

# Community Health Needs Assessment 2022



*We're here, for you.*

**FHN**

December 2022

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# Introduction and Executive Summary

## Process

FHN has conducted a 2022 Community Health Needs Assessment (CHNA), as required by Internal Revenue Code, section 501 (r) and has completed both a Summary Report and Implementation Strategy based on results.

FHN is a non-profit health system comprised of a hospital, specialty clinics, and a network of primary care clinics serving the greater Freeport region and northwestern Illinois. FHN has defined its community for the CHNA as Stephenson, Jo Daviess, and Carroll Counties, Illinois, as the overwhelming majority of inpatients and emergency department patients draw from this area. Both primary and secondary data were collected to identify health needs within FHN's community.

Primary data was collected from an online survey with over 650 responses, in-person conversations with over a dozen selected community leaders, and FHN input including executive staff and 10 members of the organization's Care Transitions Steering Committee, the primary group charged with overseeing the implementation of the planned objectives.

The input sought from these sources reflected their perspectives on a range of issues that affect the community's health and well-being, e.g., community resources, barriers to health care providers, and reasons for high rates of disease and mortality. The input measured the perception of these members of the community on various aspects of access to healthcare, perceived quality of care, and confidence and trust in healthcare providers that was impacted during the pandemic due to widespread mis- and disinformation. Specific feedback was also gathered in connection with the healthcare response to the COVID-19 pandemic, which significantly impacted FHN's ability to follow through on its 2019 Community Health Needs Assessment that was finalized only a few months before the pandemic was declared a national health emergency and became a nationwide challenge.

FHN also collected secondary data on a broad array of health indicators and demographic information. Secondary data was collected using databases created by other agencies or organizations. Types of data collected included demographic information, chronic disease and morbidity/mortality information, health status indicators and health behaviors, family planning and births, general community/environment information, and local, state, and national benchmarks.

## Summary Findings

Community health needs identified through primary and secondary data collection were prioritized by FHN's Care Transitions Steering Committee with attention paid to the requirement that the hospital conduct a Community Health Needs Assessment (CHNA) under the Patient Protection and Affordable Care Act (PPACA) that pays specific attention to healthcare concerns that affect vulnerable populations. The Care Transitions Steering Committee reached consensus on the following as priorities for 2022-2025:

1. Community Identified Needs
2. Community Health and Well Being
3. Chronic Disease Management

As brought forward throughout the community input, the following aspects of healthcare delivery – all of which contribute to the successful delivery of effective, efficient, excellent healthcare – were identified as being important to include throughout the implementation strategy tactics:

- Health Education
- Accessibility
- Community Leadership
- Behavioral/mental health support

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I am impressed with  
FHN's teamwork to  
do their best in very  
difficult situation.

– 2022 FHN Survey Comment

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The Care Transitions Steering Committee is using the following elements of care to ensure a broad, inclusive approach to meeting the Community Identified Needs through measurable tactics over the next three years, and a measurable objective for each is included in the grid in the Implementation Strategy Summary.

1. Mortality
2. Efficiency
3. Safety
4. Effectiveness
5. Patient Centeredness
6. Equity

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The elderly and/or anyone who is unfamiliar with the healthcare system need help to navigate the complicated current healthcare system, insurance issues, and so on.

– 2022 FHN Survey Comment

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Too many people have poor nutrition due to low income and little focus on healthy foods and a healthy lifestyle.

– 2022 FHN Survey Comment

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## 1. Community Health and Well Being

The availability of preventive care resources, nutritional status, and one's overall wellness significantly influence the health of the hospital community. The Care Transitions Steering Committee identified social determinants of health, including obesity, as primary health concerns, along with physical inactivity, behavior indicators, and behavioral health. Similarly, the Care Transitions Steering Committee associated mortality rates with lifestyle patterns (i.e., social determinants), so a primary initiative has been to provide both education and actual aid where needed, including activities such as widespread health screenings and education on healthy living and prevention of disease.

## 2. Chronic Disease Management

Chronic diseases and conditions – such as heart disease, stroke, cancer, type 2 diabetes, COPD, obesity, and arthritis – are among the most common, costly, and preventable of all health problems. Half of American adults have at least one chronic condition, and almost one of three have multiple chronic conditions. Transformation of healthcare is needed to change it from a system that is essentially reactive – becoming involved mostly when a person is sick – to one that is proactive and focused on keeping a person as healthy as possible.

FHN has taken a systematic approach to understanding and identifying the barriers faced by people with chronic illnesses – including their social networks, clinical support teams, and healthcare payers – by leading an initial entry into this arena with a program called Connect the D.O.T.S. (Doors of Team Support). The effort was launched in 2017 with over 21 organizations from a wide cross-section of the community. The COVID-19 pandemic slowed progress as most of the organizations involved were in some form of lock-down, and many of the efforts that were in place have since been reinitiated. The Connect the D.O.T.S. should be a consistent, very effective way to continue to maintain strong ties to these important partners, representing a full scope of social determinants of health, in ensuring that community resources are optimized on behalf of FHN patients.

In addition, FHN has continued its chronic care management program called Complex Care Management and a palliative care program called Supportive Care to address the clinical aspects of chronic disease management as well as the need to partner with other community organizations and individuals to provide necessary support outside the hospital's purview.

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Finding a good  
doctor and  
paying for it isn't  
very easy.

– 2022 FHN Survey Comment

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# Community Health Needs Assessment Background

## Requirements

FHN has conducted a Community Health Needs Assessment (CHNA) for its hospital facility as required by Internal Revenue Code, section 501 (r). The CHNA process is designed to assess health issues within the hospital community through collecting and analyzing primary and secondary data related to demographic information, health access, vulnerable populations, health status and disparity, and health behaviors of community residents. As required by the Patient Protection and Affordable Care Act (PPACA), the CHNA will include the following:

- A definition of the community served by the hospital facility
- How data was obtained, who was consulted/interviewed
- Demographics of the community
- Consulting with community representatives
- Primary and chronic disease needs and other health issues of uninsured persons, low- income persons, and minority groups
- Existing healthcare facilities and resources within the community that are available to respond to the health needs of the community
- Information gaps that limit the hospital's ability to assess the community's health needs
- Prioritized list of community health needs

## Previous Assessments

Previous assessments of health needs of Stephenson, Jo Daviess, and Carroll Counties were reviewed for FHN's 2022 CHNA. These included:

- 2021 Stephenson County Leadership Institute presentation based on new census data (provided by former University of Illinois School of Medicine research expert Deborah Lischwe)
- 2019 Illinois Risk and Reach Report from the Erikson Institute, the Illinois Early Childhood Asset Map (IECAM) of University of Illinois at Urbana-Champaign, and the Fiscal Policy Center at Voice for Illinois Children
- SG2 study (FHN data consultant partner)
- Stephenson County Health Department IPlan 2019-2024
- 2021 CHNA completed by SSM Health/Monroe Hospital, Monroe, WI

## CHNA Approval

The CHNA was accepted and approved by the FHN Board of Directors on December 6, 2022.

## Public Posting and Availability

The FHN 2022 Community Health Needs Assessment and Implementation Strategy is publicly posted on the FHN website at [fhn.org](http://fhn.org). Hard copies are also available either by downloading from the website or submitting a request to [wecare@fhn.org](mailto:wecare@fhn.org).

# Methodology

## Report Methodology

Information related to the highest priority health and demographic indicators is presented in the report document itself, with detailed supplemental secondary data and primary data transcripts available in the appendices.

## Secondary Data Methodology

Secondary data was collected using databases created by other agencies or organizations. FHN collected secondary data for the assessment from a variety of sources and about a variety of different issues. Types of data collected included demographic information, data specific to key diseases and behaviors, health status indicators and health behaviors, and local, state, and national benchmarks. Due to the nature of secondary data available, data was collected on the level of zip code, city, or county for the defined hospital community. Most health indicator data was only available on a county-level basis, which still serves the purposes of the Implementation Strategy quite well. Secondary data measures were compared to US and Illinois measures in most cases.

## Primary Data: Survey Methodology

FHN developed an online survey that was sent to a wide variety of community members both directly and through contacts at key organizations, public officials, and social service agencies. Over 650 responses were received, nearly triple the number received in response to a similar survey done for the 2019 CHNA, indicating a high degree of community interest in the topic of regional healthcare. Questions were asked about an array of community health indicators, assets, needs, and solution perspectives (survey questions appear in this document's appendices). Several questions were included in order to discover respondents' perspectives on how the COVID-19 pandemic intersected with non-pandemic healthcare concerns – this is reflected in the specific responses to those questions.

Community stakeholders surveyed represented healthcare and social service providers, economic organizations and political community officials, the elderly/senior population, the low-income population, school staff, the working class, and general population. In addition, FHN surveyed many of its own patients enrolled in its Care Transitions Programs, including home healthcare patients.

Responses to the questions were aggregated according to how frequently the responses appeared; high importance was given to issues mentioned by a majority of community stakeholders, and lower importance was given to responses given by a small number of community stakeholders.

## Information Gaps

Every attempt was made to collect relevant and recent primary and secondary data reflecting the health status and social determinants of health in the FHN community. The online survey ended up representing a more finite demographic set so the in-person conversations which followed were directed more towards groups that were not as well represented in the online survey data. Although financial and time constraints limited this assessment to the extent that they would limit any assessment of a community's needs, no significant demographic gaps were identified once the input from both the online survey and in-person conversations was compiled.

## COVID-19 Pandemic Impacts

FHN Memorial Hospital was obviously affected significantly by the COVID-19 pandemic. The hospital went into Incident Command structure immediately and reconfigured many of its processes to be able to address the unique challenges of the highly contagious disease, such as separating staff and hospital areas for COVID cases from other patient care environments. Over 1,000 unique patients were hospitalized with COVID from March 2020 to March 2022 and like many other hospitals across the country, FHN Memorial Hospital at times was required to develop new delivery of care models to ensure quality of care.

New services – including mobile testing and vaccination sites – were stood up in record time. Telehealth capability expanded in record time, with visits going from almost zero the first quarter of 2020 to nearly 600 by year-end. Testing and vaccination events were held on a continuing basis in a variety of locations throughout the hospital's service area.

Many of the organizational lessons learned during the pandemic were so successful that they have remained on a permanent basis. FHN also collaborated with other healthcare organizations in its designated Illinois state region to share resources and information as efficiently as possible.

As national reporting on COVID-19 often changed quickly – sometimes switching directions several times in a single day – keeping the community well informed was a priority. The hospital recognized its role as a source of trusted data and released literally hundreds of public communications to keep its entire service area updated and prepared. Since March 2020, FHN has disseminated the following COVID-specific communiques, all of which are still housed on the FHN website for public reference:

- 40 videos, featuring interviews with providers and staff discussing topics from types of masks to how to cope with the behavioral aspects of shutdowns to the latest clinical knowledge about the disease itself and how the new vaccines worked
- Over 30 radio interviews covering a wide range of COVID-related topics
- Nearly 100 press releases
- 27 columns/articles for local media use

The FHN community responded with an outpouring of support for hospital staff, providing everything from home-sewn face masks to meals and treats for exhausted staff. While any pandemic is certainly not a desirable event, the ability of FHN and its communities to work together in the face of this truly monumental challenge was inspirational.



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Considering what an overwhelming situation we have all been in, I think things were handled well during the pandemic.

– 2022 FHN Survey Comment

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# Hospital and Community

## FHN Memorial Hospital Description

FHN Memorial Hospital is a 100-licensed bed hospital located in Freeport, Illinois. The original location that later came to be renamed as FHN Memorial Hospital was opened in 1902.



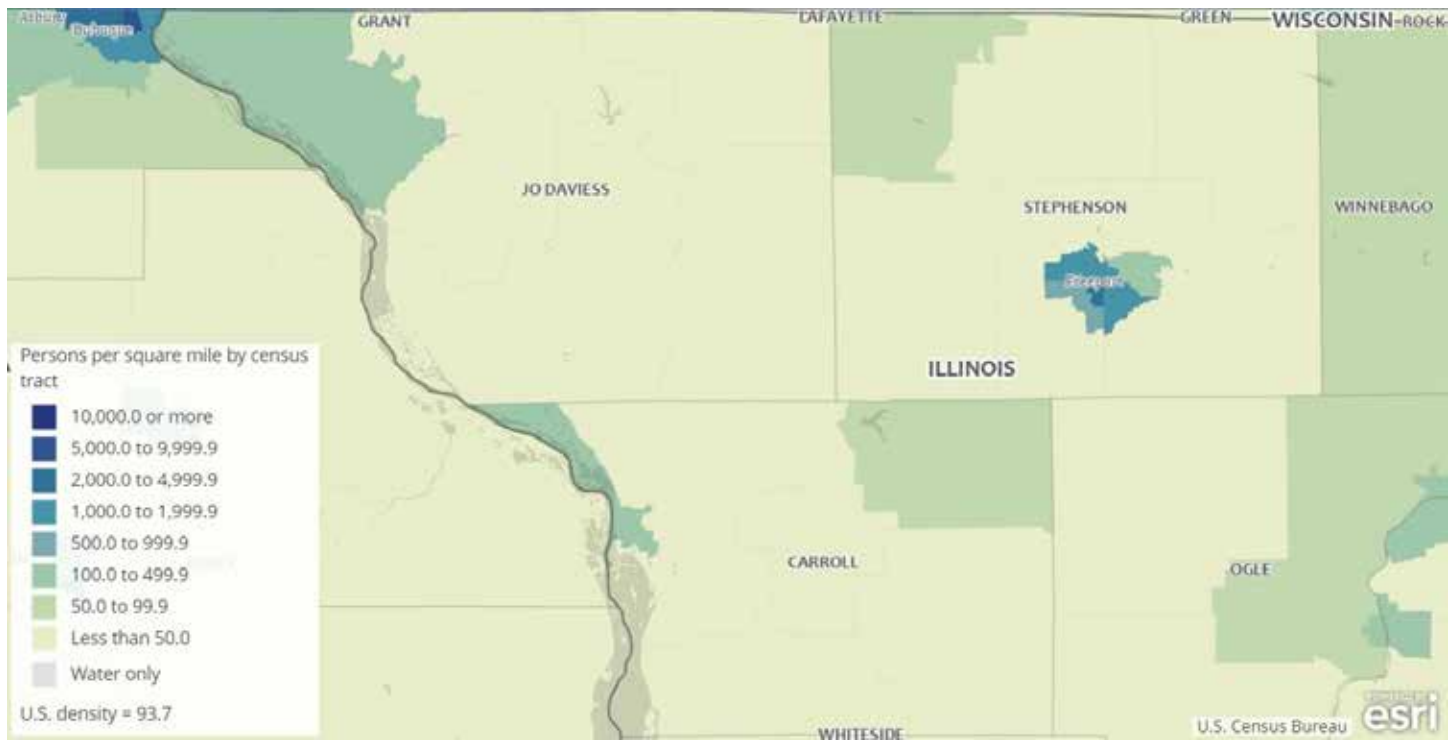
Through its extensive community involvement and well-developed system for monitoring quality of care, FHN strives to improve the health of its community and to provide superior, quality healthcare services.

FHN Memorial Hospital defined its community for the purposes of the CHNA geographically as Stephenson, Jo Daviess, and Carroll Counties. The community was defined based upon internal patient origin information by zip code for FHN's emergency room visits and inpatient discharges. A clear majority of the patients drew from these three counties.



# Community Profile

## General Demographics



Population density per 2020 Census Demographic Data Map Viewer

Stephenson County is the most populous area of FHN’s defined community with the largest part of its population clustered in the Freeport area.

### Population History

	Carroll County	Jo Daviess County	Stephenson County	FHN Community	Illinois	USA
Total 2010 Census	15,387	22,678	47,711	85,776	12,830,632	307,745,539
Total 2020 Census	15,702	22,035	44,630	82,637	12,716,164	326,569,308
Total Population Change 2010-2020 <sup>3</sup>	315	-643	-3,081	-3,409	-114,468	18,823,769
Percent Change 2010-2020	2.0%	-2.8%	-6.5%	-4.0%	-0.9%	6.1%

US Census Bureau 2020

## Population Projections

	Census 2020	2025	2030	% Change from 2020 to 2030
Carroll	15,702	12,991	12,255	-22%
Jo Daviess	22,035	21,564	21,221	-3.0%
Stephenson	44,630	43,876	42,696	-4.0%
Illinois	12,716,164	12,800,00	12,790,000	0.6%

IDPH

Jo Daviess and Stephenson county populations are likely to remain relatively steady, while the Carroll population is likely to decrease considerably by 2030.

## Median Age by Zip Code

	Carroll County	Jo Daviess County	Stephenson County	FHN Community	Illinois	USA
Total Population	15,702	22,035	44,630	82,637	12,716,164	326,569,308
Median Age	48.0	50.4	45.5	47.9	38.3	38.2

US Census Bureau 2020

The median age of people in the FHN community is varied and the average age is 47.9. This translates to a broad variety of health needs across the community, based on age population. As a comparison, the median age in Illinois is 38.3, and the national median age is 38.2.

## Projected 65 and Older Population

	2020	2025	2030	% Change from 2020 to 2030
Carroll	3,648	3,920	3,958	8.5%
Jo Daviess	6,628	6,956	7,340	10%
Stephenson	11,525	11,855	12,340	7.1%
Illinois	1,990,426	1,351,912	1,492,103	-25%

IDPH, US Census Bureau 2020

As shown in the chart above, the 65 and over population in Stephenson, Jo Daviess, and Carroll Counties is growing rapidly and will likely continue to increase in the coming years. In the case of Jo Daviess county, in the next five years, this population segment is expected to increase by over 10 percent, while Carroll and Stephenson counties' senior population is expected to increase closer to an average of 8 percent.

Because this population segment is expected to grow more quickly than the overall population, the vulnerable population of seniors in the FHN community will become a larger proportion of residents in the coming years. In this sense, health issues for seniors are likely to continue to be more prominent in the future. (The decrease in this population for Illinois overall can be traced to projected mortality figures as well as retirement of many of these individuals to other regions of the country in addition to a more pronounced exodus from the state in general, as compared to other states, based on a variety of economic parameters.)

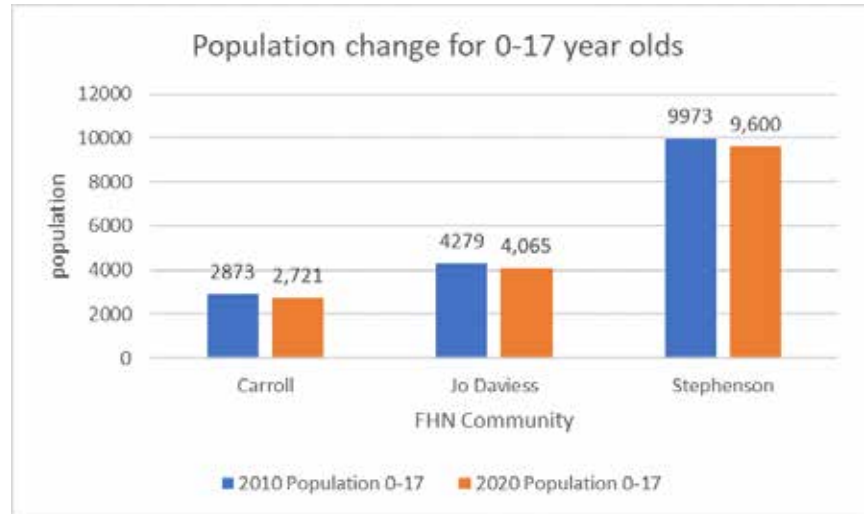
## Current 17 and Younger Population

	Carroll County	Jo Daviess County	Stephenson County	FHN Community	Illinois	USA
Total Population	15,702	22,035	44,630	82,637	12,716,164	326,569,308
Population 0-17	2,721	4,065	9,600	16,386	2,855,433	73,296,738
Percent Population 0-17	17%	18%	22%	20%	20.35%	22.44%

US Census Bureau 2020

In general, those 17 and younger make up about 20% of the total population in FHN's service area which is similar to what we see at the state level.

When comparing the 17 and under age group and projections for the number of persons over 65, the significant growth of the latter group is particularly pronounced in the FHN service area as well as Illinois overall.

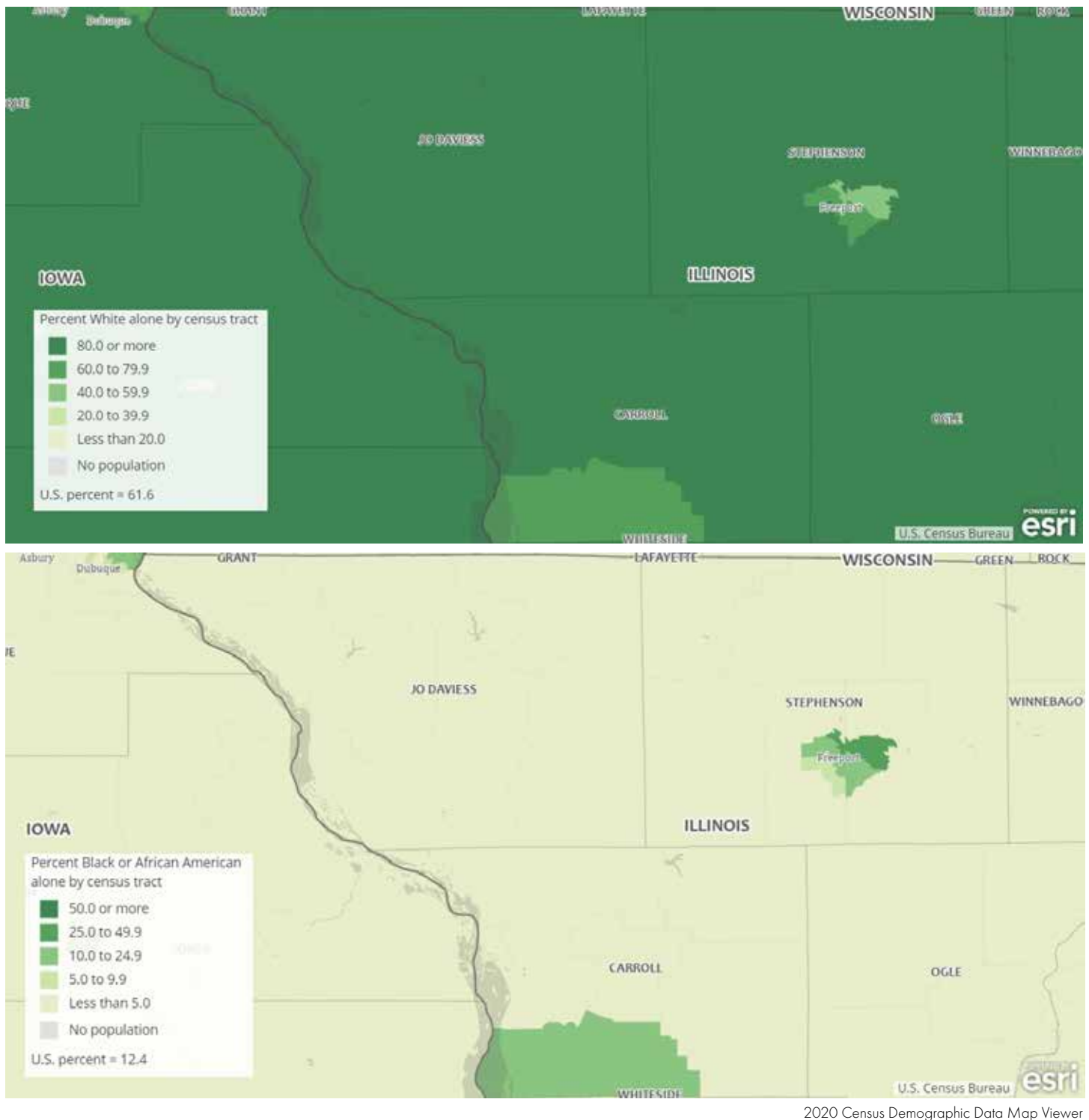


Overall, FHN is doing quite well considering all the stress throughout the health system.

– 2022 FHN Survey Comment

## Race

### Population Density



As seen above, the racial makeup of the hospital community is predominantly Caucasian with African American as a distant second. The maps also identify that both races have separated geographically, which is especially pronounced in Stephenson County. This is likely due to Freeport being the largest city in any of the counties. All three counties have very small other populations segments as well. As a result, the FHN community is significantly less racially diverse than the State of Illinois overall.

Illinois



- White 67%
- Black or African American 16%
- American Indian or Alaska Native 1%
- Asian 6%
- Native Hawaiian or Pacific Islander 0%
- Other 10%



Carroll County



- White 94%
- Black or African American 5%
- American Indian or Alaska Native 0%
- Asian 0%
- Native Hawaiian or Pacific Islander 0%
- Other 1%

African Americans want to hear about their health from African Americans.

- 2022 FHN Survey Comment

Stephenson County



- White 86%
- Black or African American 11%
- American Indian or Alaska Native 0%
- Asian 1%
- Native Hawaiian or Pacific Islander 0%
- Other 2%



Jo Daviess County



- White 97%
- Black or African American 1%
- American Indian or Alaska Native 0%
- Asian 0%
- Native Hawaiian or Pacific Islander 0%
- Other 2%



US Census Bureau 2020

## Projected African American Population

	2000	2005	2010	2015	2020	2025	2030	% Change from 2000 to 2030
Carroll	91	95	103	111	113	119	129	42%
Jo Daviess	44	58	73	84	97	115	130	195%
Stephenson	3,761	3,844	4,016	4,297	4,682	5,131	5,590	49%
Illinois	1,880,101	1,932,802	1,981,006	2,035,723	2,094,687	2,132,678	2,150,187	14%

www.ildceo.net

Stephenson County has the largest African American population in the FHN community. Relative to their current numbers, the African American population in the FHN community is growing although representation in the overall demographic picture is still a pronounced minority by comparison.

## Projected Asian Population

	2000	2005	2010	2015	2020	2025	2030	% Change from 2000 to 2030
Carroll	68	87	105	135	171	206	243	257%
Jo Daviess	36	40	44	45	48	49	48	33%
Stephenson	334	334	356	373	405	445	485	45%
Illinois	424,291	525,866	628,663	742,266	872,341	989,467	1,094,499	158%

www.ildceo.net

The Asian population in the FHN community is growing at a more rapid rate than overall population although overall representation is quite small. The growth rate is particularly strong in Carroll County, where the Asian population is expected to grow by over 80 percent between 2013 and 2030 (although relative numbers are again, still quite small).

## Projected Hispanic Population

	2000	2005	2010	2015	2020	2025	2030	% Change from 2000 to 2030
Carroll	340	367	407	444	485	526	561	65%
Jo Daviess	342	370	400	428	445	461	483	41%
Stephenson	747	826	912	998	1,095	1,202	1,301	74%
Illinois	1,532,791	1,709,072	1,877,681	2,041,127	2,206,816	2,380,472	2,562,430	67%

Note: Information does not include undocumented individuals, www.ildceo.net

At between 2 and 3 percent of the total population in the hospital community, the Hispanic population is small, relative to 15 percent in Illinois. However, as with other smaller demographic groups in the area, this ethnic group is growing at a larger rate than overall population and it will likely become more central to this community in the future. Long-term population projections through 2060 for counties have yet to be updated by the state; the only long-term projections available at this time are national.

Some of my family lack a regular healthcare provider due to lack of affordable insurance.

– 2022 FHN Survey Comment

# Socioeconomic Status and Education

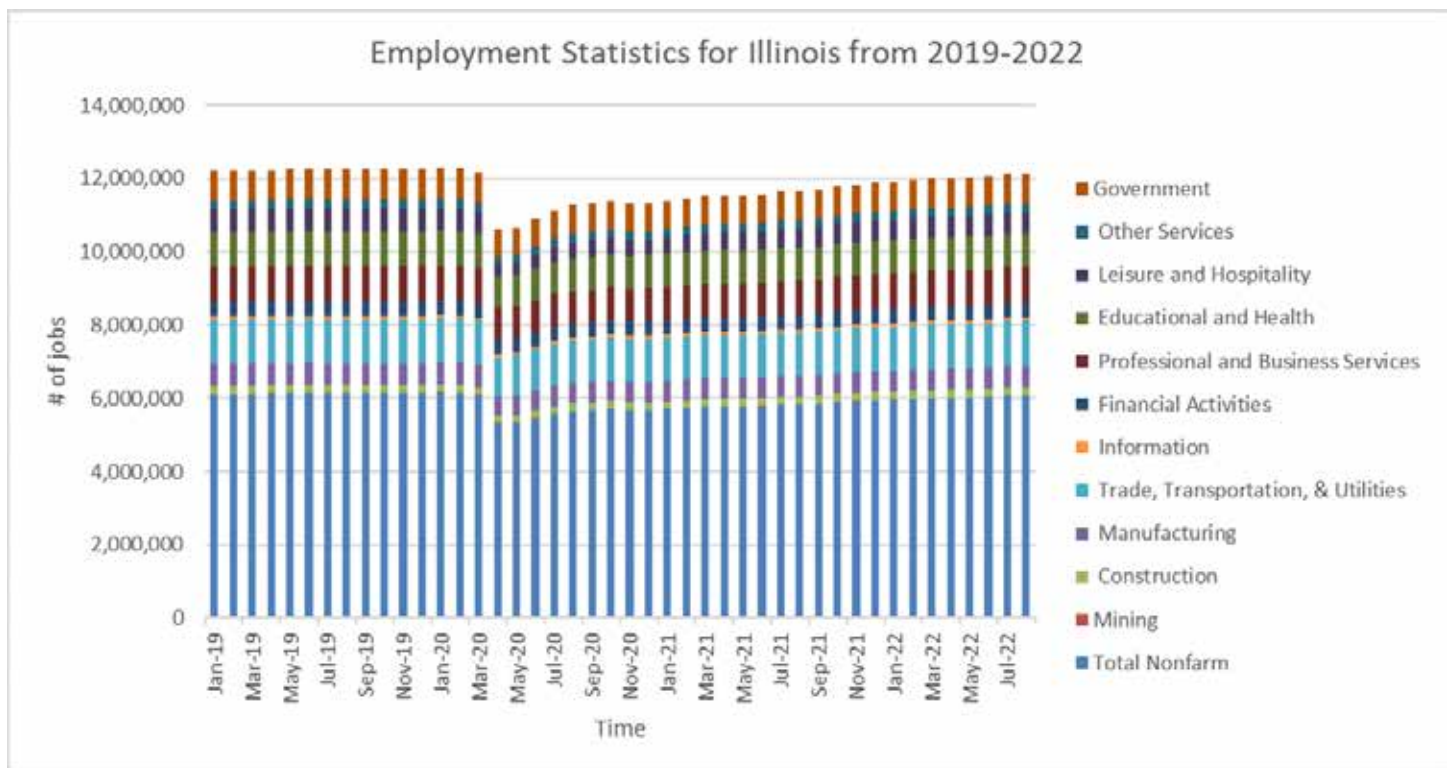
## Unemployment Rate

The improvement in the national unemployment rate over most of 2022 has positively impacted the FHN community as well. While the community saw drop-offs that were larger than expected during the first two years of the COVID-19 pandemic, that situation has largely rebounded to be about the same as the region pre-pandemic. Employers in the area still are challenged in finding entry-level qualified employees and applicants to fill jobs requiring specialized skills.

	Carroll County	Jo Daviess County	Stephenson County	FHN Community	Illinois	USA
Labor Force	12,019	17,855	36,461	66,335	10,193,604	261,649,873
Number Employed	6,839	10,945	22,569	40,353	6,646,230	167,788,019
Number Unemployed	697	429	2,552	3,678	611,616	14,291,093
Unemployment Rate	5.8%	2.4%	7.0%	5.5%	6.0%	5.4%

US Census Bureau 2020

While the area overall has recently achieved record low levels of unemployment, FHN’s understanding of the social determinants of health, which often disproportionately impact lower-income individuals and families, still mandates a focus on reducing poverty through support of job programs and other skill development opportunities. An additional challenge exists in terms of behavioral health issues and lack of “soft” job skills such as on-time attendance, interpersonal behaviors, etc.





## Median Household Income

FHN's service has a significantly lower median household income than much of the surrounding area. Not surprisingly, the poverty level in Stephenson and Carroll Counties is significantly higher than that of Jo Daviess County, as there is a statistically significant proportion of Jo Daviess' population that has moved into the county from the Chicago area. Median income (below) in the FHN community is also significantly lower than the State and the country overall.

	Carroll County	Jo Daviess County	Stephenson County	FHN Community	Illinois	USA
Total Households	6,508	9,970	19,739	36,217	4,846,134	120,756,048
Average Household Income	\$65,151	\$74,630	\$62,817	\$67,533	\$92,395	\$88,607
Median Household Income	\$52,410	\$57,946	\$48,805	\$53,054	\$65,886	\$62,843

US Census Bureau 2020

## Poverty Rates, Population Below 125% of Federal Poverty Level

Probably due to the recent improvement in job availability, poverty in FHN's service area overall is somewhat lower than the State and national averages, although it should be noted that the poverty level in Stephenson county – due to the fact that Freeport is the largest city in the service area and therefore supports a more diverse population – is higher than State and national averages.

	Carroll County	Jo Daviess County	Stephenson County	FHN Community	Illinois	USA
Total Population	15,702	22,035	44,630	82,637	12,716,164	326,569,308
Population in Poverty	1,956	2,804	8,946	10,546	2,050,937	56,269,559
Percent Population in Poverty	12.5%	12.7%	20.0%	12.8%	16.1%	17.2%

US Census Bureau 2020

## Children Below 125% of Federal Poverty Level

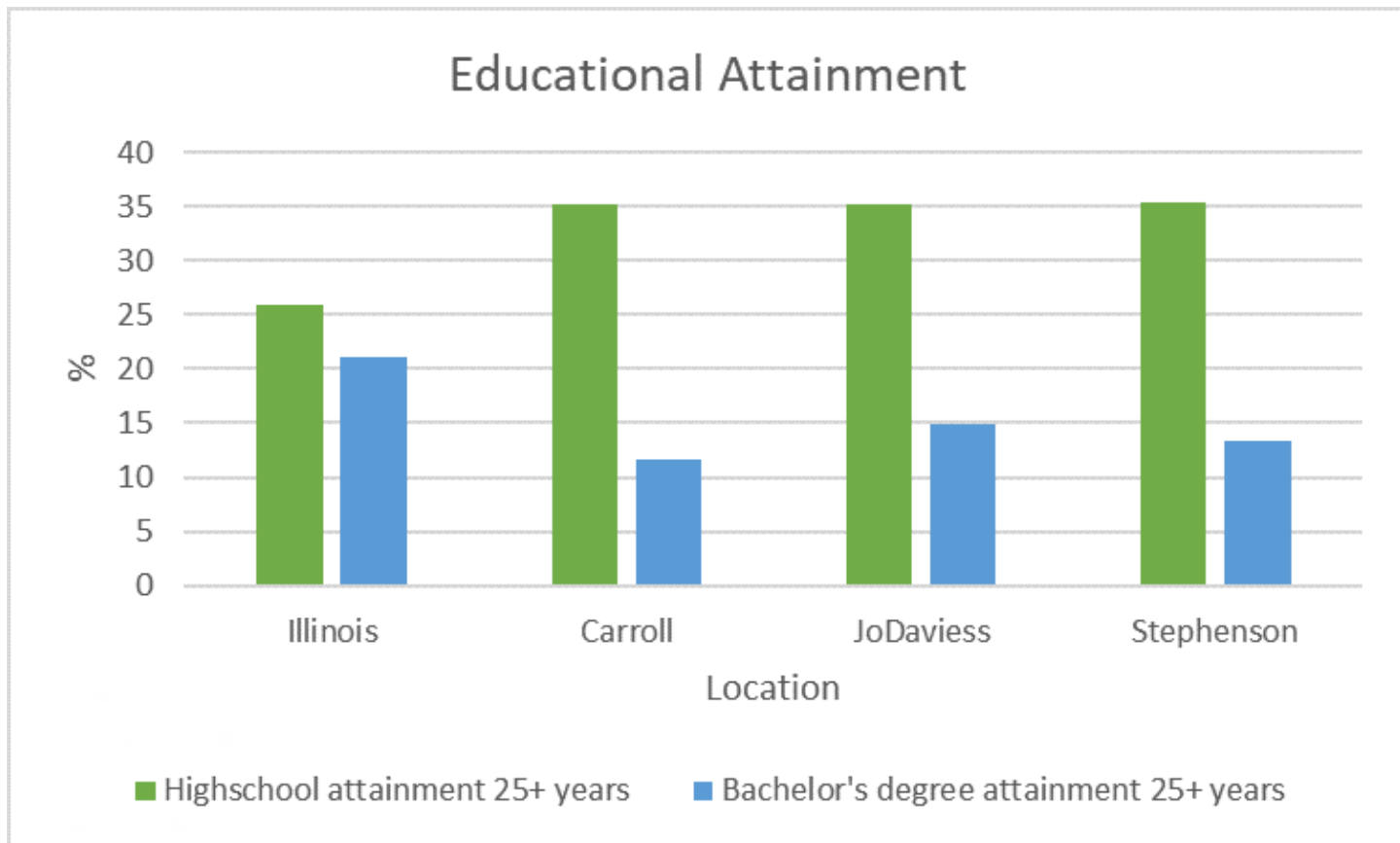
The child poverty rate in the service area reflects similar demographics – it is lower in the area when taken overall but significantly higher in Stephenson County (nearly twice the level in Carroll and Jo Daviess counties), again likely due to the more diverse population and different job mix in the city of Freeport.

	Carroll County	Jo Daviess County	Stephenson County	FHN Community	Illinois	USA
Total Population	15,702	22,035	44,630	82,637	12,716,164	326,569,308
Population Under Age 18	2,717	4,068	9,559	16,344	2,852,051	72,235,700
Population Under Age 18 in Poverty	353	445	1,899	2,697	488,516	13,377,778
Percent Population Under Age 18 in Poverty	13.0%	10.9%	19.8%	16.5%	17.1%	18.5%

US Census Bureau 2020

## Education

Noted below, educational attainment in the FHN community is significantly higher than Illinois at the high school level, however, Illinois outranks all three FHN service area counties with a population over 25 years old having Bachelor's degrees



FHN can help more in educating community members on health-related topics and implementing preventive care strategies.

— 2022 FHN Survey Comment

## Violent Crimes

The violent crime rate in Jo Daviess County is the highest of the three counties in the FHN community at 131 crimes per 100,000 population, compared to Stephenson and Carroll Counties at 128 and 47, respectively. The entirety of the FHN community has a much lower violent crime rate than the rate in Illinois and the USA overall.

	Violent Crime Rate per 100,000
Carroll County	47
Jo Daviess County	131
Stephenson County	128
Illinois	403
USA	367

FBI Uniform Crime Reports 2019\*, County Health Rankings

Because of all the misinformation given during the pandemic, there is likely to be more mistrust in healthcare.

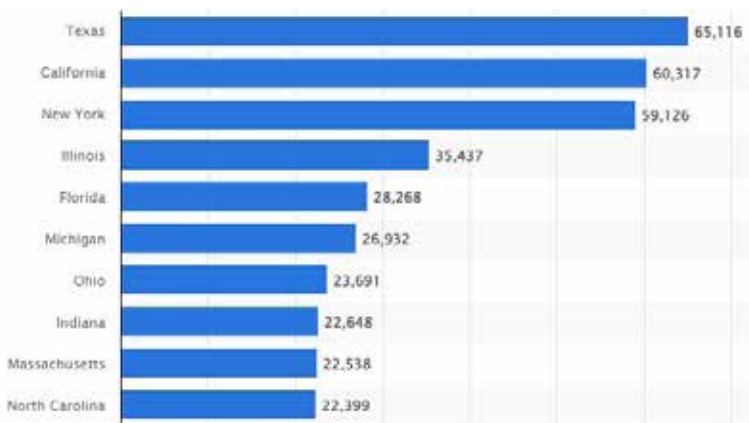
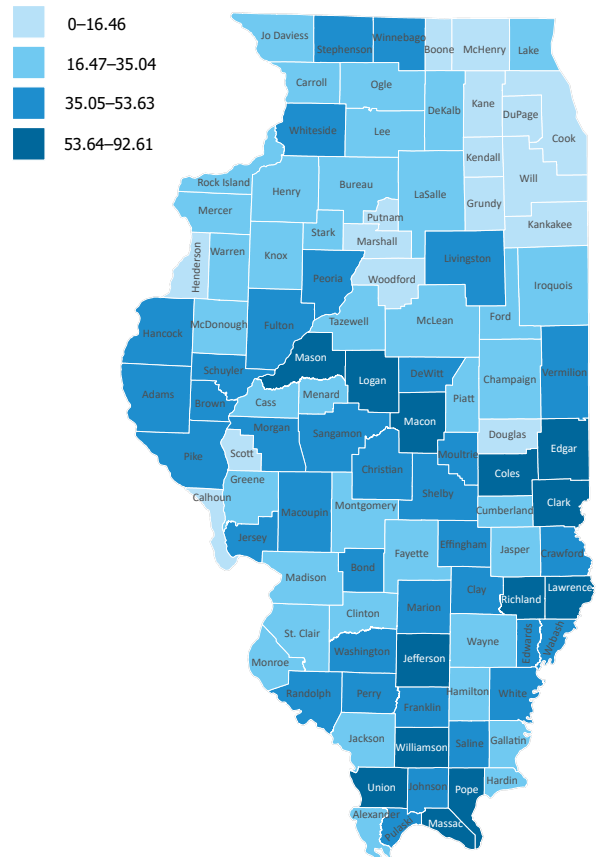
– 2022 FHN Survey Comment

## Rate of Child Abuse and Neglect (2019)

The rate of child abuse and neglect is higher in Carroll, Jo Daviess, and Stephenson Counties than the state average (only ranges are available at this time, but as shown, all three counties are above the state overall statistically significant levels). Sadly, Illinois ranks fourth in this category nationwide, behind Texas, California, and New York.

	Rate of Child Abuse and Neglect*
Carroll County	16.47–35.04
Jo Daviess County	16.47–35.04
Stephenson County	35.05–53.63
Illinois	12.8

\*per 1,000 children under age 5  
[iecam.illinois.edu/browse/data/child-abuse-and-neglect](http://iecam.illinois.edu/browse/data/child-abuse-and-neglect)



[www.statista.com/statistics/203841/number-of-child-abuse-cases-in-the-us-by-state](http://www.statista.com/statistics/203841/number-of-child-abuse-cases-in-the-us-by-state)

[iecam.illinois.edu/browse/data/child-abuse-and-neglect](http://iecam.illinois.edu/browse/data/child-abuse-and-neglect)

# Accessing Providers and Transportation

## MUA and HPSA Summary

### MUA/MUP

Stephenson County's Winslow Service Area and both Carroll and Jo Daviess Counties include census tracts (MUAs 796 and 809, respectively) designated medically underserved areas (MUAs) by the Health Resources and Services Administration (HRSA). Additionally, the low-income population of the North Freeport Service Area is considered to be a medically underserved population (MUP). This MUP applies to census tracts CT 0007.00, 0008.00, 0009.00, and 0012.00. The MUA or MUP designation is developed by HRSA and indicates that a combination of four components exists in the area or population, respectively:

- A low ratio of primary medical care physicians per 1,000 population
- A high infant mortality rate
- A high percentage of the population with incomes below the poverty level
- A high percentage of the population age 65 or over.

The resulting Index of Medical Underservice (IMU) of these components must be equal or less than 62.0 in order to be designated as an MUA and/or MUP.

### HPSA

Carroll, Jo Daviess, and Stephenson Counties have health professional shortage areas (HPSAs) for primary care providers, dental providers, and/or mental health providers. The HPSA designation is developed by HRSA, and indicates that an area or population either:

- Has a population to full-time-equivalent primary care physician ratio of at least 3,500:1
- Has a population to full-time equivalent primary care physician ratio of less than 3,500:1, but greater than 3,000:1 with unusually high needs for primary care services or insufficient capacity of existing primary care providers

Additional criteria include the percentage of the population below 100% of the Federal Poverty Level (FPL) and travel time to the nearest source of care (NSC) outside the HPSA designation.

To be considered an HPSA for primary care providers, the designated area is scored between 0 and 25, with higher numbers indicating greater need. Dental need HPSAs are scored between 0 and 26, and mental health HPSAs are scored between 0 and 25.

[www.hhs.gov/guidance/document/hpsa-and-muap-hpsa-scoring-criteria](http://www.hhs.gov/guidance/document/hpsa-and-muap-hpsa-scoring-criteria)

HPSAs for primary care providers include:

- The entirety of Carroll County including correctional facility in Thomson
- The low-income population of Stephenson County

HPSAs for dental providers include:

- The entirety of Carroll County including correctional facility in Thomson
- The low-income population of Stephenson County

HPSAs for mental health providers include:

- The entirety of Carroll County including correctional facility in Thomson
- The entirety of Jo Daviess County
- The low-income population of Stephenson County

For more detail, please see Appendices.

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Providing healthcare  
to underserved  
populations ... is one of  
the greatest challenges  
that we face.

– 2022 FHN Survey Comment

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## Preventable Hospitalizations (2019)

Hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees

	Rate
Carroll County	3,357
Jo Daviess County	4,618
Stephenson County	3,492
Illinois	4,447

County Health Rankings

Preventable hospitalizations of Medicare enrollees (the most accurate demographic measurement available for national comparison) due to ambulatory care sensitive conditions (ACSCs) in the FHN community are somewhat lower than the rate in Illinois overall. An ambulatory-care sensitive condition diagnoses usually represents a condition that could potentially be treated in an outpatient setting rather than in the hospital.

## Primary Care Population to Physician Per 100,000 (2019)

	Ratio
Carroll County	21
Jo Daviess County	47
Stephenson County	43
Illinois	81
USA	230

County Health Ranking and America Health Rankings

As seen above, there is a significant gap in the community population to primary care providers in the FHN community. Community survey respondents noted that there is a general lack of knowledge about access points for different types of care and how to use the healthcare system within the community.



People with  
chronic diseases  
need to be  
proactive, not  
reactive.

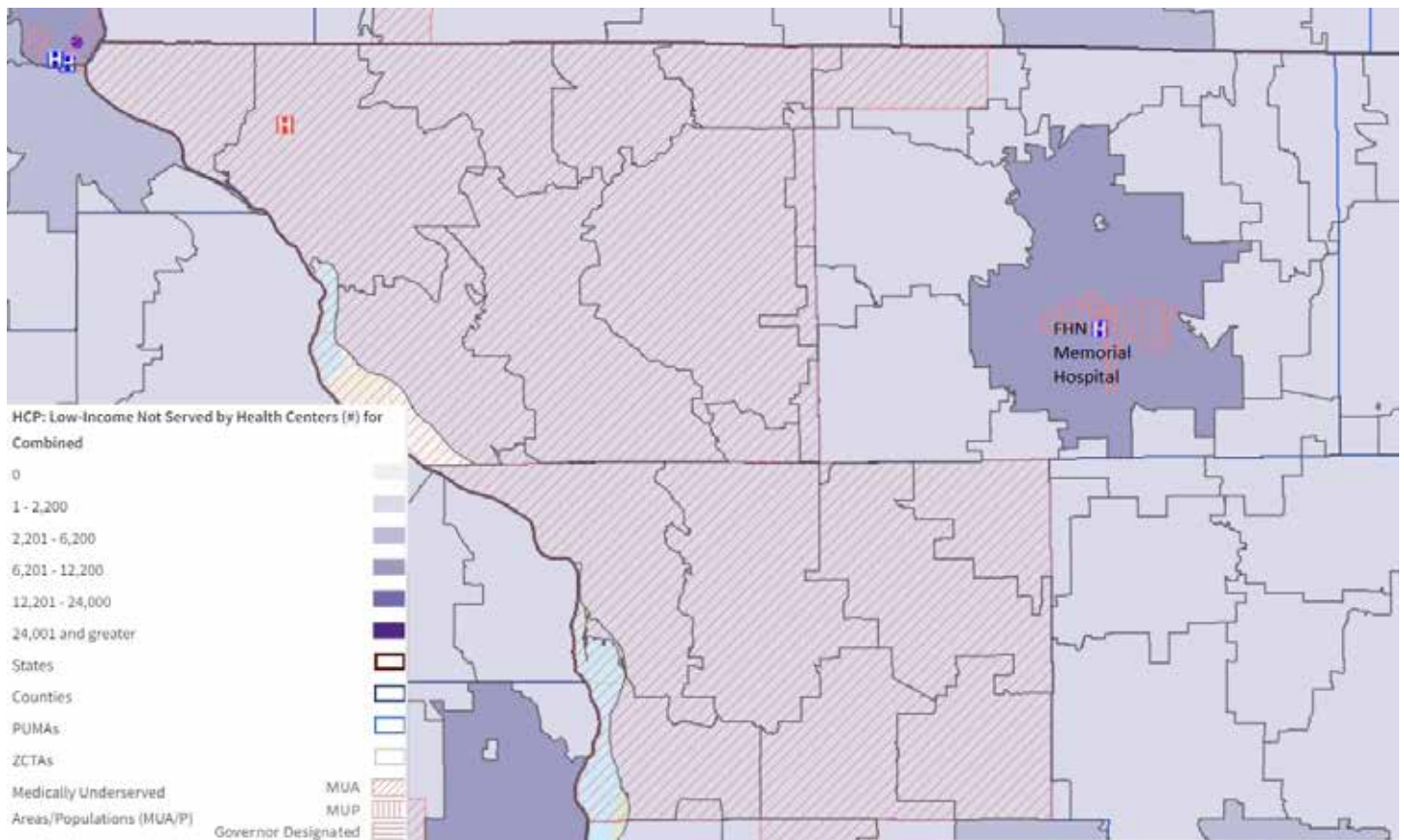
- 2022 FHN Survey Comment

## Access to Care for Low-Income Individuals and Families

Transportation in general within the community was also noted as an obstacle to residents seeking medical care. A lack of affordable, convenient transportation – including wheelchair transportation or other options for disabled individuals – was also recognized as a barrier. This affects vulnerable populations such as low-income individuals and seniors within the community more heavily. Respondents noted that public transportation in Freeport was particularly challenging due to the logistics and cost to use the system.

As demonstrated below, there are no Federally Qualified Health Centers (FQHCs) in the Freeport area to serve low-income individuals. There is only one Rural Health Center, and there are no FQHCs or Health Center Program (HCP) Grantees. An HCP Grantee is an organization that receives grant funding under section 330 of the Public Health Service Act. The majority of HCP Grantees are funded to serve a general underserved community or population.

### Low-Income Population Not Served by HCP Grantees, 2020



Overall, financial barriers to care are a frequently mentioned health concern within the FHN Memorial Hospital community. Respondents recounted financial and health insurance barriers as one of the most significant access issues in the hospital community, in part based on media coverage of uncertainty at a national level related to potential changes to the Affordable Care Act, including Medicaid coverage. Inadequate health insurance coverage was cited as one reason individuals may not seek preventive care and staying well. More local/regional education is needed to clarify for the community what services are available at the hospital versus other care locations to help mitigate; for example, the fact that some low-income families seek primary care in the Emergency Room at FHN Memorial Hospital needs to be addressed in order to ensure the right care is delivered at the right time and right place.

# Community Needs, Behaviors, and Risk Factors

## Community Need Index

The Community Need Index (CNI) indicates that cities in the FHN community experience considerable barriers to accessing health care. The CNI is a rating system that accounts for the underlying economic and structural barriers that affect access to health care, related to income, culture/language, education, insurance, and housing. A CNI score of 1 represents less community need, and a score of 5 represents the highest community need. In the FHN community, there are relatively high socio-economic barriers to health care in Savanna (61074) and Freeport (61032).

### Carroll County

Zip Code	CNI Score
61053	2.8
61074	3.8
61285	2.6
61014	2.2
61051	2.8
61046	2.4
61078	1.8

### Jo Daviess County

Zip Code	CNI Score
61025	2
61036	2
61041	3
61028	2.2
61085	3
61001	2
61087	2.4
61059	2.8
61075	1.4

### Stephenson County

Zip Code	CNI Score
61089	2.4
61050	2.2
61048	2.2
61062	1.8
61044	2.6
61032	3.4
61039	1.6
61067	2
61018	2
61019	1.4
61060	2.4
61070	1.4

Dignity Health, 2021



It is helpful, convenient, and reassuring to have quality healthcare available so close to home at FHN.

- 2022 FHN Survey Comment

## Mortality Indicators

The leading causes of death in the FHN community per 100,000 population include cancer, heart disease, and unintentional injury. Lung disease is significantly higher in all three counties than the state overall. Falls were a significant element of unintentional injury deaths when reviewing the data in more detail. Suicide was also significantly higher in both Jo Daviess and Stephenson Counties than the state, reflecting the need for more behavioral health services.

### Age-adjusted Death Rate per 100,000 Population by Cause in 2020

	Illinois	Carroll County	Jo Daviess County	Stephenson County	FHN Community
Heart Disease	171.52	202.8	173.78	167.21	181.26
Cancer	150.91	175.17	126	184.01	161.73
Lung Disease	34.06	140.44	84.75	50	91.73
Cerebrovascular Disease (Stroke)	42.35	70.22	61.21	37.64	56.36
Unintentional Injury	53.27	119.37	94.17	81.78	98.44
Infant Mortality	6.9	9.7	4.7	6.9	6.8
Suicide	10.5	suppressed	17	14	13.1
COVID-19	99.08	83.87	58	75.96	72.6

IDPH and County Health Rankin

Overall, COVID-related deaths in FHN's service area were lower than the state average; FHN Memorial Hospital played a significant role in outreach to the community in furtherance of this outcome.

## Cancer

Although frequently a cause for concern in many communities, the incidence of cancer per 100,000 throughout the FHN Community – while still a health concern that of course requires attention – is actually lower for almost all forms of cancer than what is seen in the state. While we do not have comparative data to prove the point, we believe this can be attributed in no small part to the presence of the Leonard C. Ferguson Cancer Center at FHN Memorial Hospital, which provides university-level cancer treatment very close to most people's homes in the area, making it more convenient to receive care and reduce cancer mortalities.

### Age-Adjusted Incidence Rate per 100,000 Population 2015-2019

	Illinois	Carroll County	Jo Daviess County	Stephenson County	FHN Community
Breast (female)	132.8-135.2	123.4	107.1	114.2	114.9
Colon/rectum	40.8-41.8	37.7	32.8	35.9	35.5
Lung	60.7-61.8	47.9	55.5	54.4	52.6
Prostate	112.21-114.4	110.1	104.9	76.7	97.2

State Cancer Profiles and CDC.gov



## Behavior Indicators

### Physical Inactivity, Diabetes, and Obesity

A lack of education about healthy behaviors can be a driver of health issues within the community. Correspondingly, lack of education about seeking preventive care can be a major contributor to mortality rates. Community education on healthcare topics has been a priority for FHN for the last three years and will continue to be for the foreseeable future. Data below indicate areas where education may be focused, although general health and wellness education will continue to be important as each of the focus areas reflects an overall lack of attention to healthy choices and prevention of disease.

Throughout the FHN service area, our constituents are less active than the state and national averages, although not by a great deal.

#### Physical Inactivity (2022)

	Percent
Carroll County	27%
Jo Daviess County	25%
Stephenson County	28%
FHN Community	26.6%
Illinois	25%
United States	25%

County Health Rankings and CDC

#### Diabetes in Adult Population (2022)

	Percent
Carroll County	9%
Jo Daviess County	9%
Stephenson County	10%
FHN Community	9.3%
Illinois	12.5%
United States	11.3%

County Health Rankings and CDC

#### Clinical Obesity in Adult Population (2022)

	Percent
Carroll County	35%
Jo Daviess County	35%
Stephenson County	37%
FHN Community	35.6%
Illinois	32%
United States	41.9% (2020)

County Health Rankings and CDC

Factors like poor nutrition, dietary choices, and limited exercise are behaviors affecting weight, leading to obesity. Poverty and low levels of education are also social determinants that clearly affect community residents' ability to stay healthy with recommended levels of exercise and a nutritious diet. It should be noted that the clinical obesity rate for the entire nation in 1999 was 30.5% as compared to 41.9% in 2022 – this is a national area of health concern.



## Low Birth Rate and Teen Births

Low birth weight data can be indicative of lower-quality prenatal care: Carroll and Jo Daviess counties are close to or lower than state and national averages, Stephenson County is higher, again increasing the percentage for the FHN service area and likely due to demographics in Freeport.

### Low Birth Weight Percentage (2020)

	Percent
Carroll County	6%
Jo Daviess County	7%
Stephenson County	9%
FHN Community	7.3%
Illinois	8%
United States	8.24%

County Health Rankings and CDC



### Teen Births (Mothers <= 19 years of age)

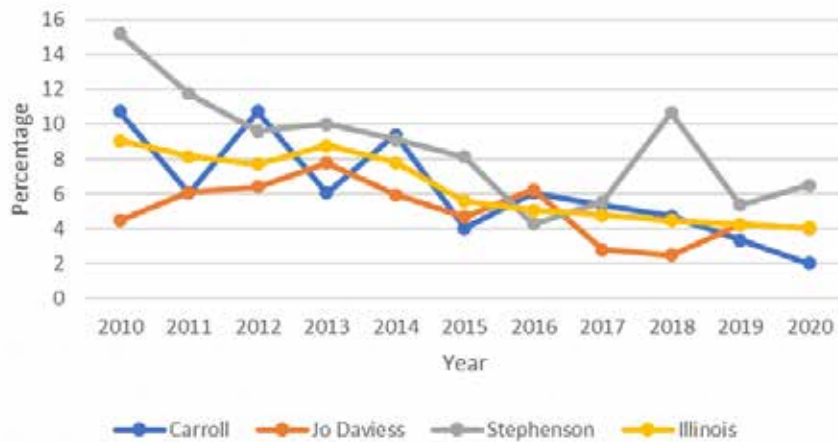
	2010	2020
Carroll County	16	3
Jo Daviess County	8	6
Stephenson County	74	30
FHN Community	98	39
Illinois	14,955	5,424
United States	367,752	158,043

IDPH and CDC

FHN does well any time,  
but adding COVID  
was quite something.  
– 2022 FHN Survey Comment



Teen Birth Trends from 2010-2020



# Risk Factors in FHN Community

## Risks in Adults

The risk factors for unhealthy behaviors in adults in FHN’s Community are higher, when compared with the data for Illinois and the US overall, and have increased since 2019.

### Tobacco Use

	2019	2021
Carroll County	15%	21%
Jo Daviess County	13%	19%
Stephenson County	17%	21%
FHN Community	15%	20.3%
Illinois	16%	14.5%
United States	14.5%	-

County Health Rankings and CDC

### Excessive Drinking

	2019	2021
Carroll County	20%	23%
Jo Daviess County	20%	23%
Stephenson County	19%	21%
FHN Community	19.6%	22.3%
Illinois	21%	22%
USA	19%	-

County Health Rankings and CDC

## Top 10 Reasons for Hospitalization for Patients in Carroll, Jo Daviess, and Stephenson Counties in 2021

Another way to look at risk factors is to examine the most common reasons people are hospitalized at FHN Memorial Hospital. For 2021, the reasons below were the most common reasons for residents of Carroll, Jo Daviess, and Stephenson Counties.

Rank	Diagnosis	Number of Patients
1	Respiratory Infections and Inflammations	254
2	Normal Newborn	145
3	Vaginal Delivery w/o Sterilization/D&C	132
4	Heart Failure and Shock	102
5	Septicemia or Severe Sepsis w/o Mechanical Ventilation	94
6	Neonate w/Other Significant Problems	75
7	Pulmonary Edema and Respiratory Failure	52
8	Cellulitis	48
9	Gastrointestinal Hemorrhage	45
10	Simple Pneumonia and Pleurisy	43
10	Cesarean Section w/o Sterilization	43

I would like to see more in-person interaction between FHN and community groups through meetings and forums.

- 2022 FHN Survey Comment



Twice during the pandemic, FHN Memorial Hospital was required to develop new delivery of care models due to the large number of patients hospitalized with COVID-19. The hospital and its staff pivoted very quickly to be able to cope with the influx and was largely able to care for the majority of COVID-19 patients admitted during the height of the pandemic.

## Risks in Adolescents

Acknowledging the reality that the adolescents of today will be the adults of tomorrow, it's important to understand the risks the young people of FHN's service area are experiencing. While many of the types of services they require for health and well-being are the same as adults, they need to be delivered in different ways due to their age, the importance of involving their parents or others who are raising them, and the fact that they are influenced by very different factors than adults.

Primary data collected by FHN Family Counseling indicates that adolescents in Stephenson and Jo Daviess Counties have a number of adverse conditions to overcome. With only 37% of age appropriate students responding, the chart below indicates the percentage of students in three grades from two counties who responded to FHN's 2022 State of Our Youth study as having recently experienced the conditions or used the substances shown (studies for both 2020 and 2022 were used for the data in these tables – only the study for 2022 appears in the appendices but copies of the 2020 study can be provided upon request).

### Stephenson County

	8 <sup>th</sup> Grade		10 <sup>th</sup> Grade		12 <sup>th</sup> Grade	
	2020	2022	2020	2022	2020	2022
Physical Inactivity (4-5 hours or more/day)	54%	49%	50%	57%	54%	54%
Alcohol Use	8%	25%	25%	31%	33%	44%
Tobacco and Vaping Use	-	13%	-	18%	54%	27%
Marijuana Use	0%	8%	11%	17%	23%	23%
Other Substance Abuse*	-	3%	-	5%	23%	5%
Depression**	28%	335	36%	48%	40%	30%
Seriously considered suicide in the last 12 months	-	-	-	20%	-	12%
Bullying	42%	44%	43%	35%	31%	26%

\*Prescription drugs NOT prescribed to you

\*\*Felt so sad or hopeless every day for two weeks or more in a row that they stopped doing usual activities

### Jo Daviess County

	8 <sup>th</sup> Grade		10 <sup>th</sup> Grade		12 <sup>th</sup> Grade	
	2020	2022	2020	2022	2020	2022
Physical Inactivity (4-5 hours or more/day)	35%	33%	51%	36%	43%	34%
Alcohol Use	11%	13%	37%	11%	30%	30%
Tobacco and Vaping Use	Total for 8 <sup>th</sup> , 10 <sup>th</sup> and 12 <sup>th</sup> graders: there was an overall decrease of 28% less for tobacco and vaping products from 2020 (there was a 9% decrease from 2020 for cigarettes specifically)					
Marijuana Use	3%	2%	15%	3%	23%	13%
Other Substance Abuse*	Total for 8 <sup>th</sup> , 10 <sup>th</sup> and 12 <sup>th</sup> graders: overall, 7% of students said that they had used prescription drugs not prescribed for them					
Depression**	Total for 8 <sup>th</sup> , 10 <sup>th</sup> and 12 <sup>th</sup> graders: overall, 12% of students said that they seriously considered suicide in the last 12 months					
Seriously considered suicide in the last 12 months	Total for 8 <sup>th</sup> , 10 <sup>th</sup> and 12 <sup>th</sup> graders: overall, 12% of students said that they seriously considered suicide in the last 12 months					

\*Prescription drugs NOT prescribed to you

\*\*Felt so sad or hopeless every day for two weeks or more in a row that they stopped doing usual activities

## Risks in Infants and Toddlers

According to the CDC. As identified in 2020, the five leading causes for infant mortality in the USA are:

1. Birth Defects
2. Preterm births and low birthweight
3. Sudden Infant Death Syndrome (SIDS)
4. Injuries (e.g. suffocation)
5. Maternal pregnancy complications



## Preterm and Low Birth Weight

About every 1 in 10 infants is born preterm in the United States; according to the CDC, the preterm birth rate rose 4% in 2021, from 10.1% in 2020 to 10.5% in 2021. That means on average 10% of babies have a higher chance of death or disability in their life due to being born too early (before 37 weeks). These disabilities could include breathing problems, feeding difficulties, developmental delay, cerebral palsy, and vision or hearing problems. This risk changes with different demographics: as has been well documented through many sources, the African American community seems to have the highest prevalence of preterm births. In 2021, the rate of preterm birth among African-American women (14.8%) was about 50 percent higher than the rate of preterm birth among white or Hispanic women (9.5% and 10.2% respectively). Accordingly, FHN is incorporating this information within the tactics of its Implementation Strategy.

### Pre-Term and Low Birth Weights

	2010 Total Births	Pre-term	Percentage	Low Birth Weight	Percentage
Carroll County	149	17	11.4%	18	12.1%
Jo Daviess County	179	9	5.0%	10	5.6%
Stephenson County	487	48	9.9%	44	9.0%
FHN Community	815	74	9.1%	76	9.3%
Illinois	165,200	16,928	10.2%	13,706	8.3%
USA	3,999,386	478,790	12.0%	327,950	8.2%

	2020 Total Births	Pre-term	Percentage	Low Birth Weight	Percentage
Carroll County	135	7	5.2%	8	5.9%
Jo Daviess County	149	16	10.7%	10	6.7%
Stephenson County	462	49	10.6%	43	9.3%
FHN Community	746	72	9.7%	61	8.2%
Illinois	133,298	13,733	10.3%	11,057	8.3%
USA	3,604,201	364,487	10.1%	297,604	8.2%

## Behavioral Health in the Overall FHN Community

Following the closure of many mental health treatment centers in Illinois in recent years, the importance of addressing behavioral health services in a more robust fashion arose from a number of sources, including the Connect the D.O.T.S. group, FHN's emergency department statistics, and the Stephenson County Health Department County Analysis 2019. The need for mental/behavioral health care was also a major priority in responses from the community in the survey completed for this report.

For example, in the Medicare population alone...

### Depression in the Medicare Population (2020)

	Percent
Carroll County	14%
Jo Daviess County	13%
Stephenson County	17%
Illinois	16%
United States	13%

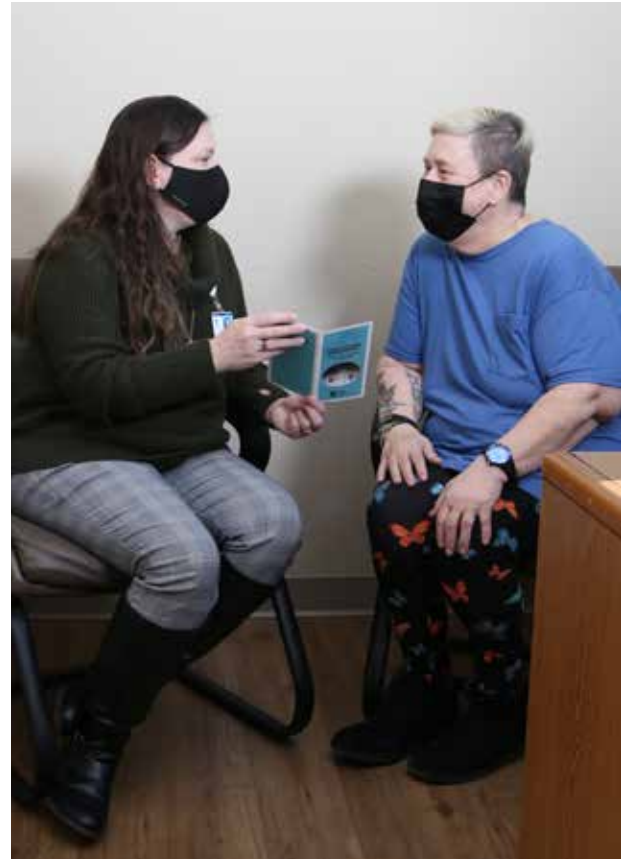
In addition, psychoses was identified as the fourth leading non-COVID-19 cause of hospitalization (the most recent available leading reasons appear below).

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The negative stigma or lack of understanding regarding mental healthcare is definitely a barrier.

– 2022 FHN Survey Comment

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As a rural healthcare organization, FHN took note of a 2020 study by the CDC that reinforces the increase in behavioral health problems in the farming community. The study uses suicide data from 32 states – including Illinois – that showed a significant increase in the suicides rates for five industry groups:

- Mining, quarrying, and oil and gas extraction (males)
- Construction (males)
- Other related services (e.g., automotive repair – males)
- Agriculture, forestry, fishing, and hunting (males)
- Transportation and warehousing (males and females)

In the past two decades, suicide deaths have been consistently higher in rural America than in urban America. Between 2000-2020, suicides increased 46% in non-metro areas compared to 27.3% in metro areas. This increase was observed in working age individuals (16-64) and it has been reported that farmers die from suicide at a higher rate than the general population, likely due to job uncertainty and reluctance to seek help. These statistics are very concerning for a rural and agriculturally dominant community such as FHN's service area and are being addressed within the tactics of the Implementation Strategy.

[www.cdc.gov/ruralhealth/Suicide.htm](https://www.cdc.gov/ruralhealth/Suicide.htm)

## Community Health Resource Review

There are many different providers and medical resources available within the FHN community, although FHN Memorial Hospital is the only facility within the community available to address inpatient care needs. Financial discounts or financial assistance are available for uninsured, underinsured and economically disadvantaged patients.

FHN has 11 primary care offices and multiple outpatient facilities for specialized care, all of which offer medical care regardless of ability to pay, financial assistance to those in financial need, or discounts to uninsured patients. An FHN-affiliated urgent care facility is located in Freeport as well as FHN Family Counseling. FHN offers telehealth provider visits for both physical and mental healthcare (via phone or video).

For more detailed information, please see Community Health Resources in the Appendices.

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We need assistance  
with transportation  
and getting affordable  
help at home.

– 2022 FHN Survey Comment

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