to unintentional falls in McLean County is 45.8 hospitalizations per 10,000 population ages 18 years and older. This is in the worst 25th percentile range (red indicator) in comparison to other counties in Illinois and higher than the value for Illinois of 41.1 hospitalizations per 10,000 population 18 years and older (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). Four high Health Equity Needs ZIP

codes fall in the worst 25th percentile range compared to other ZIP codes in Illinois; Bloomington ZIP code 61701, Bellflower ZIP code 61724, Chenoa ZIP code 61726 and Stanford ZIP code 61774. See Exhibit 64 below.

Exhibit 64: Age-Adjusted Hospitalization Rate Due to Unintentional Falls - McLean County, 2018 - 2020





McLean County
45.8
Hospitalizations / 10,000 population 18+ years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Disparities

The highest hospitalizations due to unintentional falls occur in:

- individuals 65 years and older (155.6 hospitalizations per 10,000 population 18+)
- individuals 85 years and older (589 hospitalizations per 10,000 population 18+)
- Bloomington ZIP code 61701, Bellflower ZIP code 61724, Chenoa ZIP code 61726 and Stanford ZIP code 61774.

The Illinois Department of Public Health reports that every 20 minutes in the United States, an older adult dies from a fall, with many more injured by falls. Risk factors that can be changed or modified to help prevent falls include: lower body weakness, vitamin D deficiency, difficulties with walking and balance, use of medicines, vision problems, foot pain, poor footwear, home hazards (e.g., uneven steps, throw rugs, clutter, no handrails along the stairs or in the bathroom) (Illinois Department of Public Health, Older Adult Falls, 2022).

In Illinois, from 2005 to 2014, the age-adjusted rate of fall deaths increased from 27.9 per 100,000 in 2005 to 45.7 per 100,000 in 2014. In 2014, the fall death rate in males was approximately 70 times higher than in females. The highest rate increase was among persons ages 85 and over (Illinois Department of Public Health, Older Adult Falls, Special Emphasis Report: Fall Injuries Among Older Adults, 2008 - 2014, January 2017). In the United States, in 2014 - 2017, unintentional falls accounted for 13 percent of emergency department visits by people ages 60 and over. The percentage increased with age: 10 percent of visits by people ages 60 - 69; 12 percent for those ages 70 - 79; 17 percent by those ages 80-89; and, 25 percent for people ages 90 and over (Center for Disease Control and Prevention, National Center for Health Statistics, Data Brief, June 2020).

Hip fractures are often the result of falls. In McLean County, females ages 65 and above had a hip fracture hospitalization rate of 492 hospitalizations per 100,000 females ages 65 and over (2018 – 2020) which met and exceeded the Healthy People 2020 target of 741.2, but was above the Illinois rate of 479.3. The rate for males in McLean County in the same age group was 317.2 (2018 – 2020), and although it met the Healthy People 2020 target of 418.4, it was worse than the Illinois rate of 280.2, and was in the 50th to 75th percentile (yellow indicator) compared to other counties in Illinois (Conduent Healthy Communities Institute, 2018 – 2020).

The Matter of Balance Program, hosted locally by Community Care Systems, Inc., is a grant-funded evidence-based program designed to reduce fear of falling and increase activity levels in older adults who are concerned about falling. The program includes eight two-hour classes presented to a group of 8 - 12 participants by trained coaches (National Council on Aging, 2022). The most recent McLean County session graduated 13 participants on March 3, 2022 at the

Activity and Recreation Center in Normal; more sessions are planned in 2022. Rush University Medical Center tracks results for Illinois programs. Participant satisfaction results from those completing the eight-week program (data from all host sites) included the following: 96 percent feel more satisfied with life; 97 percent feel more comfortable increasing activity and 99 percent plan to continue to exercise (Matter of Balance Program statistics, Rush University, Chicago, 2019).

School Safety/Climate

School Crime Incidents

This indicator shows the number of criminal offenses including attacks against school personnel, drug incidents, and firearm incidents reported by law enforcement officials. The offense need not have occurred on school grounds or during the academic school day. The number of school crime incidents in McLean County in 2020 was 15. This is lower than the 2019 number of incidents of 52 (Conduent Healthy Communities Institute, Illinois State Police, 2020). Over time the McLean County value is increasing, but not significantly.

Results from the 2020 Illinois Youth Survey show that an average of approximately five percent of eighth, tenth and twelfth graders in McLean County strongly disagree or disagree with the statement, "I feel safe at my school". Exhibit 65 below shows the responses for the following statement, "During the past 30 days, how many days did you not go to school because you felt you would be unsafe?"

Exhibit 65: Missing School Due to Feeling Unsafe – McLean County, 2020

N = 738 students	8 th graders	10 th graders	12 th graders
0 days	86%	93%	96%
1 day	6%	2%	1%
2 or 3 days	5%	2%	1%
4 or 5 days	2%	2%	0%
6 or more days	2%	1%	1%
Total	100%	100%*	100%

^{*} Please note, total for 8th and 10th graders is 101 percent, however, data reflected in the table is taken directly from the 2020 Illinois Youth Survey. Source: Illinois Youth Survey, 2020.

School Safety and Bullying

Questions on the 2020 Illinois Youth Survey about being bullied at school show that 47 percent of eighth graders reported at least one type of bullying followed by 39 percent for tenth graders and 35 percent for twelfth graders. Exhibit 66 below shows the responses on the Illinois Youth Survey to the following questions about being bullied.

Exhibit 665: Bullying and responses to, "During the past 12 months, has another student at school...?" – McLean County, 2020

	8 th graders	10 th graders	12 th graders
Bullied you by calling you names?	36%	31%	27%
Threatened to hurt you?	27%	15%	16%
Bullied you by hitting, punching, kicking or pushing	20%	10%	9%
you?			
Bullied, harassed or spread rumors about you on the	24%	23%	29%
Internet, social media or through text messaging.			
Ever bullied (reported at least 1 type of bullying)	47%	39%	35%
Intensely bullied (reported all types of bullying)	8%	4%	9%

Source: Illinois Youth Survey, 2020.

Social/Family Environment

Adverse Childhood Experiences

Adverse Childhood Experiences (ACEs) is the term used to describe all types of abuse, neglect and other potentially traumatic experiences that occur to people under the age of 18.

ACEs include:

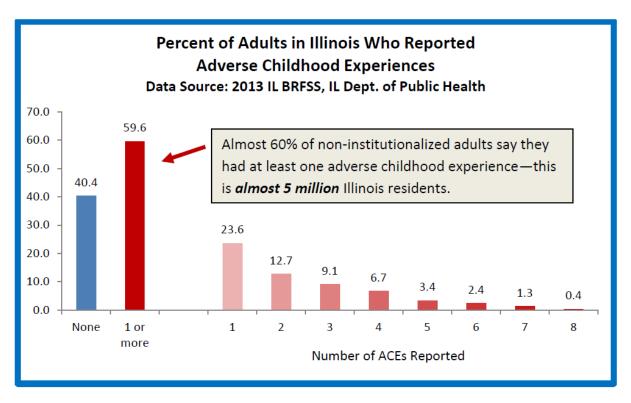
- Physical abuse
- Sexual abuse
- Emotional abuse or neglect
- Physical neglect
- Intimate partner violence
- Mother treated violently
- · Substance misuse within household
- Household mental illness
- Parental separation or divorce
- Incarcerated household member.

Adverse Childhood Experiences have been linked to:

- Risky health behaviors
- Chronic health conditions
- Low life potential
- Early death.

Exhibit 67 below illustrates ACE's data for Illinois. According to the results, almost 60 percent of non-institutionalized adults say they had at least one ACE (Illinois Behavioral Risk Factor Surveillance System, Illinois Department of Public Health, 2013).

Exhibit 67: Adverse Childhood Experience - Illinois, 2013



Source: Illinois Behavioral Risk Factor Surveillance System, Illinois Department of Public Health, 2013.

Child Abuse and Neglect

McLean County's substantiated child abuse rate (number of children under the age of 18 that experienced abuse or neglect) is 10.8 cases per 1,000 children (2015). This rate is in the best 0 - 50th percentile range (green indicator) when compared to other counties in Illinois but is higher than the Illinois rate of 9.7 cases per 1,000 children and higher than the McLean County 2014 value of 9.4 cases per 1,000 children. McLean County's substantiated child abuse rate does not meet the Healthy People 2030 target of 8.7 cases per 1,000 children. Over time, he rate for McLean County is trending in a favorable direction and is statistically significant (Conduent Healthy Communities Institute, Illinois Department of Children and Family Services, 2015). See Exhibit 68 below.

Exhibit 68: Substantiated Child Abuse Rate - McLean County, 2010 - 2015









McLean County 10.8 cases /1,000 children

Source: Conduent Healthy Communities Institute, Illinois Department of Children and Family Services, 2015.

Children in State Custody

As of May 31, 2022, McLean County had a total of 242 youth in care, with 123 in foster care, 111 with a relative and another eight children in other living arrangements. The number, which changes daily, has been decreasing after a peak of over 300 children in care in 2012 (Illinois Department of Children and Family Services, Reports and Statistics, Monthly Data Reports, 2020, https://www2.illinois.gov/dcfs/aboutus/newsandreports/reports/Pages/default.aspx).

The HealthWorks Lead Agency and Medical Case Management Program at the McLean County Health Department is a collaborative effort between the Illinois Department of Human Services and the Illinois Department of Children and Family Services. Its purpose is to assure that wards of the Illinois Department of Children and Family Services from birth to six years of age as well as pregnant youth who are in substitute care, receive comprehensive quality health care services. The McLean County Health Department provides medical case managers who deliver follow-up services and maintain complete medical records for each child. For 2021, HealthWorks Lead Agency oversaw the medical case management of 243 children per month on average. Case numbers per month ranged from 229 to 258.

In Illinois in fiscal year 2021, the Illinois Department of Children and Family Services reported (Illinois Department of Children and Family Services, Budget Briefing Fiscal Year 2023, 2022 Inspector General Report, data as of December 31, 2021, www.illinoiscasa.org):

- 22,357 children and youth, ages zero to 21 were in state custody as of June 30, 2021
- 200,607 hotline calls were received
- 86,738 child abuse and neglect investigations were conducted
- 146,125 child victims associated with the investigations of abuse and neglect
- 6,814 children entered foster care
- 4,163 families were served as of June 30, 2021 in the preservation program keeping children at home
- 122 children died in 2021 as a result of abuse and neglect.

Physical Environment – Air, Water, Radon, Lead and Hazardous Waste

<u>Air</u>

The Centers for Disease Control and Prevention reports that outdoor air quality has improved since the 1990's, but ground-level ozone and particle pollution remain as key threats to air quality. Poor air quality can exacerbate existing conditions such as asthma, chronic obstructive pulmonary disease (COPD) and heart disease (Centers for Disease Control and Prevention, Air Quality, 2022). Air quality data is collected by the Environmental Protection Agency (EPA) and the American Lung Association summarizes it and assigns grades, A – F (A=1; B=2; C=3; D=4; F=5), based on the average annual number of days ozone and particulate levels exceed U.S. standards during a three-year measurement period. (Conduent Healthy Communities Institute, American Lung Association, 2017 – 2019).

Particle Pollution

Inhaling particulates can negatively impact health by exacerbating lung conditions and cardiovascular diseases. Smaller particulates produce more damage. McLean County remains in the best $0-50^{\rm th}$ percentile range (green indicator) for particle pollution in comparison to other counties in Illinois (Conduent Healthy Communities Institute, American Lung Association, 2017 – 2019), with a score of 1, meaning on average, McLean County exceeds U.S. standards one day per year for particle pollution during a three-year measurement period. See Exhibit 69.

Exhibit 69: 3-Year Measurements for Particle Pollution - McLean County, 2017 - 2019



Source: Conduent Healthy Communities Institute, American Lung Association, 2017 – 2019.

Ozone

Ozone can affect the respiratory tract, exacerbating existing lung diseases and inflaming lung tissue. Everyone is susceptible to ozone; however, children, people ages 65 and over and individuals with current lung disease tend to be more sensitive to ozone.

When volatile organic compounds (VOCs) and nitrogen oxides (NO) react in sunlight, ground-level ozone is formed. Both VOCs and NOs are found in the emissions from vehicles, factories, and motorized vehicles. McLean County is in the best 0 - 50th percentile range (green indicator), with a score of 2, in comparison to other counties in Illinois (Conduent Healthy Communities Institute, American Lung Association, 2017 - 2019) and ozone rates have remained steady from 2013 - 2019. See Exhibit 70 for an illustration of this data.

Exhibit 70: Three-Year Measurements of Ozone Air Quality - McLean County, 2007 - 2019

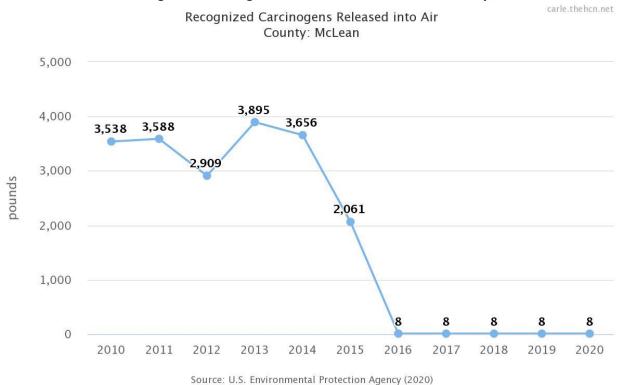


Source: Source: Conduent Healthy Communities Institute, American Lung Association, 2017 – 2019.

Carcinogens Released in the Air

According to the U.S. Environmental Protection Agency, in 2020, eight pounds of recognized carcinogens were released into the air in McLean County, placing it in the best 0 – 50th percentile range (green indicator) in comparison to other counties in Illinois. The data indicates that, over time, the McLean County value has decreased significantly. The eight pounds released each year since 2016 is a significant improvement from the prior value of 2,061 pounds in 2015 (Conduent Healthy Communities Institute, U.S. Environmental Protection Agency, 2020). See Exhibit 71.

Exhibit 71: Recognized Carcinogens Released into Air—McLean County, 2010 - 2020



Source: Conduent Healthy Communities Institute, Environmental Protection Agency, Recognized Carcinogens Released, 2020.

The Air Quality Index

The Air Quality Index (AQI) is used for reporting the overall daily quality of the air humans breathe, using a value from 0 to 500. It is the national standard of measurement method for reporting air pollution levels to the public (AirNow, Air Quality Index- A Guide to Air Quality and Your Health, www.airnow.gov/index.cfm?action=aqibasics.aqi).

As the Air QualityIndex rises, the level of health concern increases: Good (0-50), Moderate (51-100), Unhealthy for Sensitive Groups (101-150), Unhealthy (151-200), Very Unhealthy (201-300), and Hazardous (301-500). It is based on the federal National Ambient Air Quality Standards for the pollutants that serve as the five main indices of air quality, including sulfur dioxide (SO), carbon monoxide (CO), particulate matter (PM), nitrogen oxides (NOs) and volatile organic compounds (VOCs), which contribute to the creation of harmful ground-level ozone. A problematic Air Quality Index would be an AQI of greater than 100. Of the few days where an AQI greater than 100 was reached in McLean County, it was not considered statistically significant. In Central Illinois, statistics indicate the AQI for CO, NO, PM, SO and VOCs in the past five years were highest in the Peoria region (Illinois Environmental Protection Agency, Air Quality Reports by Year, Statewide Summary of Point Source Emissions, pp. 23-28, pp. 96-100, https://www2.illinois.gov/epa/topics/air-quality/air-quality-reports/Pages/default.aspx). Monitoring stations for the five main indices of air quality are located throughout Illinois, including Central Illinois:

Champaign County: Total land = 997 square miles

Main economy: farming/agriculture, some light industrial/logistics, health care and educational institutions (the University of Illinois and Parkland Community College)

Location of air sampling devices: Washington Elementary School, 606 E. Grove Street, Champaign, Illinois.

McLean County: Total land = 1189 square miles

Main economy: farming/agricultural, insurance, some light and heavy industrial manufacturing (e.g., Bridgestone Tire; Rivian truck manufacturing), and educational institutions (Illinois State University, Illinois Wesleyan University, and Heartland Community College)

Location of air sampling devices: Illinois State University Physical Plant, Main and Gregory Street, Normal, Illinois.

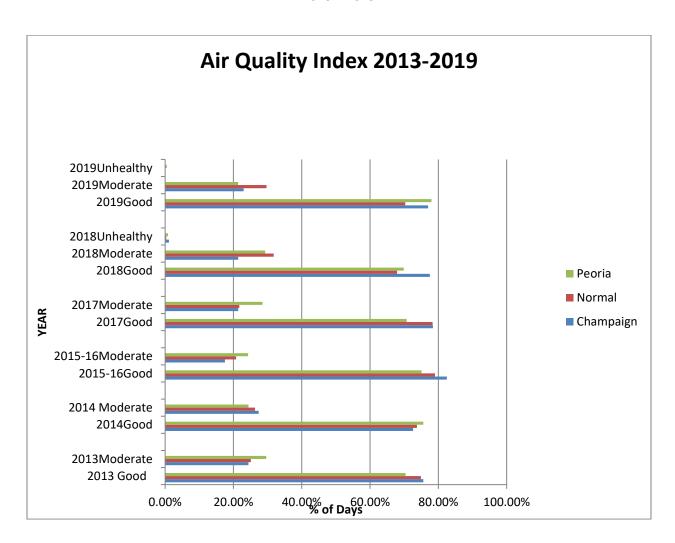
<u>Peoria County</u>: Total land = 630 square miles

Main economy: heavy and light industrial manufacturing (e.g., Caterpillar), several logistics and associated support businesses, heavy transport with barges and highways, tourism/entertainment

Location of air sampling devices: Fire Station #8, Hurlbert and MacArthur, Peoria Heights High School, 508 E. Grove Street. Peoria Heights, Illinois.

The statistics for the 2019 Air Quality Index record year shows the sector representing Normal, Illinois was rated as "Good" 70.3 percent and "Moderate" 29.7 percent for the year. There was no noticeable trend toward an Air Quality Index of "Unhealthy for Sensitive Groups" in McLean County for the past five years. Residents in McLean County, overall, have very good air quality index exposures as compared to surrounding counties. Exhibit 72 below provides an overview of the percent of days in Normal, Illinois, that air quality was "Good" or "Moderate" in comparison to Peoria and Champaign during the seven-year period of 2013 - 2019.

Exhibit 72: Air Quality Index - Normal, IL; Champaign, IL; Peoria, IL; Percent of Days Air Quality "Unhealthy", "Good" or "Moderate" 2013 – 2019



Source: Illinois Environmental Protection Agency, Air Quality Reports by Year, Statewide Summary of Point Source Emissions, pp.23-28 and pp. 96-100, https://www2.illinois.gov/epa/topics/air-quality/air-quality-reports/Pages/default.aspx.

Since VOCs are primarily generated, based on State of Illinois data, as a result of the food/agriculture industry due to land application of various agricultural chemicals from pesticides to fertilizers, the decrease in VOCs in McLean County from almost 3,000 tons a year in 2000 – 2004 to approximately 800 tons per year in 2009 to under 500 tons in both 2016 and 2017, is a significant decline. Champaign County showed a similar decline in VOCs and most closely mimics the economy of McLean County, in that agriculture is one of its primary sources of VOCs (Illinois Environmental Protection Agency, Air Quality Reports by Year, Statewide Summary of Point Source Emissions, pp. 23-28, pp. 96-100, https://www2.illinois.gov/epa/topics/air-quality/air-quality-reports/Pages/default.aspx).

These significant decreases in VOCs may be in part related to the impact of evolving farming techniques, crop land set aside, bio-engineered seed that requires less pesticide application and reduced use of fertilizers. In addition, Central Illinois implementation of Environmental Protection Agency guidelines for more rigorous scrubber systems, air pollution control equipment that can remove particulates or gases from industrial exhaust/emissions, may have contributed to VOC reductions. In McLean County, an additional impact may be that the expansion of housing growth has pushed farmland further out and away from the McLean County air sampling testing site.

Levels of NO and PM recorded in McLean County and Champaign County registered well below the level in Peoria County on a consistent basis. McLean County levels of CO and SO were noticeably lowest, to almost not detectible in the case of SO, in comparison to Peoria County and Champaign County.

Water

Drinking Water Violations

The University of Wisconsin Center for Population Health's County Health Rankings notes that ensuring drinking water safety is important for preventing illness, nausea, diarrhea, skin irritation, birth defects, cancer, kidney, liver and nervous system damage, and even death. Water safety is a world-wide concern, with studies noting that an increase in water violations has been shown to increase healthcare costs (University of Wisconsin, Center for Population Health, County Health Rankings, Physical Environment, Drinking Water Violations, Indicator Description, 2022).

Beginning in 2016, County Health Rankings reported Drinking Water Violations with just two values: "Yes" and "No", where "Yes" means that at least one community water system (not including private wells) in the county received at least one health-based violation during a specified time frame. For McLean County, a "Yes" has been received every year from 2016 – 2020. County Health Rankings acknowledges many limitations to using this measure (University of Wisconsin, Center for Population Health, County Health Rankings, McLean County, Physical Environment, Drinking Water Violations, 2022).

Private and Non-Community Water Wells

Private and non-community water wells are to be tested for Total Coliform/E-coli as an intervention to protect health. Water well samples acquired by the McLean County Health Department are shipped to the Illinois Department of Public Health in Springfield for testing. Any results that are greater than 1 ppm/100 ml are in violation and a re-sample is needed. It is possible that one well on a property may have multiple violations because samples are taken until compliance is obtained. In 2020, there were a total of 79 properties (parcels) that had private water wells sampled. Of these, 34 (43 percent) had a violation (McLean County Health Department, Environmental Health Division, 2020).

Lead in Water

Lead in drinking water can cause serious health problems, particularly for children and pregnant women. The federal Safe Drinking Water Act (http://www.epa.gov/sdwa) requires municipalities to test for lead and other contaminants in municipal water supplies. Lead in water is tested at each municipality's water treatment plant. The action level (concentration of a contaminant that triggers treatment or other required actions) for lead is 15 parts per billion (ppb). Both the City of Bloomington and the Town of Normal publish annual water quality reports. The reports referencing water samples obtained in 2020 indicate that both municipal water supplies were in compliance for lead levels in 2020 (City of Bloomington, Illinois, 2020 Annual Consumer Report on the Quality of Tap Water, 2020) (Town of Normal, Illinois, Town of Normal Water Department, Annual Water Quality Report, 2021).

Fluoridation

Fluoridation of community water supplies is another way to protect and promote health. The Centers for Disease Control and Prevention monitors the fluoride level of community water supplies. Fluoride is not required to be added to the community water supplies; however, if it is added, fluoride levels must be maintained by the municipality that supplies the community water. Most water contains some fluoride, but it is usually not enough to prevent cavities. To protect the dental health of all citizens, community water supplies are required to adjust the fluoride level to between 0.9 - 1.2 milligrams per liter (415 Ill. Compiled Statute, Act 40/7a). In Illinois, the percent of people served by fluoridated community water systems has increased, from 95.2 percent in 1992 to 98.2 percent in 2018 (Fluoride Action Network, 2018). Of the 34 water systems in McLean County found in the Centers for Disease Control and Prevention database, 30 (88 percent) had fluoridated water supplies (Centers for Disease Control and Prevention, Oral Health, My Water's Fluoride, 2020). In 2020, less than one percent (764 out of 170,954 residents) of McLean County residents on a community water supply receive water that does not meet the current standards for optimally fluoridated water (Centers for Disease Control and Prevention, Oral Health, My Water's Fluoride, 2020, U.S. Census 2020). McLean County exceeds the Healthy People 2030 goal of "increasing the proportion of people whose water systems have the recommended amount of fluoride to 77.1 percent", with 99 percent of its population receiving optimally fluoridated water.

Radon

Radon is an invisible, odorless radioactive gas that is naturally released as radioactive metals break down in soil, rocks and groundwater. It can get into buildings through holes or even small cracks. Breathing in high levels of radon can eventually cause cancer. In the United States, it is the second leading cause of lung cancer after cigarette smoking (Centers for Disease Control and Prevention, Radon, February 2022). The Environmental Protection Agency estimates that radon causes over 21,000 lung cancer deaths per year, and that one in every 15 homes in the U.S. has high radon levels, which is a radon concentration above 4 picocuries per liter of air (pCI/L) (Centers for Disease Control and Prevention, Radon, February 2022).

McLean County has been designated a Zone 1 county by the Environmental Protection Agency. These Zone 1 counties have the highest potential for indoor radon screening levels greater than 4 pCi/L. Fifty-six counties out of 102 in Illinois have been designated as Zone 1 (United States Environmental Protection Agency, 2018). Radon levels across McLean County are variable, ranging from a low of 0 to a high of 12.3 pCi/L. Measurements by ZIP code are available (Illinois Emergency Management Agency/IEMA, Radon in Illinois, Interactive Map, 2019). In the City of Bloomington, half of homes tested for radon had levels above 4 pCi/L. No disparity was noted in radon testing level results between two ZIP codes for the City of Bloomington (61701 and 61704). Both ZIP codes had an average radon test level of 5.3 pCi/L (Illinois Emergency Management Agency (IEMA), Radon, 2014; retrieved 2022). In 2014, (the most recent data posted on the IEMA webite as of April 2022), the average indoor radon level for homes in McLean County was 5.5 pCi/L, higher than state (5.3 pCi/L) and national (1.3 pCi/L) levels. Half of McLean County homes tested for radon had levels above 4 pCi/L (Illinois Emergency Management Agency, Radon in Illinois, 2014). Exhibit 73 has a list of the nineteen municipalities in McLean County that had average radon levels above 4 pCi/L.

Exhibit 73: Municipalities with Radon Levels Above 4 pCi/L - McLean County, 2014

Radon Level in picocuries/Liter	Municipalities
5.0 – 5.9	Bloomington (61701, 61704, 61705); Carlock; Downs; Normal; Saybrook
6.0 - 6.9	Chenoa; Cooksville; Hudson; Stanford
7.0 - 7.9	Colfax; Danvers; Ellsworth; Gridley; Heyworth; Lexington; McLean; Towanda
8.0 - 8.9	Shirley
9.0 and above	LeRoy (12.3)

Source: Illinois Emergency Management Agency, Radon in Illinois, retrieved May 2022.

Radon testing is not required to buy or sell a home in Illinois; however, both the Illinois Radon Awareness Act and the Illinois Real Property Disclosure Act requires home sellers to disclose their knowledge regarding the presence or absence of radon in the home (Illinois Emergency Management Agency, Radon Testing Guidelines for Real Estate Transactions, 2007).

Lead-based Paint

There is no safe level of lead in the human body. Exposure to lead can pose serious health risks for children, including developmental delays, behavioral issues, learning disabilities and many other harmful health impacts (Illinois Department of Public Health, 2019).

In Illinois, approximately 60 percent of the 4.9 million housing units were built prior to the lead paint ban in 1978. Over half of owner-occupied and rental units in Bloomington (53 percent) were built before 1980, and therefore have the potential to present lead-based paint hazards. Roughly 33 percent of units built before 1980 in Bloomington house children. Renters in Bloomington are more likely to be exposed to lead-based paint hazards as 60 percent of rental units were built before 1980 compared to 49 percent of owner-occupied units (City of Bloomington Consolidated Plan, 2015 - 2019) (Illinois Department of Public Health, Illinois Lead Program, Annual Surveillance Report, 2019).

Lead testing provides opportunities for lead surveillance and early intervention. The Centers for Disease Control and Prevention recommends monitoring children with blood lead levels of five micrograms per deciliter or higher; however, until January of 2019, the state of Illinois had set the monitoring level at 10 micrograms per deciliter or higher. It is now set at the Centers for Disease Control and Prevention level due to Illinois Public Act 100-0723 of 2019. Illinois law also requires physicians to perform a blood lead test on children six years of age or younger who live in a high-risk area for lead. In Illinois, approximately 40% of children reside in high-risk areas.

Several other lead testing opportunities in Illinois are available that provide additional lead surveillance: 1) Illinois laboratories are mandated to report adult lead test results of greater or equal to 10 micrograms per deciliter to the Adult Blood Lead Registry (ABLR); and, 2) an Illinois law requires schools built prior to January 1, 2000, to test the building's drinking water and submit the results to the Illinois Department of Public Health. (Illinois Department of Public Health, Illinois Lead Program, 2019).

In 2019, of the over 236,000 children tested in Illinois, more than 7,000 had a blood lead level at the public health intervention level. Of all children tested in Illinois in 2019, 69 percent were Medical Assistance (Medicaid) recipients; of these, 2.7 percent had elevated blood lead levels, while 1.4 percent of non-Medicaid children had elevated blood lead levels. Of the McLean County children tested in 2019, a higher percentage of both Medicaid and non-Medicaid recipients had elevated blood lead levels compared to the state percentages. In McLean County, although the children being tested for lead were equally distributed between Medicaid recipients and non-Medicaid recipients, the children who were enrolled in Medicaid had a higher percent of elevated blood lead levels (EBL) than non-Medicaid recipients in McLean County. See Exhibit 74.

Exhibit 74: Elevated Blood Lead Levels in Medicaid and Non-Medicaid Recipient Children—McLean and Illinois, 2019

	All	Percent	Percent	Percent	Percent	Percent	Percent
	Children	Medicaid	EBL >5	EBL >10	NON-	EBL >5	EBL >10
	Tested	Enrolled			Medicaid		
	2019						
McLean	2,086	49.3	3.8	2.3	50.7	3.0	2.4
Illinois	236,465	68.7	2.7	2.1	31.3	1.4	1.0

EBL: Elevated Blood Lead level

Source: Illinois Department of Public Health, Illinois Lead Program, 2019 Annual Surveillance Report, 2019.

The Illinois Lead Program 2019 Annual Surveillance Report provides a data summary for all McLean County and Illinois children tested (Illinois Department of Public Health, Illinois Lead Program, 2019).

Disparities:

In McLean County:

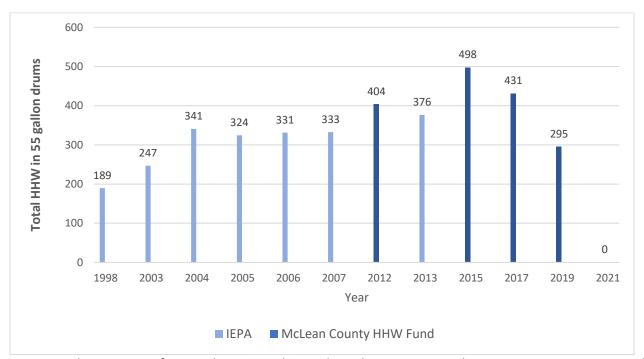
- Children tested for lead who were enrolled in Medicaid had a higher percent of elevated blood lead levels (EBL) than non-Medicaid recipients in McLean County as well as Medicaid and non-Medicaid recipients tested in Illinois.
- The Illinois Lead Program had previously, in its 2016 Annual Surveillance Report, identified the nine highest risk ZIP codes for lead in McLean County, with the list posted at https://dph.illinois.gov/content/dam/soi/en/web/idph/files/publications/pediatric-lead-poisoning-high-risk-zip-code-areas-042116.pdf:
 - Bloomington ZIP code 61701
 - o Anchor ZIP code 61720
 - Arrowsmith ZIP code 61722
 - Bellflower ZIP code 61724
 - o Colfax ZIP code 61728
 - o Cooksville ZIP code 61730
 - o Cropsey ZIP code 61731
 - o Ellsworth ZIP code 61737
 - Saybrook ZIP code 61770.

Household Hazardous Waste

Household Hazardous Wastes (HHW) are materials and chemicals that are toxic, flammable, corrosive, reactive, or explosive. They typically cannot be safely recycled or disposed of without a special center or collection event. These wastes can be a serious threat to water supplies and the local environment if they are improperly discarded with nonhazardous trash and put into a municipal solid waste landfill, dumped down the drain, or illegally dumped elsewhere. The Ecology Action Center in Normal, coordinates local collection events to meet the disposal need. In past years, the Ecology Action Center partnered with the Illinois Environmental Protection Agency (IEPA) to fund collection events. As state funding fluctuates, locally funded collections have been necessary. The most recent locally funded HHW Collection Events were in 2012, 2015, 2017, and 2019. The 2021 HHW Collection Event was primarily funded by the IEPA. No industrial, commercial, or business wastes can be accepted at a residential Household Hazardous Waste Collection Event, only residential wastes. (Ecology Action Center, HHW_results_chart1998-2021 incomplete, report by Executive Director Michael Brown, 2021).

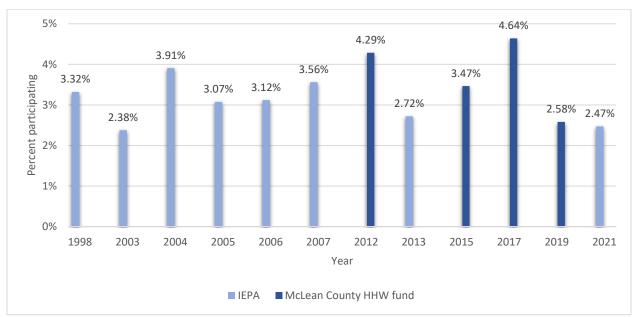
Large amounts of HHW have been safely removed from McLean County since 1998. There have been 12 HHW collection events since 1998 that have removed a total of 207,318 gallons of HHW, or 3,770 fifty-five gallon drums. HHW collections have decreased each event since an all-time high collection in 2015; however, data has not yet been tabulated for the 2021 HHW collection event. (Ecology Action Center and Illinois Environmental Protection Agency, HHW_results_chart1998-2021 incomplete, 2021). See Exhibits 75 and 76 for an illustration of this data.

Exhibit 75: Number of 55-Gallon Drums of Waste Collected at Household Hazardous Waste Collection Events – McLean County, 1998 – 2021



NOTE: Final Data Report for 2021 has not yet been released. Sources: Ecology Action Center, HHW_results_chart1998-2021 incomplete, Household Hazardous Wastes at https://ecologyactioncenter.org/hhw/, 2021. Illinois Environmental Protection Agency, Household Hazardous Waste, https://www2.illinois.gov/epa/topics/waste-management/waste-disposal/household-hazardous-waste/Pages/default.aspx, 2021.

Exhibit 76: Percent of McLean County Households Participating at Household Hazardous Waste Collection Events – McLean County, 1998 – 2021

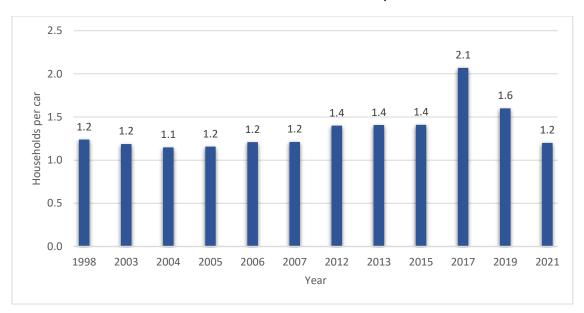


Sources: Ecology Action Center, HHW_results_chart1998-2021 incomplete, Household Hazardous Wastes at https://ecologyactioncenter.org/hhw/, 2021.

Illinois Environmental Protection Agency, Household Hazardous Waste, https://www2.illinois.gov/epa/topics/waste-management/waste-disposal/household-hazardous-waste/Pages/default.aspx, 2021.

A decrease in the number of households choosing to "carpool" was observed from the most recent collection event in 2021. This decreased the number of households represented per vehicle from 2.1 (2017) to 1.2 (2021). Another contributing factor to the drop in 2021 may be the COVID-19 pandemic which has encouraged social distancing and remote work and discouraged gatherings. Recommendations of carpooling as the COVID-19 pandemic ends could encourage non-driving populations to attend and reduce waiting lines at the event (Ecology Action Center, HHW_results_chart1998-2021 incomplete, 2021); (Ilinois Environmental Protection Agency, Household Hazardous Waste, 2021). See Exhibit 77 below.

Exhibit 77: Number of Households Represented Per Vehicle Providing Household Hazardous Waste – McLean County Collection Events, 1998 – 2021



Sources: Ecology Action Center, HHW_results_chart1998-2021 incomplete, Household Hazardous Wastes at https://ecologyactioncenter.org/hhw/, 2021.

Illinois Environmental Protection Agency, Household Hazardous Waste, https://www2.illinois.gov/epa/topics/waste-management/waste-disposal/household-hazardous-waste/Pages/default.aspx, 2021.

During collection events, households are asked for ZIP Code information for reporting purposes. The majority of participants (77 percent) reported ZIP codes primarily associated with the urban areas of Bloomington-Normal:

61704: 26 percent61761: 24 percent

• 61701: 17 percent

61705: 10 percent

Most of the remaining percentage comes from more rural McLean County ZIP Codes. (Ecology Action Center, Household Hazardous Waste, zipcodes_HHW2021, 2021).

Key findings: Social Determinants of Health in McLean County

- The percent of food-insecure children likely ineligible for assistance is in the worst 25th percentile range (red indicator) compared to other counties in Illinois.
- McLean County has two ZIP codes with a ranking of 5, or the highest relative need for food insecurity, in the county: Bloomington ZIP code 61701 and Colfax ZIP code 61728.
- People with low access to a grocery store is in the worst 25th percentile range (red indicator) compared to other counties in Illinois.
- Fast-food restaurant density is in the worst 25th percentile range (red indicator) compared to other counties in the Illinois.
- The percentage of households in McLean County with at least one of the following four housing problems, including: 1) overcrowding, 2) high housing costs, 3) lack of kitchen, or 4) lack of plumbing facilities is in the worst 25th percentile range (red indicator) compared to other counties in Illinois
- The percentage of housing units that are occupied by homeowners is in the worst 25th percentile range (red indicator) compared to other counties in Illinois.

- Ten percent of McLean County Community Health Survey respondents reported that they have housing but are worried about losing it.
- The violent crime rate is trending favorably.
- The age-adjusted hospitalization rate due to unintentional falls is in the worst 25th percentile range (red indicator) in comparison to other counties in Illinois.
- McLean County's substantiated child abuse rate is in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois.
- The air quality is in the best 0 50th percentile range (green indicator) in comparison to other counties in Illinois.
- The municipal water supplies in Bloomington and Normal met compliance for lead levels in 2020.
- Ninety-nine percent of the population is served by community water systems with optimally fluoridated water, exceeding the Healthy People 2030 goal of 77.1 percent.
- Radon levels across McLean County are variable, ranging from a low of 0 to a high of 12.3 picocuries per liter of air (target: no more than 4 picocuries per liter of air). McLean County has been designated a Zone 1 county, which indicates it has the highest potential for indoor radon.
- Nineteen municipalities had homes tested for radon with average radon levels above 4 pCi/L.
- In 2016, the Illinois Lead Program identified nine highest risk ZIP codes for lead in McLean County.
- Through the twelve McLean County household hazardous waste collection events held between 1998 2021, 207,318 gallons of household hazardous waste (3,770 fifty-five gallon drums) have been received and removed from the environment.

g) Disease and Chronic Conditions

Alzheimer's Disease and Dementia

Alzheimer's disease is the most common form of dementia among older people. It is a progressive and irreversible disease that impairs memory and affects thinking and behavior, to the point of eventually interfering with daily tasks. The greatest risk factor currently known is increasing age. After age 65, the likelihood of developing the disease doubles every five years; the risk is nearly 50 percent after age 85.

Alzheimer's imposes heavy emotional and financial burden on families. While there is currently no cure, there are treatments that can slow the progression of Alzheimer's and improve the quality of life for people with Alzheimer's and their caregivers (Conduent Healthy Communities Institute, 2022).

The age-adjusted death rate due to Alzheimer's disease in McLean County is 55.9 deaths per 100,000 population. This rate is in the worst 25th percentile range (red indicator) compared to other counties in Illinois, is higher than the Illinois value of 26.2 deaths per 100,000 population and is approximately equal to the prior value. Over time the McLean County value is increasing, but not significantly (Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2018 - 2020). See Exhibit 78 below for an illustration of this data.

Exhibit 78: Age-Adjusted Death Rate Due to Alzheimer's Disease - McLean County, 2007 - 2020









McLean County 55.9 deaths / 100,000 population

Source: Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2018 - 2020).

The percent of Medicare beneficiaries being treated for Alzheimer's disease or dementia in McLean County is 8.8 percent (Conduent Healthy Communities Institute, Centers for Medicare and Medicaid Services 2018). This rate is in the best 0 - 50th percentile range (green indicator) compared to other counties in Illinois, is less than the Illinois value of 10.7 percent and is less than the prior value of 8.9 percent. Over time, the McLean County value is decreasing, but not significantly. In McLean County, in 2020, Alzheimer's disease and dementia ranked as the third leading cause of death, causing 125 deaths (Illinois Department of Public Health, Vital Statistics, Death Statistics, 2020).

Cancer

In McLean County from 2013 – 2020, cancer (malignant neoplasms) ranked consistently as the second leading cause of death. It caused 245-288 deaths per year between 2013 and 2020. In 2020, there were 260 deaths due to cancer (Illinois Department of Public Health, Vital Statistics, Death Statistics, Causes of Death by Resident County, 2013 – 2020).

Prostate Cancer

McLean County's age-adjusted death rate due to prostate cancer is 19.7 deaths per 100,000 males (Conduent Healthy Communities Institute, National Cancer Institute, 2015 - 2019). This rate is:

- in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois
- equal to the Illinois value (19.7 deaths per 100,000 males)
- trending favorably, but not in a statistically significant direction
- does not meet the Healthy People 2030 goal (16.9 deaths per 100,000 males).

The incidence rate for prostate cancer in McLean County is 96.1 cases per 100,000 males (Conduent Healthy Communities Institute, National Cancer Institute, 2014 – 2018). This rate is:

- in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois
- lower than the Illinois value (111.5 cases per 100,000 males)
- approximately equal to the prior value (101.7 cases per 100,000 males, 2013 2017)
- trending favorably in a statistically significant direction

See Exhibit 79 below for an illustration of this data.

Exhibit 79: Prostate Cancer Incidence Rate – McLean County, 2004 - 2018









McLean County 96.1 cases / 100,000 males

Source: Conduent Healthy Communities Institute, National Cancer Institute, 2004 - 2018.

Breast Cancer

McLean County's age-adjusted death rate due to breast cancer is 22.7 deaths per 100,000 females (Conduent Healthy Communities Institute, National Cancer Institute, 2015 - 2019). This rate is:

- in the worst 50 75th percentile range (yellow indicator) when compared to Illinois counties
- is higher than the Illinois value (20.9 deaths per 100,000 females)
- not statistically different from the 2014 2018 value (20.8 deaths per 100,000 females)
- does not meet than the Healthy People 2030 goal (15.3 deaths per 100,000 females)
- trending favorably, but not in a statistically significant direction.

The breast cancer incidence rate for McLean County females is 135.0 cases per 100,000 females (Conduent Healthy Communities Institute, National Cancer Institute, 2014 - 2018). This rate is:

- in the worst 50 75th percentile range (yellow indicator) when compared to Illinois counties
- higher than the Illinois value (133.7 cases per 100,000 females)
- not statistically different from the prior value for 2013 2017 (144.2 cases per 100,000 females)
- trending unfavorably in a statistically significant direction.

See Exhibit 80 below.

Exhibit 80: Breast Cancer Incidence Rate - McLean County, 2004 - 2018









McLean County 135.0 cases / 100,000 females

Source: Conduent Healthy Communities Institute, National Cancer Institute, 2014 - 2018.

The percent of Medicare beneficiaries who have received a mammogram in the past two years is 77.2 percent (Conduent Healthy Communities Institute, The Dartmouth Atlas of Health Care, 2015). This rate is:

- in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois
- is higher than the Illinois value (65.1 percent)
- is better than the prior value (76 percent)
- trending favorably but not in a statistically significant direction.

The percent of women aged 50 – 74 years in McLean County who have had a mammogram in the past two years is 72.9 percent (Conduent Healthy Communities Institute, CDC - Places, 2018). This rate is:

- in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois
- is lower than the United States value (74.8 percent)
- does not meet the Healthy People 2030 target (74.1 percent).

Colorectal Cancer

The age-adjusted death rate due to colorectal cancer is 12.8 deaths per 100,000 population in McLean County (Conduent Healthy Communities Institute, National Cancer Institute, 2015 - 2018). This rate is:

- in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois
- lower than the Illinois value (14.5 deaths per 100,000 population)
- not statistically different from the prior value for 2014 2018 (14.4 deaths per 100,000 population)
- trending favorably in a statistically significant direction
- does not meet the Healthy People 2030 target of 8.9 deaths per 100,000 population.

McLean County's colorectal cancer incidence rate is 33.8 cases per 100,000 population (Conduent Healthy Communities Institute, National Cancer Institute, 2014 - 2018). This rate is:

- in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois
- lower than the Illinois value (42.1 cases per 100,000 population)
- not statistically different from the prior value for 2013 2014 (39.7 cases per 100,000 population)
- trending favorably in a statistically significant direction
- meets the Healthy People 2020 goal of 39.9 cases per 100,000.

Disparities

• There are no significant disparities for gender.

See Exhibit 81 below.

Exhibit 81: Colorectal Cancer Incidence Rate - McLean County, 2004 - 2018











McLean County 33.8 cases / 100,000 population

Source: Conduent Healthy Communities Institute, National Cancer Institute, 2004 - 2018.

The percentage of respondents aged 50 - 7 who have had either a fecal occult blood test in the past year, a sigmoidoscopy in the past five years AND a fecal occult blood test in the past three years, or a colonoscopy exam in the past ten years in McLean County is 67.1 percent. This is in the best 0 – 50th percentile range (green indicator) compared to other counties in Illinois however, it is lower than the Healthy People 2030 target of 74.4 percent (Conduent Healthy Communities Institute, CDC - Places, 2018).

Cervical Cancer

The cervical cancer incidence rate in McLean County is 5.8 cases per 100,000 females (Conduent Healthy Communities Institute, National Cancer Institute, 2014 - 2018). This rate is:

- in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois
- lower than the rate for Illinois (7.7 cases per 100,000 females)
- not statistically different from the 2013 2017 rate (6.0 cases per 100,000 population)
- trending unfavorably but not in a statistically significant direction
- lower than the Healthy People 2020 goal (7.3 cases per 100,000 females).

The percentage of women in McLean County aged 21 - 65 who have had a cervical cancer screening test is 83.2 percent. This is a Pap test every three years for women 21-29; and a Pap test every three years or an HPV test and Pap test every five years for women 30 - 65. This is in the best $0 - 50^{th}$ percentile range (green indicator) compared to other counties in Illinois, but does not meet the Healthy People 2030 target of 84.3 percent (Conduent Healthy Communities Institute, CDC – Places, 2018).

Lung Cancer

The age-adjusted death rate due to lung cancer is 40.6 deaths per 100,000 population in McLean County (Conduent Healthy Communities Institute, National Cancer Institute, 2015 - 2019). This rate is:

- in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois
- higher than the Illinois value (39.2 deaths per 100,000 population)
- not statistically different from the 2014 2018 value (40.5 deaths per 100,000 population)
- trending favorably in a statistically significant direction
- higher than the Healthy People 2030 target of 25.1 deaths per 100,000.

Disparities

There are no disparities for gender or race/ethnicity.

The incidence rate due to lung and bronchus cancer in McLean County is 60.0 cases per 100,000 population (Conduent Healthy Communities Institute, National Cancer Institute, 2014 - 2018). This rate is:

- in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois
- lower than the Illinois rate (63 cases per 100,000 population)
- not statistically different from the 2013 2017 value (60.7 cases per 100,000 population)
- trending favorably in a statistically significant direction.

Disparities

There are no disparities for gender. Additional disparity information is not available.

Oral Cavity and Pharynx Cancer Incidence Rate

The incidence rate due to oral cavity and pharynx cancer in McLean County is 13.1 cases per 100,000 population (Conduent Healthy Communities Institute, National Cancer Institute, 2014 - 2018). This rate is:

- in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois
- higher than the Illinois rate (12.2 cases per 100,000 population)
- not statistically different from the 2013 2017 value (12.2 cases per 100,000 population)
- trending unfavorably in a statistically significant direction.

Disparities

There are no disparities for gender. Additional disparity information is not available.

Medicare Beneficiaries Treated for Cancer

In 2018, 9.5 percent of McLean County Medicare beneficiaries were being treated for cancer (Conduent Healthy Communities Institute, Centers for Medicare and Medicaid Services, 2018). This percentage is:

- in the worst 25th percentile range (red indicator) when compared to other counties in Illinois
- higher than the Illinois value (9.0 percent)
- has increased from the percentage in 2017 (9.3 percent)
- trending favorably but not in a statistically significant direction.

Prevalence of Cancer

Three percent of McLean County survey respondents indicated that they have cancer (McLean County Community Health Survey, 2021). Data is not available from the 2018 survey.

Cardiovascular Disease

According to the Centers for Disease Control and Prevention, coronary heart disease is the most common type of heart disease, causing nearly 400,000 deaths per year and costing over \$100 billion in health services, medication and lost productivity (Conduent Healthy Communities Institute, 2022).

Age-Adjusted Emergency Room and Hospitalization Rates

Heart Failure

Heart failure is a condition in which the heart cannot pump enough blood to the body's other organs. This can result from to a variety of conditions such as coronary artery disease, diabetes, past heart attack and hypertension (Conduent Healthy Communities Institute, 2022.

Emergency Room Rate

The age-adjusted emergency room rate due to heart failure is 6.9 emergency room visits per 10,000 population ages 18 years and older for McLean County. This rate is in the best $0 - 50^{th}$ percentile range (green indicator) compared to other counties in Illinois and lower than the Illinois value of 10.2 emergency room visits per 10,000 population ages 18 years and older. The current rate is not statistically different from the prior value (2017 - 2019) of 6.8 emergency room visits per 10,000 population 18 years and older. (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020).

Disparities

The highest emergency room rates occur in:

- individuals 65 84 years (19.3 emergency room visits per 10,000 population 18+ years)
- individuals 85 years and older (65.6 emergency room visits per 10,000 population 18+ years)
- Blacks or African Americans (30.8 emergency room visits per 10,000 population 18+ years). This is 346% higher than the overall rate for McLean County.

Hospitalization Rate

The rate for age-adjusted hospitalizations due to heart failure in McLean County is 33.1 hospitalizations per 10,000 population 18 years and older (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 – 2020). This is in the worst 50 –75th percentile range (yellow indicator) compared to other counties in Illinois but is lower than the Illinois value (39.2 hospitalizations per 10,000 population 18+ years). The current rate is not statistically different from the 2017 – 2019 rate of 32.6 hospitalizations per 10,000 population 18 years and older. The rate for McLean ZIP code 61754 (49.5 hospitalizations per 10,000 population 18+ years) is in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois. See Exhibit 82 below.

Exhibit 82: Age-Adjusted Hospitalization Rate Due to Heart Failure - McLean County versus McLean ZIP Code 61754, 2018 – 2020

McLean County

IL Counties

33.1

33.

McLean – 61754



IL Zip Codes

49.5

hospitalizations / 10,000 population 18+ years

hospitalizations / 10,000 population 18+ years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Disparities

The highest hospitalization rates for heart failure occur in:

- individuals 65 84 years (108.2 hospitalizations per 10,000 population 18+ years)
- individuals 85 years and older (412.6 hospitalizations per 10,000 population 18+ years). This is 1,147 percent higher than the overall rate for McLean County.
- Blacks or African-Americans (97.5 hospitalizations per 10,000 population 18+ years)
- males (39.1 hospitalizations per 10,000 population 18+ years)
- McLean ZIP code 61754 (49.5 hospitalizations per 10,000 population 18+ years).

Hypertension

Emergency Room Rate

The age-adjusted emergency room visit rate due to hypertension (high blood pressure) is 25.5 emergency room visits per 10,000 population ages 18 years and older for McLean County (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). This rate is in the best $0 - 50^{th}$ percentile range (green indicator) compared to other counties in Illinois and is lower than the Illinois value (38.9 emergency room visits per 10,000 population 18+ years). The current rate is not statistically different from the prior value for 2017 - 2019 of 26.1 emergency room visits per 10,000 population ages 18 years and older. None of the high Health Equity Needs ZIP codes are in the worst 25^{th} percentile range (red indicator) in comparison to other ZIP codes in Illinois. See Exhibit 83 below.

Exhibit 83: Age-Adjusted Emergency Room Rate Due to Hypertension - McLean County, 2018 – 2020

McLean County

IL Counties

IL Value
(38.9)

25.5

ER visits / 10,000 population 18+ years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Disparities

The highest emergency room rates due to hypertension occur in:

- individuals 45 64 years (32.5 emergency room visits per 10,000 population 18+)
- individuals 65 84 years (50.1 emergency room visits per 10,000 population 18+)
- individuals ages 85 years and older (84.8 emergency room visits per 10,000 population 18+)
- females (30.7 emergency room visits per 10,000 population 18+)
- Blacks or African-Americans (108.3 emergency room visits per 10,000 population 18+). This rate is 324 percent (more than 4 times) higher than the county rate.

Hospitalization Rate

The age-adjusted hospitalization rate for hypertension in McLean County is 4.7 hospitalizations per 10,000 population ages 18 years and older (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). This is in the worst 50th - 75th percentile range (yellow indicator) compared to other counties in Illinois. The current rate is lower than the Illinois rate of 5.1 hospitalizations per 10,000 population ages 18 years and older and is not statistically different from the prior rate for 2017 – 2019 of 4.7 hospitalizations per 10,000 population ages 18 years and older. None of the high Health Equity Needs ZIP codes are in the worst 25th percentile range (red indicator) in comparison to other ZIP codes in Illinois.

Disparities

The highest hospitalization rates due to hypertension occur in:

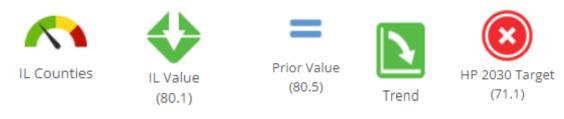
- individuals 65 84 years (12.1 hospitalizations per 10,000 population 18+)
- individuals 85 years and older (23.7 hospitalizations per 10,000 population 18+)
- Blacks or African-Americans (21.0 hospitalizations per 10,000 population 18+). This rate is 347 percent (approximately four and one-half times) higher than the county rate.

Death Rates

Coronary Heart Disease

The age-adjusted death rate due to coronary heart disease in McLean County is 78 deaths per 100,000 population (Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2018 - 2020). This is in the best 0 - 50th percentile range (green indicator) compared to other counties in Illinois, is lower than the Illinois value (80.1 deaths per 100,000 population) and not statistically different from the prior value for McLean County (80.5 deaths per 100,000 population). The rate is trending favorably in a statistically significant direction, but does not meet the Healthy People 2030 target (71.1 deaths per 100,000 population). See Exhibit 84 below for an illustration of this data.

Exhibit 84: Age-Adjusted Death Rate Due to Coronary Heart Disease - McLean County, 2007 - 2020



McLean County 78 deaths / 100,000 population

Source: Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2018 - 2020.

Disparities

The highest death rates due to coronary heart disease occur in:

males (111.8 deaths per 100,000 population).

Heart Attack

The age-adjusted death rate due to a heart attack in McLean County is 56.6 deaths per 100,000 population (Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2018 - 2020). This is in the best 0 - 50th percentile range (green indicator) compared to other counties in Illinois, but it is higher than the Illinois value (55.2 deaths per 100,000 population). The rate is not statistically different from the prior value for McLean County (60.9 deaths per 100,000 population). The rate is trending favorably in a statistically significant direction.

Disparities

Disparities are not available.

Cerebrovascular Disease (Stroke)

The age-adjusted death rate due to cerebrovascular disease (stroke) in McLean County is 26.4 deaths per 100,000 population (Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2015 - 2017). This is in the best 0 - 50th percentile range (green indicator) compared to other counties in Illinois. The rate is lower than the Illinois rate (38.4 deaths per 100,000 population) and not statistically significantly different from the prior rate for McLean County (30.6 deaths per 100,000 population). The rate is trending favorably in a statistically significant direction and meets the Healthy People 2020 target (34.8 deaths per 100,000 population). See Exhibit 85 below.

Exhibit 85: Age-Adjusted Death Rate Due to Cerebrovascular Disease - McLean County, 2007 - 2017











McLean County 26.4 deaths / 100,000 population

Source: Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2015 - 2017.

Percent of Medicare Beneficiaries Receiving Treatment for Cardiovascular Diseases/Conditions

The percent of Medicare beneficiaries in McLean County receiving treatment for hyperlipidemia (high cholesterol), atrial fibrillation, stroke, hypertension (high blood pressure), ischemic heart disease and heart failure is illustrated below in Exhibit 86. The trend for all the conditions listed below is favorable and the percent for all conditions is in the best 0 - 50th percentile range (green indicator) in comparison to other counties in Illinois (Conduent Healthy Communities Institute, Centers for Medicare and Medicaid Services, 2018).

Exhibit 86: Medicare Beneficiaries Receiving Treatment for Cardiovascular Diseases /Conditions - McLean County, 2010 – 2018

Disease or Condition	Percent Being Treated (2015)	Indicator Color (McLean County compared to other counties in Illinois)	Trend Direction
Hyperlipidemia	50.3		Favorable - not statistically significant
Atrial fibrillation	8.0		Favorable - not statistically significant
Stroke	3.4	1	Favorable - statistically significant
Hypertension	55.9	<u>~</u>	Favorable - not statistically significant
Ischemic heart disease	25.8		Favorable - statistically significant
Heart failure	12.3	<u></u>	Favorable - statistically significant

Source: Conduent Healthy Communities Institute, Center for Medicare and Medicaid Services, 2018.

Prevalence of Hypertension and High Cholesterol

In comparison to other counties in Illinois, McLean County residents are doing better than Illinois for prevalence of hypertension (high blood pressure) and high cholesterol; however, the percentages for McLean County do not meet the Healthy People 2020 goals for both high blood pressure and high cholesterol (Conduent Healthy Communities, Illinois Behavioral Risk Factor Surveillance System, 2010 - 2014). See Exhibit 87 below.

Exhibit 87: Prevalence of High Blood Pressure and Cholesterol - McLean County, 2010 - 2014

Question/Topic	McLean County Percent	Illinois Percent in 2015	Healthy People 2020 Target	Healthy People 2020 Target Met
Told by a Physician that Blood	29.4	30.8	26.9	No
Pressure is High				
Told by a Physician that	30.9	36.0	13.5	No
Cholesterol is High				

Source: Conduent Healthy Communities, Illinois Risk Factor Surveillance System, 2010 - 2014.

Prevalence of Heart Disease

Six percent of McLean County survey respondents indicated that they have heart disease (McLean County Community Health Survey, 2021). Data is not available from the 2018 survey.

ICD-9 and ICD-10 Hospital Emergency Room Diagnosis

Cardiac disorders were the number one reason for patient visits to Carle BroMenn Medical Center's emergency room from 2010 – 2020 and to OSF St. Joseph Medical Center in 2021 (Carle BroMenn Medical, Top ICD-9 and ICD-10 Diagnosis, 2010 -2020 and OSF St. Joseph Medical Center ICD-10 Diagnosis, 2021). For adult patients with Medicaid,

cardiac disorders were the fourth most prevalent reason for a patient visit in 2020 to Carle BroMenn Medical Center's emergency room.

Diabetes

Diabetes is a leading cause of death in the United States. According to the Centers for Disease Control and Prevention (CDC), more than 25 million people have diabetes, including both diagnosed and undiagnosed cases. This disease can have a harmful effect on most of the organ systems in the human body; it is a frequent cause of end-stage renal disease, non-traumatic lower-extremity amputation, and a leading cause of blindness among working age adults. Persons with diabetes are also at increased risk for ischemic heart disease, neuropathy, and stroke. According to the CDC, the direct medical expenditures attributable to diabetes are over \$116 billion. Diabetes disproportionately affects minority populations and the elderly (Conduent Healthy Communities Institute, 2022).

Age-Adjusted Emergency Room and Hospitalization Rates

A summary of the age-adjusted emergency room and hospitalization rates for numerous diabetes indicators is illustrated in Exhibit 88 below. All emergency room visit indicators are in the best 0 - 50th percentile range (green indicator) in comparison to other counties in Illinois. Age-adjusted hospitalizations due to diabetes, short-term complications of diabetes and Type 2 diabetes are in the worst 50th – 75th percentile range (yellow indicator) compared to other counties in Illinois (Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020).

Exhibit 886: Summary of Age-Adjusted Emergency Room Visits and Hospitalizations for Diabetes Indicators - McLean County, 2018 - 2020

Indicator rate due to:	Emergency room visits/10,000 population 18+ years	Indicator Color (McLean County compared to other counties in Illinois)	Hospitalizations/10,000 population 18+ years	Indicator Color (McLean County compared to other counties in Illinois)
Diabetes	23.1		17.1	
Long-term Complications of Diabetes	2.8		6.7	
Short-term Complications of Diabetes	.8		7.5	
Type 2 Diabetes	19.2		11.5	
Uncontrolled Diabetes	18.5		2.9	

Source: Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020.

Although the values for McLean County (shown above) for the various diabetes indicators are good in comparison to other counties in Illinois, there are statistically significant disparities by race/ethnicity, gender and age. The greatest disparities for diabetes for both emergency room visits and hospitalizations are seen in Blacks or African Americans. Exhibits 89 and 90 below illustrate disparities by race/ethnicity, age and/or gender when compared to the McLean County rate.

Exhibit 89: Diabetes Disparities by Race/Ethnicity and Age for Age-Adjusted Emergency Room Visits - McLean County, 2018 - 2020

Indicator rate due to:	Emergency room visits per 10,000 population 18+ years: McLean County	Emergency room visits per 10,000 population 18+ years: Disparities by race/ethnicity	Emergency room visits per 10,000 population 18+ years: Disparities by age and/or gender
Diabetes	23.1	Black or African American - 101 337% (> 4x's) higher than the county rate Hispanic or Latino – 50.4 118% higher than the county rate	 45 - 64 years of age - 32 39% higher than the county rate 65 - 84 years of age - 31.9 38% higher than the county rate
Long-term Complications of Diabetes	2.8	 Black or African American – 16.8 500% (6x's) higher than the county rate Hispanic or Latino – 12.3 339% (> 4x's) higher than the county rate 	No disparities for age or gender
Short-term Complications of Diabetes	.8	No disparities for race/ethnicity	No disparities for age or gender
Type 2 Diabetes	19.2	 Black or African American – 91.1 374% (>4.5x's) higher than the county rate Hispanic or Latino – 48.2 151% (2.5x's) higher than the county rate 	 45 - 64 years of age – 28.4 48% higher than the county rate 65 - 84 years of age – 30.5 59% higher than the county rate
Uncontrolled Diabetes	18.5	 Black or African American – 77.7 320% (>4 x's) higher than the county rate Hispanic or Latino – 33.9 83% higher than the county rate 	 45 – 64 years of age – 26 41% higher than the county rate 65 - 84 years of age – 26.2 43% higher than the county rate

Source: Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020.

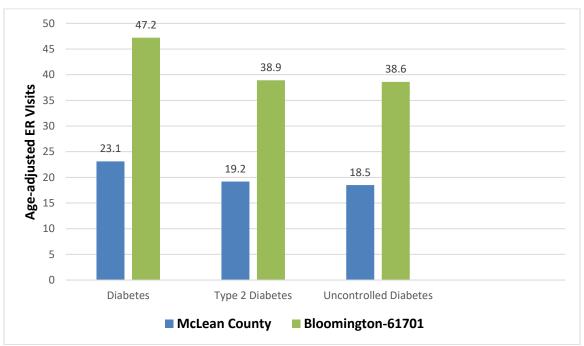
Exhibit 90: Diabetes Disparities by Race/Ethnicity and Age for Age-Adjusted Hospitalizations – McLean County, 2018 – 2020

Indicator rate due to:	Hospitalizations per 10,000 population 18+ years: McLean County	Hospitalizations per 10,000 population 18+ years: Disparities by race/ethnicity	Hospitalizations per 10,000 population 18+ years: Disparities by age and/ or gender
Diabetes	17.1	Black or African American – 70.2 • 311% (>4x's) higher than the county rate	 45 - 64 years of age – 22.1 29% higher than the county rate 65 - 84 years of age - 29 70% higher than the county rate
Long-term Complications of Diabetes	6.7	Black or African American – 24.3 • 263% (> 3.5x's) higher than the county rate	 45 - 64 years of age - 10.6 58% higher than the county rate 65 - 84 years of age - 14.9 122% higher than the county rate
Type 2 Diabetes	11.5	Black or African American – 57.5 • 400% (5x's) higher than the county rate	 45 - 64 years of age - 17.4 51% higher than the county rate 65 - 84 years of age - 27.2 137% (>2x's) higher than the county rate) 85+ years of age - 22.6 97% higher than the county rate
Short-term Complications of Diabetes	7.5	Black or African American − 24.4 • 225% (>3x's) higher than the county rate	 35 - 44 years of age – 12.5 67% higher than the county rate
Uncontrolled Diabetes	2.9	Black or African American – 21.1 628% (>7x's) higher than the county rate	65 − 84 years of age − 9.1 • 214% (>3x's) higher than the county rate

Source: Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020.

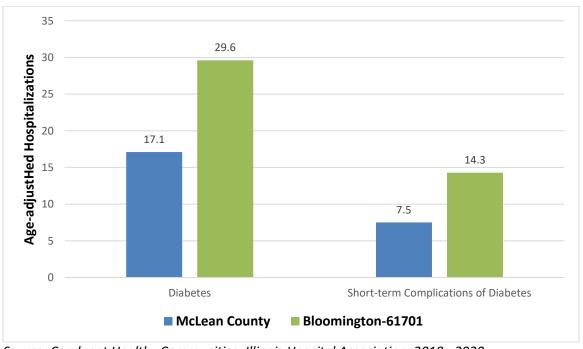
In addition to the above disparities, McLean County has one high Health Equity Needs ZIP code, Bloomington ZIP Code 61701, that is in the worst 25th percentile range compared to other ZIP codes in Illinois for emergency room and hospitalization diabetes indicators. See Exhibits 91and 92 below for an illustration of this data.

Exhibit 91 Age-Adjusted Diabetes Emergency Room Indicators - McLean County versus Bloomington ZIP Code 61701, 2018 - 2020



Source: Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020.

Exhibit 92: Age-Adjusted Diabetes Hospitalization Indicators - McLean County versus Bloomington ZIP Code 61701 for 2018 - 2020



Source: Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020.

Death Rate: Diabetes

The age-adjusted death rate due to diabetes in McLean County is 17.1 deaths per 100,000 population. This is in the best $0-50^{th}$ percentile range (green indicator) compared to other counties in Illinois (Conduent Healthy Communities

Institute, Centers for Disease Control and Prevention, 2018 – 2020). This is lower than the Illinois value (19.6 deaths per 100,000 population). The overall value for McLean County is decreasing over time, but not significantly.

Disparities

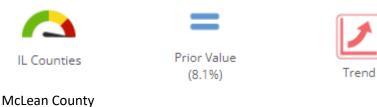
There are no disparities for gender. Additional disparity information is not available.

Prevalence: Diabetes

The percent of Medicare beneficiaries receiving treatment for diabetes in McLean County is 22.8 percent (Conduent Healthy Communities Institute, Centers for Medicare and Medicaid Services, 2018). This is in the best 0 - 50th percentile range (green indicator) compared to other counties in Illinois, is lower than the Illinois value (27.1 percent), higher than the prior value for McLean County (22.6 percent) and is trending favorably but not in a statistically significant direction.

The percent of adults in McLean County ages 20 and over that have ever been diagnosed with diabetes is 9.1 percent. This is in the worst 25th percentile range (red indicator) compared to other counties in Illinois. The rate is trending unfavorably but not in a statistically significant direction. The prior value is not statistically different from the current value for McLean County (Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2019). See Exhibit 93 below.

Exhibit 93: Percent of Adults Diagnosed with Diabetes - McLean County, 2008 - 2019



Source: Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2019.

Disparities

There are no disparities for gender. Additional disparity information is not available.

According to the 2021 McLean County Community Health Survey, nine percent of survey respondents have diabetes (McLean County Community Health Survey, 2021). Data is not available from the 2018 survey.

Infectious Disease

9.1%

Food Borne Illnesses and Other Pathogens

E. Coli

Escherichia coli (E. coli) are bacteria found in foods, the environment and in the intestines of people and animals. Most strains of E. coli are harmless, according to the Centers for Disease Control and Prevention (CDC); however, others can make individuals very sick, causing diarrhea, stomach cramps, vomiting, urinary tract infections, respiratory illnesses and pneumonia. Some strains, such as O157:H7, can cause a serious kidney condition called hemolytic uremic syndrome (HUS). (Centers for Disease Control and Prevention, https://www.cdc.gov/ecoli/index.html, April 2022). In Illinois, there are 100 – 200 cases of O157:H7 detected each year (Illinois Department of Public Health, https://dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/e-coli.html, May 2022).

Nationally, children ages one to four years had the highest incidence of E. coli infection of all age groups for both the O157 and non-O157 serogroups. The largest percentage of infections for both serogroups are reported in the summer months (Illinois Department of Public Health, https://dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/e-coli.html, May 2022).

From 2011 – 2017, McLean County case counts have ranged from a low of 1 (2011 and 2017) to a high of 6 (2013). In 2016, there were three cases of all E. coli serotypes. The Illinois (0.93) and national (0.71/100,000) incidence rates are for the O157 serotype only; both jurisdictions met and exceeded the Healthy People 2030 goal of 3.7 cases per 100,000 (Centers for Disease Control and Prevention, Shiga toxin-producing Escherichia coli [STEC] Annual Survey, 2017; Illinois Department of Public Health, IQuery, 2016).

Salmonella

Salmonella are bacteria that can make people sick. Although there are over 2500 serotypes, less than 100 cause sickness in humans. Salmonella lives in the intestines of animals and people. Eating food, touching the feces or environment of animals, or drinking water contaminated with Salmonella can lead to infection, causing diarrhea, fever, stomach cramps, nausea, vomiting and/or headache.

Each year, there are an estimated 1,400,000 cases of salmonellosis in the United States and 1,500 - 2,000 cases of this foodborne illness in Illinois (Illinois Department of Public Health, Salmonella, 2022).

In McLean County, case numbers for Salmonella fluctuate. Between 2010 and 2021, cases ranged from a low of 11 (2015) to a high of 67 (2012). The 2016 salmonella incidence rate for Illinois (11.44 per 100,000 population) is lower than the national rate (14.51 per 100,000 population) and the Healthy People 2030 goal of 11.5 cases per 100,000 (Illinois Department of Public Health, IQuery, 2022) (Illinois Department of Public Health, Office of Disease Control, 2022). See Exhibit 94 and Exhibit 95 below.

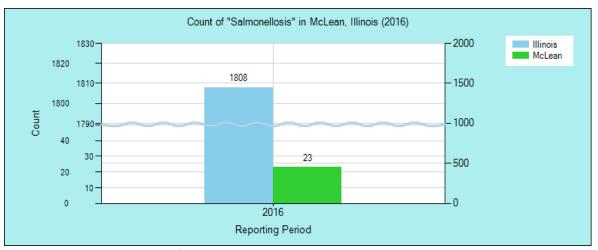
Exhibit 94: Salmonella Case Counts – McLean County, 2010 - 2021

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
15	12	67	27	17	11	23	14	23	11	12	22

Source: Illinois Department of Public Health, IQuery, 2022.

Source: Illinois Department of Public Health, Office of Disease Control—INEDSS, May 2022.

Exhibit 95: Salmonella Cases - McLean County and Illinois, 2016



Source: Illinois Department of Public Health, IQuery, 2016.

Tuberculosis

Mycobacterium tuberculosis ("TB") is a bacteria that usually attacks the lungs, but can attack any part of the body. If not treated correctly, active TB can be fatal and can contribute to the development of drug-resistant strains. TB spreads through the air from one person to the other through talking, coughing and singing. People can be infected with TB and not be sick and unable to spread the disease to others. This is called Latent TB Infection (LTBI). Without prophylactic treatment, one in 10 people with LTBI will go on to develop active TB disease at some point in their lifetime. Although McLean County only identifies about one to two cases of active TB per year, there are many LTBI cases. In 2020, McLean County Health Department provided prophylactic treatment to 19 individuals with LTBI; in 2021, 33 people received prophylactic treatment for LTBI (Illinois Department of Public Health, Tuberculosis, 2022; McLean County Health Department Communicable Disease Program, Bloomington, IL, March 2022).

In McLean County, there were 0 cases of active tuberculosis in 2019, two in 2020, and one in 2021. In 2019, case rates per 100,000 were 0.00 in McLean County, 2.54 in Illinois, and 2.7 in the United States. In 2020, case rates per 100,000 were 1.16 in McLean County, 1.69 for Illinois, and 2.2 for the United States. In 2021, case rates per 100,000 were 0.58 in McLean County, 2.00 for Illinois, and 2.37 for the United States. The National Tuberculosis Program Objectives and Performance target is no more than 1.3 cases per 100,000, the same target used by the Illinois Department of Public Health. For 2019, 2020, and 2021, McLean County met the national target (Illinois Department of Public Health, 2019, 2020, and 2021; McLean County Health Department, Bloomington Illinois, 2019, 2020, and 2021). See Exhibit 96.

Exhibit 96: Active Cases of TB—McLean County, 2000 – 2021

2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010
2	1	3	3	NA	1	5	2	1	2	1
2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1	1	1	1	0	0	2	2	0	2	1

Source: Illinois Department of Public Health, IQuery, 2000 – 2018; McLean County Health Department, Communicable Disease Program, Annual McLean County Health Department TB Risk Assessment, 2013, 2015-2016, 2019 – 2021; NA: not available within the IQuery dataset.

Sexually Transmitted Infections

Chlamydia

Chlamydia, caused by Chlamydia trachomatus, is the most commonly reported bacterial sexually transmitted infection (STI) in the United States. It is easily treatable; but, if left untreated, it can cause permanent damage to a woman's reproductive system and make it difficult to get pregnant later (Illinois Department of Public Health, Sexually Transmitted Diseases, Chlamydia, May 2022).

In 2019, there were 661.7 cases of Chlamydia diagnosed per 100,000 population in McLean County. This rate is in the worst 25th percentile range (red indicator) compared to other counties in Illinois, is higher than the Illinois value (639.3 cases per 100,000 population) and the U.S. value (551 cases per 100,000); and is greater than the prior value previously measured at 554.9 cases per 100,000 population for McLean County. The rate is trending unfavorably in a statistically significant direction (Conduent Healthy Communities Institute, National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention, 2016). See Exhibit 97and Exhibit 98.

Exhibit 97: Chlamydia Incidence Rate - McLean County, 2019













IL Counties

U.S. Counties

(639.3)

(551.0)

(554.9)

McLean County 661.7 cases/100,000 population

Source: Conduent Healthy Communities Institute, National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention, 2019.

Exhibit 98: Chlamydia Incidence Rate - McLean County, 2011 - 2019 700 661.7 cases/ 100,000 population 600 560.7 554.9 540.4 536.0 527.1 512.5 511.1 500 408.1 400 300 2011 2012 2013 2014 2015 2016 2017 2018 2019

Source: National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (2019)

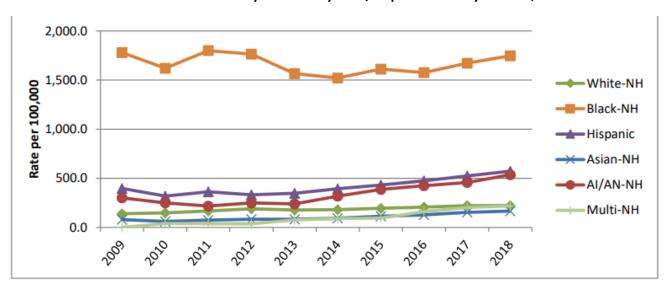
Source: Conduent Healthy Communities Institute, National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention, 2019.

Disparities

In Illinois in 2018:

- chlamydia cases in females were 64.3%.
- individuals ages 15-19 years and 20-24 years made up 63.1% of the cases.
- the state ranked ninth out of all 50 states for chlamydia rate in 2018.
- the non-Hispanic Black population was disproportionately affected more than any other group. (Illinois Department of Public Health, Sexually Transmitted Diseases in Illinois: 2018 Epidemiologic Summary and Yearly Trends Data for 2009 2018). See Exhibit 99. In 2018, the chlamydia rates were:
 - o Non-Hispanic Black: 1,747.1 per 100,000 population
 - O Hispanic: 572.5 per 100,000 population
 - o Non-Hispanic American Indian/Alaskan Native: 535.8 per 100,000 population
 - o Non-Hispanic White: 221.2 per 100,000 population
 - Non-Hispanic Multiple Race: 218.5 per 100,000 population
 - O Non-Hispanic Asian: 166.2 per 100,000 population
 - Note: Many chlamydia cases are reported without a race/Hispanic ethnicity, with 16.4% (12,716) of cases reported as "unknown" in 2018.

Exhibit 99: Chlamydia Rates by Race/Hispanic Ethnicity - Illinois, 2009 - 2018



Source: Illinois Department of Public Health, Sexually Transmitted Diseases in Illinois: 2018 Epidemiologic Summary and Yearly Trends Data for 2009 – 2018, at:

https://dph.illinois.gov/content/dam/soi/en/web/idph/files/publications/2018-il-std-surveillance-report.pdf

Gonorrhea

Gonorrhea is the second most commonly reported sexually transmitted infection (STI) in the United States. It is caused by a bacteria, Neisseria gonorrhoeae, that infects the mucous membranes of the reproductive tract, mouth, throat, eyes and rectum. It is treatable; however, if left untreated, it can cause pelvic inflammatory disease (PID) in women and epididymitis in men, both of which may lead to infertility. (Illinois Department of Public Health, Sexually Transmitted Diseases, Gonorrhea, May 2022).

McLean County's incidence rate for gonorrhea was 150.4 cases per 100,000 population in 2019. This rate is in the worst 50th - 75th percentile range (yellow indicator) compared to other counties in Illinois. It is lower than the state rate of 231.0 cases per 100,000 and higher than the prior value for McLean County (121.9 cases per 100,000). The rate is trending unfavorably, but not in a statistically significant direction (Conduent Healthy Communities Institute, National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention, 2019). See Exhibit 100.

Exhibit 100: Gonorrhea Incidence Rate – McLean County, 2019













McLean County 150.4 cases/100,000 population

Source: Conduent Healthy Communities Institute, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2019.

Disparities

In Illinois in 2018:

- gonorrhea cases in males were 60.4%.
- individuals ages 15-29 years made up 71.4% of the cases reported.
- the state ranked 16th out of all 50 states for gonorrhea rate.
- the non-Hispanic Black population was disproportionately affected more than any other group. (Illinois
 Department of Public Health, Sexually Transmitted Diseases in Illinois: 2018 Epidemiologic Summary and Yearly
 Trends Data for 2009 2018). See Exhibit 101. In 2018, the gonorrhea rates were:
 - o Non-Hispanic Black: 751.4 per 100,000 population
 - Non-Hispanic American Indian/Alaskan Native: 212.2 per 100,000 population
 - o Hispanics: 126.2 per 100,000 population
 - o Non-Hispanic White: 64.5 per 100,000 population.

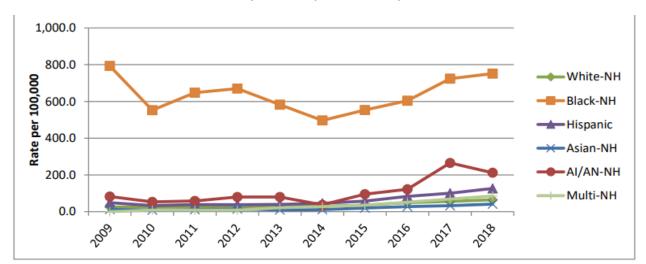


Exhibit 101: Gonorrhea Rates by Race/Hispanic Ethnicity - Illinois, 2009 - 2018

Source: Illinois Department of Public Health, Sexually Transmitted Diseases in Illinois: 2018 Epidemiologic Summary and Yearly Trends Data for 2009 – 2018, at:

https://dph.illinois.gov/content/dam/soi/en/web/idph/files/publications/2018-il-std-surveillance-report.pdf

Syphilis

Syphilis is a sexually transmitted infection (STI) caused by the bacteria Treponema pallidum. Without early and adequate treatment, syphilis can have serious health impacts. The infection usually follows a progression of four stages that can last for weeks to years: primary, secondary, latent and tertiary. "Early syphilis" is a term used for the primary, secondary and early latent stages.

In 2019, there were 13.4 cases of primary and secondary syphilis per 100,000 population in McLean County, which is above the 2019 Illinois rate (10.8 cases per 100,000 population) and the United States rate of 11.9 cases per 100,000. The McLean County rate is in the worst 25th percentile range (red indicator) compared to other Illinois counties and the rate is higher than the prior value in 2018 (8.7 cases per 100,000 population). The rate is trending unfavorably, but not in a statistically significant direction (Conduent Healthy Communities Institute, National Center for HIV/AIDS, Viral Hepatitis, Sexually Transmitted Diseases and Tuberculosis Prevention, 2019). See Exhibit 102.

Exhibit 102: Primary and Secondary Syphilis Rate - McLean County, 2019











McLean County 13.4 cases/100,000 population

Early syphilis case counts for McLean County have been in the double-digits since 2018. See Exhibit 103.

Exhibit 103: Early Syphilis Case Count - McLean County, 2015 – 2020 (Primary, Secondary, and Early Latent Stages)

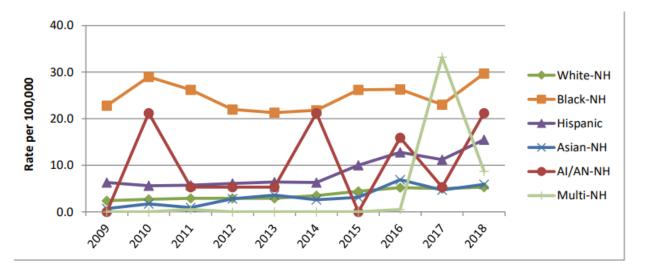
Year	McLean County Case Count	Illinois, Excluding Chicago, Case Count	Illinois Total Case Count
2020	16*	485*	1,878*
2019	36	1095	2,719*
2018	13	639	1,862
2017	4	808	2,417
2016	7	836	2,398
2015	2	622	1,974

^{* 2020} data is considered provisional only.

Source: Illinois Department of Public Health, Sexually Transmitted Diseases, Data and Statistics, Publications, Reportable STD by Morbidity Responsibility Area—2018/2019 and 2019/2020, at https://dph.illinois.gov/topics-services/diseases-and-conditions/stds/data-statistics.html.

In Illinois, disparities in primary and secondary syphilis cases can be seen by race and ethnicity, with non-Hispanic Black residents disproportionately affected more than any other group, with a rate of 29.7 per100,000 compared to the group with the lowest rate, non-Hispanic White, with a rate of 5.3 per100,000. See Exhibit 104.

Exhibit 104: Primary and Secondary Syphilis Rates by Race/Hispanic Ethnicity - Illinois, 2009 - 2018



Source: Illinois Department of Public Health, Sexually Transmitted Diseases in Illinois: 2018 Epidemiologic Summary and Yearly Trends Data for 2009 – 2018, at:

https://dph.illinois.gov/content/dam/soi/en/web/idph/files/publications/2018-il-std-surveillance-report.pdf

Disparities

In Illinois in 2018 for primary and secondary syphilis:

- syphilis cases in males were 91.4 %
- individuals ages 25-29 years had the highest rate (35.2 per 100,000)
- Illinois ranked 13th out of the 50 states for primary and secondary syphilis
- the non-Hispanic Black population was disproportionately affected more than any other group. (Illinois Department of Public Health, Sexually Transmitted Diseases in Illinois: 2018 Epidemiologic Summary and Yearly Trends Data for 2009 2018). See Exhibit____. In 2018, the rates were:
 - o Non-Hispanic Black: 29.7 per 100,000
 - o Non-Hispanic American Indian/Alaskan Native: 21.2 per 100,000 population
 - o Hispanic: 15.5 per 100,000 population
 - o Multiple Race Non-Hispanic: 8.7 per 100,000 population
 - o Non-Hispanic Asian: 5.9 per 100,000 population
 - o Non-Hispanic White: 5.3 per 100,000 population.

Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS)

The Human Immunodeficiency Virus (HIV) is a virus that attacks the human immune system and interferes with the body's ability to fight infections. It can be transmitted through contact with infected blood, semen, or vaginal fluids. Acquired Immunodeficiency Syndrome (AIDS) is a chronic condition that is caused by HIV. Medications can control the infection and prevent disease progression.

From 2018 through May 2021, there has been a gradual decrease of HIV diagnosed in McLean County. In 2018, 17 newly diagnosed HIV cases and two newly diagnosed cases of AIDS were identified. In 2019, eight individuals were newly diagnosed with HIV and five cases of AIDS were diagnosed. In 2020, three newly diagnosed cases of HIV and two newly diagnosed cases of AIDS were identified. As of May 2021, one newly diagnosed case of HIV and zero cases of AIDS were identified. Lower numbers in 2020 – 2021 may be due to some clinics being closed or hours minimized, or clients skipping regular health checkups due to the COVID-19 pandemic. Exhibit 105 lists cases of HIV and AIDS from 2016 - 2021 in McLean County.

Exhibit 105: Cases of HIV and AIDS - McLean County, 2016 - 2021

	2016	2017	2018	2019	2020	2021 (through 5/31/21)
HIV	8	16	17	8	3	1
AIDS	3	6	2	5	2	0

Source: Illinois Department of Public Health, HIV/AIDS Monthly Surveillance Update, 2016 - May 2021.

In 2019, the Illinois Department of Public Health, the Chicago Department of Public Health and the AIDS Foundation of Chicago introduced a new five-year plan to end the HIV epidemic in Illinois by 2030 using the Getting to Zero Illinois (GTZ-IL) initiative. The plan included strategies to reduce the number of new HIV infections to assist Illinois in reaching "functional zero," the point at which the HIV epidemic cannot be sustained.

As of 2022, educational efforts remain underway to increase awareness of key GTZ strategies: 1) to increase the number of people living with HIV who are taking medications to achieve viral suppression, when HIV cannot be transmitted sexually, a concept known as Undetectable = Untransmittable, or U=U; and, 2) to increase the use of PrEP (preexposure prophylaxis), a daily pill nearly 100% effective at preventing HIV transmission, among persons vulnerable to HIV.

Vaccine Preventable Diseases

Pneumonia and Influenza

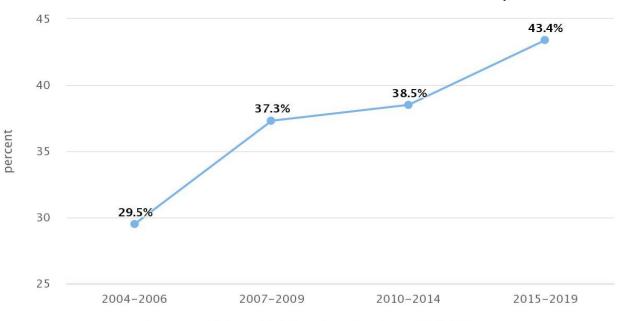
Influenza (flu) is a contagious respiratory disease caused by the influenza virus. It can cause mild to severe illness as well as pneumonia, which is an infection of the lungs. On average, about eight percent (range of three – 11 percent) of the U.S. population gets sick from influenza every year, and in 2018, approximately 1.5 million people were diagnosed with pneumonia in the emergency department and more than 40,000 died from it (Centers for Disease Control and Prevention, Disease Burden of Flu, 2022).

Thirty-three percent of McLean County adults have received a pneumonia vaccine at some point in their lifetime. This is in the worst 25th percentile range (red indicator) when compared to other counties in Illinois (Conduent Healthy Communities Institute, Illinois Behavioral Risk Factor Surveillance System, 2015 - 2019).

During the 2019 – 2020 flu season, there were an estimated 380,000 hospitalizations for flu and 20,000 deaths in the United States. The annual influenza vaccine can help prevent serious illness and death; however, only about half of the U.S. population ages six months and older gets vaccinated for flu. During the 2020 – 2021 flu season, 52.1 percent of that population group were vaccinated. Nationally, flu vaccination coverage for adults has increased over the past three flu seasons (2018/2019; 2019/2020; 2020/2021) and, until the 2020/2021 flu season, flu vaccination coverage for children had increased as well. The Centers for Disease Control and Prevention (CDC) continues to recommend that everyone ages six months and older get a flu vaccine every year (Centers for Disease Control and Prevention, Disease Burden of Flu, 2022).

According to the Illinois Behavioral Risk Factor Surveillance System (2015 - 2019), 43.4 percent of McLean County adults received an influenza vaccination in the past 12 months. McLean County does not meet the Healthy People 2030 goal of 70 percent. When compared to other counties in Illinois, McLean County falls in the best 0 - 50 percentile range (green indicator) compared to other counties in Illinois for this measure, and its vaccination rate has been increasing since 2004, from 29.5 percent to 43.4 percent (Conduent Healthy Communities Institute, Illinois Behavioral Risk Factor Surveillance System, 2015 - 2019). See Exhibit 106.

Exhibit 106: Adults with Influenza Vaccination - McLean County, 2004 - 2019



Source: Illinois Behavioral Risk Factor Surveillance System (2015-2019)

Source: Conduent Healthy Communities Institute, Illinois Behavioral Risk Factor Surveillance System, 2015 - 2019.

The annual age-adjusted emergency room visit rate due to immunization-preventable pneumonia and influenza for 2018-2020 was 14.9 visits per 10,000 population ages 18 years or older (Conduent Health Communities Institute, Illinois Hospital Association, 2018 - 2020). When compared to other counties in Illinois, this measure falls in the best 0 - 50th percentile range (green indicator).

McLean County's age-adjusted death rate due to influenza and pneumonia is 8.3 deaths per 100,000 population, which is in the best 0 - 50th percentile range (green indicator) when compared to other counties in Illinois (Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2018-2020). The rate is lower than the Illinois rate (15.1 deaths per 100,000 population), but not statistically different from the prior value for McLean County (8.6 deaths per 100,000 population). The rate is trending favorably in a statistically significant direction. See Exhibit 107 below.

Exhibit 107: Age-Adjusted Death Rate Due to Influenza and Pneumonia – McLean County, 2018 - 2020









McLean County 8.3 Deaths/100,000 population

Source: Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2018 - 2020.

Published vital records data for McLean County indicate that deaths from influenza and pneumonia ranked in the top ten leading causes of death in 2019 (9 deaths) and 2020 (21 deaths). Between 2008 and 2020, the number of deaths per year ranged from a low of 9 (2019) to a high of 29 (2012) (Illinois Department of Public Health, Data and Statistics, Death Statistics, 2008 – 2020). See Exhibit 108 below.

Exhibit 108: Deaths Due to Influenza and Pneumonia – McLean County, 2008 - 2020

	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
# Deaths	22	20	20	21	29	19	15	20	13	23	14	9	21

Source: Illinois Department of Public Health, Data and Statistics, Death Statistics, 2008 - 2020, http://www.dph.illinois.gov/data-statistics/vital-statistics/death-statistics/more-statistics.

Disparities

In the United States:

- Non-Hispanic Black children have lower flu vaccination coverage than other children.
- Hispanic children have lower flu vaccination coverage than non-Hispanic White children.
- Non-Hispanic Black adults had lower flu vaccination coverage than non-Hispanic White adults and adults of other races.
- Hispanic adults had lower flu vaccination coverage than non-Hispanic White adults and adults of other races.

Other Vaccine Preventable Diseases

Immunization Status for School-Age Children

The immunization status of school-age children in McLean County exceeds recommended Illinois Department of Public Health-specified levels necessary to prevent epidemics, according to immunization data collected from public and non-public schools for the 2020 – 2021 school year, the most current data published in 2022 (Illinois State Board of Education, Data Analysis and Accountability Division, Health Requirements/Student Health Data, School Year 2020 - 2021). Over 98 percent of students were fully protected or in compliance with vaccination requirements. The Healthy People 2030 goal for Measles-Mumps-Rubella (MMR) vaccination (2-doses for children by kindergarten) is 95 percent. McLean County has exceeded the national goal of completion of two doses of MMR. See Exhibit 109 below.

Exhibit 109: Compliance with Required Immunizations for School (Public and Non-Public) – McLean County, 2020 - 2021

Immunization Type	McLean County Compliance with Vaccination Requirements	Illinois Department of Public Health Minimum Vaccination Level Necessary to Prevent Epidemics	Healthy People 2030 Goal
Polio	97.98%	90%	90% (HP 2020)
DTP (diphtheria; tetanus;			
pertussis)	98.07%	90%	90%
Measles (Rubeola)	98.06%	90%	95%
Mumps	98.06%	90%	95%
Rubella (German Measles)	98.06%	90%	95%

Sources: Illinois State Board of Education, Data Analysis and Accountability Division, Health Requirements/Student Health Data, School Year 2020 - 2021; https://www.isbe.net/Pages/Health-Requirements-Student-Health-Data.aspx.

Healthy People 2020, Immunization and Infectious Disease, Objectives, https://www.healthypeople.gov/2020/topics-objectives/topic/immunization-and-infectious-diseases/objectives, 2022.

Healthy People 2030, Infectious Disease, Objectives, https://health.gov/healthypeople/objectives-and-data/browse-objectives/infectious-disease, 2022.

Additional school-age data from the 2020 – 2021 school year is available for Tdap (Tetanus, Diphtheria, Pertussis), Hepatitis B and Varicella (Chickenpox); however, the protection rates vary by grade level.

Measles—Mumps—Rubella (MMR)

Measles (Rubeola) is a highly contagious viral illness that is spread through the air via droplets when an infected individual coughs or sneezes. It can also be spread by direct contact if an individual touches a surface that has the virus on it and then touches their eyes, nose, or mouth. Symptoms of measles include a rash that starts on the face and neck, a mild to moderate to high fever, cough, runny nose and red, watery eyes (conjunctivitis). Measles can be dangerous, particularly for babies and young children. It is one of the most contagious diseases. If one person has measles, up to 90% of the people close to that person (if not immune) will become infected. Complications can be serious. One out of every 1,000 people with measles will develop brain swelling, which could lead to brain damage; and, one to three out of 1,000 people with measles will die, even with the best of care given to them (Centers for Disease Control and Prevention, Measles-Rubeola, 2022).

In the United States in 2019, measles outbreaks were occurring in seven states (New York, Michigan, New Jersey, California, Georgia, Maryland and Pennsylvania), primarily related to unvaccinated international travelers (Centers for Disease Control and Prevention, 2019). Since measles was eliminated in the United States in 2000, the annual number of people reported with measles ranged from a low of 37 in 2004 to a high of 839 cases in 2019 (January 1 to May 10, 2019). The 2019 case count is the largest number of cases reported in the United States since 1994. Measles cases in 2019 were confirmed in 23 states, including Illinois (Centers for Disease Control and Prevention, 2019).

As of May 5, 2022, there have been no cases of measles reported in McLean County in decades. The last documented case in McLean County was 1989 (Illinois Department of Public Health, May 2022). In Illinois, over the past 10 years, case numbers have ranged from zero to 17. See Exhibit 110 below for the Illinois case counts from 2010 – 2019.

Exhibit 110: Measles Case Counts - Illinois, 2010 - 2019*

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Number										
of Cases	0	3	0	5	2	17	2	0	5	9*

^{*}Current case count (preliminary) for 2019 in Illinois as of early May 2022.

Source: Illinois Department of Public Health, Diseases and Conditions, Diseases A-Z, Measles, 2019; http://www.dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/measles.

Mumps is an acute infectious viral disease that can cause swelling and tenderness in the salivary glands, causing swelling in the jaw and cheek area. It is spread from person to person by coughing and sneezing as well as through direct contact with the discharges from the nose and throat of infected people. Mumps case counts in McLean County from 2013 - 2016 increased due to two mumps outbreaks in 2015 and 2016. Case counts were 0 in 2013 and 2014. During the 2015 outbreak, 71 cases were reported, and 88 percent of cases were in persons ages 15-24 years. During the 2016 outbreak, 41 cases were reported and 95 percent of cases were in persons ages 15-24 years (McLean County Health Department, Bloomington, Illinois, 2018). See Exhibit 111 for case counts

Exhibit 111: Mumps Case Counts – McLean County, 2006 – 2016

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Number											
of Cases	24	3	NA	NA	NA	NA	1	NA	NA	71	41

NA: not available in the IQuery data set.

Source: Illinois Department of Public Health, IQuery, Mumps, May 2022.

Rubella, also called German measles, is a viral illness that is spread from person to person by breathing in respiratory secretions or droplets that are exhaled from an infected person. Rubella was last reported in McLean County in 1990 (McLean County Health Department, Bloomington Illinois, 2022).

Pertussis (Whooping Cough)

Pertussis is caused by a bacteria called Bordetella pertussis, which lives in the nose, mouth and throat of individuals. It is a highly contagious disease that can easily spread from person to person. Many pertussis cases are not diagnosed and therefore, not reported. Between 2012 and 2016, McLean County saw an increase in the number of pertussis cases (McLean County Health Department, Bloomington, Illinois, 2018). Updated data are no available as this data is no longer being tracked by the Illinois Department of Public Health's IQuery data system. See Exhibit 112 below for case numbers from 2012 - 2016.

Exhibit 112: Pertussis Case Counts – McLean County, 2012 - 2021

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Number of										
Cases	6	9	9	17	11	6	3	5	2	3

Source: Illinois Department of Public Health, IQuery, Pertussis, May 2022.

Healthy People 2030 focuses on preventing infectious diseases by increasing vaccination rates. In both 2015 and 2016, most cases identified in McLean County occurred in children between the ages of 10 to 19 years, 47 percent of cases in 2015 and 54 percent in 2016. For comparison, from 2010 – 2014, 19 percent of cases occurred in children under the age of one and 27 percent occurred in individuals 11 to 18 years of age. During this period, pertussis cases in McLean County

and Illinois declined 33 percent and 38 percent, respectively (Illinois Department of Public Health, IQuery, 2010 - 2014). In 2016, there were 11 cases of pertussis in McLean County. All cases occurred in individuals aged 19 and under. (Illinois Department of Public Health, IQuery, 2016). For a 12-year trend, see Exhibit 113 below for the Illinois and McLean County case counts.

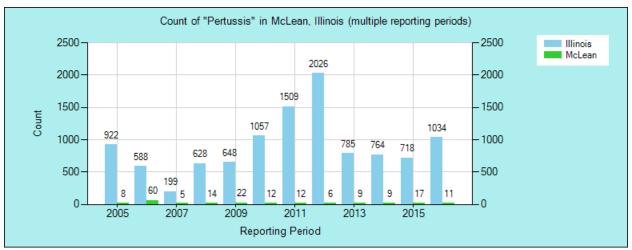


Exhibit 113: Case Counts of Pertussis by Year—McLean County and Illinois, 2005 – 2016

Source: Illinois Department of Public Health, IQuery Data System, Pertussis, 2005 – 2016.

Varicella (Chickenpox)

Varicella, commonly called chickenpox, is a highly contagious disease caused by the virus, varicella zoster. When one person has chickenpox, up to 90 percent of the individuals close to that person, who are not immune to the disease, will also become infected. It is spread person to person by direct contact with secretions from respiratory tracts, direct contact with fluid from the chickenpox blisters, and by handling an infected person's bedding or clothing. Chickenpox can be a serious disease and even life-threatening, especially for infants, pregnant women, and people with weakened immune systems (Centers for Disease Control and Prevention, Chickenpox-Varicella, 2022). Once an individual has had chickenpox, then shingles can also occur. The risk for shingles increases as a person ages (Centers for Disease Control and Prevention, Shingles—Herpes Zoster, 2022).

Data on the number of varicella outbreaks that occur each year in the United States is lacking due to variations in reporting requirements. In the United States, a vaccine was licensed for use in March 1995. Since its introduction, the number of outbreaks has decreased, demonstrated through the Centers for Disease Control and Prevention's Varicella Active Surveillance Project (VASP) that was active from 1995 - 2010. Due to implementation of the two-dose varicella vaccine, sites participating in VASP saw a 90 percent decrease in varicella cases from 1995 - 2008. Among infants, varicella disease decreased 90 percent (1995 - 2008) and 74 percent among adults (1995 - 2005) (Centers for Disease Control and Prevention, Varicella Active Surveillance Project). Prior to vaccine availability, about 4 million people got chickenpox every year in the U.S., with over 10,500 hospitalized and about 100 – 150 deaths. Healthy People 2030 focuses on preventing infectious diseases by increasing vaccination rates. (Centers for Disease Control and Prevention, Chickenpox-Varicella, 2022).

In Illinois, varicella remains a reportable disease. Case reports dropped 90% from 2009 (40 cases reported) to 2021 (4 cases reported) in McLean County (Illinois Department of Public Health, IQuery, 2009 - 2016) (Illinois Department of Public Health, Office of Disease Control – INEDSS, 2017 – 2021). See Exhibit 114 below:

Exhibit 114: Varicella (Chickenpox) Case Counts – McLean County, 2009 – 2021

	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Number													
of Cases	40	25	18	25	23	6	15	10	13	15	3	5	4

Source: Illinois Department of Public Health, IQuery, Chickenpox, 2009- 2016, May 2022.

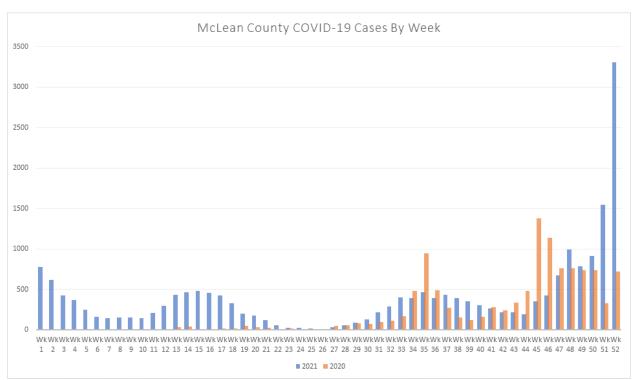
Source: Illinois Department of Public Health, Office of Disease Control – INEDSS, 2017 – 2021, May 2022.

COVID-19 (SARS-CoV-2)

COVID-19 is a disease caused by a virus called SARS-CoV-2. It can be spread by breathing in droplets and particles in the air that contain the virus when close to an infected person who is exhaling (e.g., talking, singing, coughing), or when the droplets or particles come into contact with a person's mouth, nose or eyes; or, when an individual touches their own mouth, nose or eyes with hands that have the virus on them. Symptoms range from none, to mild, to very severe. Post-COVID-19 conditions have also been identified and can be long-lasting. Even individuals who only experienced mild symptoms may experience post-COVID-19 conditions. In 2020, COVID-19 was declared a pandemic and that status was continued in 2021 and 2022. Vaccines, testing and treatments became more readily available in 2021; however, by May of 2022, the nation approached a milestone of one million deaths from COVID-19, and over 82 million cases documented (Centers for Disease Control and Prevention, COVID-19 Data Tracker, May 2022).

McLean County experienced its first reported case of COVID-19 on March 19, 2020. The McLean County Health Department and the Illinois Department of Public Health tracked the number of COVID-19 cases reported each week. By May 13, 2022, the total number of probable and confirmed cases of COVID-19 reported in McLean County since March of 2020 was 52,241. Exhibit 115 reflects the number of COVID-19 cases reported by week in McLean County in both 2020 and 2021.

Exhibit 115: Case Count of Reported COVID-19 by Week - McLean County, 2020 - 2021



Source: Illinois Department of Public Health, IL-National Electronic Disease Surveillance System (INEDSS), McLean County Case Counts, 2020 – 2021.

As of May 6, 2022, McLean County had an incidence rate of 48.14 cases per 100,000 population. This rate is in the worst 25th percentile range (red indicator) compared to other counties in Illinois and is higher than the both the Illinois and U.S. values. The value is increasing and in a statistically significant direction. See Exhibit 116.

Exhibit 116: COVID-19 Daily Average Incidence Rate - McLean County, May 6, 2022



IL Counties



U.S. Counties



IL Value (16.51)



US Value Prior Value (11.46) (44.08)



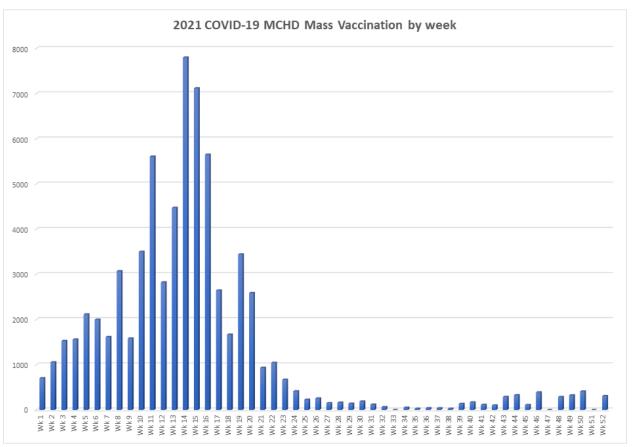
Trend

McLean County 48.14 cases/100,000 population

Source: Conduent Healthy Communities Institute, CSSE at Johns Hopkins University data repository, May 6th, 2022.

Two COVID-19 vaccines (Pfizer and Moderna) became available in late December 2020 under Federal Drug Administration (FDA) Emergency Use Authorizations. Vaccine campaigns for eligible individuals began in earnest in January 2021. By December 31, 2021, the McLean County Health Department, along with community partners, had sponsored 171 mass vaccination clinics: 113 at the Grossinger Motors Arena, 12 at Illinois State University, 14 through community events, and 32 coordinated through community groups, including those in rural communities. Many additional venues were available to receive vaccines throughout 2021 – 2022, including pharmacies, primary care offices, the McLean County Health Department Immunization Clinic, student health services, and the offices of pediatricians. See Exhibit 117 for the number of doses of vaccine administered per week in 2021 through McLean County Health Department mass vaccination clinics.

Exhibit 117: Number Vaccine Doses Administered per Week at McLean County Health Department Mass Vaccination Clinics - McLean County, 2021



Source: McLean County Health Department, Weekly Vaccination Numbers, Juvare Electronic Record System, 2021.

Listed below, from data available as of May 11, 2022, is the percentage of McLean County residents who are fully vaccinated in comparison to Illinois and U.S. totals. (Illinois Department of Public Health, COVID-19 Vaccine Administration Data, May 2022; Centers for Disease Control and Prevention, COVID-19 Data Tracker, May 2022).

United States.: 66.3% are fully vaccinated

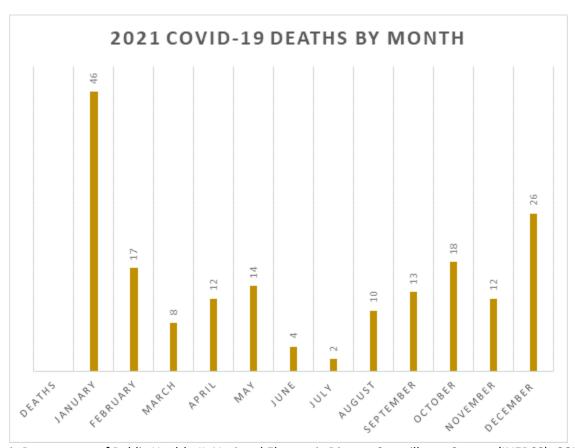
Illinois: 64.79% of residents are fully vaccinated

McLean County: 62.5% are fully vaccinated

Fully vaccinated ages 5-11 years: 38.13%
 Fully vaccinated ages 12 – 17 years: 64.22%
 Fully vaccinated ages 18 – 64 years: 64.15%
 Fully vaccinated ages 65 and above: 93.35%

The first COVID-19-related death in McLean County was announced on March 21, 2020 (McLean County Health Department, 2021 Annual Report). As of May 13, 2022, there had been 364 COVID-related deaths in McLean County since March of 2020. See Exhibit 118 for a graph of COVID-19 deaths by month in 2021.

Exhibit 118: COVID-19 Deaths by Month - McLean County, 2021



Source: Illinois Department of Public Health, IL-National Electronic Disease Surveillance System (INEDSS), COVID-19 Deaths, 2021.

The COVID-19 pandemic has impacted all communities, although a disproportionate burden can be seen among some racial and ethnic groups at the local, state and national level. As of mid-May 2022, the Illinois Department of Public Health documented, for McLean County, on its website a cumulative (March 2020 – mid-May 2022) total of 52,655 cases of COVID-19 and 294 confirmed deaths. The McLean County Health Department tracks both confirmed deaths from COVID-19 (79.57 percent of the total number of COVID-19 deaths) as well as "probable" COVID-19 deaths (20.43 percent of the total), with a cumulative total (March 2020 – mid-May 2022) of 364 confirmed and probable deaths due to COVID-19. The Non-Hispanic Black population experienced a higher percentage of cases of COVID-19 compared to the percent this population represents in the county population; however, the percent of deaths among Non-Hispanic Black residents was not disproportionate (Illinois Department of Public Health, COVID-19 Statistics, May 2022). See Exhibit 119:

Exhibit 119: COVID-19 Cases and Confirmed Deaths by Race and Ethnicity – McLean County, May 2022

	Percent Cases of COVID-19 N=52,655 Cases in McLean County	Percent of the McLean County Population Represented by this Race/Ethnicity (based on 2021 Census Data)	Confirmed Deaths due to COVID-19 (does not include probable cases)
Non-Hispanic White			
	60.4%	79.2%	61.83%
Non-Hispanic Black	9.51%	8.4%	8.34%
Hispanic			
	5.79%	5.2%	1.62%
American Indian/Alaskan Native			
	2.11%	0.3%	0.00%
Asian	2.23%	5.1%	0.00%
Left Blank, Unknown or Other	19.8%	1.8%	7.8%

Source: Illinois Department of Public Health, COVID-19 Statistics, May 2022.

Source: McLean County Health Department, Communicable Disease Program, COVID-19 Confirmed Death Statistics, May 2022.

A further example of disparities can be seen in McLean County COVID-19 vaccination rates, where rates for Non-Hispanic Black, Hispanic, and American Indian/Alaskan Native residents are behind that of Non-Hispanic White, Asian and the total population (Illinois Department of Public Health, COVID-19 Vaccine Administration Data, McLean County, May 2022). See Exhibit 120:

Exhibit 120: Vaccination Status for Fully Vaccinated Residents by Race and Ethnicity – McLean County, May 2022

	Percent Fully Vaccinated In McLean County	Percent of the McLean County Population (based on 2019 Census Data)
Total Population	63.24%	NA
Non-Hispanic White		
	62.50%	79.2%
Non-Hispanic Black		
	50.74%	8.4%
Hispanic	59.89%	5.2%
American Indian/Alaskan Native	57.50%	0.3%
Asian	73.53%	5.1%

Source: Illinois Department of Public Health, COVID-19 Vaccine Administration Data, McLean County, May 2022.

Disparities

In McLean County:

• COVID-19 vaccination rates for all race and ethnic groups, except Asian residents, trail Non-Hispanic White resident vaccination rates.

 the percentage of COVID-19 cases for Non-Hispanic Black, Hispanic, and American Indian/Alaskan Native residents is disproportionate to the percent of the McLean County population represented by their race or ethnicity.

Mental Health

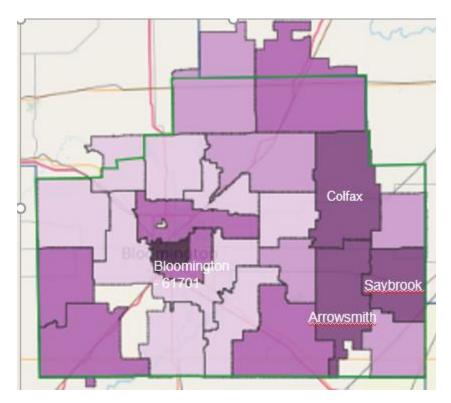
Mental illnesses are one of the leading causes of disability in the United States. In any given year, approximately 13 million American adults have a seriously debilitating mental illness. Unstable mental health can lead to suicide, which accounts for the death of approximately 30,000 Americans every year (Conduent Healthy Communities Institute, 2022). Additionally, one in five Americans will experience a mental illness in a given year, one in five children, either currently or at some point during their life, have had a seriously debilitating mental illness and one in 25 Americans lives with a serious mental illness, such as schizophrenia, bipolar disorder, or major depression (Centers for Disease Control and Prevention, Mental Health. November 22, 2021.

Mental Health Index

Mental health is known to be strongly correlated with financial stability, access to health care services, and social environment. The Mental Health Index considers validated indicators related to access to care, physical health status, transportation, employment, and household environment to identify areas at highest risk for experiencing poor mental health. All ZIP codes, census tracts, and counties in the United States are given an index value from 0 (low need) to 100 (high need). Communities with the highest values are estimated to have the highest socioeconomic and health needs correlated with self-reported poor mental health. Ranks and colors help to identify the relative level of need within a community or service area. The national index value for each location is compared to all other similar locations within the community area to assign a **relative rank (from 1 to 5)** locally. These ranks are used to color the map and chart for the Mental Health Index, with darker coloring associated with higher relative need (Conduent Healthy Communities Institute, 2021).

See Exhibit 121 below for McLean County's Mental Health Index.

Exhibit 121: Mental Health Index – McLean County, 2021



MAP LEGEND greater need →

1 2 3 4 5

Source: Conduent Healthy Communities Institute, 2021.

Age-Adjusted Emergency Room Rates

Mental Health (Adults)

The age-adjusted emergency room rate due to mental health is 80.2 emergency room visits per 10,000 population ages 18 years and older for McLean County. The rate is in the best 0 - 50th percentile range (green indicator) compared to other counties in Illinois (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). The rate is lower than the Illinois value of 92. 9 emergency room visits per 10,000 population and is not statistically different from the 2017 – 2019 rate of 84 emergency room visits per 10,000 population. The rate for Bloomington ZIP code 61701 (144.7 emergency room visits per 10,000 population 18+ years), however, is in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois. See Exhibit 122 below for an illustration of this data.

Exhibit 122: Age-Adjusted Emergency Room Rate Due to Mental Health - McLean County versus Bloomington ZIP Code 61701, 2018 – 2020

McLean County

Bloomington - 61701





IL Counties

IL Zip Codes

80.2 ER visits per 10,000 population 18+ years 144.7 ER visits per 10,000 population 18+ years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 – 2020.

Disparities

The highest emergency room rates occur in:

- individuals 18 24 years (101.4 emergency room visits per 10,000 population 18+ years)
- individuals 25 34 years (122.0 emergency room visits per 10,000 population 18+ years)
- Blacks or African Americans (212.6 emergency room visits per 10,000 population 18+ years)
- Bloomington ZIP code 61701 (144.7 emergency room visits per 10,000 population 18+ years).

Pediatric Mental Health

The rate for age-adjusted emergency room visits due to pediatric mental health (less than 18 years) for McLean County is 86.3 emergency room visits per 10,000 population (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 – 2020). This is in the worst 50th to 75th percentile range (yellow indicator) compared to other counties in Illinois. The McLean County value is higher than the Illinois value of 64.7 emergency room visits per 10,000 population less than 18 years of age and is not statistically different from the prior value (2017 – 2019) of 95.0 emergency room visits per 10,000 population less than 18 years of age. The rate for Bloomington ZIP code 61701 (156.2 emergency room visits per 10,000 population <18 years) is the worst 25th percentile range (red indicator) compared to ZIP codes in Illinois. See Exhibit 123 below.

Exhibit 123: Age-Adjusted Emergency Room Rate for Pediatric Mental Health - McLean County versus Bloomington ZIP Code 61701, 2018 – 2020

McLean County

Bloomington - 61701





IL Counties

IL Zip Codes

86.3 ER visits / 10,000 population <18 years

156.2 ER visits / 10,000 population <18 years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 – 2020.

Disparities

The highest emergency room rates occur in:

- individuals 10 14 years (148.5 emergency room visits per 10,000 population < 18 years)
- individuals 15 17 years (213.5 emergency room visits per 10,000 population <18 years) which is 147 percent higher (nearly 2 ½ times) the county rate
- Blacks or African Americans (118.4 emergency room visits per 10,000 population <18 years)
- Bloomington ZIP code 61701 (156.2 emergency room visits per 10,000 population <18 years).

Suicide and Intentional Self-inflicted Injury (Adults)

The rate for age-adjusted emergency room visits for adults due to suicide and intentional self-inflicted injury in McLean County is 47.7 emergency room visits per 10,000 population ages 18 years and older (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 – 2020). This is in the worst 50th – 75th percentile range (yellow indicator) compared to other counties in Illinois. It is also higher than the Illinois value (40.5 emergency room visits per 10,000 population 18 + years) and is not statistically different from the prior value in 2017 – 2019 (43.7 emergency room visits per 10,000 population 18 years and older). The rates for Bloomington ZIP code 61701 (97.6 emergency room visits per 10,000 population 18 years and older) and McLean ZIP code 61754 (55.5 emergency room visits per 10,000 population 18 years and older) are in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois. See Exhibit 124 below.

Exhibit 124: Age-Adjusted Emergency Room Rate Due to Suicide and Intentional Self-Inflicted Injury for Population 18+ Years - McLean County versus Bloomington ZIP Code 61701 and McLean ZIP Code 61754, 2018 - 2020

McLean County

Bloomington - 61701

McLean - 61754

IL Zip Codes

47.7

ER visits / 10,000 population
18+ years

Bloomington - 61701

McLean - 61754

IL Zip Codes

IL Zip Codes

ER visits / 10,000 population
18+ years

18+ years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Disparities

The highest emergency room visit rates due to suicide and intentional self-inflicted injury occur in:

- individuals 18 24 years (73.3 emergency room visits per 10,000 population 18+ years)
- individuals 25 34 years (76.6 emergency room visits per 10,000 population 18+ years)
- Blacks or African Americans (103.1 emergency room visits per 10,000 population 18+ years)
- Bloomington ZIP code 61701 (97.5 emergency room visits per 10,000 population 18+ years)
- McLean ZIP code 61754 (55.5 emergency room visits per 10,000 population 18+ years).

Adolescent Suicide and Intentional Self-inflicted Injury

The rate for age-adjusted emergency room visits due to adolescent suicide and intentional self-inflicted injury in McLean County is 151.5 emergency room visits per 10,000 population 10 - 17 years of age (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). This is in the worst 25^{th} percentile range (red indicator) compared to other counties in Illinois and is higher than the Illinois value of 78 emergency room visits per 10,000 population 10 - 17 years of age. It is not statistically different from the prior value (2017 - 2019) of 142.9 emergency room visits per 10,000 population 10 - 17 years of age. The rate for Bloomington ZIP code 61701 is 257.5 emergency room visits per 10,000

population 10 – 17 years of age. Like the county rate, this is also in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois. See Exhibit 125 below.

Exhibit 125: Age-Adjusted Emergency Room Rate Due to Adolescent Suicide and Intentional Self-Inflicted Injury for 10 – 17 Years of Age - McLean County versus Bloomington ZIP Code 61701, 2018 - 2020

McLean County

IL Counties

151.5 ER visits / 10,000 population 10 – 17 years Bloomington - 61701



IL Zip Codes

257.5 ER visits / 10,000 population 10 – 17 years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Disparities

The highest emergency room visit rates for adolescent suicide and intentional self-inflicted injury occur in:

- individuals 15 17 years old (217.6 emergency room visits per 10,000 population 10 17 years)
- females (193.5 emergency room visits per 10,000 population 10 17 years)
- Bloomington ZIP code 61701 (257.5 emergency room visits per 10,000 population 10 17 years).

Age-Adjusted Hospitalization Rates

Mental Health (Adults)

The age-adjusted hospitalization rate due to mental health is 35.1 hospitalizations per 10,000 population ages 18 years and older for McLean County. The rate is in the worst 50th – 75th percentile range (yellow indicator) compared to other counties in Illinois (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). The rate is lower than the Illinois value of 53.1 hospitalizations per 10,000 population and is not statistically different from the 2017 – 2019 rate of 31.4 hospitalizations per 10,000 population. The rates for Bloomington ZIP code 61701 (70.6 hospitalizations per 10,000 population 18+ years) and Gridley ZIP code 61744 (63 hospitalizations per 10,000 population 18+ years), however, are in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois. See Exhibit 126 below for an illustration of this data.

Exhibit 126: Age-Adjusted Hospitalization Rate Due to Mental Health - McLean County versus Bloomington ZIP Code 61701 and Gridley ZIP Code 61744, 2018 – 2020

McLean County

IL Counties

35.1 Hospitalizations per 10,000 population 18+ years Bloomington - 61701



IL Zip Codes

70.6 Hospitalizations per 10,000 population 18+ years Gridley – 61744



IL Zip Codes

63.0 Hospitalizations per 10,000 population 18+ years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 – 2020.

Disparities

The highest hospitalization rates occur in:

- individuals 25 34 years (47.8 hospitalizations per 10,000 population 18+ years)
- individuals 35 44 years (42.2 hospitalizations per 10,000 population 18+ years)
- Blacks or African Americans (77.3 hospitalizations per 10,000 population 18+ years)
- Bloomington ZIP code 61701 (70.6 hospitalizations per 10,000 population 18+ years)
- Gridley ZIP code 61744 (63 hospitalizations per 10,000 population 18+ years).

Pediatric Mental Health

The rate for age-adjusted hospitalization rate due to pediatric mental health (<18 years) for McLean County is 25.1 hospitalizations per 10,000 population (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 – 2020). This is in the best 0 – 50th percentile range (green indicator) compared to other counties in Illinois. The McLean County value is lower than the Illinois value of 40.9 hospitalizations per 10,000 population less than 18 years of age and is not statistically different from the prior value (2017 – 2019) of 22.7 hospitalizations per 10,000 population less than 18 years of age. There are no high Health Equity Needs ZIP codes in McLean County that are in the worst 25th percentile range compared to other ZIP codes in Illinois. See Exhibit 127 below.

Exhibit 127: Age-Adjusted Hospitalization Rate for Pediatric Mental Health - McLean County, 2018 – 2020

McLean County Rate







25.1 Hospitalizations/ 10,000 population under 18 years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 – 2020.

Disparities

The highest hospitalization rates occur in:

- individuals 10 14 years (46.7 hospitalizations per 10,000 population < 18 years)
- individuals 15 17 years (65.3 hospitalizations per 10,000 population <18 years) which is 160 percent (>2 ½ times) higher than the county rate.

Suicide and Intentional Self-inflicted Injury (Adults)

The age-adjusted hospitalization rate for adults due to suicide and intentional self-inflicted injury in McLean County is 38.0 hospitalizations per 10,000 population ages 18 years and older (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). This is in the worst $50^{th} - 75^{th}$ percentile range (yellow indicator) compared to other counties in Illinois. It is lower than the Illinois value (42.7 hospitalizations per 10,000 population 18 + years) and is not statistically different from the prior value in 2017 - 2019 (35.5 hospitalizations per 10,000 population 18+ years). Two

high Health Equity Needs ZIP codes are in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois; Bloomington ZIP code 61701 (79.2 hospitalizations per 10,000 population 18+ years) and Gridley ZIP code 61744 (51.7 hospitalizations per 10,000 population 18+ years). See Exhibit 128 below.

Exhibit 128: Age-Adjusted Hospitalizations Due to Suicide and Intentional Self-Inflicted Injury for Population 18+
Years - McLean County versus Bloomington ZIP Code 61701 and
Gridley ZIP Code 61744, 2018 - 2020

McLean County

IL Counties

38.0 Hospitalizations / 10,000 population 18+ years Bloomington - 61701



IL Zip Codes

79.2 Hospitalizations / 10,000 population 18+ years Gridley - 61744



IL Zip Codes

51.7 Hospitalizations/ 10,000 population 18+ years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Disparities

The highest hospitalizations due to suicide and intentional self-inflicted injury occur in:

- individuals 25 34 years (50.7 hospitalizations per 10,000 population 18+ years)
- Blacks or African Americans (70.5 hospitalizations per 10,000 population 18+ years)
- Bloomington ZIP code 61701 (79.2 hospitalizations per 10,000 population 18+ years)
- Gridley ZIP code 61744 (51.7 hospitalizations per 10,000 population 18+ years).

Adolescent Suicide and Intentional Self-inflicted Injury

The rate for age-adjusted hospitalizations due to adolescent suicide and intentional self-inflicted injury in McLean County is 44.4 hospitalizations per 10,000 population 10 - 17 years of age (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). This is in the best $0 - 50^{th}$ percentile range (green indicator) compared to other counties in Illinois and is lower than the Illinois value of 68.4 hospitalizations per 10,000 population 10 - 17 years of age. It is not statistically different from the prior value (2017 - 2019) of 36.9 hospitalizations per 10,000 population 10 - 17 years of age. There are no high Health Equity Needs ZIP codes in McLean County that are in the worst 25^{th} percentile range compared to other ZIP codes in Illinois. See Exhibit 129 below.

Exhibit 129: Age-Adjusted Hospitalizations Due to Adolescent Suicide and Intentional Self-Inflicted Injury for 10 - 17 Years of Age for McLean County, 2018 - 2020

McLean County



IL Counties





44.4
Hospitalizations / 10,000
population
10 – 17 years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Disparities

There are no disparities for race/ethnicity, age, or gender.

Suicide Deaths

The age-adjusted death rate due to suicide in McLean County is 12.9 deaths per 100,000 population (Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2018 - 2020). This is in the best 0 - 50th percentile range (green indicator) compared to other counties in the United States but it is higher than the Illinois value (10.9 deaths per 100,000 population). The rate is not statistically different from the prior value (2017 – 2019) for McLean County (12.0 deaths per 100,000 population) is trending unfavorably in a statistically significant direction and does not meet the Healthy People 2030 target (12.8 deaths per 100,000 population). See Exhibit 130 below for an illustration of this data.

Exhibit 130: Age-Adjusted Death Rate Due to Suicide - McLean County, 2007 - 2020







(12.0)



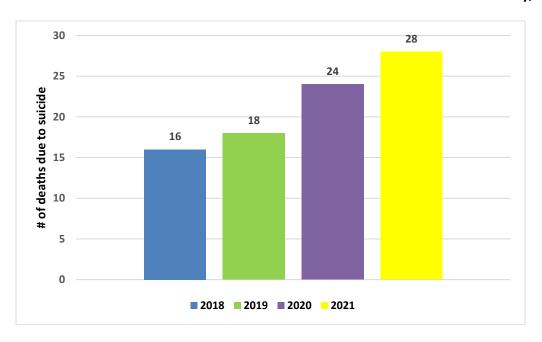


McLean County 12.9 Deaths / 100,000 population

Source: Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2018 - 2020.

There were 28 deaths due to suicide in McLean County in 2021 (McLean County Coroner, 2021). Exhibit 131 below shows the number of deaths due to suicide from 2018 - 2021. Over time, the number of deaths due to suicide is increasing.

Exhibit 131: Number of Deaths Due to Suicide - McLean County, 2018 - 2021



Source: McLean County Coroner, 2021.

Number of Suicide-related Calls to Path Crisis Center

The PATH Crisis Center is a community resource for those seeking help with human services. The crisis center answers over 75,000 calls annually through the 24-hour, seven day a week, 2-1-1 crisis hotline. The crisis center also answers calls nationally for the suicide hotline.

In 2021, 765 suicide-related calls were made to Path Crisis Center from residents in McLean County (Path Crisis Center, 2021). This number has increased from the 2019 (578) and 2020 (733) number of calls. See Exhibit 132.

Exhibit 132: Suicide Calls – McLean County, 2019 - 2021

Year	2019	2020	2021
# of suicide-	E70	700	765
related calls	578	733	703

Source: PATH Crisis Center, 2021.

Percent of Medicare Beneficiaries Receiving Treatment for Depression

The percent of Medicare beneficiaries receiving treatment for depression in McLean County is 16.5 percent (Conduent Healthy Communities Institute, Center for Medicare and Medicaid Services, 2018). This is in the best 0 - 50th percentile range (green indicator) in comparison to other counties in Illinois, is lower than the Illinois value (16.7 percent), higher than the prior value for McLean County (16.0 percent) and is trending unfavorably but not in a statistically significant direction.

Self-Reported Mental Health

Illinois Youth Survey

Teens Feeling Sad or Hopeless

The average percentage of eighth, tenth and twelfth graders in McLean County who reported they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities was 40 percent (Illinois Youth Survey, 2020). This is a nine percent increase from the 2018 value of 31 percent.

Teens Who Considered Attempting Suicide

The average percentage of tenth and twelfth graders in McLean County who reported they seriously considered attempting suicide during the past 12 months is 15 percent (Illinois Youth Survey, 2020). This is lower than the 2018 value of 16 percent.

County Health Rankings

Frequent Mental Distress

The percentage of adults in McLean County who stated that their mental health was not good for 14 or more of the past 30 days is 12.7 percent (Conduent Healthy Communities Institute, County Health Rankings, 2018). This is in the best 0 - 50th percentile range (green indicator) compared to other counties in Illinois and is higher than the Illinois value (11.5 percent).

Poor Mental Health

The number of days McLean County residents reported that their mental health was not good in the past 30 days is 4.0 days (Conduent Healthy Communities Institute, County Health Rankings, 2018). This is in the best 0 - 50th percentile range (green indicator) in comparison to other counties in Illinois, but is higher than the Illinois value (3.8 days).

CDC - Places

Poor Mental Health: 14+ Days

The percentage of adults who stated that their mental health was not good 14 or more days in the past month in McLean County is 14.1 percent (Conduent Healthy Communities Institute, CDC – Places, 2019). This is in the best 0 – 50th percentile range (green indicator) compared to other counties in Illinois. The current value is not statistically different from the prior value (13 percent).

Adults Ever Diagnosed with Depression

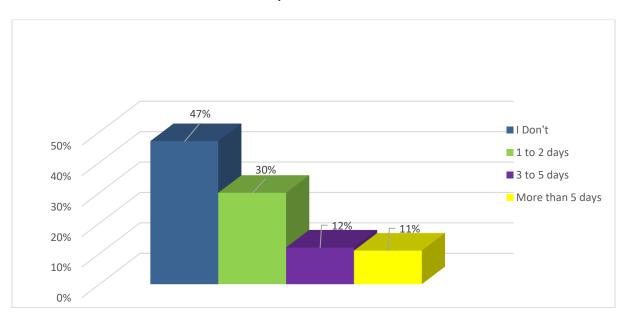
The percentage of adults who reported that they have been diagnosed with depression is 21.5 (Conduent Healthy Communities Institute, CDC – Places, 2019). This is in the best $0 - 50^{th}$ percentile range (green indicator) compared to other counties in Illinois.

2021 McLean County Community Health Survey

Eighteen percent of McLean County Survey respondents reported having a mental health issue (McLean County Community Health Survey, 2021). Data is not available from the 2018 survey.

Forty-seven percent of survey respondents reported that they did not feel depressed on any day during the past 30 days. Thirty percent reported feeling depressed one or two days, 12 percent for three to five days and 11 percent for more than five days. See Exhibit 133 below.

Exhibit 133: Responses to "In the last 30 days, how often have you felt depressed?" for McLean County Survey
Respondents, 2021



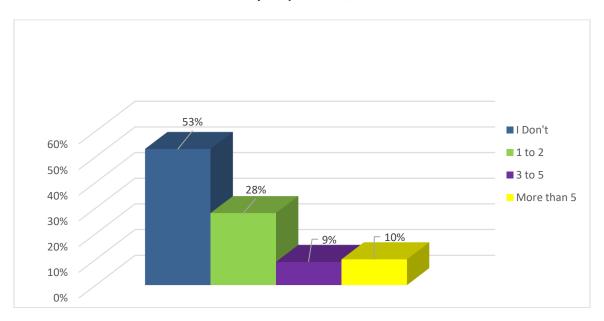
Source: McLean County Community Health Survey, 2021.

Comparison to the 2018 McLean County Community Health Survey

Results of the 2021 McLean County Community Health Survey show a five percent increase in the number of people feeling depressed in the last 30 days, compared to the 2018 survey.

Fifty-three percent of survey respondents reported that they did not feel stressed or anxious on any day during the past 30 days. Twenty-eight percent reported feeling stressed or anxious one or two days, nine percent for three to five days and ten percent for more than five days. See Exhibit 134 below.

Exhibit 134: Responses to "In the last 30 days, how often have you felt anxious or stressed?" for McLean County
Survey Respondents, 2021



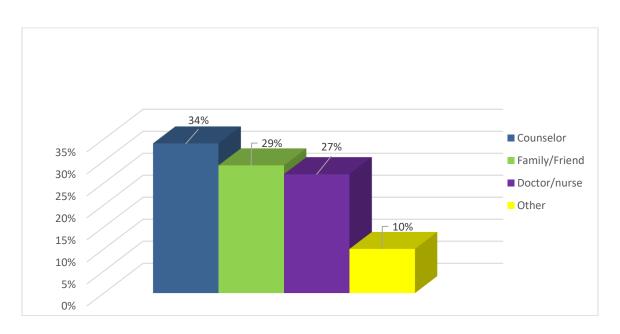
Source: McLean County Community Health Survey, 2021.

Comparison to the 2018 McLean County Community Health Survey

Results of the 2021 McLean County Community Health Survey show a 7% increase in the number of people experiencing stress or anxiety in the last 30 days, compared to the 2018 survey.

Fifty-four percent of survey respondents reported that they have talked to someone about their mental health. Of those individuals, the following graph (Exhibit 135) illustrates to whom they talked.

Exhibit 135: Responses to "If you talked to anyone about your mental health, who was it?" - McLean County survey respondents, 2021



Source: McLean County Community Health Survey, 2021.

Comparison to the 2018 McLean County Community Health Survey

Results of the 2021 McLean County Community Health Survey show a five percent decrease in the number of people who have talked to someone about their health, compared to the 2018 survey.

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's behavioral health. The following relationships were found using correlational analyses:

- **Depression** tends to be rated higher by younger people, and those with lower income.
- Anxiety tends to be rated higher by younger people, and those with lower education and income.

ICD-9 and ICD-10 Hospital Data

Psychiatric visits were the second most common reason for patient visits to Carle BroMenn Medical Center's emergency room from 2012 to 2020. In 2020, it was the first most common reason for adult Medicaid patients visiting the emergency room and the second most common reason for children with Medicaid (Carle BroMenn Medical Center, ICD-9 and ICD-10 Diagnosis. 2012 - 2020). Psychiatric visits were the fifth most common reason for patient visits to OSF St. Joseph Medical Center's emergency room (OSF St. Joseph Medical Center, ICD-10 Diagnosis, 2021).

Oral Health

Oral health has an impact on overall health. The negative impacts of poor dental health go well beyond having missing or hurting teeth. They also affect academics, employment and well-being.

Health Impact

Poor oral health can have long-term effects that are associated with serious illnesses like cardiovascular disease, certain cancers, pneumonia and dementias as well as birth complications (University of Illinois-Chicago, College of Dentistry, 2019). According to the Centers for Disease Control and Prevention, nearly one-third of adults in the United States have untreated tooth decay or tooth caries. One in seven adults aged 35 – 44 years old has periodontal disease. Periodontal disease and tooth decay are the most frequent causes of tooth loss. Missing teeth can affect overall health and nutrition (Conduent Healthy Communities, 2022). Additionally, the average cost of a Medicaid enrollee's inpatient hospital treatment for dental problems is nearly 10 times more expensive than the cost of preventive care delivered in a dentist's office. From 2008 – 2011, a Pew Research Center study noted that there were approximately 77,000 dental visits to hospitals in the Chicago Metro area (American Public Health Association, American Journal of Public Health, Impact of Poor Oral Health on Children's School Attendance and Performance, 2011).

Academic Impact

When children miss school due to illness, parents may miss work as well to stay home with them. A study published in 2011 noted that children with poor oral health were more likely to: 1) have pain; 2) miss school; and 3) demonstrate poor academic performance (The Pew Research Center on the States, A Costly Dental Destination: Hospital Care Means States Pay Dearly, 2012) (American Public Health Association, American Journal of Public Health, Impact of Poor Oral Health on Children's School Attendance and Performance, 2011). Nearly two in five (38 percent) of Illinois parents say their children between the ages of six and 12 had to miss school due to an oral health problem in the past 12 months (Delta Dental of Illinois, Children's Oral Health Report: An Exam of the Oral Health of Illinois Children, 2018).

Employment Impact

Having an imperfect smile may prevent a manager from hiring that person for certain roles. A 2008 study, "Social Perceptions of Individuals Missing Upper Front Teeth", referenced in a University of Illinois College of Dentistry online article, "The Many Costs (Financial and Well-Being) of Poor Oral Health", noted that people missing front teeth were viewed as less intelligent and less trustworthy than someone with a healthy smile. Perceptions such as this may result in periods of unemployment due to the appearance of a person's smile. Some individuals may not apply for a job because of their oral health. About 35 percent of low-income adults feel embarrassed over the condition of their teeth.

Twenty-nine percent of low-income adults and 28 percent of young adults feel like the appearance of their mouth and teeth affect their ability to interview for a job (University of Illinois – Chicago, College of Dentistry, 2019, The Many Costs (Financial and Well-Being) of Poor Oral Health, August 6, 2019).

Well-being Impact

A person's well-being and social activities may be impacted due to poor oral health. An American Dental Association report noted that people feel life is less satisfying when the health of their mouth and teeth is not optimal. It also noted that one in five adults experience anxiety and 23 percent feel embarrassment due to poor oral health. Some individuals avoid smiling (one in four adults) and 22 percent of young adults avoid social activities because of the current condition of their teeth (American Dental Association, ADA Health Policy Institute Report: Oral Health and Well-Being in the United States, 2015).

Age-Adjusted Emergency Room Rate due to Dental Problems

The age-adjusted emergency room rate due to dental problems for McLean County is 32.6 emergency room visits per 10,000 population (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). This is in the best $0 - 50^{th}$ percentile range (green indicator) compared to other counties in Illinois, is lower than the Illinois value of 45.8 emergency room visits per 10,000 population and is not statistically different from the prior value of 36.4

emergency room visits per 10,000 population. The rate for Bloomington ZIP code 61701, however, is in the worst 50th – 75th percentile range (yellow indicator) compared to other ZIP codes in Illinois. See Exhibit 136 below.

Exhibit 136: Age-adjusted Emergency Room Visits due to Dental Problems - McLean County versus Bloomington ZIP Code 61701, 2018 – 2020

McLean County



IL Counties

Bloomington - 61701



IL Zip Codes

32.6 emergency room visits/10,000 population

64.2 emergency room visits/10,000 population

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 – 2020

Disparities

The highest emergency room rates in McLean County due to dental problems are seen in:

- individuals ages 25 34 (84.7 emergency room visits per 10,000 population)
- individuals ages 35 44 (58.7 emergency room visits per 10,000 population)
- Blacks or African Americans (125.3 emergency room visits per 10,000 population, which is 284 percent higher than the county rate)
- Bloomington ZIP code 61701 (64.2 emergency room visits per 10,000 population or nearly double the county rate)
- Colfax ZIP code 61728 (48.6 emergency room visits per 10,000 population or 49 percent higher than the county rate).
- McLean ZIP code 61754 (46.8 emergency room visits per 10,000 population or 44 percent higher than the county rate).
- Chenoa ZIP code 61726 (45.2 emergency room visits per 10,000 population or 39 percent higher than the county rate)
- Stanford ZIP code 61774 (37.8 emergency room visits per 10,000 population or 16 percent higher than the county rate)

Adults 65+ with Tooth Loss

The percent of adults in McLean County who have had all of their natural teeth extracted is 10.8 percent. This is in the best $0-50^{th}$ percentile range (green indicator) compared to other counties in Illinois and is lower that the United States value of 13.5 percent (Conduent Healthy Communities Institute, CDC – Places, 2018). Bloomington ZIP code 61701, however is in the worst $50^{th} - 75^{th}$ percentile range compared to other ZIP codes in Illinois at 13.8 percent.

Adults Who Visited a Dentist

In 2018, 71.4 percent of McLean County residents visited a dentist or dental clinic within the past year (Conduent Healthy Communities Institute, CDC – Places, 2018). This percentage is higher than the United States rate (66.5 percent) and is in the best 0 - 50th percentile range (green indicator) when compared to other counties in Illinois.

School-Aged Children and Oral Health Data

Compliance with Oral Health Exams

The Illinois State Board of Education (ISBE) maintains annual oral health exam compliance rates. As of 2022, the most recent data published and accessible by county was for the 2013-2014 school year. Results for all schools in Illinois is available through the 2020 – 2021 school year. Freedom of Information Act (FOIA) requests may be used to obtain county-specific data.

Percentage of Children with Untreated Dental Caries

Comparing 2020 - 2021 data, obtained through a Freedom of Information Act request, with the 2013-2014 data published on the Illinois State Board of Education website, there has been an improvement in the percentage of sixth-grade children with untreated dental caries, from 10.5 percent (2013-2014) down to 7.14 percent. Kindergarten children experienced an increase in untreated dental caries when comparing 2013-2014 to 2020-2021. None of the three grade levels met the Healthy People 2030 target of 10.2 percent (Illinois State Board of Education, 2013-2014 and 2020-2021). See Exhibit 137 below.

Exhibit 137: Percentage of Children with Untreated Dental Caries – McLean County versus Illinois, 2020-2021 Compared to 2013 - 2014

Grade	McLean County 2013 – 2014 School Year	Illinois 2013 - 2014	McLean County 2020 – 2021 School Year	Illinois 2020 - 2021	Healthy People 2030 Target For Children ages 3-19 years
Kindergarten	17.0%	17.4%	18.97%	22.65%	10.2%
2 nd Grade	16.5%	19.4%	17.83%	16.10%	10.2%
6 th Grade	10.5%	13.2%	7.14%	21.04%	10.2%

Source: Illinois State Board of Education, Percentage of Children with Untreated Dental Caries—2020-2021 School Year, received via a Freedom of Information Act request by the McLean County Health Department, May 2022.

Source: Illinois State Board of Education Report: Dental Examination Compliance Status of Kindergarten, Second and Sixth Grade Children in Illinois for School Year 2013 — 2014, previously reported in the 2019 McLean County, IL, Community Health Needs Assessment. https://www.isbe.net/Pages/Health-Requirements-Student-Health-Data.aspx

Disparities

The Illinois Department of Public Health Division of Oral Health's Healthy Smiles Healthy Growth Project that assessed the oral health, beverage consumption and body mass index of third-grade children in Illinois (2018-2019), found several disparities in oral health, including (Illinois Department of Public Health, Division of Oral Health, Healthy Smiles Healthy Growth Project, 2019):

- Non-Hispanic Black children have the lowest dental sealant rates (45.7 percent) followed by Non-Hispanic Asian children (49.0 percent).
- Non-Hispanic Asian children had the highest rate of untreated dental caries (28.8 percent) followed by Non-Hispanic Black children (26.7 percent).

• Eligibility for the Free and Reduced-Price Meal Program (FRMP) is a factor in disease burden: children who were eligible for the program had more caries experience (48.9 percent compared to 32 percent), more untreated caries (26.7 percent compared to 15.6 percent) and lower prevalence of dental sealants (51.2 percent compared to 56.8 percent) than children who were not eligible for the program.

Respiratory Disease

Chronic lower respiratory disease (CLRD) refers to a diverse group of disorders characterized by airway obstruction, causing shortness of breath and impaired lung function and includes asthma, emphysema, bronchitis and chronic obstructive pulmonary disease. Chronic lower respiratory disease is a leading cause of death and generally occurs in older adults. While mortality rates of other leading causes of death have decreased, deaths due to chronic obstructive respiratory diseases have continued to rise. Smoking cigarettes, as well as exposure to secondhand smoke, and chemical irritants are important risk factors. According to the Centers for Disease Control and Prevention, over 30 billion dollars are spent annually on chronic obstructive respiratory diseases (Conduent Healthy Communities Institute, 2022).

Age-Adjusted Emergency Room and Hospitalization Rates

A summary of the age-adjusted emergency room and hospitalization rates for numerous respiratory indicators are illustrated in Exhibit 138 below. Emergency room visits due to adult asthma is in the worst $50^{th} - 75^{th}$ percentile range (yellow indicator) in comparison to other counties in Illinois. Emergency room visits due to asthma (all ages), pediatric asthma and chronic obstructive pulmonary disease are all in the best $0 - 50^{th}$ percentile range (green indicator) compared to other counties in Illinois. All of the hospitalization indicators in the table below are also in the best $0 - 50^{th}$ percentile range (green indicator) compared to other counties in Illinois (Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020).

Exhibit 138: Summary of Age-Adjusted Emergency Room Visits and Hospitalizations for Respiratory Indicators - McLean County, 2017 – 2020

Indicator rate due to:	Emergency room visits/10,000 population	Indicator Color (McLean County compared to Other Counties in Illinois)	Hospitalizations/10,000 population	Indicator Color (McLean County compared to Other Counties in Illinois)
Adult Asthma 18+ years	19.5		2.9	IL Counties (2017-2019)
Asthma All ages	19.6		2.4	
Pediatric Asthma <18 years	19.7		1.1	Not available
COPD 18+ years	21.5		15.7	

Source: Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020.

Race/Ethnicity and Age Disparities for Respiratory Emergency Room Visits

In comparison to McLean County overall, there are statistically significant disparities by race/ethnicity and age for respiratory indicators for emergency room visits. There were no disparities by gender. The greatest disparities for respiratory indicators for emergency room visits are seen in Blacks or African Americans with rates ranging from 115 - 486 percent higher than the overall rate for McLean County. Exhibit 139 below illustrates disparities by race/ethnicity and age when compared to the overall McLean County rate for emergency room visits due to respiratory reasons (Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020).

Exhibit 139: Respiratory Disparities by Race/Ethnicity and Age for Age-Adjusted Emergency Room Visits - McLean County, 2018 – 2020

Indicator rate due to:	Emergency room visits per 10,000 population in McLean County	Emergency room visits per 10,000 population Disparities by race/ethnicity	Emergency room visits per 10,000 population Disparities by age
Adult Asthma 18+ years	19.5	 Black or African American – 119.1 486% higher (>than 5x's) than the county rate 	25 - 34 years - 32 • 64% higher than the county rate
Asthma All ages	19.6	Black or African American – 113.1 • 477% higher (>than 5.5 x's) than the county rate	25 - 34 years – 32 • 63% higher than the county rate
Pediatric Asthma < 18 years	19.7	Black or African American – 95.8 • 386% higher (>4 ½ x's) than the county rate	No disparities by age
COPD 18+ years	21.5	Black or African American – 46.3 • 115% higher (>2x's) than the county rate	 45 - 64 years - 33.1 54% higher than the county rate 65 - 84 years - 64.1 198% higher (3x's) than the county rat >85 years - 45.2 110% higher than the county rate

Source: Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020.

Race/Ethnicity, Gender and Age Disparities for Respiratory Hospitalizations

In comparison to McLean County overall, there are statistically significant disparities by race/ethnicity, age and gender for respiratory indicators for hospitalizations. The greatest disparities for respiratory indicators for hospitalizations are seen in Blacks or African Americans and individuals greater than 65 years of age with rates ranging from three and one-half to four and one-half times higher than the rate for McLean County. Exhibit 140 below illustrates disparities by race/ethnicity, age and gender when compared to the McLean County rate for hospitalizations due to respiratory reasons (Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020).

Exhibit 140: Respiratory Disparities by Race/Ethnicity and Age for Age-Adjusted Hospitalizations - McLean County, 2018 – 2020

Indicator rate due to:	Hospitalizations per 10,000 population McLean County	Hospitalizations per 10,000 population Disparities by race/ethnicity	Hospitalizations per 10,000 population Disparities by age and/or gender
Adult Asthma 18+ years	2.9	Black or African American - 12.5 • 331% higher (>4x's) than the county rate	Female – 4.659% higher than the county rate
Asthma All ages	2.4	Black or African American - 10.1 • 321% higher (>4x's) than the county rate	No age or gender disparities
Pediatric Asthma < 18 years	1.1	Disparities not available	Disparities not available
COPD 18+ years	15.7	No significant disparities	 65 - 84 years – 57.9 269% higher (>3.5x's) than the county rate 85+ years – 73.5 368% higher (>4.5x's) than the county rate

Source: Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020.

ZIP Code Disparities for Respiratory Emergency Room Visits and Hospitalizations

In addition to the above disparities, there are also disparities by ZIP code for respiratory diseases compared to other ZIP codes in Illinois. Disparities by ZIP code are shown below (when data is available) for the ten highest Health Equity Needs ZIP codes in McLean County. Out of the ten highest Health Equity Needs ZIP codes in the county, only Bloomington ZIP code 61701 had a rate in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois for the data for respiratory disease indicators (Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). See Exhibit 141 below.

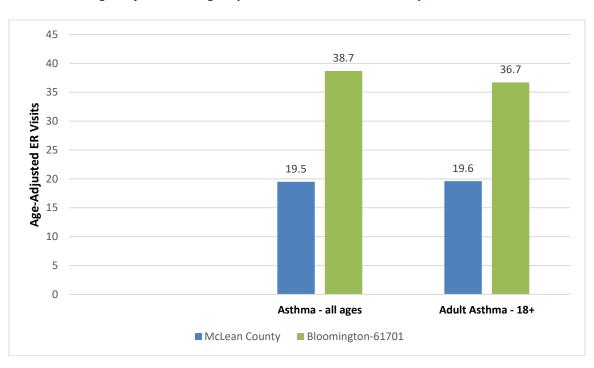


Exhibit 141: Respiratory Disparities by ZIP Code for Age-Adjusted Emergency Room Visits - McLean County, 2018 – 2020

Source: Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020.

For respiratory disparities by ZIP code for hospitalizations, Bloomington ZIP code 61701 was in the worst 25th percentile range (red indicator) for hospitalizations due to COPD per 10,000 population 18 years and older compared to other ZIP codes in Illinois (Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020).

Death Rate: Chronic Lower Respiratory Diseases

The age-adjusted death rate due to chronic lower respiratory diseases in McLean County is 49.4 deaths per 100,000 population. This is in the best $0-50^{th}$ percentile range (green indicator) compared to other counties in Illinois but is higher than the Illinois value (35.1 deaths per 100,000 population). The current value is not statistically different from the prior value of 48.2 deaths per 100,000 population, but it is trending unfavorably over time (Conduent Healthy Communities Institute, Centers for Disease Control and Prevention, 2018-2020).

Disparities

There are no disparities for gender. Additional disparity information is not available.

Prevalence: Asthma

Adults with Asthma

The percent of adults in McLean County that have ever been told by a healthcare provider that they currently have asthma is 8.9 percent (Conduent Healthy Communities Institute, CDC – Places, 2019). This is in the best 0 - 50th percentile range (green indicator) compared to other counties in Illinois and is lower than the United States value (8.9 percent).

According to the responses from the 2021 McLean County Community Health Survey, ten percent of respondents indicated that they have asthma or chronic obstructive pulmonary disease (McLean County Community Health Survey, 2021).

Medicare Beneficiaries Receiving Treatment for Asthma

The percent of Medicare beneficiaries receiving treatment for asthma in McLean County is 4.8 percent (Conduent Healthy Communities Institute, Centers for Medicare and Medicaid Services, 2018). This is in the worst 25th percentile range (red indicator) compared to other counties in Illinois and is higher than the Illinois value (4.7 percent). It is, however, lower than the prior value for McLean County (5.1 percent) and is trending favorably but not in a statistically significant direction. See Exhibit 142 below.

Exhibit 142: Asthma in the Medicare Population - McLean County, 2010 - 2018









McLean County 4.8 %

Source: Conduent Healthy Communities Institute, Centers for Medicare and Medicaid Services, 2018.

Prevalence: Chronic Obstructive Pulmonary Disease

Adults with COPD

The percent of adults in McLean County that have ever been told by a healthcare provider that they currently have chronic obstructive pulmonary disease, emphysema or chronic bronchitis is 5.7 percent (Conduent Healthy Communities Institute, CDC – Places, 2019). This is in the best 0 - 50th percentile range (green indicator) compared to other counties in Illinois and is lower than the United States value (6.6 percent).

Medicare Beneficiaries Receiving Treatment for COPD

The percent of Medicare beneficiaries receiving treatment for chronic obstructive pulmonary disease in McLean County is 10.5 percent (Conduent Healthy Communities Institute, Centers for Medicare and Medicaid Services, 2018). This is in the best 0 - 50th percentile range (green indicator) compared to other counties in Illinois, is lower than the Illinois value (11.8 percent), equal to the prior value for McLean County (10.5 percent) and is trending favorably but not in a statistically significant direction.

ICD-9 and ICD-10 Hospital Data

Upper respiratory visits were the sixth most common reason for patient visits to Carle BroMenn Medical Center's emergency room in 2020. It was the third most common reason for adult Medicaid patients in 2020 and the first most common reason for child Medicaid patients (Carle BroMenn Medical Center, ICD-9 and ICD-10 Diagnosis, 2020) and the ninth most common reason for visits to OSF St. Joseph Medical Center's emergency room in 2021 (OSF St. Joseph Medical Center, ICD-10 Diagnosis, 2021).

Sentinel Events

Adults with Tuberculosis

In McLean County, there were zero cases of active tuberculosis in 2019, two in 2020, and one in 2021. In 2019, case rates per 100,000 were 0.00 in McLean County, 2.54 in Illinois, and 2.7 in the United States. In 2020, case rates per 100,000 were 1.16 in McLean County, 1.69 for Illinois, and 2.2 for the United States. In 2021, case rates per 100,000 were 0.58 in McLean County, 2.00 for Illinois, and 2.37 for the United States. The National Tuberculosis Program Objectives and Performance target is no more than 1.3 cases per 100,000, the same target used by the Illinois Department of Public Health. For 2019, 2020, and 2021, McLean County met and exceeded the national target (Illinois Department of Public Health, 2019, 2020, and 2021; McLean County Health Department, Bloomington Illinois, 2019, 2020, and 2021).

Age-Adjusted Hospitalizations due to Dehydration—Adults

The age-adjusted hospitalization rate in McLean County due to dehydration is 9.5 hospitalizations per 10,000 population 18 years and older (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). This is in the best 0 - 50th percentile range (green indicator) in comparison to other counties in Illinois and lower than the Illinois value of 12.8 hospitalizations per 10,000 population 18 years and older. Pediatric rates were unavailable.

Age-Adjusted Hospitalization Rate due to Hypertension—Adults

The age-adjusted hospitalization rate due hypertension in McLean County is 4.7 hospitalizations per 10,000 population 18 years and older. This is in the worst $50^{th} - 75^{th}$ percentile (yellow indicator) in comparison to other counties in Illinois, but lower than the Illinois value of 5.1 hospitalizations per 10,000 population (Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020).

Age-Adjusted Hospitalizations due to Pediatric Asthma

The age-adjusted hospitalization rate due to pediatric asthma in McLean County is 1.1 hospitalizations per 10,000 population less than 18 years of age. This is lower than the Illinois value of 8.1 hospitalizations per 10,000 population less than 18 years of age (Conduent Healthy Communities Institute, Illinois Hospital Association, 2016 - 2018).

In-Situ Cancer- 5-Year Averages

Breast Cancer in Situ

In McLean County, breast cancer *in situ* (cancer in its original place) rates have been climbing steadily since the early 1990s, from a five-year average rate of 15.7 per 100,000 for 1991 – 1995 (baseline) to 27.4 per 100,000 for 2014 – 2018, with the highest rate of 29.1 per 100,000 occurring in 2009 - 2013 (Illinois Department of Public Health, Cancer in Illinois Statistics, 1994 – 2018). See Exhibit 143 below. Rates by race and ethnicity were not available.

Exhibit 143: 5-Year Cancer Incidence Counts and Age-Adjusted Rates per 100,000 for Breast Cancer in Situ – McLean County, 1994 - 2018

5-Year Period	# Breast Cancer In Situ Diagnosed	County Rate Per 100,000
2014 - 2018	122	27.4
2009 - 2013	121	29.1
2004 - 2008	85	21.8
1999 - 2003	95	27.5
1994 - 1998	57	18.6

Source: Illinois Department of Public Health, Cancer in Illinois Statistics, Cancer Incidence by County, Breast Cancer In Situ, 1994 – 2018, http://www.idph.state.il.us/cancer/statistics.htm.

Cervical Cancer

In McLean County, cervical cancer incidence rates have been decreasing since the early 1990s, from a five-year average rate of 7.9 per 100,000 for 1994 – 1998, to 5.4 per 100,000 for 2009 – 2013. The rate increased slightly to 5.8 per 100,000 during the 2014 – 2018 period (Illinois Department of Public Health, Cancer in Illinois Statistics, 1994 – 2018). See Exhibit 144 below. State and McLean County rates for cervical cancer *in situ* were not available. Rates by race and ethnicity were not available.

Exhibit 144: 5-Year Cancer Incidence Counts (5-year Totals) and Age-Adjusted Incidence Rates per 100,000 for Cervical Cancer – McLean County, 1994 - 2018

5-Year Period	# Cervical Cancer Diagnosed	County Rate Per 100,000
2014 - 2018	24	5.8
2009 - 2013	21	5.4
2004 - 2008	25	6.6
1999 - 2003	26	7.6
1994 - 1998	26	7.9

Source: Illinois Department of Public Health, Cancer in Illinois Statistics, Cancer Incidence by County, Cervical Cancer, 1994 – 2018, http://www.idph.state.il.us/cancer/statistics.htm.

Children Hospitalized for Rheumatic Fever

Rheumatic fever may develop after a strep throat or scarlet fever infection if either is not treated appropriately. This immune system response can cause painful and tender joints, fever and symptoms of congestive heart failure. Rheumatic fever is not a reportable condition in Illinois; however, the bacterium that can produce an infection that may lead to rheumatic fever, Streptococcal (Group A, invasive), is reportable to health authorities within 24 hours as a Class I (b) biological agent. Not all Streptococcal (Group A, invasive) infections cause rheumatic fever. In Illinois, there are approximately 350 cases of Invasive Group A Streptococcus each year (Illinois Department of Public Health, 2022).

Number of Cases of Measles, Mumps, Polio, and Tetanus (ages 1-17)

The immunization status of school-age children in McLean County for the school year 2020 - 2021 exceeds the recommended Illinois Department of Public Health specified level of 90 percent and meets Healthy People 2020 and Healthy People 2030 goals. McLean County compliance with vaccination requirements ranges from a low of 97.98 percent (for polio immunizations) to 98.07 percent (for Diphtheria, Tetanus, Pertussis). Measles/Mumps/Rubella (MMR) vaccination coverage was at 98.06 percent for the 2020 – 2021 school year. The Healthy People 2020 goal is 90 percent

for polio and the Healthy People 2030 goal for Measles/Mumps/Rubella is 95 percent and 90 percent for Diphtheria/Tetanus/Pertussis (Illinois State Board of Education, Data Analysis and Accountability Division, Health Requirements/Student Health Data, School Year 2020-2021).

Case numbers for the five-year period of 2013 – 2017 for the following diseases include (McLean County Health Department, Annual Reports, 2013 – 2017; later data not available in the IQuery data set):

- Measles: Zero. The last documented case in McLean County was in 1989.
- Mumps: Mumps case counts in McLean County from 2013 2016 increased due to two mumps outbreaks in 2015 and 2016. Case counts were 0 in 2013 and 2014. During the 2015 outbreak, 71 cases were reported, and 88 percent of cases were in persons ages 15-24 years. During the 2016 outbreak, 41 cases were reported, and 95 percent of cases were in persons ages 15-24 years (McLean County Health Department, Communicable Disease Data, 2018). Case counts after 2016 were not available in the IQuery data set.
- Rubella: Zero. The last documented case in McLean County was in 1990.

Polio: 0Tetanus: 0

Substance Use

Substance use is a major public health issue that has a strong impact on individuals, families and communities. The use of illicit drugs, abuse of alcohol and addition to pharmaceuticals is linked to health conditions such as heart disease, cancer and liver diseases. Substance use also contributes to a wide range of social, mental and physical problems such as domestic violence, child abuse, crime and suicide (Conduent Healthy Communities Institute, 2022.)

Age-Adjusted Emergency Room Rates

Substance Use

Compared to other counties in Illinois, the age-adjusted emergency room rate due to substance use for McLean County is in the best 0 - 50th percentile range (green indicator) at 13.5 emergency room visits per 10,000 population ages 18 years and older. The rate is also lower than the rate for Illinois (38.3 emergency room visits per 10,000 population 18+ years) and is not statistically different from the prior rate (12.6 emergency room visits per 10,000 population 18+ years). (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 – 2020). See Exhibit 145 below.

Exhibit 145: Age-Adjusted Emergency Room Rate Due to Substance Use - McLean County, 2018 – 2020





IL Value (38.3)



McLean County
13.5
ER visits / 10,000 population
18+ years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Disparities

The highest emergency room rates due to substance use are seen in:

- individuals ages 25 34 (25.6 emergency room visits per 10,000 population 18+ years)
- males (17.3 emergency room visits per 10,000 population 18+ years)
- Blacks or African Americans (39.1 emergency room visits per 10,000 population 18+ years).

Opioid Use

Compared to other counties in Illinois, the age-adjusted emergency room rate due to opioid use is in the best 0 - 50th percentile range (green indicator) at 5.8 emergency room visits per 10,000 population ages 18 years and older, is lower than the Illinois value of 18.7 emergency room visits per 10,000 population ages 18 years and older and is not statistically different from the prior value of 6.0 emergency room visits per 10,000 population 18 years and older (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). See Exhibit 146 below.

Exhibit 146: Age-Adjusted Emergency Room Rate Due to Opioid Use - McLean County, 2018 - 2020







McLean County
5.8
ER visits per 10,000 population
18+ years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Disparities

The highest emergency room rates due to opioid use are seen in:

- individuals ages 25 34 (10.5 emergency room visits per 10,000 population 18+ years)
- Blacks or African Americans (15.6 emergency room visits per 10,000 population 18+ years).

Alcohol Use

The age-adjusted emergency room rate due to alcohol use for McLean County falls in the worst 25th percentile range (red indicator) compared to other counties in Illinois with a rate of 47.8 emergency room visits per 10,000 population 18 years and older. The rate is lower, however, than the rate for Illinois (57.4 emergency room visits per 10,000 population 18+ years) and not statistically different from the prior value (50.0 emergency room visits per 10,000 population 18 years and older (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 – 2020). Two of the high Health Equity Needs ZIP codes in McLean County have rates in the worst 25th percentile range compared to other ZIP

codes in Illinois; Bloomington ZIP code 61701 (107.4 emergency room visits per 10,000 population 18+ years) and Carlock ZIP code 61725 (64.7 emergency room visits per 10,000 population 18+ years). See Exhibit 147 below.

Exhibit 147: Age-Adjusted Emergency Room Rate Due to Alcohol Use - McLean County versus Bloomington ZIP Code 61701 and Carlock ZIP Code 61725, 2018 - 2020







McLean County
47.8
ER visits per 10,000 population
18+ years

Bloomington – 61701 107.4 ER visits per 10,000 population 18+ years

Carlock – 61725 64.7 ER visits per 10,000 population 18+ years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Disparities

The highest emergency room rates due to alcohol use are seen in:

- individuals ages 25 34 (57.5 emergency room visits per 10,000 population 18+ years)
- individuals ages 35 44 (64.2 emergency room visits per 10,000 population 18+ years)
- individuals ages 45 64 (56.2 emergency room visits per 10,000 population 18+ years)
- males (66.9 emergency room visits per 10,000 population 18+ years)
- Blacks or African Americans (107.3 emergency room visits per 10,000 population 18+ years)
- Hispanics or Latinos (65.3 emergency room visits per 10,000 population 18+ years).
- Bloomington ZIP code 61701 (107.4 emergency room visits per 10,000 population 18+ years) and Carlock ZIP code 61725 (64.7 emergency room visits per 10,000 population 18+ years)

Age-Adjusted Hospitalizations

Substance Use

The age-adjusted hospitalization rate due to substance use is 2.8 hospitalizations per 10,000 population 18 years and older. This is in the best $0-50^{th}$ percentile range (green indicator) compared to other counties in Illinois, is lower than the Illinois value (10.5 hospitalizations per 10,000 population 18+ years) and is not statistically different from the prior value (2.6 hospitalizations per 10,000 population 18+ years) (Conduent Healthy Communities Institute, Illinois Hospitalization Association, 2018 -2020.)

Disparities

The highest hospitalization rates due to substance use are seen in:

• individuals ages 25 - 34 (5.7 hospitalizations per 10,000 population 18+ years).

Opioid Use

The age-adjusted hospitalization rate due to opioid use is 1.5 hospitalizations per 10,000 population 18 years and older. This is in the best $0-50^{th}$ percentile range (green indicator) compared to other counties in Illinois, is lower than the Illinois value (7.8 hospitalizations per 10,000 population 18+ years) and is not statistically different from the prior value

(1.4 hospitalizations per 10,000 population 18+ years) (Conduent Healthy Communities Institute, Illinois Hospitalization Association, 2018 -2020).

Disparities

No significant disparities for age or gender.

Alcohol Use

Compared to other counties in Illinois, the age-adjusted hospitalization rate due to alcohol use is in the worst 50th - 75th percentile range (yellow indicator) at 12.7 hospitalizations per 10,000 population ages 18 years. It is, however, lower than the Illinois value of 19.7 hospitalizations per 10,000 population ages 18 years and older and not statistically different from the prior value of 13.2 hospitalizations per 10,000 population 18+ years (Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020). See Exhibit 148 below.

Exhibit 148: Age-Adjusted Hospitalizations Due to Alcohol Use - McLean County 2018 - 2020







McLean County 12.7 Hospitalizations/10,000 population 18+ years

Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Disparities

The highest hospitalization rates due to alcohol use are seen in:

- individuals ages 35 44 (19.7 hospitalizations per 10,000 population 18+ years)
- individuals ages 45 64 (18.1 hospitalizations per 10,000 population 18+ years)
- males (18.1 hospitalizations per 10,000 population 18+ years).

Deaths/Death Rate

Alcohol Impaired Driving Deaths

The percent of motor vehicle crash deaths with alcohol involvement in McLean County is 31.8 percent. This rate is in the worst $50^{th} - 75^{th}$ percentile range (yellow indicator) compared to other counties in Illinois and higher than the Illinois value of 31.1 percent (Conduent Healthy Communities Institute, County Health Rankings, 2015-2019). Over time, the value is decreasing, but not significantly. The value does not meet the Healthy People 2030 target of 28.3 percent. See Exhibit 149 below.

Exhibit 1497: Alcohol Impaired Driving Deaths - McLean County, 2008-2019









McLean County 31.8%

Source: Conduent Healthy Communities Institute, County Health Rankings, 2015 - 2019.

Death Rate Due to Drug Poisoning

The death rate due to drug poisoning in McLean County is 18.6 deaths per 100,000 population (Conduent Healthy Communities Institute, County Health Rankings, 2017 - 2019). This is in the best 0 - 50th percentile in comparison to other counties in Illinois and is lower than the Illinois value of 21.7 deaths per 100,000 population. It is not statistically different than the previous value of 17.0 deaths per 100,000 population but it is trending unfavorably (statistically significant). See Exhibit 150 below.

Exhibit 150: Death Rate Due to Drug Poisoning - McLean County, 2004 - 2019









Prior Value Tro (17.0)

McLean County 18.6 deaths / 100,000 population

Source: Conduent Healthy Communities Institute, County Health Rankings, 2017 - 2019.

Self-Reported: Substance Use

County Health Rankings

Adults Who Smoke

The percentage of adults who currently smoke cigarettes in McLean County is 17.2 percent. This is in the best $0-50^{\rm th}$ percentile range (green indicator) compared to other counties in Illinois but is higher than the Illinois value of 15.9 percent (Conduent Healthy Communities Institute, County Health Rankings, 2018). The percent of adults who currently smoke cigarettes in McLean County does not meet the Healthy People 2030 target of five percent.

Adults Who Drink Excessively

The percentage of McLean County adults who report heavy or binge drinking is 21.4 percent. This is in the best $0-50^{th}$ percentile range (green indicator) in comparison to other counties in Illinois, is lower than the Illinois value of 21.5

percent and meets the Healthy People 2020 target (25.4 percent) (Conduent Healthy Communities Institute, County Health Rankings, 2018). See Exhibit 151 below for an illustration of this information.

Exhibit 151: Adults Who Drink Excessively - McLean County, 2017 - 2018







McLean County 21.4%

Source: Conduent Healthy Communities Institute, County Health Rankings, 2018

Illinois Youth Survey

Teens Who Smoke Cigarettes

In 2020, two percent of twelfth graders in McLean County reported smoking at least one cigarette in the 30 days prior to completing the Illinois Youth Survey. This is lower than the prior value for McLean County of five percent and in the best 0 - 50th percentile range (green indicator) in comparison to other counties in Illinois. The trend for McLean County is favorable or decreasing in a statistically significant direction (Conduent Healthy Communities Institute, Illinois Youth Survey, 2020).

Teens Who Use Marijuana

In 2020, 16 percent of twelfth graders in McLean County reported using marijuana one or more times during the 30 days prior to completing the Illinois Youth Survey. This is lower than the prior value for McLean County of 17 percent, lower than the state value of 26 percent and in the best 0 - 50th percentile range (green indicator) in comparison to other counties in Illinois. The trend for McLean County is favorable or decreasing but not in a statistically significant direction (Conduent Healthy Communities Institute, Illinois Youth Survey, 2020).

Teens Who Use Alcohol

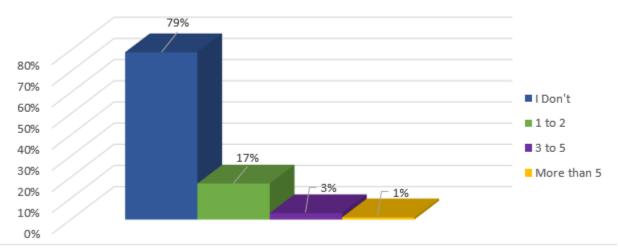
Twenty-six percent of McLean County twelfth grade students reported that they drank alcohol during the 30 days prior to the 2020 Illinois Youth Survey. This is in the best 0 - 50th percentile range (green indicator) in comparison to other counties in Illinois, lower than the prior value in 2016 for McLean County of 32 percent and lower than the 2018 Illinois value of 40 percent. The percentage of teens who use alcohol in McLean County is trending favorably in a statistically significant direction.

2018 McLean County Community Health Survey

Frequency of Alcohol Use

According to the 2021 McLean County Community Health Survey question, "On a typical day, how many alcoholic drinks do you have?", 79 percent said "I don't", 17 percent said, "1 -2", three percent said "3 to 5" and one percent said "more than 5". See Exhibit 152 below.

Exhibit 152: Responses to "On a typical day, how many alcoholic drinks do you have?" for McLean County Survey
Respondents, 2021



Source: McLean County Community Health Survey, 2021

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's frequency of alcohol consumption. The following relationships were found using correlational analyses:

Frequency of alcohol consumption tends to be rated higher by those with higher income.

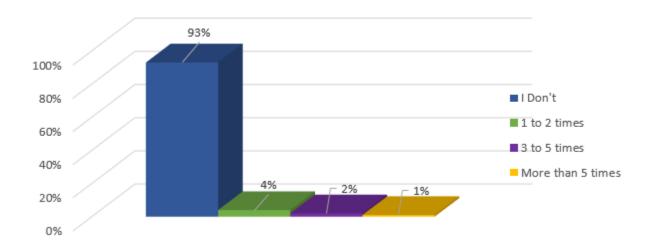
Comparison to 2018 McLean County Community Health Survey

Comparison data is not available due to the substance use questions changing from the 2018 to the 2021 survey.

Frequency of Marijuana Use

According to the 2021 McLean County Community Health Survey question, "On a typical day, how often do you use marijuana?", 93 percent said "I don't", 4 percent said, "1 -2", two percent said "3 to 5" and one percent said "more than 5". See Exhibit 153 below.

Exhibit 153: Responses to "On a typical day, how often do you smoke marijuana?" for McLean County Survey Respondents, 2021



Source: 2021 McLean County Community Health Survey

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's frequency of marijuana use. The following relationships were found using correlational analyses:

• **Frequency of use of marijuana** tends to be rated higher by men, younger people, those with lower education and income, and those with an unstable (e.g. homeless) housing environment.

Comparison to 2018 McLean County Community Health Survey

Comparison data is not available due to the substance use questions changing from the 2018 to the 2021 survey.

Frequency of Improper Use of Prescription Medication

According to the 2021 McLean County Community Health Survey question, "On a typical day, how often do you improperly use prescription medication?", 93 percent said "I don't", five percent said, "1 -2", two percent said "3 to 5" and zero percent said "more than 5".

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's frequency of improper use of prescription medication. The following relationships were found using correlational analyses:

• **Frequency of misuse of prescription medication** tends to be rated higher by men, Black or African American people, Hispanic or Latino people, those with lower education and income, and those with an unstable (e.g. homeless) housing environment. Misuse of prescription medications tends to be rated lower for White people.

Comparison to 2018 McLean County Community Health Survey

Comparison data is not available due to the substance use questions changing from the 2018 to the 2021 survey.

Frequency of Illegal Substance Use

According to the 2021 McLean County Community Health Survey question, "On a typical day, how often do you use illegal substances?", 99 percent said "I don't", one percent said, "1 -2", zero percent said "3 to 5" and zero percent said "more than 5".

Social Determinants of Health Correlations

Frequency of use of illegal drugs tends to be rated higher by men and those with an unstable (e.g.; homeless) housing environment.

Comparison to 2018 McLean County Community Health Survey

Comparison data is not available due to the substance use questions changing from the 2018 to the 2021 survey.

Frequency of Smoking

The 2021 McLean County Community Health Survey data show 86 percent of McLean County respondents do not smoke. Five percent of respondents state they smoke more than 12 cigarettes (per day).

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's frequency of smoking. The following relationships were found using correlational analyses:

• **Frequency of smoking** tends be rated higher by those with lower education and income and those with an unstable (e.g. homeless) housing environment.

Comparison to 2018 McLean County Community Health Survey

In comparison to the 2018 survey, there was a two percent increase in the number of survey respondents that reported that they do not smoke.

Frequency of Vaping

The 2021 McLean County Community Health Survey data show 96 percent of McLean County respondents do not vape.

Social Determinants of Health Correlations

Several characteristics show a significant relationship with an individual's frequency of vaping. The following relationships were found using correlational analyses:

• **Frequency of vaping** tends be rated higher by men, younger people, those with lower education and income and those with an unstable (e.g.; homeless) housing environment.

Comparison to 2018 McLean County Community Health Survey

In comparison to the 2018 survey, there was a ten percent increase in the number of survey respondents that reported that they do not vape.

Key findings: Disease and Chronic Conditions

Alzheimer's Disease and Dementia

• The age-adjusted death rate due to Alzheimer's disease in McLean County is in the worst 25th percentile range (red indicator) compared to other counties in Illinois.

Cancer

- A higher percentage of Medicare beneficiaries are being treated for cancer in McLean County than other comparative Illinois counties.
- The age-adjusted death rate for prostate, lung and colorectal cancer is in the best 0 50th percentile range (green indicator) compared to other counties in Illinois.
- The age-adjusted incidence and death rate for breast cancer is in the worst 50th 75th percentile range (yellow indicator) compared to other counties in Illinois.
- The age-adjusted incidence rate for prostate, colorectal, cervical, lung and bronchus and oral cavity and pharynx cancer is in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois.

Cardiovascular Disease

- Cardiac conditions were the number one reason for patient visits to Carle BroMenn Medical Center's emergency room from 2010 2020 and to OSF St. Joseph Medical Center's emergency room in 2021.
- In comparison to other counties in Illinois, McLean County residents are doing better than Illinois for prevalence of high blood pressure and high cholesterol. The age-adjusted emergency room rate due to heart failure is 346% higher than the county rate for Blacks or African Americans.
- Age-adjusted hospitalization rates for heart failure is in the worst 25th percentile range (red indicator) in comparison to other ZIP codes in Illinois for McLean ZIP Code 61754 and is nearly three times higher than the county rate for Blacks or African Americans.
- Age-adjusted emergency room visits and hospitalizations due to hypertension is more than four times higher than the county rate for Blacks or African Americans.
- The age-adjusted death rates due to heart attacks, coronary heart disease and cerebrovascular disease (stroke) are in the best 0 50th percentile (green indicator) when compared to other counties in Illinois.

Diabetes

- Age-adjusted emergency room visits due to diabetes-related indicators are all in the best 0 50th percentile range (green indicator) when compared to other counties in Illinois.
- Age-adjusted hospitalizations are in the worst 50th 75th percentile range (yellow indicator) in comparison to other counties in Illinois for diabetes, Type 2 diabetes and short-term complications due to diabetes.
- Disparities are the greatest for Blacks or African Americans for diabetes-related emergency room and hospitalization indicators. The rates range from 225 628 percent higher than the county rate. These rates are approximately three to seven times higher than the county rate.
- The age-adjusted diabetes-related emergency room rate and hospitalizations indicators for Hispanics or Latinos ranged from 118 339 percent higher than the county rate. These rates are approximately two to four times higher than the county rate.
- Bloomington ZIP code 61701 was in the worst 25th percentile range (green indicator) compared to other ZIP codes in Illinois for age-adjusted emergency room visits due to Type 2 diabetes and uncontrolled diabetes and for hospitalizations for diabetes and short-term complications due to diabetes.

<u>Infectious Disease</u>

- McLean County's chlamydia incidence rate is in the worst 25th percentile range (red indicator) when compared to other counties in Illinois. It is trending unfavorably in a statistically significant direction.
- In Illinois in 2018, the Non-Hispanic Black population was disproportionately affected by chlamydia, gonorrhea and syphilis infections.
- McLean County's gonorrhea incidence rate is in the 50th 75th percentile range (yellow indicator) when compared to other counties in Illinois.
- McLean County's primary and secondary syphilis rate is in the worst 75th percentile range (red indicator) when compared to other counties in Illinois. It is trending unfavorably, but not in a statistically significant direction.
- Thirty-three percent of McLean County adults have received a pneumonia vaccination at some point in their lifetime. This is in the worst 25th percentile range (red indicator) when compared to other counties in Illinois (2015 – 2019).
- Forty-three percent of McLean County adults received an influenza vaccination in the past 12 months.
- Vital records data for McLean County indicated that deaths from influenza and pneumonia ranked in the top ten leading causes of death in 2020, with 21 deaths each.
- The immunization status of school-age children for non-COVID-19 vaccines in McLean County exceeds recommended Illinois Department of Public Health-specified levels necessary to prevent epidemics according to immunization data collected from public and non-public schools for the 2020 2021 school year.
- McLean County had a COVID-19 incidence rate of 48.14 cases per 100,000 population. This rate is in the worst 75th percentile range (red indicator) when compared to other counties in Illinois. It is higher than both the Illinois and United States rates.
- The percentage of COVID-19 cases for Non-Hispanic Black, Hispanic and American Indian/Alaskan Native McLean County residents is disproportionate in comparison to the percent of the county population represented by their race or ethnicity.
- COVID-19 vaccination rates for all race and ethnic groups, except for Non-Hispanic Asian residents, trail the Non-Hispanic White resident vaccination rate.

Mental Health

- Psychiatric visits were the second most common reason for patient visits to Carle BroMenn Medical Center's emergency room from 2012-2020.
- Age-adjusted emergency room visits due to mental health is in the worst 25th percentile range (red indicator) for Bloomington ZIP code 61701 when compared to other counties in Illinois and is 165 percent higher than the county rate for Blacks or African Americans.
- Age-adjusted emergency room visits due to pediatric mental health is in the 50th 75th percentile range (yellow indicator) for McLean County. The highest rates occur for:
 - o individuals 15 17 years (nearly 2 ½ times the county rate)
 - o Bloomington ZIP code 61701 (81 percent higher than the county rate and in the worst 25th percentile range compared to other ZIP codes in Illinois).
- The age-adjusted emergency room rate due to suicide and intentional self-inflicted injury (18+ years) is in the worst 50th 75th percentile range (yellow indicator) compared to other counties in Illinois and is highest for:
 - Bloomington ZIP code 61701 (104 percent higher than the county rate and in the worst 25th percentile range compared to other ZIP codes in Illinois)
 - Blacks or African Americans (more than double the county rate).
- Age-adjusted emergency room visits due to adolescent suicide and intentional self-inflicted injury is in the worst 25th percentile range (red indicator) compared to other counties in Illinois for McLean County. The rates are highest for:
 - Bloomington ZIP code 61701 (70 percent higher than the county rate and in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois)
 - o individuals ages 15 17 years (44 percent higher than the county rate).

- The age-adjusted hospitalization rate due to mental health is in the worst 50th 75th percentile range compared to other counties in Illinois and is highest for Bloomington ZIP code 61701, Gridley ZIP code 61744 and Blacks or African Americans.
- The age-adjusted hospitalization rate due to pediatric mental health is 160 percent higher for individuals 15 17 years of age.
- The age-adjusted hospitalization rate due to adult suicide or self-inflicted injury is in the worst 50th 75th percentile range and is highest for Blacks or African Americans (86 percent higher than the county rate) and Bloomington ZIP code 61701 (108 percent higher than the county rate and in the worst 25th percentile range compared to other ZIP codes in Illinois).
- The age-adjusted hospitalization rate due to adolescent suicide and self-inflicted injury is in the best 0 50th percentile range (green indicator) compared to other counties in Illinois.
- The age-adjusted death rate due to suicide in McLean County is in the best 0 50th percentile range (green indicator) compared to other counties in Illinois but is trending unfavorably in a statistically significant direction and does not meet the Healthy People 2030 target.
- The average percentage of eighth, tenth and twelfth graders who reported feeling so sad or hopeless that they stopped doing some usual activities almost every day for two weeks or more in a row was 40 percent.

Oral Health

- A higher percentage of McLean County residents visited the dentist or a dental clinic within the past year (2018) compared to the Illinois and United States rates.
- The age-adjusted emergency room visit rate due to dental problems is in the best 0 50th percentile range (green indicator) for McLean County. The rate for Bloomington ZIP code 61701, however, is in the worst 50th 75th percentile range (yellow indicator) compared to other ZIP codes in Illinois.
- Adult tooth loss for individuals 65 years and older for Bloomington ZIP code 61701 is in the worst 50th 75th percentile range (yellow indicator) compared to other ZIP codes in Illinois.
- The percentage of McLean County children in kindergarten, second grade and sixth grade with untreated dental caries in the 2020 2021 school year was higher than the Healthy People 2030 target.
- In Illinois:
 - Non-Hispanic Black children have the lowest dental sealant rates followed by Non-Hispanic Asian children
 - children eligible for the Free and Reduced-Price Meal Program (FRMP) had more caries experience, more untreated caries and a lower prevalence of dental sealants than children who were not eligible for the program (2018 – 2019).

Respiratory Disease

- Age-adjusted emergency room visits due to adult asthma is in the worst 50th 75th percentile range (yellow indicator) in comparison to other counties in Illinois.
- Age-adjusted emergency room visits due to asthma (all ages), pediatric asthma and chronic obstructive pulmonary disease are all in the best 0 – 50th percentile range (green indicator) compared to other counties in Illinois.
- All of the respiratory hospitalization indicators are in the best 0 50th percentile range (green indicator) compared to other counties in Illinois.
- The greatest disparities for respiratory indicators for emergency room visits are seen in Blacks or African Americans with rates ranging from 115 486 percent higher than the overall rate for McLean County.
- The greatest disparities for respiratory indicators for hospitalizations are seen in Blacks or African Americans and individuals greater than 65 years of age with rates ranging from three and one-half to four and one-half times higher than the rate for McLean County.
- Age-adjusted emergency room rates due to asthma (all ages) and adult asthma ranges from 87 98 percent higher than the county rate for Bloomington ZIP code 61701 and both indicators are in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois.

- Bloomington ZIP code 61701 is in the worst 25th percentile range (red indicator) in comparison to other ZIP codes in Illinois for age-adjusted hospitalizations due to chronic obstructive pulmonary disease.
- The percent of Medicare beneficiaries receiving treatment for asthma in McLean County is in the worst 25th percentile range (red indicator) compared to other counties in Illinois.

Sentinel Events

- McLean County met and exceeded the national tuberculosis target and consistently had case rates below both Illinois and the United States.
- The age-adjusted hospitalization rate due hypertension in McLean County is in the worst 50th 75th percentile (yellow indicator) in comparison to other counties in Illinois, but lower than the Illinois value.
- 2020 2021 school year school-age non-COVID-19 immunizations: 97 98 percent of students were fully protected or in compliance with vaccination requirements, exceeding the Healthy People goal of 90 percent for polio and the Healthy People 2030 goal of 95 percent for Measle-Mumps-Rubella vaccine and Diphtheria-Tetanus-Pertussis vaccine.
- In McLean County, breast cancer in situ rates have been climbing steadily since the early 1990s.
- Cervical cancer incidence rates have been decreasing since the early 1990's, from 7.9 per 100,000 (1994 1998) to 5.8 per 100,000 (2014 2018).

Substance Use

- The following indicators are in the best 0 50th percentile range (green indicator) compared to other counties in Illinois:
 - o Teens who smoke
 - o Teens who use marijuana
 - o Teens who use alcohol
 - o Adults who smoke
 - Adults who drink excessively
 - Death rate due to drug poisoning
 - o Age-adjusted emergency room rate due to substance use
 - Age-adjusted emergency room rate due to opioid use
 - Age-adjusted hospitalization rate due to substance use
 - Age-adjusted hospitalization rate due to opioid use
- The age-adjusted emergency room visit rate due to alcohol use for individuals ages 18 years and older is in the
 worst 25th percentile range (red indicator) when compared to other counties in Illinois. The highest rates occur
 in:
 - Bloomington ZIP code 61701 (125 percent or more than double the county rate)
 - Blacks or African Americans (124 percent higher than or more than double the county rate).
- Compared to other counties in Illinois, the age-adjusted hospitalization rate due to alcohol use is in the worst 50th 75th percentile range (yellow indicator).

h) Maternal and Child Health

Pre- and Post-Natal Care

Births to Medicaid-Eligible Women

The March of Dimes Foundation tracks and produces an annual report card that provides data on birth characteristics in the U.S. and by state. The 2022 report card contains data for 2020 and indicates 38.9 percent of births in Illinois were to women covered by Medicaid insurance and the percentage of births in 2020 to women with Medicaid (38.9 percent) was lower compared to 2017 (40.0 percent). See Exhibit 154.

Exhibit 154: Medicaid Coverage of Births—Illinois, 2017 – 2020

	2017	2018	2019	2020
Mothers with				
Medicaid insurance	40.9%	39.1%	38.2%	38.9%
at the time of a live				
birth				

Source: March of Dimes Foundation, Data for Illinois, Report Cards (2017 – 2020), 2022.

In 2022, the most recent data published for McLean County women enrolled in the federal Women Infants Children (WIC) Supplemental Nutrition Program, is for 2015, when 659 women participated in WIC and there were 2,128 live births in the county. Women in WIC are Medicaid eligible and births to these women would be a subset of all Medicaid births. For the most recent available data, IQuery reports that in 2019 in McLean County, there were 463 infants born to WIC program participants, which is 26.2 percent of the 1,769 live births in McLean County that year. This is comparable to the Illinois rate of 26.8 percent. The McLean County rate has been decreasing from a high of 30 percent in 2017 (Illinois Department of Public Health, IQuery, 2019).

As of 2021, the number of McLean County infants and children enrolled in Medicaid increased from 13,374 (2017) to 13,934 (2021); however, this is a decrease from the high of 14,243 in 2014. In Illinois, after experiencing decreases in enrollment from 2013 – 2019, the numbers are now trending upwards in 2020 and 2021 (The Annie E. Casey Foundation Kids Count Data Center, Children Enrolled in Medical Assistance Programs by County, McLean, Fiscal Year 2012 – Fiscal Year 2021).

Mothers Who Drank Alcohol Before, During or After Pregnancy

From 2010 – 2019 in McLean County, the age-adjusted rate for babies born to mothers who reported drinking alcohol during pregnancy ranged from a rate that was so small that a rate could not be calculated to a high of 14.8 per 100,000 (2013), with a case count of 27 live births that year to mothers who drank alcohol during pregnancy. The most recent data, in 2019 for McLean County, was 5.8 per 100,000, with a case count of 12 live births. This rate is higher than the 2019 Illinois rate of 5.2 per 100,000 (Illinois Department of Public Health, IQuery, 2010 - 2019).

The 2019 Illinois Pregnancy Risk Assessment Monitoring (PRAMS) anonymous survey was sent to 2,099 Illinois mothers who had delivered a live infant; 1,235 responded. Of those completing the survey, 64.3 percent reported consuming alcoholic beverages during the three months before pregnancy. This is an increase from the 2009 PRAMS survey that reported 53 percent drank alcoholic beverages on a weekly basis during the three months prior to pregnancy and from the 2016 PRAMS survey that reported 59.9 percent consumed alcoholic drinks during the three months before pregnancy. Additionally, PRAMS data indicates that Illinois has not met the Healthy People 2030 target to increase the percent of pregnant females ages 15 to 44 years who report abstaining from alcohol in the past 30 days to 92.2 percent (Illinois Department of Public Health, Pregnancy Risk Assessment Monitoring System [PRAMS] 2009, 2016, 2019).

Mothers Who Smoked During Pregnancy

As of 2021, the most recent data available from the Illinois Vital Records System was from 2011 – 2016 for McLean County, which indicated the percentage of births that were to mothers that smoked and/or used tobacco products during pregnancy in McLean County ranged from 11.4 percent (2012) for 247 births, to a high of 13.7 percent (2015) for 292 births. The most current available rate is for 2016, with 12.7 percent of births to county women who reported smoking during pregnancy, leaving 87.3 percent of births to county women who did not smoke during pregnancy. Every year, 2011 – 2016, the McLean County rate was higher than the Illinois rate (a low of 5.0 percent in 2019 to a high of 10.7 percent in 2016). Rates for Illinois were available through 2019. The Illinois rate dropped further in 2017 – 2019, from a high of 10.7 percent (2016) to a low of 5 percent in 2019. McLean County, with a rate of 87.3 percent, did not

meet the Healthy People 2030 goal of having 95.7 percent of pregnant women report not smoking during pregnancy (Illinois Department of Public Health, Vital Statistics: 2011 – 2016, 2021).

Mothers Who Use Other Substances During Pregnancy

Infants who are born and thought to have been exposed to illegal substances, through observation by physicians or by toxicology test results, are reported to the Illinois Department of Children and Family Services (DCFS). These cases are investigated by DCFS to verify the infant's prenatal exposure. This information is not available at the county level. The most recent state-level data available in 2018 is from 2013, identifying 447 substance exposed infants (0.29 percent) out of the 155,528 live births in Illinois. This is the second lowest rate in the six-year period of 2008-2013 (Illinois Department of Children and Family Services, Abuse and Neglect Statistics, Substance Exposed Infants, November 2015).

Maternal Age

Data from 2009 to 2019 indicates that the percent of mothers ages 35 and over has continued to rise since 2009 for both McLean County and Illinois. The percent of live births to McLean County women in this age category has moved from a low of 10.6 percent (2012) with 229 live births to a high of 16.8 percent (2019) with 298 live births. The McLean County percentage has remained lower each year than the Illinois rates, which increased each year 2009 - 2019 (ranging from 15.6 percent to 20.8 percent) (Illinois Department of Public Health, Vital Statistics, 2009 – 2019).

Maternal Mortality

Maternal mortality is measured in two ways: 1) Pregnancy-Associated Deaths: the death of a woman while pregnant or within one year of pregnancy from any cause; and, 2) Pregnancy-Related Deaths: the death of a woman while pregnant or within one year of pregnancy from a cause related to the pregnancy.

From 2008 – 2017 in Illinois, a cumulative total of 754 women died while pregnant or within one year of pregnancy. In April 2021, the Illinois Department of Public Health published the Maternal Mortality Report 2016 – 2017, which included the findings from two Maternal Mortality Review Committees that reviewed 129 maternal deaths that occurred during 2016 – 2017 in Illinois. The report noted that an average of 75 women die each year while pregnant or within one year of pregnancy; this is one death every five days. About one in three pregnancy-associated deaths were pregnancy-related deaths. The timing of these pregnancy-related deaths include:

- one in three women died while pregnant
- one in three women died during the first two months postpartum
- one in three women died two or more months postpartum.

More than four out of five pregnancy-related deaths in Illinois are preventable. Some significant disparities exit. Non-Hispanic Black women in Illinois are about three times as likely to die from a pregnancy-related condition as Non-Hispanic White women, and more likely to die from pregnancy-related medical conditions. Non-Hispanic White women were more likely to die from pregnancy-related mental health conditions. Women on Medicaid during pregnancy were three times as likely to die within one year of pregnancy as women with private insurance (Illinois Department of Public Health, Maternal Morbidity and Mortality, 2016 – 2017). Separate county-level statistics were not provided in the April 2021 report.

During 2016 – 2017 in Illinois, there were 175 pregnancy-associated deaths. Common underlying causes for pregnancy-associated deaths in that time period included: medical causes (46 percent), suicide (eight percent), homicide (13 percent), drug overdose (22 percent), and other injuries (12 percent) (Illinois Department of Public Health, Maternal Morbidity and Mortality, 2016 – 2017).

Disparities

Maternal mortality in Illinois:

- A Non-Hispanic Black woman is three times more likely to die from a pregnancy-related condition than a non-Hispanic White woman.
- A Non-Hispanic Black woman is more likely to die from pregnancy-related medical conditions than a Non-Hispanic White woman.
- A Non-Hispanic White woman is more likely to die from pregnancy-related mental health conditions.
- Women on Medicaid during pregnancy were three times as likely to die within one year of pregnancy as women with private insurance.

Other Maternal Indicators

The Public Health Pregnancy Risk Assessment Monitoring System (PRAMS) anonymous survey is a surveillance instrument used by the Illinois Department of Public Health as part of a national initiative by the U.S. Centers for Disease Control and Prevention to reduce morbidity and mortality. The 2019 PRAMS survey was sent to 2,099 recent mothers in Illinois, and 1,235 survey responses were received.

A comparison of the 2009 and 2019 Illinois Department of Public Health PRAMS results revealed gains in pre-conception health. This includes a reduction in smoking during the last three months of pregnancy, an improvement in the percent of postpartum women who breastfed at least once, and an increase in the percent of women who placed infants on their backs most of the time. There were also increases in the rate of individuals being diagnosed with depression either during their pregnancy or after the pregnancy. The survey results are unable to project if this increase is due to improved depression screening on the part of healthcare providers or if it is due to increases in the occurrence of depression (Illinois Department of Public Health, Pregnancy Risk Assessment Monitoring System [PRAMS] 2009, 2016, 2019). See Exhibit 155 below.

Exhibit 155: Comparison of Select indicators from IDPH PRAMS Surveys of Recent Mothers Who Delivered a Live Born Infant – Illinois, 2009 – 2019

PRAMS Indicator	2009 PRAMS	2016 PRAMS	2019 PRAMS
Pre-Conception			
Visited dentist or had teeth cleaned during			
past 12 months	52%	58.5%	59.6%
Took multi-vitamins, prenatal vitamins, or			
folic acid every day during the month before			
pregnancy	30%	37.6%	37.1%
Smoked during the 3 months before			
becoming pregnant	21%	16.7%	15.4%
Consumed alcoholic drinks during the 3			
months before becoming pregnant	53%	59.9%	64.3%
Healthcare visit for depression and/or			
anxiety in 12 months before pregnancy	11%*	6.9%	11.1%
During Pregnancy			
Visited Dentist or had teeth cleaned	44%	44.3%	48.1%
Diagnosed with depression	7%	8.6%	13.8%
Were physically abused	2%	2%	1.9%
Smoked during last 3 months of pregnancy	9%	7.6%	6.7%
Postpartum (After Pregnancy)			
Breastfed at least once after birth	80%	88.6%	90.8%
Diagnosed with depression	9%	9.8%	11.6%
Put infant to sleep on their back most of the	72%	79.9%	82.6%
time			

^{*}The pre-conception depression/anxiety question in 2009 was regarding a healthcare visit for depression or diabetes. Sources: Illinois Department of Public Health, Pregnancy Risk Assessment Monitoring System (PRAMS) 2009, 2016, 2019; http://www.idph.state.il.us/health/prams_rpt_09.pdf; http://www.dph.illinois.gov/sites/default/files/Publications OPPS Doument A 2016%20Illinois%20PRAMS%20Facts.pdf.

Breastfeeding

The American Academy of Pediatrics recommends infants be exclusively breastfed for the first six months of life, with continued breastfeeding while introducing new foods for at least one year. Nationally, 84.1 percent of all infants born in the United States in 2017 started to breastfeed, with 58.3 percent still breastfeeding at six months of age and 35.3 percent breastfeeding at 12 months (Centers for Disease Control and Prevention, Breastfeeding Report Card: United States 2020). The state-level statistics for Illinois show a similar pattern of decline in breastfeeding throughout the first year of life. A higher percentage of breastfed infants in Illinois (26.2 percent) were also given formula before two days of age compared to the United States rate (19.2 percent). (Centers for Disease Control and Prevention, Breastfeeding Report Card: U.S. 2020). See Exhibit 156 below.

Exhibit 156: Breastfeeding Rates in Infants Born in 2017—Illinois and United States, 2017

Jurisdiction	Percent Ever Breastfed	Percent Breastfeeding At 6 Months	Percent Breastfeeding At 12 Months	Percent Exclusively Breastfeeding Through 3 Months	Percent Exclusively Breastfeeding Through 6 Months	Percent Breastfed Infants Receiving Formula Before 2Days of Age
United States	84.1	58.3	35.3	46.9	25.6	19.2
Illinois	84.2	52.9	30.3	42.1	23.9	26.2

Source: Centers for Disease Control and Prevention (CDC), Breastfeeding Report Card: U.S. 2020.

The Centers for Disease Control and Prevention's Maternity Practices in Infant Nutrition and Care (MPINC) conducted a 2020 Illinois survey that measures care practices and policies that impact newborn feeding, infant feeding education, staff skills and discharge support. All hospitals in the United States are invited to participate in the survey. In Illinois, 77 of 100 eligible hospitals in Illinois participated. Results from Carle BroMenn Medical Center included (Centers for Disease Control and Prevention, Maternity Practices in Infant Nutrition and Care, 2020):

- 20 percent of healthy, term, breastfed newborns are fed infant formula
- The hospital's total score (100 possible): 93, which is higher than the U.S. average of 81, the Midwest Region (81), and those of similar-sized hospitals (83).

For the fiscal year 2022, the McLean County Health Department WIC Program had exclusive breastfeeding rates of 9.4 percent to 10.7 percent. Partial breastfeeding rates ranged from 16.7 percent to 18.6 percent for quarters one through three (July 2021 – March 2022). Total percent breastfeeding in fiscal year 2022 was 27.4 percent in first quarter, 28.2 percent in second quarter, and 28.0 percent in third quarter. This is slightly below the state average of 31.56 percent (McLean County Health Department, WIC Program, 2022).

The McLean County Milk Bank, housed at the McLean County Health Department, has received 28,448 ounces of donated breast milk since the grand opening on February 14, 2017. The donated milk is shipped to the Mother's Milk Bank of the Western Great Lakes where it is processed and distributed. In Illinois, through legislative efforts in 2019, donor milk can be obtained through insurance when the client has a medical need (specific medical conditions) (McLean County Health Department, WIC Program, 2022).

Live Births

In 2019, there were 1,769 live births in McLean County. In the eleven-year period of 2009 - 2019, the number of live births in McLean County ranged from a low of 1,769 (2017) to a high of 2,169 (2012). There has been a decrease of 17 percent in the number of live births in McLean County when comparing 2009 to 2019. Births in 2019 were down 18.4 percent from the peak in 2012 (2,169 live births). Illinois experienced an 18 percent decrease in live births from 2009 to 2019. Exhibit 157 shows the number of live births in McLean County from 2009 to 2019 (Illinois Department of Public Health, Vital Statistics, 2009 - 2019).

Exhibit 157: Live Births - McLean County Compared to Illinois and U.S., 2009 - 2019

Year	McLean	Illinois	Nation
2019	1,769	140,145	3,747,540
2018	1,820	144,828	3,791,712
2017	2,006	149,390	3,855,500
2016	2,020	154,467	3,945,875
2015	2,128	158,101	3,978,497
2014	2,028	158,522	3,998,175
2013	2,140	156,918	3,940,764
2012	2,169	159,152	3,960,796
2011	2,091	161,234	3,961,220
2010	2,121	164,998	4,007,105
2009	2,132	171,077	4,130,665

Source: Centers for Disease Control and Prevention, National Vital Records Report, Births: Final Data, 2019, Vol. 70, No. 2, https://www.cdc.gov/nchs/data/nvsr/nvsr70/nvsr70-02-508.pdf, March 23, 2021.

Source: Centers for Disease Control and Prevention, National Vital Records Report, Births: Final Data, 2018, Vol. 68, No. 13, https://www.cdc.gov/nchs/data/nvsr/nvsr68/nvsr68 13-508.pdf, November 27, 2019.

Source: The Illinois Department of Public Health, Vital Statistics, http://www.dph.illinois.gov/data-statistics/vital-statistics/birth-statistics;

Source: Illinois Department of Public Health, http://www.dph.illinois.gov/data-statistics/vital-statistics/birth-statistics/more-statistics;

Source: Centers for Disease Control and Prevention, Vital Statistics Online Data Portal,

https://www.cdc.gov/nchs/data access/vitalstatsonline.htm#Births;

Source: Centers for Disease Control and Prevention, National Center for Health Statistics, FastStats Homepage, https://www.cdc.gov/nchs/fastats/births.htm;

Source: Centers for Disease Control and Prevention, National Vital Statistics Reports, Vol. 60, No. 1, November 3, 2011, for Births: Final Data for 2009, https://www.cdc.gov/nchs/data/nvsr/nvsr60/nvsr60 01.pdf.

The general fertility rate in the United States in 2019 was 58.3 births per 1,000 women (ages 15 – 44), a decline of one percent from 2018 (59.1) and a record low rate for the United States. It was also the fifth year in a row for a decline (Centers for Disease Control and Prevention, National Vital Records Report, Births: Final Data 2019, 2020). In 2015, the state of Illinois began reporting race and ethnicity (Non-Hispanic White; Non-Hispanic Black; Non-Hispanic Other; Hispanic) for live births. Prior to 2015, all women giving birth and reporting Hispanic ethnicity were included in the White race category. In 2019, the most recent year with available data, 72.8.3 percent (1,287) of live births in McLean County were non-Hispanic White; 12.6 percent (223) non-Hispanic Black, which was a decrease of one percent from 2018; 8.1 percent (143) non-Hispanic other; and 6.6 percent (116) were Hispanic, which was an increase of one percent from 2016 (Illinois Department of Public Health, Vital Statistics—Births, 2009 - 2019). Exhibit 158 presents the percent of McLean County live births by race and ethnicity from 2009 - 2019.

Exhibit 158: Percent Live Births by Race and Ethnicity – McLean County and Illinois, 2009 – 2019

V "	McLean Cou	nty			State of Illi	nois		
Year	NH White	NH Black	NH Other	Hispanic	NH White	NH Black	NH Other	Hispanic
2019	72.8%	12.6%	8.1%	6.6%	54.5%	17.2%	6.9%	21.4%
2018	71.4%	13.7%	8.4%	6.6%	54.7%	17.5%	6.9%	21.0%
2017	70.3%	12.7%	10.5%	6.4%	54.4%	17.7%	6.8%	21.0%
2016	71.1%	11.8%	11.5%	5.5%	54.9%	17.1%	6.9%	21.1%
2015	71.4%	12.1%	10.9%	5.7%	54.9%	17.2%	6.5%	21.4%
Year	McLean Cou			McLean Percent Live Births by Ethnicity Hispanic*	State of Ill	inois lack Other		State of Illinois Percent Live Births by Ethnicity Hispanic*
2014	75.8% 12.	7% 11.5%		6.0%*	74.4% 1	7.5% 8.1%		21.3%
2013	75.2% 11.	2% 13.6%		5.8%*	74.4% 1	7.4% 8.2%		21.3%
2012	76.4% 11.	4% 12.1%		5.9%*	74.7% 1	7.5% 7.8%		21.8%
2011	78.6% 10.	0% 11.4%		6.6%*	75.9% 1	7.1% 6.9%		22.2%
2010	78.0% 10.	7% 11.4%		6.4%*	75.8% 1	7.5% 6.7%		22.6%
2009	79.3% 10.	7% 10.0%		6.7%*	76.4% 1	7.6% 6.0%		23.6%

Note for Exhibit 158: NH: Non-Hispanic; * All Hispanic live births were also counted in the "White" column for years 2009 through 2014. For 2009 - 2014, the percent for Hispanic is the percent of all live births who were of Hispanic origin. **Beginning in 2015**, the state started categorizing "race and ethnicity," rather than listing them separately. For 2015 - 2019, four categories were used: Non-Hispanic White, Non-Hispanic Black, Non-Hispanic Other and Hispanic. All four of these categories now add up to the total of all live births. Note: the percent of Hispanic origin live births compares across all years, 2009 through 2019, as it is, in both cases, the percent of all live births.

Source: Illinois Department of Public Health, Vital Statistics, Births, 2009 - 2019. http://www.dph.illinois.gov/data-statistics/vital-statistics/birth-statistics; http://www.dph.illinois.gov/data-statistics/vital-statistics/birth-statistics/more-statistics.

Particularly since 2017, when Hispanic births moved into the six percent range, births by race and ethnicity do not consistently align with the proportion of that race or ethnicity in the population. According to the 2020 U.S. Census estimates, the McLean County population consists of:

Non-Hispanic White: 79.2 percent (births in 2019: 72.8 percent Non-Hispanic White)
 Non-Hispanic Black: 8.4 percent (births in 2019: 12.6 percent Non-Hispanic Black)

Hispanic: 5.2 percent (births in 2019: 6.6 percent Hispanic)

Asian: 5.1%

• Non-Hispanic Other: 1.8%

American Indian/Alaskan Native: 0.3%

Births by Cesarean Section

In the eleven-year period (2009 - 2019), the rate of cesarean sections performed during labor and delivery in McLean County has been consistently higher than both the Illinois and national rates. In 2019, 35 percent (619) of live births resulted from cesarean sections. The annual rate ranged from a low of 33.1 percent (677) in 2009, to a high of 39.4 percent (824) in 2011. The Healthy People 2030 target is to have no more than 23.9 percent of live births by cesarean

section. In 2019, McLean County continued to exceed both the state (29.6 percent) and national (31.7 percent) rate as well as the Healthy People 2030 goal (Centers for Disease Control and Prevention, National Center for Health Statistics, 2019; Illinois Department of Public Health, Vital Statistics, Birth Characteristics, 2019).

Births to Adolescent Mothers

In McLean County, the number and percent of births to adolescent mothers (individuals under age 20) has continued to steadily decrease over the past thirteen years, falling 62.5 percent from 2007 to 2019 (Illinois Department of Public Health, Vital Statistics). Using data from 2014 – 2020, the County Health Rankings reported in 2022 that McLean County's teen birth rate (the number of births per 1,000 females ages 15 – 19) was 10, which is lower than the Illinois rate of 14.6 in 2019 and 13.6 in 2020, and the national rate of 16.7 in 2019. Although teen pregnancy and birth rates have gone down, disparities by race and ethnicity remain. In McLean County, the rate for Black or African American teens is 30 and Hispanic or Latino teens is 18, compared to White teens at seven. The Healthy People 2030 target is 31.4 pregnancies per 1,000 females (University of Wisconsin, Center for Population Health, County Health Rankings, 2022). See Exhibit 159 for additional trend data.

Exhibit 159: Live Births to Adolescent Females - McLean County, 2007 - 2019

Year	Live Births	Under 15	Age 15 - 17	Age 18- 19	Total Teen	Rate for # live births per 1,000 adolescent females	% McLean	% Illinois
2019	1,769	1	1	52	63		3.6%	4.2%
2018	1,820	1	8	50	68		3.7%	4.5%
2017	2,006	1	14		66		3.3%	4.8%
2016	2,020	3	27	60	90	4	4.5%	5.1%
2015	2,128	2	26	67	95		4.5%	5.6%
2014	2,028	0	24	68	92	6.1	4.5%	6.1%
2013	2,140	2	18	77	97	6.5	4.5%	6.8%
2012	2,169	2	41	97	140	9.3	6.5%	7.7%
2011	2,091	1	40	89	130	8.7	6.2%	8.2%
2010	2,121	1	39	89	129		6.1%	9.1%
2009	2,132	2	43	91	136		6.4%	9.6%
2008	2,156	2	41	97	140		6.5%	10.0%
2007	2,272	2	55	111	168		7.4%	10.1%

Sources: Illinois Department of Public Health, Vital Statistics, Birth Statistics, Illinois Teen Births by County, 2007 – 2019; http://www.dph.illinois.gov/data-statistics/vital-statistics/birth-statistics/more-statistics.

Birth Outcomes

Infant Mortality

An infant dying before age one is considered an infant death. Infant mortality rates are one indicator of the overall health of a community. Nationally, neonatal mortality (deaths occurring during days 0 - 27) is associated with gestational age, low birth weight and congenital malformations, or the development of other health problems before or after birth. Post-neonatal mortality (deaths occurring after birth during days 28 – 364) is associated with Sudden Infant Death Syndrome (SIDS), unintentional injury and congenital malformations (Illinois Department of Public Health, Infant Mortality webpage, 2018). In Illinois, in 2020, the top ten leading causes of infant death were disorders related to short gestation and low birth weight; congenital malformations, deformations and chromosomal abnormalities; newborn affected by maternal complications of pregnancy; accidents; newborn affected by complications of placenta, cord and

membranes; bacterial sepsis of the newborn; sudden infant death syndrome; assault (homicide); intrauterine hypoxia and birth asphyxia; and, neonatal hemorrhage (Illinois Department of Public Health, Infant Mortality Statistics, 2010 – 2020). No data was available on the Illinois Department of Public Health website regarding the leading causes of infant mortality for McLean County.

The most recent available infant mortality rate for McLean County is 6.4 deaths per 1,000 live births. This is in the worst $50^{th} - 75^{th}$ percentile range (yellow indicator) compared to other counties in Illinois, is higher than the Illinois value of 6.1 deaths per 1,000 live births and the prior value of 6.0. The number of deaths is trending favorably, but not in a statistically significant direction and the rate does not meet the Healthy People 2020 target of 6.0 deaths per 1,000 live births nor the Healthy People 2030 target of 5.0 deaths per 1,000 live births. Disparities are apparent in the Illinois rates, with the Non-Hispanic White rate (4.4) exceeding the Healthy People 2030 target (5.0), and the Non-Hispanic Black rate (11.4) more than double the rate for Non-Hispanic White (Conduent Healthy Communities Institute, Illinois Department of Public Health, 2017-2019). See Exhibit 160 below.

Exhibit 160: Infant Mortality Rate - McLean County, 2016 - 2018





(6.1)







McLean County 6.4 Deaths/1,000 live births

The Illinois Department of Public Health reports McLean County infant mortality rates have ranged from a low of 5.7 deaths per 1,000 live births (2010) to a high of 10.5 (2011), with the number of deaths ranging from 8 – 22. State infant mortality rates show far less variation, ranging from a low of 6.0 deaths per 1,000 live births (2013, 2015) to 6.8 (2010). In 2019, the Illinois infant mortality rate dropped to 5.5 per 1,000, the first time the rate had dropped below 6.0 in the ten-year period 2010 – 2019 (Illinois Department of Public Health, Infant Mortality Statistics, 2010 – 2019). See Exhibit 161 below.

Exhibit 161: Infant Deaths and Infant Mortality Rates (IMR) - McLean County, 2010 - 2019

	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
IMR Illinois	6.8	6.6	6.5	6.0	6.6	6.0	6.4	6.1	6.6	5.5
IMR McLean	5.7	10.5	7.8	6.5	6.9	8.9	*	8.0	6	*
# Deaths -McLean	12	22	17	14	14	19	8	16	11	9

^{*}Figure does not meet standards of reliability or precision

Source: Illinois Department of Public Health, More Detailed Infant Mortality Statistics, 2010 – 2019, http://www.dph.illinois.gov/data-statistics/vital-statistics/infant-mortality-statistics/more-statistics.

Source: March of Dimes Foundation, 2021 March of Dimes 2021 Report Card, Illinois, Infant Mortality, 2009 – 2019, 2021).

In 2018, out of 50 states, Illinois ranked 36 in infant mortality. Risk factors and risk markers for infant mortality in Illinois include: infants born to women less than 20 years old; infants born to Black women; infant mortality rate decreased as the mother's education level increased; infant mortality was highest among women covered by Medicaid compared to women who had private insurance or other payment plans; and, infant mortality was higher among infants born to women with preexisting chronic conditions (Illinois Department of Public Health, Office of Women's Health and Family Services, Illinois Infant Mortality Data Report, December 2020).

Disparities

In Illinois in 2018 - 2019:

- The infant mortality rate varied by race and ethnicity:
 - Non-Hispanic White: 4.4
 - Non-Hispanic Black: 11.4. The infant mortality rate for infants born to Non-Hispanic Black women decreased as the mother's education level increased.
 - Hispanic: 5.3Other: 3.0
- The infant mortality rate was highest among women covered by Medicaid.

Low Birth Weight (<2,500 grams; less than 5 pounds, 8 ounces)

In McLean County, 8.8 percent of infants are considered to have low birth weight, which is in the worst $50^{th} - 75^{th}$ percentile range (yellow indicator) compared to other counties in Illinois and is higher than the Illinois value of 8.4 percent and the U.S. value of 8.3 percent. The current value is also higher than the prior value in 2018 of 7.3 percent and exceeds the Healthy People 2020 target of 7.8 percent. There is not a comparable target in the Healthy People 2030 measures. The rate is trending unfavorably, but not in a statistically significant direction (Conduent Healthy Communities Institute, Illinois Department of Public Health, 2019). See Exhibit 162 below.

Exhibit 162: Babies with Low Birth Weight - McLean County, 2007 - 2019

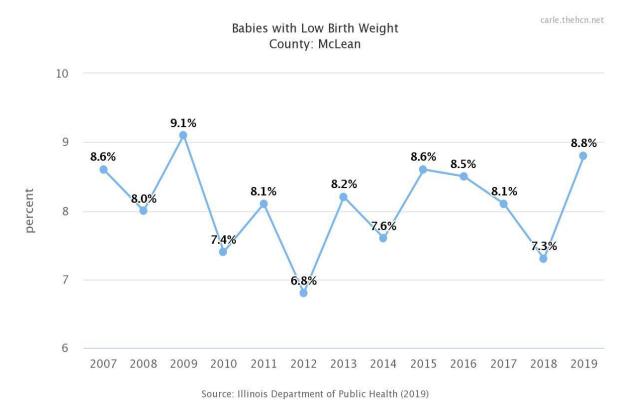


McLean County 8.8%

Source: Conduent Healthy Communities Institute, Illinois Department of Public Health, 2019.

The low birth weight rate in McLean County has been variable and did meet the Healthy People 2020 target four times (2010, 2012, 2014 and 2018) in a thirteen year period. See Exhibit 163 below:

Exhibit 163: Low Birth Weight Trends - McLean County, 2007 - 2019



Source: Conduent Healthy Communities Institute, Illinois Department of Public Health, 2019.

Very Low Birth Weight (<1,500 grams; less than 3 pounds, 5 ounces)

In 2018, 2019, 2020 and 2021, the percent of infants born with very low birth weight at Carle BroMenn Medical Center and at OSF St. Joseph Medical Center was lower than the Healthy People 2020 goal to reduce very low birth weight to 1.4 percent of live births. See Exhibit 164 below.

Exhibit 164: Number and Percentage of Very Low Birth Weight Infants (<1500 grams or 3 pounds, 5 ounces born in McLean County Hospitals, 2018 – 2021

		Carle Bro					. Joseph al Center	
	2018	2019 2020 2021			2018	2019	2020	2021
# VLBW Infants	1	2	5	11	1	2	0	2
# Live Births	1434	1333	1383	1276	734	767	737	819
% VLBW Infants	0.06%	0.15%	0.36%	0.8%	0.14%	0.26%	0.00%	0.24%

Source: Carle BroMenn Medical Center and OSF St. Joseph Medical Center, 2018 – 2021.

Pre-term births are those infants that are born at less than 37 weeks gestation. In McLean County, 10.5 percent of the births are pre-term, which is in the best $0-50^{th}$ percentile range (green indicator) when compared to other counties in Illinois and is lower than the Illinois value (10.7 percent). It is, however, higher than McLean County's prior value (9.8%) and the Healthy People 2030 goal of 9.4 percent (Conduent Healthy Communities Institute, Illinois Department of Public Health, 2019).

Congenital Anomalies

Birth defects can occur at any stage of pregnancy, but most occur during the first trimester when the infant's organs are developing. In Illinois, a report published in April 2021 notes that birth defects are the leading cause of infant mortality in the United States and the second leading cause of infant mortality in Illinois (Illinois Department of Public Health, Illinois Adverse Pregnancy Outcomes Reporting System (APORS), Trends in the Prevalence of Birth Defects in Illinois 2002 – 2018, April 2021). In the United States, birth defects affect one in every 33 infants (approximately three percent of all infants) born in the United States each year, and account for 20% of all infant deaths (Centers for Disease Control and Prevention, Data and Statistics on Birth Defects, 2022).

For McLean County, the Illinois Department of Public Health's IQuery data system notes that there were one to 11 deaths per year (2000 – 2020) due to congenital malformations, deformations and chromosomal abnormalities. In Illinois, deaths from these causes during the same time period ranged from a low of 332 (2019) to a high of 490 (2003) (Illinois Department of Public Health, IQuery Data System, 2020).

Child Well-Being

Child Well-Being Ranking

The Annie E. Casey Foundation publishes the Kids Count Data Book and ranks the 50 U.S. states on child well-being using five categories: Overall Rank, Economic Well-Being, Education, Health, and Family and Community. In the 2020 report, the following rankings for child well-being were provided for Illinois in comparison to the other 49 states (Annie E. Casey Foundation, Kids Count Data Book: 2020 State Trends in Child Well-Being, June 2020):

Overall Rank: 24

Economic Well-Being: 21

Education: 12Health: 20

Family and Community: 9

Rankings at a county level are not provided.

Key findings: Maternal and Child Health

- The infant mortality rate for McLean County exceeds the Healthy People 2030 goal.
- A comparison of the 2009, 2016 and 2019 Illinois Department of Public Health Pregnancy Risk Assessment
 Monitoring System (PRAMS) anonymous survey results revealed gains in pre-conception health, a reduction in
 smoking during the three months before pregnancy and the last three months of pregnancy, and an
 improvement in the percent of postpartum women who breastfed at least once and who placed infants on their
 backs most of the time.
- The rate of cesarean sections performed during labor and delivery in McLean County has been consistently higher than both the Illinois and national rates.
- McLean County percentage of mothers who report smoking during pregnancy did not meet the Healthy People 2030 target.
- A Non-Hispanic Black woman is three times more likely to die from a pregnancy-related condition than a Non-Hispanic White woman.
- A Non-Hispanic Black woman is more likely to die from pregnancy-related medical conditions than a Non-Hispanic White woman.
- A Non-Hispanic White woman is more likely to die from pregnancy-related mental health conditions.
- Women on Medicaid during pregnancy were three times as likely to die within one year of pregnancy as women with private insurance.

- The breastfeeding rate at a local hospital is higher than the state and nation.
- The rate of births to adolescents in McLean County is lower than the Illinois and United States rates and it meets and exceeds the Healthy People 2030 goal.
- McLean County's infant mortality rate, although decreasing since its high level in 2011, remains higher than the Illinois rate and the Healthy People 2030 goal. It falls in the worst 50th 75th percentile (yellow indicator) compared to other counties in Illinois.

VI. Prioritization of Health-Related Issues

k) Community Health Survey: Perceptions of Health Issues, Unhealthy Behaviors and Issues Impacting Quality of Life

To aid in identifying the high priority health issues in McLean County, the 2021 McLean County Community Health Survey asked respondents to report on their perceptions of the three most important health issues, unhealthy behaviors and factors that contribute to well-being in the community.

Perceptions of Health Issues

2021 McLean County Community Health Survey respondents perceived their community as having the following top three major health issues: mental health, being overweight and/or obese and COVID-19. Twenty-six percent of survey respondents feel mental health is the biggest health issue, 16 percent feel that obesity/overweight is a top health issue and 14 percent responded that viruses (COVID-19) is the third top issue. See Exhibit 165 below.

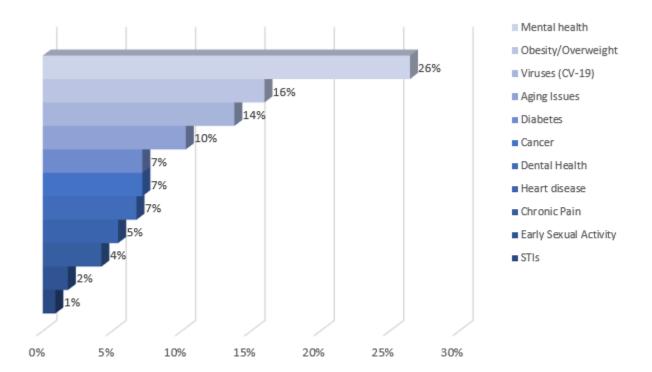


Exhibit 165: Perception of Health Issues - McLean County, 2021

Source: McLean County Community Health Survey, 2021.

Comparison to the 2018 McLean County Community Health Survey

Comparison data is not available since 2018 respondents were allowed to select three choices rather than one choice in the 2022 survey.

Perception of Issues Impacting Quality of Life

Survey respondents were asked to select the three most important issues impacting well-being in the community (See Exhibit 166). The three top issues impacting well-being are access to healthcare (20 percent), healthy food choices (14 percent) and less hatred (10 percent).

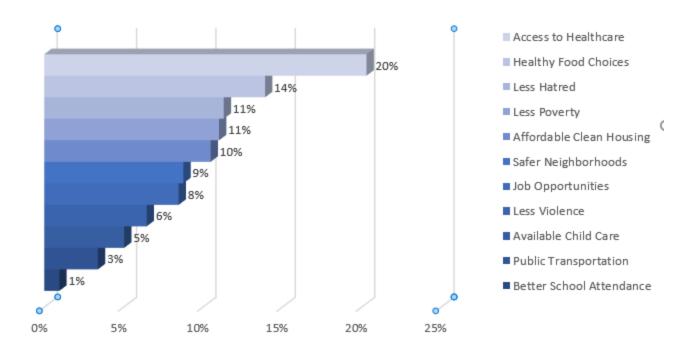


Exhibit 166: Issues Impacting Quality of Life - McLean County, 2021

Source: McLean County Community Health Survey, 2021.

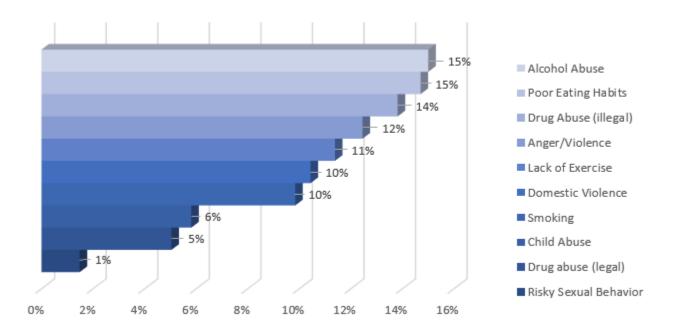
Comparison to the 2018 McLean County Community Health Survey

Comparison data is not available since 2018 respondents were allowed to select three choices rather than one choice in the 2022 survey.

Perceptions of Unhealthy Behaviors

2021 McLean County Community Health Survey respondents identified alcohol abuse (15 percent), poor eating habits (15 percent) and illegal drug use (14 percent) as the unhealthy behaviors affecting their community's perception of health. See Exhibit 167 below.

Exhibit 167: Unhealthy Behaviors that Impact Health Perception - McLean County, 2021



Source: McLean County Community Health Survey, 2021.

Comparison to the 2018 McLean County Community Health Survey

Comparison data is not available since 2018 respondents were allowed to select three choices rather than one choice in the 2022 survey.

I) Summary of Health Disparities

Healthy People 2030 defines a health disparity as "a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion." (Office of Disease Prevention and Health Promotion, Healthy People 2030, 2022). This section highlights the key health disparities that emerged for McLean County.

Geographic Disparities

Individuals living in specific geographic areas of McLean County experience worse health outcomes than individuals living in other geographic areas. The ZIP codes that were identified through Conduent Healthy Communities Institute's Health Equity Index as having the highest Health Equity Needs ranking (5) in McLean County are Bellflower ZIP Code 61724 and Bloomington ZIP code 61701. Exhibit 168 below lists the ten ZIP codes in McLean County that have the highest Health Equity Needs rankings (5 or 4).

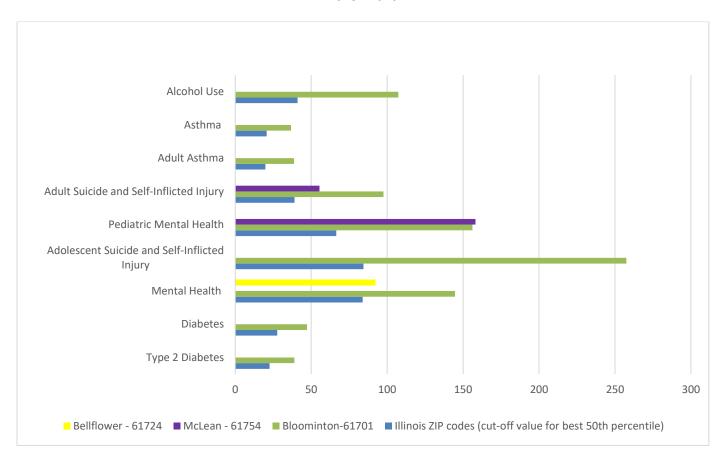
Exhibit 168: High Health Equity Needs ZIP Codes in McLean County, 2021

City/Town	ZIP Code	Health Equity Ranking	Population
Bellflower	61724	5	488
Bloomington	61701	5	33,884
Stanford	61774	4	896
Ellsworth	61737	4	471
Chenoa	61726	4	2,505
Colfax	61728	4	1,395
Arrowsmith	61722	4	506
Gridley	61744	4	1,924
McLean	61754	4	1,121
Saybrook	61770	4	1,044

Source: Conduent Healthy Communities Institute, Claritas, 2021.

The greatest geographic disparities compared to other ZIP codes in Illinois are evident for Bloomington ZIP code 61701. Exhibit 169 below shows that Bloomington ZIP code 61701 is in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois for emergency room visits due to alcohol use, adult asthma, asthma (all ages) pediatric and adult mental health, diabetes, Type 2 diabetes and both adolescent and adult suicide and self-inflicted injury in comparison to other ZIP codes in Illinois. Additionally, Bellflower ZIP code 61724 is in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois for adult mental health. McLean ZIP code 61754 is in the worst 25th percentile range (red indicator) in comparison to other ZIP codes in Illinois for adult suicide and self-inflicted injury and pediatric mental health. See Exhibit 169 below.

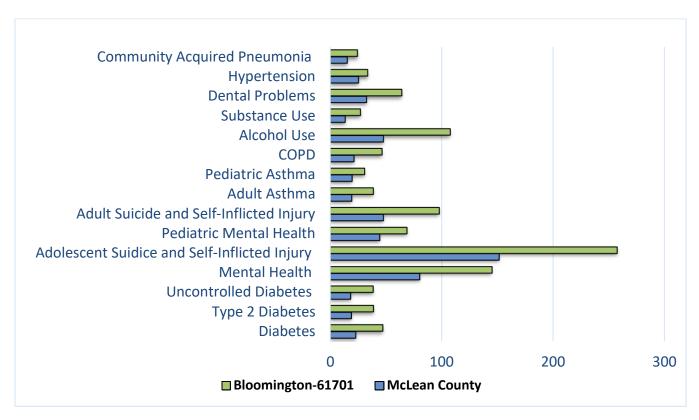
Exhibit 169: Age-Adjusted Emergency Room Visit Rates per 10,000 Population (various age categories) for Bloomington ZIP Code 61701, Bellflower ZIP Code 61624 and McLean ZIP Code 61754 versus other ZIP codes in Illinois, 2018 - 2020



Conduent Healthy Communities, Illinois Hospital Association, 2018 – 2020.

Bloomington ZIP code 61701, is also the ZIP code that has the most number of age-adjusted emergency room rates that are higher than the overall rate for McLean County. Emergency room rates in Bloomington ZIP code 61701 range from 70 – 125 percent higher than the county rate for all of the indicators displayed below with the exception of hypertension, pediatric asthma and community acquired pneumonia (32 – 58 percent higher). See Exhibit 170 below for an illustration of this data.

Exhibit 170: Age-Adjusted Emergency Room Visit Rates per 10,000 Population (various age categories) in McLean County versus Bloomington ZIP Code 61701, 2018 – 2020



Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

In addition to the above disparities, the following table (Exhibit 171) illustrates the age-adjusted emergency room rates for additional ZIP codes with rates higher than the rate for McLean County.

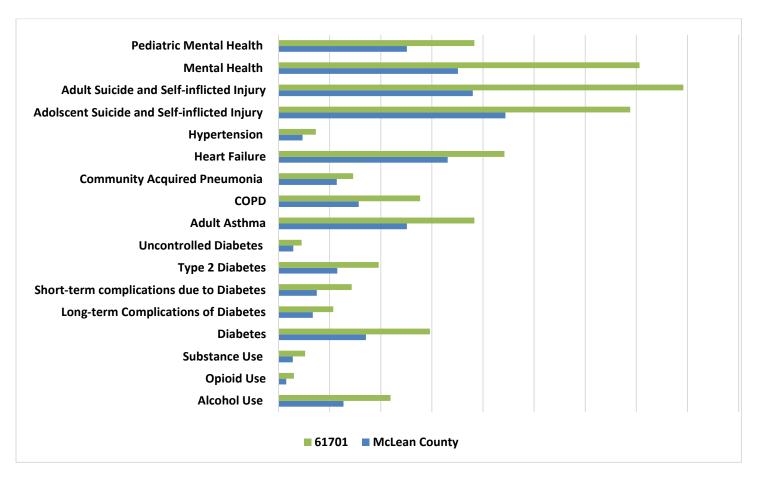
Exhibit 171: High Health Equity Needs ZIP Codes with Age-Adjusted Emergency Room Rates Higher than the McLean County Rate, 2018 – 2020

Indicator rate due to:	Emergency room visits per 10,000 population 18+: McLean County	Emergency room visits per 10,000 population 18+: ZIP Code
Diabetes	23.1	Chenoa - 61726 (37.3) ■ 61% > county rate Gridley – 61744 (28.6) ■ 24% > county rate
Type 2 Diabetes	19.2	Chenoa – 61726 – (25) • 30% > county rate Gridley – 61744 (28.6) • 49% > county rate
Uncontrolled Diabetes	18.5	Chenoa − 61726 (38.6) • 108% > county rate
Hypertension	25.5	Chenoa − 61726 − 32.4 • 27% > county rate
Adult Mental Health	80.2	Saybrook – 61770 (89) • 11% > county rate Stanford – 61774 (93.5) • 17% > county rate
Pediatric Mental Health	86.3	Chenoa − 61726 (92) • 7% > county rate
Oral Health	32.6	Chenoa – 61726 (48.6) • 49% > county rate Gridley – 61744 (37.8) • 16% > county rate McLean – 61754 (69.8) • 114% > county rate Stanford – 61774 (45.6) • 40% > county rate
Community Acquired Pneumonia	15.5	Chenoa – 61726 (17.4) ■ 12% > county rate
COPD	21.5	McLean − 61754 (45.9) • 113% > county rate

Source: Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020.

Hospitalization rates for alcohol, opioid and substance use, diabetes, long and short-term complications due to diabetes, Type 2 diabetes, uncontrolled diabetes, heart failure, hypertension, adolescent and adult suicide and self-inflicted injury, adult and pediatric mental health, adult asthma, COPD and community acquired pneumonia are also higher for Bloomington ZIP code 61701 in comparison to the overall rate for McLean County. See Exhibit 172 below for an illustration of this data.

Exhibit 172: Age-Adjusted Hospitalization Rates per 10,000 Population in McLean County versus Bloomington ZIP Code 61701, 2018 - 2020



Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

In addition to the higher rates for Bloomington ZIP code 61701 outlined above, the following table (Exhibit 173) illustrates the age-adjusted hospitalization rates for additional ZIP codes with rates higher than the rate for McLean County.

Exhibit 173: High Health Equity Needs ZIP Codes with Age-Adjusted Hospitalization Rates Higher than the McLean County Rate, 2018 – 2020

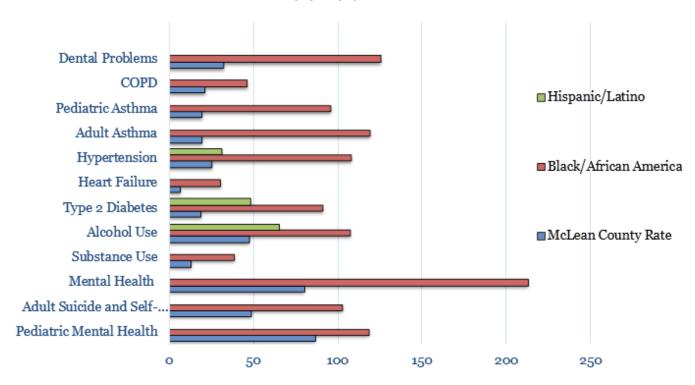
Indicator rate due to:	Hospitalizations per 10,000 population 18+: McLean County	Hospitalizations per 10,000 population 18+: ZIP Code
Diabetes	17.1	Chenoa - 61726 (20.0) ■ 17% > county rate
Heart Failure	33.1	Colfax – 61728 (37.3) • 13% > county rate McLean – 61754 (49.5) • 50% > county rate
Adult Mental Health	35.1	Gridley – 61744 (63) ■ 79% > county rate
Adult Suicide and Self- inflicted Injury	38	Gridley − 61744 (51.7) • 36% > county rate
COPD	27.7	McLean – 61754 (39.6) • 43% > county rate Chenoa – 61726 (29.0 • 5% > county rate

Source: Conduent Healthy Communities, Illinois Hospital Association, 2018 - 2020.

Racial and Ethnic Disparities

When looking at all chronic conditions listed in Exhibit 174 below, Blacks or African Americans have higher rates of disparities than any other race in McLean County, based on emergency room visits. Similarly, Hispanics or Latinos have greater disparities in Type 2 Diabetes, alcohol use and hypertension when compared to the rate for McLean County.

Exhibit 174: Age-Adjusted Emergency Room Visits per 10,000 Population by Race/Ethnicity - McLean County, 2018 – 2020



Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2018 - 2020.

Many factors contribute to health disparities such as income level, education level and stable housing environment. According to the 2021 McLean County Community Health Survey, commercial/employer insurance is used more often by White people and those with higher education and income. Private insurance tends to be rated lower by Black people, and those with an unstable (e.g. homeless) housing environment. Individuals with a higher income use a clinic or doctor's office more often and report ease of access to dental care and prescription medication. Access to dental care tends to be lower for Hispanics or Latinos and the emergency room tends to be used more often by Blacks or African Americans, those that are less educated, have a lower income and by people with an unstable (e.g.; homeless) housing environment. Emergency Departments are used less often by White people. Individuals with lower incomes and who are less educated are less likely to seek medical care. Lastly, frequency of breast exams tends be rated higher by White women and those with higher education and income. Frequency of breast exams tends to be rated lower by Black women and those with an unstable (e.g.; homeless) housing environment.

m) Priority Setting Process

To maximize the effectiveness of the Community Health Improvement Plan that will result from the 2022 McLean County Community Health Needs Assessment, it was necessary for the health issues presented above to be prioritized and narrowed to a select few to address. By determining the most important health issues, it is hoped that more significant advances can be made in a shorter amount of time.

In the fall of 2021 and early 2022, the Executive Steering Committee met every other week to analyze the primary and secondary data presented in this report. By considering the criteria below, the Executive Steering Committee identified the significant health needs to present to the McLean County Community Health Council for prioritization:

- Size of the issue
- Rates worse than Illinois counties or state rate

- Disparities by race/ethnicity/age/gender
- Disparities by ZIP code
- Percent of indicators trending unfavorably in a statistically significant direction
- Does not meet Healthy People (HP) 2020 or HP 2030 target
- Does working on the issue impact other issues for collective impact?

Seven Significant Health Needs Identified for Prioritization

The seven significant health needs that were presented to the McLean County Community Health Council for prioritization at three meetings held on January 27, February 10 and February 24, 2022 were:

- Access to Care
- Behavioral Health (mental health and substance use)
- Diabetes
- Healthy Eating and Active Living (exercise, nutrition, obesity and food access/insecurity)
- Heart Disease
- Oral Health
- Respiratory Disease.

McLean County Community Health Council Prioritization Meetings

In order to ensure the safety of McLean County Community Health Council Members from COVID-19, all three prioritization meetings were held virtually.

January 27, 2022

The purpose of the first meeting was to explain the collaborative nature of the joint 2022 Community Health Needs Assessment between Carle BroMenn Medical Center, the McLean County Health Department, OSF St. Joseph Medical Center and Chestnut Health Systems, in addition to the end goal of producing a joint Community Health Improvement Plan for McLean County. Annual Report highlights from 2020 and 2021 for the 2020 - 2022 McLean County Community Health Improvement Plan were also reviewed with the council.

February 10, 2022

During the second meeting, the Executive Steering Committee presented detailed data on the significant health needs identified for prioritization. Age, gender, race/ethnicity and ZIP code disparities were shared when available. Data for the social determinants of health was also reviewed with the council. Questions from council members were addressed throughout the data presentation. At the conclusion of the meeting, data summaries for the top seven health needs were emailed to the council in addition to the presentation given by the Executive Steering Committee during the meeting.

February 24, 2022

During the final prioritization meeting, the Hanlon prioritization method was used to the select the three significant health needs for the 2022 McLean County Community Health Needs Assessment and around which the 2023 - 2025 McLean County Community Health Improvement Plan will be developed.

The Hanlon Method, developed by J.J. Hanlon, was the prioritization method utilized by the McLean County Community Health Council to select three significant health needs for McLean County to address through a joint Community Health Improvement Plan. The Hanlon Method is a well-respected quantitative technique promoted by the National Association of County and City Health Officials (NACCHO). Prioritization ratings are based on the size of the health problem,

seriousness of the health problem and effectiveness of available interventions. As shown in Exhibit 175, prioritization ratings are given on a scale of zero to 10.

Exhibit 1758: Hanlon Method Criteria, 2009

Rating	Size of the Health Problem (% of population w/ health problem)	Seriousness of the Health Problem	Effectiveness of Available Interventions
9 or 10	>25%	Very serious	80% - 100% effective
7 or 8	10% - 24.9%	Relatively serious	60% - 80% effective
5 or 6	1% - 9.9%	Serious	40% - 60% effective
3 or 4	0.1 % - 0.9%	Moderately serious	20% - 40% effective
1 or 2	0.01% - 0.09%	Relatively not serious	5% - 20% effective
0	<.01%	Not serious	<5% effective

Source: National Association of City and County Health Officials, First Things First: Prioritizing Health Problems, 2009.

The following guidelines helped determine the ratings for each criterion:

- Size of the health problem or percent of the population with the health problem:
 - The average size rating of numerous indicators for each health issue was calculated to arrive at an overall size rating.
 - The midpoint of the range for percent of population with a health problem was used to determine a single size rating per indicator. For example, 0.05 percent of the population 18 years and older visits the emergency room due to opioid use. This percentage falls in the range of 0.01 percent to 0.09 percent for a size rating of one or two. The midpoint for this range is .05 percent. Since 0.05 percent is equal to or greater than the midpoint of 0.05 percent, it is given a size rating of two.
- Seriousness of the health problem; the following questions were taken into consideration when rating seriousness:
 - Does it require immediate attention?
 - o Is there public demand to address the issue?
 - O What is the economic impact?
 - O What is the impact on quality of life?
 - o Is there a high hospitalization and death rate?
 - Are there severe disparities associated with this issue?
 - Is the issue more prevalent in certain populations or ZIP codes?
 - Is the morbidity burden greater in certain populations?
 - Are certain populations more likely to die of this condition?
- Effectiveness of available interventions; the following questions were taken into consideration when rating effectiveness of available interventions:
 - o Are prevention programs effective in preventing the issue?
 - o Do treatment programs effectively address the health issue?
 - Are there best practices/evidence-based programs (EBP's) or interventions that are available to address the health issue?

McLean County Community Health Council members were provided with an explanation of the Hanlon Method from the National Association of County and City Health Officials (Appendix 6) to assist with rating the seriousness and effectiveness of each health problem. The size ratings were pre-populated by the Executive Steering Committee in the Hanlon Method Table and provided to the council (Appendix 7) to decrease subjectivity. See Appendix 8 for specifics about each size rating estimation for the top seven health priorities.

Prior to voting on the significant health needs for the 2022 McLean County Community Health Needs Assessment and the 2023 - 2025 McLean County Community Health Improvement Plan, the 'PEARL' test was applied to the seven significant health needs. The 'PEARL' test is used to screen out health problems based on the following feasibility factors:

- Propriety: Is the program for the health problem suitable?
- Economics: Does it make economic sense to address the problem? Are there economic consequences if a problem is not addressed?
- Acceptability: Will a community accept the programs to address the problem? Is it wanted?
- Resources: Is funding available or potentially available for a program?
- Legality: Do current laws allow program activities to be implemented?

If the answer to any of the questions above is no for any of the significant health needs, then it is eliminated as a choice for prioritization. The council did not answer no to any questions for any of the seven significant health needs, so all seven issues were voted upon by the council according to the Hanlon Method criteria.

Prior to electronic voting, council members were divided into five breakout rooms for fifteen minutes, with one executive steering committee member in each room, to allow for group discussion prior to voting. The breakout rooms allowed for the opportunity for council members to discuss questions, share ideas and/or thought processes related to voting. At the conclusion of the breakout rooms, each group shared the highlights from their breakout room discussion.

Council members were given fifteen minutes to vote electronically. After voting, the next step in the process was to calculate the priority scores for each of the health issues. Exhibit 176 below illustrates the results of the Hanlon Method scoring with behavioral health, access to care and healthy eating/active living receiving the top scores.

Exhibit 176: Hanlon Method Prioritization Results, 2022

	Α	В	С	D	E
Health Concern	Size	Seriousness	Effectiveness of Interventions	Priority Score (A+2B)*C	Rank
Access to Care	6.7	9.0	7.0	172.9	1
Behavioral Health	3.2	9.0	7.5	159.0	2
Healthy Eating and Active Living	6.5	8.0	7.0	157.5	3
Oral Health	4.0	6.0	7.0	112	4
Heart Disease	4.0	6.0	6.0	96.0	5
Respiratory Disease	3.0	6.0	6.0	90.0	6
Diabetes	1.9	5.0	6.0	71.4	7

Source: McLean County Community Health Council Meeting February 24, 2022.

n) Health Needs Selected

As illustrated in Exhibit 176 above, access to care, behavioral health and healthy eating/active living received the top three priority scores according to the Hanlon method calculations with scores of 172.9, 159 and 157.5, respectively. There was a clear divide in the scores between the top three issues and the bottom four: diabetes, heart disease, oral health and respiratory disease. Following a group discussion, the McLean County Community Health Council agreed to select the top three health needs as the ones with the highest priority scores. They are listed below.

Access to Care

Access to care was selected as a significant health need to be addressed by the McLean County Community Health Council not only because of its high priority score (172.9), but for several other reasons. Access to care is an important issue that affects many health outcomes. Improving access in certain areas and for certain populations can have a widespread impact on a variety of health outcomes. Data presented to the council also indicated that there are significant geographic and racial/ethnic disparities in McLean County that may be related to access to care. Access to healthcare was also rated by the 2021 McLean County Community Health Survey respondents as the number one issue affecting quality of life. Council members suggested that there are a variety of factors that can improve access to care

ranging from health equity to transportation. Access to care was also selected as a health priority for the 2016 and 2019 McLean County Community Health Needs Assessments.

Behavioral Health (Mental Health and Substance Abuse)

Behavioral health was selected as a significant health need to be addressed by the McLean County Community Health Council for several reasons. Behavioral health received the second highest priority score (159.0), indicating the need for further improvements in this area in McLean County. There are numerous geographic and racial/ethnic disparities for behavioral health related indicators. In addition, mental health was rated as the top health issue by 2021 McLean County Community Health Survey respondents. There has been a great deal of public support and momentum behind behavioral health in McLean County for the last several years. McLean County is well situated to continue to collaborate on mental health care due to the ongoing efforts of numerous organizations and the support of the McLean County Government. Mental health was also previously selected as a key health priority for the 2016 and 2019 McLean County Community Health Needs Assessments.

Healthy Eating/Active Living

Healthy eating/active living was selected as a significant health need to be addressed by the McLean County Community Health Council because it ranked as number three according to its priority score of 157.5. Additionally, the council felt that by focusing on healthy eating/active living, many other health outcomes such as heart disease, cancer and diabetes may also be positively impacted. This issue was also selected because obesity was the second top perceived health issue, according to the 2021 McLean County Community Health Survey respondents, and poor eating habits was the second most important perceived issue impacting health. Food insecurity and food access are also areas needing improvement in McLean County. Healthy Eating/Active Living was selected as a health priority for the 2019 McLean County Community Health Needs Assessment. Obesity was selected as a health priority for the 2016 McLean County Community Health Needs Assessment.

o) Health Needs Not Selected

Diabetes

Diabetes will not be addressed because it was ranked seventh with a priority score of 71.4 and the McLean County Community Health Council did not feel that there was a compelling reason to eliminate one of the top three ranked health issues. Council members also felt that diabetes improvements could be made with a focus on access to care and healthy eating/active living.

Heart Disease

Heart disease will not be addressed because it was ranked fifth according to its priority score of 96.0 and the McLean County Community Health Council did not feel that there was a compelling reason to eliminate one of the health issues that ranked in the top three. The council did discuss that improving access to care may also improve health outcomes for heart disease, particularly in areas of high socioeconomic needs.

Oral Health

Although oral health is deemed as an extremely important issue in McLean County, the McLean County Community Health Council agreed to address the three needs that received the highest priority scores. Oral health was ranked fourth with a score of 112. The council did discuss that oral health is an access issue and can be addressed under access to care. The opening of a new dental clinic at the Community Health Care Clinic in early 2019 for individuals without health insurance is improving oral health care access.

Respiratory Disease

Respiratory disease was not selected as a health need to be addressed as it ranked sixth according to its priority score of 90.0 and the McLean County Community Health Council did not feel that there was a compelling reason to eliminate one of the health concerns that ranked in the top three. The council did discuss that improving access to care may also improve health outcomes for respiratory disease, particularly in areas of high socioeconomic needs.

VII. Overview of Improvement Plan Goals and Community Resources

In April 2022, three priority action team meetings were held to establish a high-level goal for each significant health need/priority. Priority action teams consisted of current and new key community stakeholders with an interest or expertise in the prioritized health issue. Cross-sector representation was sought for each priority action team.

The health needs identified in the 2019 McLean County Community Health Needs Assessment are the same as the newly identified health needs for the 2022 McLean County Community Health Needs Assessment. A facilitator from the McLean County Executive Steering Committee led a discussion for each priority action team to reach consensus for the high-level goal for the 2022 McLean County Community Health Needs Assessment priorities and the 2023 – 2025 McLean County Community Health Improvement Plan. The goals agreed upon by each priority action team are listed below.

a) 2023 - 2025 Health Priority Goals

Access to Care

The Access to Care Priority Action Team meeting was held on April 14, 2022. The following goal was established during the meeting:

Advance and advocate for equitable and affirming access to care and other resources, which address social determinants of health, to improve the health and wellbeing of our diverse community by 2026.

Behavioral Health

The Behavioral Health Priority Action Team meeting was held on April 19, 2022. The following goal was established during the meeting:

Further equitable, inclusive, and integrated systemic community approaches to behavioral health and well-being for our diverse community by 2026.

Healthy Eating/Active Living

The Healthy Eating/Active Living Priority Action Team meeting was held on April 7, 2022. The following goal was established during the meeting:

Promote equitable opportunities for healthy eating and active living to strengthen the health and well-being of our diverse community by 2026.

b) Community Resources for the 2020 - 2022 Community Health Improvement Plan Health Priority Goals

In the fall of 2022, the priority action teams will meet to determine the resources, interventions and outcome metrics for each priority. The 2023 - 2025 McLean County Community Health Improvement Plan will again be a joint plan for the

entire county and consist of interventions and resources to be provided by the hospitals, health department, family health center and numerous social services or other community organizations. Community resources specific to the three health priorities are listed in Appendices 9 and 10.

VIII. Vehicle for Community Feedback

We welcome your feedback regarding the Community Health Needs Assessment (CHNA) Report. If you would like to comment on this report, please send an email to one of the two links below. We will respond to your questions/comments within thirty days. Your comments will also be considered during our next CHNA assessment cycle. You can also provide feedback by clicking on the link to the McLean County Health Department's website below and completing the CHNA feedback form.

Email contacts: publicrelations@carle.com

CHNAFeedback@osfhealthcare.org

A paper copy of this report may be requested by contacting the public relations departments within Carle BroMenn Medical Center, Chestnut Health Systems' Chestnut Family Health Center, OSF St. Joseph Medical Center or the McLean County Health Department. In addition, an electronic copy of this CHNA Report is available on each organization's website.

Carle BroMenn Medical Center: https://carle.org/about-us/community-report-card

Chestnut Health Systems: https://www.chestnut.org/chestnut-family-health-center/data-reports/

McLean County Health Department: https://health.mcleancountyil.gov/112/Community-Health-Needs-Assessment-Health

OSF St. Joseph Medical Center Community Health | OSF HealthCare

IX. Appendices

Appendix 1: Summary of 2020 – 2022 McLean County Community Health Improvement Plan Accomplishments

Appendix 2: Conduent Healthy Communities Institute ICON and Gauge Meanings

Appendix 3: Data Sources—2022 McLean County Community Health Needs Assessment

Appendix 4: 2021 McLean County Community Health Needs Assessment Survey

Appendix 5: McLean County Health Equity Needs Index and National Rankings

Appendix 6: The Hanlon Method from the National Association of County and City Health Officials (NACCHO)

Appendix 7: Hanlon Table Pre-Populated with the Size of the Significant Health Need

Appendix 8: Size Estimates for the Hanlon Method for the Top Six Significant Health Needs

Appendix 9: Matrix of McLean County Community Resource Examples for the 2022 Identified Health

Concerns

Appendix 10: Narrative of McLean County Resources for the 2022 Identified Health Concerns

Appendix 1: Summary of 2020 and 2021 McLean County Community Health Improvement Plan Key Accomplishments

	Carle BroMenn	Chestnut Health	McLean County	OSF St. Joseph
	Medical Center	Systems	Health Department	Medical Center
ACCESS TO CARE			•	
Coordinating	Х			Х
Appropriate Access to				
Comprehensive Health				
Care (CAATCH)				
Support for Community	Х			Х
Health Care Clinic				
Expanding Access for	Х		Х	
HIV and Sexual Health				
Services				
Dental Health –	Х	х		Х
Fluoride for Pediatrics				
Navigation/Engagement		х		
Program				
Carle Mobile Health	Х		Х	х
Clinic				
Medicaid Dental		х	Х	
Hygiene				
Virtual Services	Х	Х		Х
BEHAVIORAL HEALTH				
Mental Health First Aid Classes	Х		Х	Х
Embedded School and				
Community Based		Х	Х	
Services Program				
Social media campaign	X	X	X	X
	^	^	^	^
Behavioral Health	X			
Counseling for Cancer				
Patients				
Community Behavioral Health Forum	Х	X	Х	Х
Frequent Users System	Х		Х	
Engagement (FUSE)				
Trauma Informed Care	Х	х	х	х
Intellectual and			×	
Developmental			Λ	
Disability Collaborative				
Recovery Oriented	V	V	V	
Systems of Care Council	Х	Х	Х	
HEALTHY				
EATING/ACTIVE LIVING				
LATING/ACTIVE LIVING				

	Carle BroMenn Medical Center	Chestnut Health Systems	McLean County Health Department	OSF St. Joseph Medical Center
The Partnership In Health Program	х		х	
Peace Meal Senior Nutrition Program				х
Vegetable Gardens	х			х
Community Events/Education Programs	Х	х	х	х
Workplace Wellness Events	х	х	Х	х
Food Farmacy	х			х
Diabetes Prevention Education	х	Х	Х	х
SmartMeals Program				х
Food Pantry Collaborative Initiatives	х			х
Food Insecurity Questions and Referrals	х	х		х
Girls on the Run Sponsorship				х

Appendix 2: Conduent Healthy Communities Institute Icon and Gauge Meanings

Compare to Distribution (Dial Gauge)

The compare to distribution gauge measures how your community is doing compared to other communities in your state, the U.S. or region. The needle in the green means that the selected location is in the best 50% of similar locations, yellow represents the 50th to 25th percentile and red represents the worst quartile.



Compare to Target (Circle Gauge)

The Circle represents a comparison to a target value.

A green circle with a check means that the selected value has met or is better than the target value. A red circle with an "x" means that the selected value has not met the target value.





Compare to the Prior Value (Triangle Gauge)

The triangle represents a comparison to the immediate prior value. If the triangle is pointing up, the value is higher than the previous value, if the triangle points down the value is decreasing and if there is an equal sign there is no change in the value. If the triangle is green it means the change is good, if the triangle is red it means the change is bad.







Trend over Time (Square Gauge)

The square represents a comparison to a trend over time. The trend looks at how the indicator is doing over multiple time periods. We analyze up to 10 previous measurement periods (and at least 4) to determine if the value is going up significantly, not significantly, staying the same, decreasing significantly or decreasing not significantly. A solid color gauge means that the change is significant and an outlined gauge means there is a change but it is not significant. A red gauge represents a poor trend and a green gauge represents a positive trend. The blue gauge with an arrow means that going up or down is neither positive or negative and an equal sign means there is no change.

To learn more about how we calculate this rate, please visit the Mann-Kendall Test for Trend Overview.













Appendix 3: Data Sources – 2022 McLean County Community Health Needs Assessment

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Appendix 4: 2021 McLean County Community Health Needs Assessment Survey

INSTRUCTIONS

We want to know how you view our community, and other factors that may impact your health. We are inviting you to participate in a research study about community health needs. Your opinions are important! This survey will take about 12 minutes to complete. All of your individual responses are confidential. We will use the survey results to better understand and address health needs in our community.

COMMUNITY PERCEPTIONS			
1. What would you say are the three (3) biggest HEAI	LTH IS	SUES in our community?	
Aging issues, such as Alzheimer's disease,		Early sexual activity	
hearing loss, memory loss, arthritis, falls		Heart disease/heart attack	
Cancer		Mental health issues (including depression, anger)	
Chronic pain		Obesity/overweight	
Dental health (including tooth pain)		Sexually transmitted infections	
Diabetes		Viruses (including COVID-19)	
Other			
2. What would you say are the three (3) most UNHE A	A I .THV	REHAVIORS in our community?	
Angry behavior/violence		Drug abuse (legal drugs)	
Alcohol abuse	H	Lack of exercise	
Child abuse	H	Poor eating habits	
Domestic violence	H	Risky sexual behavior	
Drug abuse (illegal drugs)	H	Smoking/vaping (tobacco use)	
Other	Ш	Smoking/vaping (toouceo use)	
3. What would you say are the three (3) most important	nt factor	s that would improve your WELL-BEING ?	
Access to health services		Job opportunities	
Affordable healthy housing		Less hatred & more social acceptance	
Availability of child care		Less poverty	
Better school attendance		Less violence	
Good public transportation		Safer neighborhoods/schools	
Healthy food choices			
Other			
ACCESS TO CARE The following questions ask about your own health you in any way.	and he	alth choices. Remember, this survey will not be linke	ed to
Medical Care 1. When you get sick, where do you go? (Please choo	ose only	one answer).	
☐ Clinic/Doctor's office ☐ Emergency I☐ Urgent Care Center ☐ Health Depart	_	ent I don't seek medical attention Other	
If you don't seek medical attention, why not? Fear of Discrimination Lack of trust	Cost	☐ I have experienced bias ☐ Do not need	

Other	
2. In the last YEAR, was there a time when you needed a Yes (please answer #3)	medical care but were not able to get it? No (please go to #4: Prescription Medicine)
3. If you were not able to get medical care, why not? (Pl	lease choose all that apply).
☐ Didn't have health insurance. ☐ Couldn't afford to pay my co-pay or deductible. ☐ Fear of discrimination. Are there any other reasons why you could not access me	☐ Too long to wait for appointment. ☐ Didn't have a way to get to the doctor. ☐ Lack of trust. edical care?
Prescription Medicine	
4. In the last YEAR, was there a time when you needed Yes (please answer #5)	prescription medicine but were not able to get it? No (please go to #6: Dental Care)
5. If you were not able to get prescription medicine, wh	y not? (Please choose all that apply).
 □ Didn't have health insurance. □ Couldn't afford to pay my co-pay or deductible. □ Fear of discrimination. Are there any other reasons why you could not access presented in the property of the propert	Pharmacy refused to take my insurance or Medicaid. Didn't have a way to get to the pharmacy. Lack of trust. rescription medicine?
Dental Care	
6. In the last YEAR, was there a time when you needed Yes (please answer #7)	dental care but were not able to get it? No (please go to #8: Mental-Health Counseling)
7. If you were not able to get dental care, why not? (Ple	ease choose all that apply).
 □ Didn't have dental insurance. □ Couldn't afford to pay my co-pay or deductible. □ Fear of discrimination □ Not sure where to find available dentist Are there any other reasons why you could not access a company of the could be dentist 	☐ The dentist refused my insurance/Medicaid ☐ Didn't have a way to get to the dentist. ☐ Lack of trust
The more any concernations will you could not access at	
Mental-Health Counseling 8. In the last YEAR, was there a time when you needed ☐ Yes (please answer #9)	mental-health counseling but could not get it? No (please go to next section – HEALTHY BEHAVIORS)
9. If you were not able to get mental-health counseling,	why not? (Please choose all that apply).
 □ Didn't have insurance. □ Couldn't afford to pay my co-pay or deductible □ Didn't have a way to get to a counselor. □ Fear of discrimination □ Long wait time Are there any other reasons why you could not access a result of the country of the country	☐ The counselor refused to take insurance/Medicaid. ☐ Embarrassment. ☐ Cannot find counselor. ☐ Lack of trust. mental-health counselor?
and one reasons will you could not decould us	

HEALTHY BEHAVIORS

The following questions ask about your own health and health choices. Remember, this survey will not be linked to you in any way.

Exercise

1. In the last WEEK how many times did you participate in exercise, (such as jogging, walking, weight-lifting, fitness

classes) that lasted for at least 30 minut	es?						
☐ None (please answer #2) ☐ 1 −	2 times	☐ 3 - 5 times	☐ More than 5 times				
2. If you answered "none" to the questi that apply).	ion about exercis	se, why didn't you	exercise in the past week? (Please choose all				
☐ Don't have any time to exercise. ☐ Can't afford the fees to exercise. ☐ Don't have access to an exercise factors affect issues	Can't afford the fees to exercise. Don't have access to an exercise facility. Don't have child care while I exercise. Too tired.						
Are there any other reasons why you co	ould not exercise	in the last week? _					
Healthy Eating 3. On a typical DAY, how many serving be a banana (but not banana flavored put)		rtions of fruits and/	or vegetables did you have? An example would				
☐ None (please answer #4) ☐ 1 - 2	2 servings	3 - 5 servings	☐ More than 5 servings				
4. If you answered "none" to the question choose all that apply).	ions about fruits	and vegetables, wh	ny didn't you eat fruits/vegetables? (Please				
☐ Don't have transportation to get fruit ☐ It is not important to me ☐ Don't know how to prepare fruits/veg ☐ Don't know where to buy fruits/veg	egetables		its/vegetables ruits/vegetables refrigerator/stove				
Are there any other reasons why you do	not eat fruits/ve	egetables?					
5. Where is your primary source of food	d? (Please choose	e only one answer)					
☐ Grocery store ☐ Fast food ☐ Food pantry ☐ Farm/garden	Gas stat	tion ience store	Food delivery program Other				
6. Please check the box next to any of the If you don't have any health condition		•	11 11				
☐ I do not have any health conditions ☐ Diabetes ☐ Mental-health conditions ☐ Allergy ☐ Heart problems ☐ Stroke ☐ Asthma/COPD ☐ Overweight ☐ Cancer ☐ Memory problems							
7. If you identified any conditions in Quality Never Sometimes		often do you follov ually Alwa	w an eating plan to manage your condition(s)? ys				
Smoking 8. On a typical DAY, how many cigare	ttes do you smok	xe?					
☐ None ☐ 1 - 4	<u> 5 - 8</u>	9 - 12	More than 12				
Vaning							

Vaping9. On a typical DAY, how many times do you use electronic vaping?

None	<u> </u>	5 - 8	9 - 12	☐ More than 12
•			_	to get health information in the future?
11. Do you have a	personal physician/docto	or? Yes	☐ No	
12. How many day	ys a week do you or your	family members go	o hungry?	
None	☐ 1–2 days	☐ 3-5 days	☐ More than 5 o	lays
13. In the last 30 I	DAYS, how many days ha	ave you felt depress	sed, down, hopeles	ss?
None	☐ 1–2 days	\square 3 – 5 days	☐ More than 5 d	lays
14. In the last 30 I	DAYS, how often has you	ır stress and/or anxi	iety stopped you fr	om your normal daily activities?
None	☐ 1–2 days	☐ 3 - 5 days	☐ More than 5 o	lays
15. In the last YEA	AR have you talked with	anyone about your	mental health?	
Yes (please and	swer #16) No (ple	ease go to #17)		
16. If you talked to	o anyone about your men	tal health, who was	it?	
Doctor/nurse	☐ Counselor	☐ Family/friend	d 🗌 Oth	er
typical DAY?	you use prescription med $\boxed{1-2}$ times	ications not prescri	bed to you or diffe	erently than how the doctor instructed on a 5 times
18. How many alc	oholic drinks do you hav ☐ 1–2 times	e on a typical DAY	? More than 5	5 times
	you use marijaunia on a t] 1−2 times	ypical DAY? 3-5 times	☐ More than 5	5 times
20. How often do None	you use substances such a 1–2 times	<u> </u>	y, cocaine, meth or 5 times	heroin on a typical DAY? More than 5 times
21. Do you feel sa	fe where you live?	☐ Y	es	No
Breast/ma Prostate e Colonosco	ears, have you had a: mmography exam xam ppy/colorectal cancer screancer screening/pap smea	eening Y	res No res No res No res No	☐ Not applicable☐ Not applicable☐ Not applicable☐ Not applicable
Overall Health	_			
21. My overall ph22. My overall me		Below average Below average	☐ Average ☐ Average	☐ Above average ☐ Above average

INTERNET

1. Do you have Internet at home? For example, can you watch Youtube at home?
☐ Yes (please go to next section – BACKGROUND INFORMATION) ☐ No (please answer #2)
2. If don't have Internet, why not? Cost Data limits Poor Internet service I don't know how No phone or computer
BACKGROUND INFORMATION
1. What county do you live in? McLean Other
2. What is your Zip Code?
3. What type of health insurance do you have? (Please choose all that apply). Medicare Medicaid/State insurance Commercial/Employer Don't have (Please answer #4)
4. If you answered "don't have" to the question about health insurance, why don't you have insurance? (Please choose all that apply). Can't afford health insurance Don't know how to get health insurance Other
5. What is your gender? Male Female Non-binary/Transgender Prefer not to answer Other
6. What is your sexual orientation? Heterosexual Queer Lesbian Gay Bisexual Other
7. What is your age? Under 20 21-35 36-50 51-65 Over 65
8. What is your racial or ethnic identification? (Please choose only one answer). White/Caucasian Black/African American Hispanic/LatinX Pacific Islander Native American Asian/South Asian Multiracial Other:
9. What is your highest level of education? (Please choose only one answer). Grade/Junior high school Some high school High school degree (or GED) Some college (no degree) Associate's degree Graduate degree Other:
10. What was your household/total income last year, before taxes? (Please choose only one answer). Less than \$20,000
11. During the COVID pandemic, what financial stimulus payments have you received? (Check all that apply). stimuls check(s) extra SNAP benefits unemployment benefits loan deferrment none
12. What is your housing status? Do not have Have housing, but worried about losing it 13. If you answered that you have housing, does your house have:

leaking roof running water	mold rodents	heat lead	air conditiing electicity	Interr	net
14. How many people live	with you?				
with friends/family?)	_	_	_	_	or example, talking, texting, meeting More than 5 times per week
Is there anything else you'd	d like to share abo	out your own h	ealth goals or hea	alth issues	s in our community?

Thank you very much for sharing your views with us!

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Appendix 5: McLean County Health Equity Index and Rankings

ZIP Code	Index	Rank	Population	County	City or Town
61724	73.8	5	488	McLean	Bellflower
61701	58.6	5	33,884	McLean	Bloomington
61774	38.2	4	896	McLean	Stanford
61737	37.5	4	471	McLean	Ellsworth
61726	34.4	4	2,505	McLean	Chenoa
61728	34.4	4	1,395	McLean	Colfax
61722	33.3	4	506	McLean	Arrowsmith
61744	31.8	4	1,924	McLean	Gridley
61754	31.6	4	1,121	McLean	McLean
61770	29.3	4	1,044	McLean	Saybrook
61745	26.0	3	4,517	McLean	Heyworth
61761	25.2	3	52,707	McLean	Normal
61752	24.6	3	4,241	McLean	LeRoy
61730	23.8	3	344	McLean	Cooksville
61753	23.3	3	2,702	McLean	Lexington
61772	20.8	3	392	McLean	Shirley
61732	18.1	2	1,985	McLean	Danvers
61725	15.9	2	1,591	McLean	Carlock
61776	13.6	2	890	McLean	Towanda
61748	11.7	2	2,984	McLean	Hudson
61704	8.1	1	38,278	McLean	Bloomington
61736	8	1	1,952	McLean	Downs
61705	6.4	1	14,335	McLean	Bloomington



The Hanlon Method vi

Developed by J.J. Hanlon, the *Hanlon Method for Prioritizing Health Problems* is a well respected technique which objectively takes into consideration explicitly defined criteria and feasibility factors. Though a complex method, the Hanlon Method is advantageous when the desired outcome is an objective list of health priorities based on baseline data and numerical values.

Step-by-Step Instructions:

Rate against specified criteria – Once a list of health problems has been identified, on a scale
from zero through ten, rate each health problem on the following criteria: size of health
problem, magnitude of health problem, and effectiveness of potential interventions. It is
important to remember that this step requires the collection of baseline data from the
community such as from a community health assessment. Table 4.1 illustrates an example
numerical rating system for rating health problems against the criteria.

Table 4.1

The Hanlon Method: Sa	mple Criteria Rating			
Rating Size of Health Problem (% of population w/healt problem)		Seriousness of Health Problem	Effectiveness of Interventions	
9 or 10	>25% (STDs)	Very serious (e.g. HIV/AIDS)	80% - 100% effective (e.g. vaccination program)	
7 or 8	10% - 24.9%	Relatively Serious	60% - 80% effective	
5 or 6	1% - 9.9%	Serious	40% - 60% effective	
3 or 4	.1%9%	Moderately Serious	20% - 40% effective	
1 or 2	.01%09%	Relatively Not Serious	5% - 20% effective	
0	< .01% (Meningococcal Meningitis)	Not Serious (teen acne)	<5% effective (access to care)	
Guiding considerations when ranking health problems against the 3 criteria	Size of health problem should be based on baseline data collected from the individual community.	Does it require immediate attention? Is there public demand? What is the economic impact? What is the impact on	 Determine upper and low measures for effectiveness and rate health problems relative to those limits. For more information on assessing effectiveness of 	
		quality of life? Is there a high hospitalization rate?	interventions, visit http://www.communityguide org to view CDC's Guide to Community Preventive Services.	

*Note: The scales in Table 1 are arbitrary models of how numerical scales are established and are not based on real epidemiological data; LHDs should establish scales that are appropriate for the community being served.



- Apply the 'PEARL' test Once health problems have been rated by criteria, use the 'PEARL' Test, to screen out health problems based on the following feasibility factors:
 - Propriety Is a program for the health problem suitable?
 - Economics Does it make economic sense to address the problem? Are there
 economic consequences if a problem is not carried out?
 - Acceptability Will a community accept the program? Is it wanted?
 - Resources Is funding available or potentially available for a program?
 - Legality Do current laws allow program activities to be implemented?

Eliminate any health problems which receive an answer of "No" to any of the above factors or proceed with corrective action to ensure that potential health priorities meet all five of the feasibility factors.

 Calculate priority scores – Based on the three criteria rankings assigned to each health problem in Step 1 of the Hanlon Method, calculate the priority scores using the following formula:

 $D = [A + (2 \times B)] \times C$

Where: D = Priority Score

A = Size of health problem ranking

B = Seriousness of health problem ranking C = Effectiveness of intervention ranking

4. Rank the health problems – Based on the priority scores calculated in Step 3 of the Hanlon Method, assign ranks to the health problems with the highest priority score receiving a rank of '1,' the next high priority score receiving a rank of '2,' and so on.

^{*}Note: Seriousness of health problem is multiplied by two because according to the Hanlon technique, it is weighted as being twice as important as size of health problem.

Appendix 7: Hanlon Table Pre-populated with Size of the Significant Health Need

	А	В	С	D	E
Health Concern	Size	Seriousness	Effectiveness of Interventions	Priority Score (A+2B)*C	Rank
Access to Care	6.7	9.0	7.0	172.9	1
Behavioral Health	3.2	9.0	7.5	159.0	2
Healthy Eating and Active Living	6.5	8.0	7.0	157.5	3
Oral Health	4.0	6.0	7.0	112	4
Heart Disease	4.0	6.0	6.0	96.0	5
Respiratory Disease	3.0	6.0	6.0	90.0	6
Diabetes	1.9	5.0	6.0	71.4	7

Appendix 8: Size Estimates for the Hanlon Method for the Top Seven Significant Health Needs

McLean County Grid: Size of problem	McLean County Incidence Rate OR Prevalence (%)	Estimated # of People Affected based on Incidence Rates or Percent	% of Total Population in McLean County with Health Problem/Issue (size)	Hanlon Size Rating
ACCESS TO CARE				
Adults without Health insurance	10.90%	14,660	8.6	6
No Access to Medical Care (Community Health Survey 2021)	15%	20,174	11.8	7
No Access to Prescription Medicine (Community Health Survey 2021)	13%	17,484	10.2	7
No Access to Dental Care (Community Health Survey 2021)	18%	24,208	14.2	7
No Access to Counseling (Community Health Survey 2021)	17%	22,863	13.4	7
Households without a vehicle	6.2% of households	10,206	5.97	6
			Average size rating: Access to Care	6.7
McLean County Grid: Size of problem	McLean County Incidence Rate OR Prevalence (%)	Estimated # of People Affected based on Incidence Rates or Percent	% of Total Population in McLean County with Health Problem/Issue (size)	Hanlon Size Rating
BEHAVIORAL HEALTH				

BEHAVIORAL HEALTH: ALCOHOL and SUBSTANCE USE				
Age Adjusted ER Rate due to:				
Alcohol Use	47.8/10,000 pop. 18+	624	0.37	3
Adolescent Alcohol Use	6.5/10,000 pop. 10-17	11	0.01	1
Substance Use	13.5/10,000 pop. 18+	181	0.11	3
Opioid Use	5.8/10,000 pop. 18+	80	0.05	2
Age Adjusted Hospitalization Rate due to:				
Alcohol Use	12.7/10,000 pop. 18+	171	0.1	3
Substance Use	2.8/10,000 pop. 18+	38	0.02	1
Opioid Use	1.5/10,000 pop. 18+	20	0.01	1
Age-adjusted Drug and Opioid-Involved Overdose Death Rate	21.3 deaths/100,000 pop.	36	0.02	1
Age-adjusted Death Rate due to Drug Poisoning	18.6 deaths/100,000 pop.	32	0.02	1
Adults who Drink Excessivly	21.4%	28,781	16.80	7
Adults who Smoke	17.2%	23,132	13.50	7
McLean County Grid: Size of problem	McLean County Incidence Rate OR Prevalence (%)	Estimated # of People Affected based on Incidence Rates or Percent	% of Total Population in McLean County with Health Problem/Issue (size)	Hanlon Size Rating
Youth (12-17 years) with Substance Use Disorder (Mental Health America, 2021- state data only)	4.25%	NA	NA	NA
Percent of McLean County residents that report improperly using prescription medication 1 - 5 times/day (Community Health Survey 2021)	7%	9,414	5.50	6

			Average size rating: Substance Use	3.3
BEHAVIORAL HEALTH: MENTAL HEALTH				
Age-adjusted ER Rates due to:				
Adult Mental Health	80.2/10,000 pop. 18+	1078	0.63	4
Pediatric Mental Health	86.3/10,000 pop. <18	314	0.18	3
Adolescent Suicide and Intentional Self-Inflicted	151.5/10,000 pop. 10-			
Injury	17	250	0.15	3
Adult Suicide and Intentional Self-Inflicted Injury	47.1/10,000 pop. 18+	633	0.37	3
Age-adjusted Hospitalizations due to:				
Adult Mental Health	35.1/10,000 pop. 18+	472	0.28	3
Pediatric Mental Health	25.1/10,000 <18	91	0.05	2
Adolescent Suicide and Intentional Self-Inflicted				
Injury	44.4/pop. 10-17	73	0.04	1
Adult Suicide and Intentional Self-Inflicted Injury	38/10,000 pop. 18+	511	0.30	3
Age-adjusted Death Rate due to Suicide	12 deaths/100,000 pop.	21	0.01	1
McLean County Grid: Size of problem	McLean County Incidence Rate OR Prevalence (%)	Estimated # of People Affected based on Incidence Rates or Percent	% of Total Population in McLean County with Health Problem/Issue (size)	Hanlon Size Rating
Youth (ages 12-17)with at least one major depressive disorder in the past year; 2020 (Mental Health America, 2021 - state data only	14.0%	NA	NA	NA
Poor Mental Health 14+ days (adults)	10.4%	13,987	8.19	6
Frequent Mental Distress (adults)	12.7%	17,080	9.77	6

Percent of McLean County residents that reported feeling depressed at 5 or more days/month in the past 30 days (Community Health Survey 2021)	11%	14,794	9%	6
Percent of McLean County residents that rated their mental health as poor (Community Health Survey, 2021)	18%	24,208	14%	7
Percent of McLean County residents that reported feeling anxious or stressed 3 or more days/month in the past 30 days (Community Health Survey 2021)	10%	13,449	7.9	6
			Average size rating: Mental Health	3.2
			Average Size Rating: Behavioral Health	3.2
McLean County Grid: Size of problem	McLean County Incidence Rate OR Prevalence (%)	Estimated # of People Affected based on Incidence Rates or Percent	% of Total Population in McLean County with Health Problem/Issue (size)	Hanlon Size Rating
DIABETES				
Age-adjusted ER Rates due to:				
Type 2 Diabetes	19.4/10,000 pop. 18+	261	0.15	3
Diabetes (includes Type 1 and 2)	23.1/10,000 pop. 18+	310	0.18	3
Long-term Complications of Diabetes	2.8/10,000 pop. 18+	38	0.02	1
Uncontrolled Diabetes	18.5/10,000 pop. 18+	249	0.15	3
Short-term Complications of Diabetes	.8/10,000 pop. 18+	11	0	0

Age-adjusted Hospitalization Rates due to:				
Type 2 Diabetes	11.5/10,000 pop. 18+	155	0.09	2
Diabetes (Includes Type 1 and 2)	17.1/10,000 pop. 18+	230	0.13	3
Short-term Complications of Diabetes	7.5/10,000 pop. 18+	101	0.06	2
Long-term Complications of Diabetes	6.7/10,000 pop. 18+	90	0.05	2
Uncontrolled Diabetes	2.9/10,000 pop. 18+	39	0.02	1
Age-adjusted Death Rate due to Diabetes	15.6 deaths100, 000 pop.	27	0.02	1
Adults with Diabetes	9.10%	NA	NA	NA
			Average size rating: Diabetes	1.9
McLean County Grid: Size of problem	McLean County	Estimated # of People Affected	% of Total	Hanlon
Tweeding Grid. Size of problem	Incidence Rate OR Prevalence (%)	based on Incidence Rates or Percent	Population in McLean County with Health Problem/Issue (size)	Size Rating
HEART DISEASE				
Hypertension	25.5/10,000 pop. 18+	343	0.2	3
Heart Failure	6.9/10,000 pop. 18+	93	0.05	2
Age-adjusted Hospitalization Rate due to:				
Heart Failure	33.1/10,000 pop. 18+	445	0.26	3
Hypertension	4.7/10,000 pop. 18+	63	0.04	1
Age-adjusted Death Rate due to Stroke	26.3/100,000 pop.	45	0.03	1

Age-adjusted Death Rate due to Coronary Heart Disease	80.5 deaths/100,000 pop.	138	0.08	2
Adults who have high BP who have taken medications for high BP	73.1%	26,508	15.51	7
High Blood Pressure Prevalence	27.0%	36,313	21.3	8
High Cholesterol Prevalence	31.1%	41,692	24.4	8
Coronary Heart Disease Prevalence (CDC Places)	5.5%	7,397	4.3	5
			Average size rating: Heart Disease	4.0
RESPIRATORY DISEASE				
Age-adjusted ER Rates due to:				
Pediatric Asthma	23.5/10,000 pop. <18	86	0.05	2
McLean County Grid: Size of problem	McLean County Incidence Rate OR Prevalence (%)	Estimated # of People Affected based on Incidence Rates or Percent	% of Total Population in McLean County with Health Problem/Issue (size)	Hanlon Size Rating
Asthma	19.6/10,000 pop.	335	0.2	3
Adult Asthma	19.5/10,000 pop. 18+	262	0.15	3
COPD	21.5/10,000 pop. 18+	289	0.17	3
Age-adjusted Hospitalization Rates due to:				
COPD	15.7/10,000 pop. 18+	211	0.12	3
Adult Asthma	2.9/10,000 pop 18+	39	0.02	1
Asthma	2.4/10,000 pop.	41	0.02	1
Age-adjusted death rate due to chronic lower				
respiratory diseases	48.2 deaths/100,000 pop.	82	0.05	2
	• •	2,644	1.54	5

Asthma: Medicare Population	4.80%	1,164	0.68	4
Adults with current asthma	9.40%	12,642	7	6
			Average size rating: Respiratory Disease	3.0
HEALTHY EATING/ACTIVE LIVING (HEAL)				
HEAL: ACCESS TO FOOD & EXERCISE OPPORTUNITES				
People 65+ with low access to a grocery store	2.20%	534	0.32	3
McLean County Grid: Size of problem	McLean County Incidence Rate OR Prevalence (%)	Estimated # of People Affected based on Incidence Rates or Percent	% of Total Population in McLean County with Health Problem/Issue (size)	Hanlon Size Rating
Children with low access to a grocery store	6.30%	2,291	1.34	5
Limited access to exercise opportunities	16.10%	27,509	16.1	7
			Average size rating: Access to Food and Exercise Opportunities	6
HEAL: EXERCISE, NUTRITION, AND WEIGHT				
Adult Fruit and Vegetable Consumption <3 servings/day (Community Health Survey 2021)	55%	73,970	43.3	10
Adults who are Sedentary - no exercise (Community Health Survey 2021)	24%	32,278	19	8
Adults who are Obese	29.4%	15,510	9.10%	6
Adults 20+ who are Sedentary	19.9%	NA	NA	NA
	1	1	1	

			Average size rating: Exercise, Nutrition and Weight	8
HEAL: FOOD INSECURITY				
Food Insecurity Rate	9.50%	16,232	9.5	6
Food Insecure Children Likely Ineligible for Assistance	31.00%	11,275	6.6	6
Students Eligible for the Free Lunch Program	33.70%	NA	NA	NA
McLean County Grid: Size of problem	McLean County Incidence Rate OR Prevalence (%)	Estimated # of People Affected based on Incidence Rates or Percent	% of Total Population in McLean County with Health Problem/Issue (size)	Hanlon Size Rating
Child Food Insecurity rate	9.50%	3,455	2	5
			Average size rating : HEAL	6.5
ORAL HEALTH				
Adults 65+ with Tooth Loss	10.80%	2,620	1.5	5
Age-adjusted ER rate due to Dental Problems	32.6/10,000 pop.	557	0.33 Average size	3 4.0
			rating: Oral Health	

Appendix 9: Matrix of McLean County Community Resource Examples for the 2022 Identified Health Concerns

	Organization name	Access to Care	Healthy Eating/Active Living	Behavioral Health
Bloomington- Normal	Bloomington-Normal YMCA		х	
Recreational Facilities	Carle Health & Fitness Center		х	
	Four Season Health Club		х	
Government	Local municipality parks and recreation departments		х	
	Local school districts – District 87, Unit 5, Heartland Community College, Illinois State University, Illinois Wesleyan University		х	x
	McLean County Board and Behavioral Health Coordinating Council	х		х
	McLean County Health Department	х	х	Х
Community Agencies	American Cancer Society		х	
Agencies	American Heart Association		х	
	Bloomington Housing Authority	х	х	
	Bloomington Normal Faith in Action	x		
	Boys & Girls Club of Bloomington-Normal		х	х
	Center for Human Services	Х		Х

Organization name	Access to Care	Healthy Eating/Active Living	Behavioral Health
Center for Youth and Family Solutions			х
Collaborative Solutions Institute			х
Connect Transit	х		
Depression and Bipolar Support Alliance			х
East Central Illinois Area Agency on Aging	х	х	х
EasterSeals of Central Illinois	х		
Heartland Head Start		X	
Homes for Hope		х	
Illinois State University Student Health Services	х	х	х
Illinois Wesleyan University Student Health Services	х	х	х
Integrity Counseling	х		х
John M. Scott Health Care Commission	х	х	х
Lutheran Child and Family Services of Illinois			х
Marcfirst	х		x
McLean County Center for Human Services	х		х
Mid Central Community Action	х	х	х
Midwest Food Bank		х	
National Alliance on Mental Illness			х
PATH 211	х		

	Organization name	Access to Care	Healthy Eating/Active Living	Behavioral Health
	Peace Meal Senior Nutrition Program	Х	х	
	Project Oz			Х
	The Baby Fold			х
	University of Illinois Extension		х	
	United Way of McLean County		х	
	West Bloomington Revitalization Project		х	
	Western Avenue Community Center		х	
	YWCA		Х	
Community	Access to Care Priority Action Team	х		
Coalitions	All Our Kids (AOK) Childhood Network			х
	Behavioral Health Priority Action Team			х
	Bike Blono	х	х	
	Black Nurses Association of Central Illinois	х		
	Bloomington Normal NAACP	х	х	х
	Food Access/Food Pantry Committee		х	
	Healthy Eating/Active Living Priority Action Team		х	
	Mental Health Advisory Council			х
	League of Women Voters			х
	The Links Inc	Х	х	Х

	Organization name	Access to Care	Healthy Eating/Active Living	Behavioral Health
	Carle BroMenn Medical Center	х	х	х
Hospitals/	Chestnut Family Health Center	х	х	х
Clinics	Chestnut Health System	х		х
	Community Health Care Clinic	х	х	
	McLean County Health Department	х	x	х
	OSF St. Joseph Medical Center	х	x	х
	Center for Healthy Lifestyles	х	x	х
	Children's Home + Aid	х		
Local	Fleet Feet Bloomington		x	
Employers	Forefront Illinois	х		
	Heritage of Care	x		
	Illinois Farm Bureau		x	Х
	Center for Hope		x	
	Eastview Christian Church		x	
Churches	First Christian Church		х	
	Mount Pisgah Church		х	
	St. Vincent DePaul		x	
	Trinity Lutheran		x	

Appendix 10: Narrative of McLean County Community Resources for the 2022 Identified Health Concerns

RECREATIONAL FACILITIES

Bloomington-Normal YMCA

Healthy Eating/Active Living

The Bloomington Normal YMCA offers high quality after-school programs, swimming and gymnastics instruction, youth sports, teen programs, day camp and a variety of recreational experience for children and adults of all ages.

Carle Health & Fitness Center

Healthy Eating/Active Living

The Carle Health & Fitness Center focuses on promoting whole-person health and complete well-being for each member. Programming and services are provided from all dimensions of wellness.

Four Seasons Association

Healthy Eating/Active Living

The Four Seasons Association is a family oriented not-for-profit health club in the community that plays an active role in acknowledging various health issues and providing opportunities to combat these concerns. Resources/programs include healthy eating every day, active living every day, dietitian programs and services, and corporate outreach program.

GOVERNMENT/PUBLIC ENTITIES

Local Municipality Parks & Recreation Departments Healthy Eating/Active Living

Local School Districts and Regional Office of Education Behavioral Health, Healthy Eating/Active Living

McLean County Government

Access to Care, Behavioral Health

Under the direction of the McLean County Board, a Mental Health Action Plan was created in 2015, followed by the formation of the Behavioral Health Coordinating Council. The Mental Health Action Plan was updated in 2022. The county, using data to drive change, has multiple projects under development to improve access to behavioral health services.

McLean County Health Department

Access to Care, Behavioral Health, Healthy Eating/Active Living

Prevention information at a variety of venues, as well as health-related data, is provided through the Health Promotion Program. Multiple clinics, on-site and off-site, provide direct services and appropriate healthcare to all ages in the community.

COMMUNITY AGENCIES

American Cancer Society

Access to Care

The American Cancer Society offers resources on cancer and patient navigator program for people with cancer.

American Heart Association

Access to Care

The American Heart Association offers resources related to heart disease and CPR training guidelines.

Bloomington Housing Authority

Access to Care, Healthy Eating/Active Living

The Bloomington Housing Authority provides affordable housing to approximately 600 households in public housing and more than 650 households under the Housing Choice Voucher Program (Section 8).

Bloomington Normal Faith in Action

Access to Care

Faith in Action is a 501(c) 3 organization that provides spiritual, physical, and emotional support to seniors 60 years and over and their caregivers to maintain independence, dignity, and improved quality of life.

Boys and Girls Club of Bloomington Normal

Behavioral Health, Healthy Eating Active Living

The Boys & Girls Club is a safe place for kids that is supervised by paid professionally trained staff who offer fun and engaging programs for Club members at an affordable price.

Carle Cancer Institute Normal

Access to Care, Healthy Eating/Active Living

Carle Cancer Institute Normal offers the care of multiple physician specialties, the latest drug therapies, radiation treatment, research protocols and support services for patients with cancer.

Center for Youth and Family Solutions

Behavioral Health

The Center for Youth and Family Solutions sponsors Screening, Assessment and Support Services (SASS). SASS provides intensive mental health services for children and youth experiencing a mental health crisis. The center also offers outpatient therapy as part of its comprehensive behavioral health counseling program.

Children's Home & Aid

Access to Care

Children's Home & Aid is a leading child and family service agency in Illinois. They help children recover their health, their hope, and their faith in the people around them.

Collaborative Solutions Institute

Behavioral Health

The Collaborative Solutions Institute offers mental health evaluation and treatment.

Connect Transit

Access to Care

Connect Transit's mission is to provide independence through transportation to live, learn, work and play; added economic value, through transportation opportunities, to McLean County that is environmentally and economically sustainable; and, service to customers that is safe, affordable, reliable, accessible and valued.

Depression and Bipolar Support Alliance

Behavioral Health

The Depression and Bipolar Support Alliance sponsors support groups for families/friends of mentally ill individuals and individuals with mental illness/emotional disabilities.

East Central Illinois Area Agency on Aging

Healthy Eating/Active Living

Dedicated to enhancing the quality of life for older Americans and their families by providing information about and access to a variety of services in their community in the 16 counties of East Central Illinois.

Easter Seals of Central Illinois

Access to Care

Easter Seals of Central Illinois provides exceptional services to ensure that children with developmental delays, disabilities, and other special needs can reach their full potential.

Heartland Community College

Behavioral Health

Heartland Community College offers counseling services to students

Heartland Head Start

Healthy Eating/Active Living

Heartland Head Start is a unique program providing comprehensive educational, health and social services for low-income pre-school age children and their families, including prevention and intervention services for kids six weeks to five years of age as well as pregnant mothers.

Illinois State University Student Health Services

Access to Care, Behavioral Health, Healthy Eating Active Living

Illinois State University Student Health Services provides counseling and outpatient psychiatric services and dietitian consultations.

Illinois Wesleyan University—Arnold Health Services

Access to Care, Behavioral Health, Healthy Eating/Active Living

IWU offers students dietitian consultations and behavioral health counseling.

John M. Scott Health Care Commission

Access to Care, Behavioral Health, Healthy Eating/Active Living

The John M. Scott Health Care Commission provides financial assistance through grant opportunities for the health priorities identified in the McLean County Community Health Needs Assessment and improvement plan.

Marcfirst

Access to Care, Behavioral Health

Marcfirst's mission is to connect families and people with developmental disabilities to their community through a lifetime of meaningful supports.

McLean County Center for Human Services

Behavioral Health

McLean County Center for Human Services offers a Crisis Response Team to attend to urgent mental health issues and administer the Indigent Drug Program.

Mid Central Community Action

Behavioral Health, Healthy Eating/Active Living

MCCA envisions healthy and self-sufficient families interacting positively with one another in strong, safe, and diverse neighborhoods to enhance the community while preserving the environment.

Midwest Food Bank

Healthy Eating/Active Living

Midwest Food Bank shares the love of Christ by alleviating hunger and malnutrition locally and throughout the world and providing disaster relief; all without discrimination.

National Alliance on Mental Illness

Behavioral Health

The National Alliance on Mental Illness (NAMI) is a self-help, non-profit organization dedicated to improving the quality of life for persons with neuro-biological brain disorders.

PATH 211

Access to Care, Behavioral Health

PATH 211 offers suicide prevention services and support to help individuals locate health and human service assistance including food, shelter, rent and utility assistance, physical and mental health resources, employment supports, volunteer opportunities and support resources for children, older Americans and people with disabilities.

Peace Meal Senior Nutrition Program

Healthy Eating/Active Living

Peace Meal Senior Nutrition Program provides congregate and home delivered meals to seniors in a seven-county region to improve quality of life.

Project Oz

Behavioral Health

Project Oz is a not-for-profit human service agency with a focus on preventing drug abuse, empowering youth and young adults, assisting homeless and runaway youth, and helping teens stay in school. The Youth Action Board provides youth substance use prevention and education, alcohol and drug prevention classes. Project Oz also provides training, called STEPS, for sellers/servers of alcohol on how to stay within the law.

The Baby Fold

Behavioral Health

The Baby Fold offers a residential treatment center for children ages three through thirteen with a variety of severe and complex mental health problems who need intensive supervision and treatment 24 hours a day.

United Way of McLean County

Healthy Eating/Active Living

United Way of McLean County improves lives in our communities by bringing together local partners – donors, volunteers, government, non-profits, and businesses – to create sustainable, innovative solutions that address our county's most pressing human needs.

University of Illinois Extension Healthy Eating/Active Living

U of I Extension offers nutritional education programming and resources.

West Bloomington Revitalization Project

Healthy Eating/Active Living

Driven by the voice of residents, the WBRP leads impactful, collaborative efforts of neighbors and local stakeholders that honor our historical and cultural roots, build on the pride and strengths of our neighborhoods and empower residents to be leaders and achieve a vision for a better community.

Western Avenue Community Center

Behavioral Health, Healthy Eating/Active Living

Western Avenue Community Centers, through its Hispanic Outreach program, offers Individual, child, family and couples general counseling; counseling in the areas of codependency, grief and loss, anger management, conflict resolution, parenting education and domestic violence; and crisis intervention.

YWCA

Behavioral Health

For more than 100 years, YWCA McLean County has been a constant force in the lives of families in McLean County serving women, children and families and offering a variety of services and programs.

COMMUNITY COALITIONS

All Our Kids (AOK) Childhood Network

Access to Care

All Our Kids Early Childhood Networks (AOK Networks) is an initiative to promote healthy pregnancies and the positive growth and development of all children birth to five and their parents/caregivers by assuring a well-coordinated, easily accessible, equitable and just system of services and supports that engages parents as partners in making the system work for them.

Behavioral Health Coordinating Council

Behavioral Health

In 2014 the McLean County Board created two advisory groups to look at the issue of mental health in the community. The Best Practices group looked at best practices in the field of mental health for individuals and groups in the community. The Needs Assessment group assessed the most pressing mental health needs in the area. Each group presented a report and recommendations to the McLean County Board. The two groups were then consolidated. The Consolidated Mental Health Group worked to put together recommendations and action plans.

Bike Blono Healthy Eating/Active Living Bike Blono's main cause is to promote the bicycle for everyday transportation in Bloomington-Normal. Bike Blono's main community contributions come in the form of three methods: advocacy, awareness and education.

Black Nurses Association of Central Illinois

Access to Care

The mission is to provide a forum for collective action by African American nurses to represent and provide a forum for black nurses to advocate for and implement strategies to ensure access to the highest quality of healthcare for persons of color.

Bloomington Normal NAACP

Access to Care

The mission of the National Association for the Advancement of Colored People (NAACP) is to secure the political, educational, social, and economic equality of rights in order to eliminate race-based discrimination and ensure the health and well-being of all persons.

League of Women Voters

Behavioral Health

The League of Women Voters has been an integral part of the political and civic life of McLean County. The League recently completed a study on mental health services in our community and is currently working on a housing study.

Mental Health Advisory Council

Behavioral Health

The mission of IMHPAC is to advocate for a robust mental health delivery system on behalf of the people in the State of Illinois by bringing together stakeholders to advise the State on the development and implementation of mental health plans, programs, and policies.

The Links Inc

Access to Care

The Links, Incorporated is an international, not-for-profit corporation, established in 1946. It is one of the nation's oldest and largest volunteer service organizations of extraordinary women who are committed to enriching, sustaining and ensuring the culture and economic survival of African Americans and other persons of African ancestry.

HOSPITALS/CLINICS

Carle BroMenn Medical Center

Access to Care, Behavioral Health, Healthy Eating/Active Living

Carle BroMenn Medical Center (CBMC), a 200-bed hospital in Normal, IL, serves four central Illinois counties with a total population of more than 227,000. Among the nearly 2,000 team members are more than 100 doctors and advance providers practicing within one of the top-five largest regional employers. CBMC holds Magnet* designation for nursing excellence is a designated and is certified as a Primary Stroke Center. Carle BroMenn Medical Center also offers the community's only inpatient mental health unit.

Chestnut Health Systems and Chestnut Family Health Center Access to Care, Behavioral Health, Healthy Eating/Active Living

Chestnut Health Systems provides outpatient and residential mental health services; adult and adolescent addiction treatment; and crisis stabilization, including medically monitored detoxification.

Community Health Care Clinic

Access to Care, Behavioral Health, Healthy Eating/Active Living

The Community Health Care Clinic provides quality healthcare to the medically underserved population of McLean County through the operation of a free medical and dental clinics.

McLean County Health Department

Access to Care, Behavioral Health, Heathy Eating/Active Living

The Health Department's multiple clinics, on-site and off-site, provide direct services and appropriate healthcare to all ages in the community. On-site clinics include dental, immunization, WIC, and communicable diseases. Prevention information and health-related data is provided at a variety of venues.

OSF St. Joseph Medical Center

Access to Care, Behavioral Health, Healthy Eating/Active Living

OSF St. Joseph Medical Center is a 149-licensed bed, not for profit, acute care, and Level II Trauma Center facility. Specific centers of interest include the OSF St. Joseph Medical Center Weight Management Center, the OSF Center for Healthy Lifestyles, and community wellness screenings.

LOCAL EMPLOYERS

Center for Healthy Lifestyles

Access to Care, Healthy Eating/Active Living

The Center for Healthy Lifestyles assists members of the community in achieving healthier behaviors and making informed health care decisions. This is achieved through comprehensive prevention, education, counseling, and diagnostic services.

Forefront Illinois

Access to Care

Forefront is Illinois' statewide association representing both grant makers and nonprofits, as well as their advisors and allies. Forefront's mission is to build a vibrant social impact sector for all the people of Illinois. We provide education, advocacy, thought leadership, and facilitate collective action around issues that are important to our Members and to the sector.

Illinois Farm Bureau

Healthy Eating/Active Living

Since 1916, Illinois Farm Bureau has provided education and information to help farmers, while supporting legislation and lobbying efforts about agricultural issues.

Worksite Wellness Programs

Behavioral Health, Healthy Eating/Active Living

Local employers offer wellness challenges, education, exercise programs, and screenings to engage and improve the health of their employees.

FAITH ORGANIZATIONS

Healthy Eating/Active Living

Numerous faith organizations in McLean County offer food to both members and the community at large.