

2022

Community
Health Needs
Assessment



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Early Childhood



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INTRODUCTION

In 1850, John Kirby left his home in Limerick County, Ireland, and headed for America. When he eventually settled in Monticello, Illinois, he could not have imagined that someday he would be revered as a great community leader. Today, more than 90 years after his passing, his legacy as a community philanthropist remains.

The original John and Mary E. Kirby Hospital was located in one of the majestic mansions of Monticello and opened for business in 1941. In the early 1970s, a new Kirby Hospital was built on that same location and would serve the community and Pike County for the next 30 years. Kirby Ambulance Service began in 1974.

In 2011, the new Kirby Medical Center began providing care at its current location. In 2015, Kirby Medical Center began a Wellness Trail on its campus. In 2016, KMC Active opened on the campus. In 2019, KirbyRx Retail Pharmacy opened. The pharmacy expanded to a second location in Monticello in 2020. A new Kirby Medical Center clinic opened in Cerro Gordo in 2016, and a replacement clinic was built and opened in Atwood in 2021.



EXECUTIVE SUMMARY

Provisions in the Affordable Care Act (ACA) require charitable hospitals to conduct a Community Health Needs Assessment (CHNA). The CHNA is a systematic process involving the community to identify and analyze community health needs as well as community assets and resources in order to plan and act upon priority community health needs.

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

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

ICAHN, with 57 member hospitals, is an independent network governed by a nine-member board of directors, with standing and project development committees facilitating the overall activities of the network. ICAHN continually strives to strengthen the capacity and viability of its members and rural health providers.

This Community Health Needs Assessment will serve as a guide for planning and implementation of healthcare initiatives that will allow the hospital and its partners to best serve the emerging health needs of Monticello and the surrounding area. The CHNA process was coordinated by the Chief Compliance Officer service at Kirby Medical Center.

Two focus groups met to discuss the state of overall health and wellness in the Kirby Medical Center service area and to identify health concerns and needs in the delivery of healthcare and health services in order to improve wellness and reduce chronic illness for all residents. The focus groups included representation of healthcare providers, community leaders, community services providers, schools, faith-based organizations, local elected officials, public health and others. Several members of these groups provided services to underserved and unserved persons as all or part of their roles.

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

IDENTIFICATION AND PRIORITIZATION > ADDRESSING THE NEED

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



Creating a Post-COVID Response



Addressing Transportation Gaps



Locations and Patterns of Poverty



Mental Health and Wellness Needs

- 1. Create a community-wide post-COVID response for adults and youth**
- 2. Identify and address gaps in transportation related to:**
 - Flexibility in and outside of Kirby Medical Center service area for transportation to and from local appointments
 - Transportation to out-of-the-area substance use disorder and other mental health services
- 3. Identify location and patterns of poverty within the Kirby Medical Center service area and address issues related to scattered or isolated poverty**
- 4. Identify and plan to address mental health and wellness needs across the Kirby Medical Center service area**

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

ADDRESSING THE NEED > CREATING THE PLAN

The group addressed the needs with the following strategies:

- Kirby Medical Center will collaborate with local officials, providers, agencies, and organizations within communities served to recognize the potential post-COVID needs of the communities and begin to analyze, assist, and move together toward solutions.

- Kirby Medical Center will investigate ways to make availability of KMC van service better known.
- Kirby Medical Center will collaborate with the Piatt County Sheriff to explore transfers out-of-the-area for mental health and substance use disorder services.
- Kirby Medical Center will utilize new U.S. Census and other data in combination with input from local government officials and community and faith-based organizations to identify poverty in the smaller communities and rural areas, analyze its impact to health and wellness, and plan for mitigation.

BACKGROUND

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

Kirby Medical Center will start a geriatric behavioral health program

- Kirby Senior Life Solutions started in the spring of 2020

Kirby Wellness Services

- Free service that combines physical and mental health wellness services started in 2020
- Kirby Medical Center implemented free COVID rapid testing for Piatt County student and school faculty

Kirby Medical Center will hire a new Licensed Clinical Social Worker

- Another LCSW was hired during the summer of 2019 and advertising for an LCPC (Licensed Clinical Professional Counselor)
- LCPC hired in the fall of 2020
- LCSW services now also offered in Cerro Gordo and Atwood at the clinics

Kirby Medical Center will begin Mental Health First Aid training in the community

- Staff have been trained in this, and KMC has offered to provide to the Ministerial Alliance
- Mental Health First Aid provided to the Ministerial Alliance

Kirby Medical Center will continue to support “Girls on the Run” through the Mattoon YMCA

- Annual program that continues to be staffed by Kirby Medical Center, with 5-10 girls graduating every year

Kirby Medical Center will continue the in-house pharmacy to address pain management

- Continues to be staffed full-time, with regular face-to-face consults between the pharmacist and patients

Kirby Medical Center will explore a retail outpatient pharmacy to collaborate with the clinics

- Opened November 2019
- Second location opened November 2020 on Market Street

Kirby Medical Center will continue and expand corporate health services

- New Wellness Coordinator has been hired and has made an immediate impact and connection with patients from Kirby Medical Group and also its employees
- The Wellness Coordinator is working directly with corporate health partners for bi-annual lab and health metric testing

Kirby Medical Center will continue and expand the internal employee health program

- KMC has continued the program and continues to tweak and improve it
- KMC will continue Seniors Active and Independent for Life (SAIL). The program has relocated to the Community Building where the class size can be increased and also, there is more room for social distancing.

Kirby Medical Center will expand dietitian services for weight loss

- KMC has moved away from the Fresh Start/Ideal Protein program with new food and a more streamlined, non-keto program that is proving successful

Kirby Medical Center will continue intensive behavioral therapy

- This continues and has proven successful

Kirby Medical Center will continue to develop recreation and exercise opportunities on the Kirby Medical Center campus, in conjunction with the YMCA

- Kirby Medical Center has expanded the KMC Active programs to include KMC30. Other programs like Endurance and Olympic weightlifting have also been added.
- The YMCA collaboration on the hospital campus has not worked out, and KMC remains interested in helping the YMCA establish somewhere else in the community. The YMCA is considering a Y Express in the Lincoln School building when it is vacated. Monticello schools have put the Lincoln School up for sale with no further interest from the Clinton YMCA.
- Kirby Medical Center will continue Neighborhood Medic welfare checks and chronic care management through Kirby Medical Group ACO activities and case management.
- Kirby Medical Center announced the development of the new Kirby Therapy & Wellness Center, a 22,000 square foot building that will house therapy, wellness, cardiac rehab, pulmonary rehab, dietitians, and KMC Active under one roof.

Kirby Medical Center will support local partners that are attempting to address food insecurity as reasonably possible

- Kirby Medical Center financially supports the operations and capital improvements of the East Illinois Foodbank that serves areas in Piatt County
- Kirby Medical Center will continue to collect food to support local food providers through employee programs

Kirby Medical Center will explore a hospital-owned retail pharmacy that will utilize 340b program funds to improve access to affordable medication

- Kirby Rx has opened and offers 340b discounts. Additionally, hours are expanded and over-the-counter medications are offered for a steep discount.
- Kirby Rx #2 opened on November 2, 2021 on Market Street, and this location will now be able to offer 340b discounts to clients and the potential of expanding DME (durable medical equipment) services.

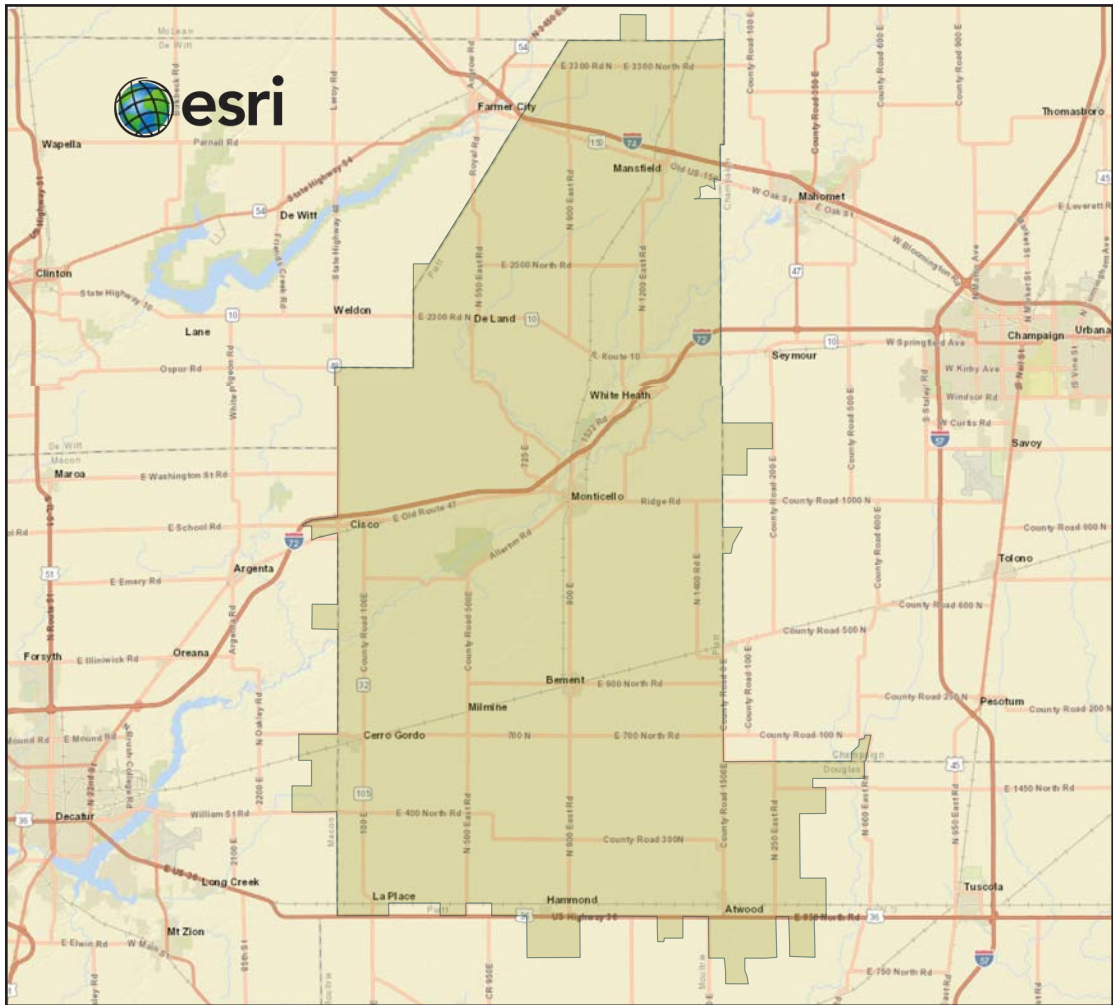
Kirby Medical Center will explore partnerships with local clergy to support transportation needs beyond what Piattran can provide

- This was explored following the community meetings, and a contact number was given. When called, the message went to a machine with no response. That clergy is no longer in the local ministry, and contact will be made with the Ministerial Alliance leader to see if there is another option.
- Kirby Medical Center has purchased a MediVan that can be used to transport patients to and from the outlying clinics, as well as from the Emergency Department when other transportation is not available.

A small number of expected activities were not completed, largely because of COVID-19 and staffing issues but they remain under review.



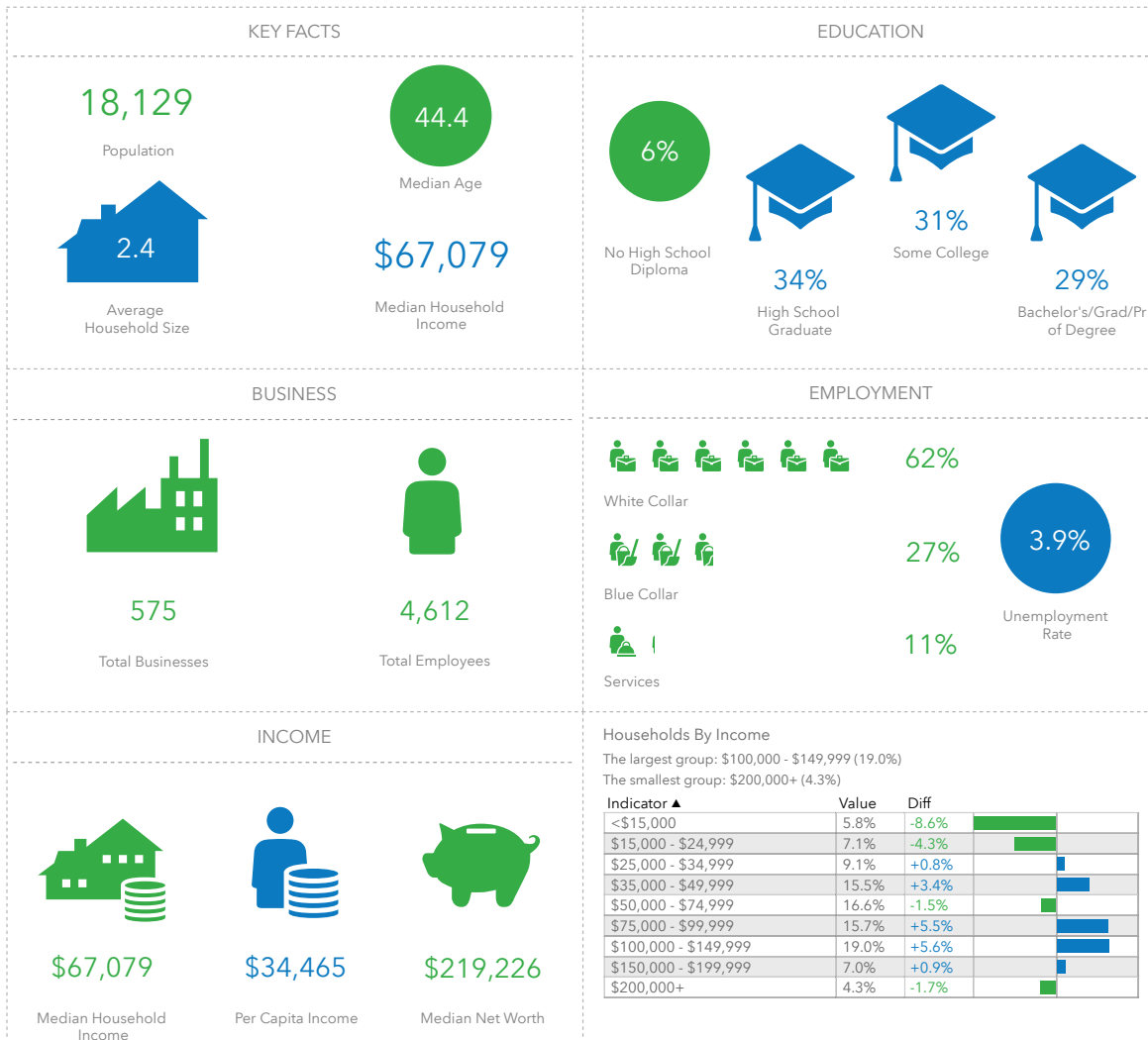
AREA SERVED BY KIRBY MEDICAL CENTER



For the purpose of this CHNA, Kirby Medical Center has defined its primary service area and populations as the general population within the geographic area in and surrounding Monticello, defined in detail below. This includes all of Piatt County and some adjoining locations. The hospital's patient population includes all who receive care without regard to insurance coverage or eligibility for assistance. A total of 16,847 people live in the 445.75 square mile report area defined for this assessment, according to the U.S. Census Bureau American Community Survey 2015-19 5-year estimates. The population density for this area, estimated at 38 persons per square mile, is less than the national average population density of 92 persons per square mile.

Monticello	LaPlace	Cisco	Mansfield
Deland	White Heath	Bement	Hammond
Atwood	Cerro Gordo	Milmine	

Kirby Medical Center Service Area – Key Facts



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

The average household size of the area, at 2.42, is lower than both Illinois (3.00) and the U.S. (2.50). Median age is 44.4 years, which is higher than Illinois and the U.S. The largest education segment is high school graduate, followed closely by some college and Bachelor's/Graduate degrees of almost equal measure.

The unemployment rate of 3.9% is lower than statewide and also lower than the U.S. Also, as is the case in much of rural Illinois, median family household income in the service area is lower than statewide.

LOCAL IMPACT OF COVID as of 2/16/22

COVID-19 Confirmed Cases and Mortalities

The COVID-19 epidemic has overshadowed many local health functions since March 2020. It has dramatically impacted overall health of the communities and the delivery of healthcare and health-related services. The broad impact has been seen throughout the communities, changing the way people work, shop, learn, and communicate.

The mortality rate related to COVID-19 in the service area of Piatt County essentially is approximately one-half the rate of the state of Illinois. This indicator reports incidence rate of confirmed COVID-19 cases per 100,000 population. Data for this indicator are updated daily and derived from the Johns Hopkins University data feed. In the Kirby Medical Center-Piatt County service area, there have been 4,285 total confirmed cases of COVID-19. Data are current as of 2/16/2022.

Report Area	Total Population	Total Confirmed Cases
Champaign County, IL	209,983	60,899
Douglas County, IL	19,479	6,384
Macon County, IL	104,712	29,981
Piatt County, IL	16,396	4,285
Illinois	12,741,080	3,004,520
United States	326,262,499	76,585,542

**Confirmed
COVID-19 Cases**

*Note: This indicator is compared to the state average.
Data Source: Johns Hopkins University. Accessed via ESRI.
Additional data analysis by CARES. 2021. Source geography: County*

In the service area, there have been 21 total deaths among patients with confirmed cases of the coronavirus disease COVID-19. Data are current as of 2/16/2022.

Report Area	Total Population	Total Deaths
Champaign County, IL	209,983	279
Douglas County, IL	19,479	51
Macon County, IL	104,712	325
Piatt County, IL	16,396	21
Illinois	12,741,080	32,072
United States	326,262,499	908,705

COVID-19 Mortalities

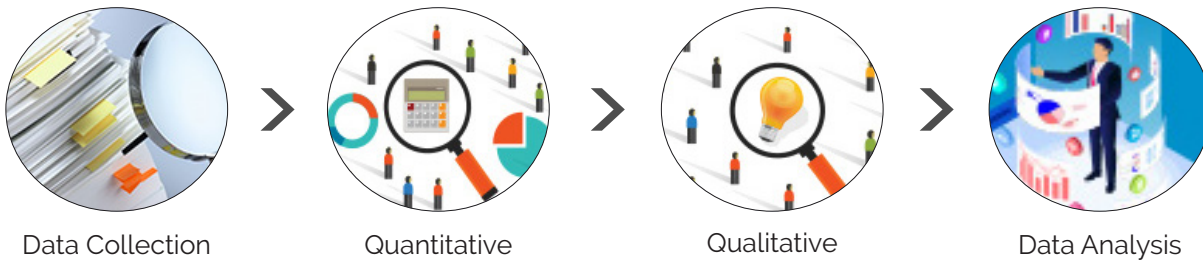
*Note: This indicator is compared to the state average.
Data Source: Johns Hopkins University. Accessed via ESRI.
Additional data analysis by CARES, 2021. Source geography: County*

COVID-19 Fully Vaccinated Adults

This indicator reports the percent of adults fully vaccinated for COVID-19. Data is updated daily from the CDC API. Vaccine hesitancy is the percent of the population estimated to be hesitant towards receiving a COVID-19 vaccine. The Vaccine Coverage Index is a score of how challenging vaccine roll-out may be in some communities compared to others, with values ranging from 0 (least challenging) to 1 (most challenging). Data are current as of 2/16/2022.

Report Area	Percent of Adults Fully Vaccinated	Estimated Percent of Adults Hesitant About Receiving COVID-19 Vaccination	Vaccine Coverage Index	Last Update
Champaign County, IL	70.0%	7.67%	0.44	02/15/2022
Douglas County, IL	58.1%	9.58%	0.76	02/15/2022
Macon County, IL	62.3%	9.52%	0.26	02/15/2022
Piatt County, IL	68.6%	9.86%	0.05	02/15/2022
Illinois	74.4%	7.95%	0.37	02/15/2022
United States	72.2%	10.29%	0.44	02/15/2022

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention and the National Center for Health Statistics, CDC GRASP, 2021.



ESTABLISHING THE CHNA INFRASTRUCTURE AND PARTNERSHIPS

Data Collection

SECONDARY DATA

Description of Data Sources – Quantitative

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

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

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

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

PRIMARY DATA

Two focus groups were convened at Kirby Medical Center on December 9 and 10, 2021. The groups included representation of healthcare providers, community leaders, community services providers, schools, faith-based organizations, local elected officials, public health, and others. Several members of the groups provided services to underserved and unserved persons as all or part of their roles. In response to a request to identify positive developments in health and healthcare in the service area of Kirby Medical Center, the group put forward the following:

Focus Group One – Community Leaders and Partners

- School COVID testing program
- There has been better cooperation/collaboration on many community issues by agencies and organizations of all types
- Kirby Medical Center has expanded mental health services
- IMPACT Coalition
- Collaboration among Kirby Medical Center and schools to address COVID-related issues has grown to include ongoing partnerships
- Partnership between KMC Active and schools
- Excellent teamwork between Monticello Fire Department and Kirby Medical Center Ambulance
- Youth lunch programs have developed in small towns in the county
- Meals on Wheels has adapted well to COVID
- Mental health resources have generally increased
- The stigma around mental health issues and substance use issues and substance use disorders has been reduced
- American Rescue Plan Act funding has supported new programs for youth and others at Public Health and other agencies

- Drug takeback program has expanded
- Local schools are offering a CEO entrepreneurship program for youth supported by Kirby Medical Center and others
- Kirby Medical Center offers a “grow your own” scholarship program for local healthcare professions



“The people of Piatt County really came together to care for our people.”

Focus Group Two – Medical Professionals and Partners

- Strong collaboration among healthcare providers, schools, community organizations, community agencies, and others in response to COVID
- High level of cooperation among healthcare providers to make sure that patients could be seen on a timely basis
- General surgeon
- Mental health counselors
- Cardiology services
- Hand surgeon
- Additional care navigators at Kirby Medical Center
- Continued services for substance use disorder
- Continued services for pain management
- COVID has led to strong collaboration around planning and community life and needs
- Emergency services providers came together in response to COVID
- Kirby Medical Center has adjusted to evolving needs for individual patients and the communities
- Increased collaboration for peer support for persons facing substance use disorders
- Health services are working well together to provide patients with services and options in a spirit of “coopetition”

- A cooperative effort including Kirby Medical Center, other organizations and groups, and area youth has begun a small food pantry project utilizing food pantries made by youth
- Kirby Medical Center is responsive and proactive in addressing staff wellness
- New clinic in Atwood has begun to provide local service to the Amish community there
- New urgent care at Kirby Medical Center



“Health services are working well together to provide patients with services and options in a spirit of collaboration and ‘coopetition.’”

The groups were next asked to identify needs continuing to face the health of the community, including physical and mental wellness and the delivery of health services and care for all segments and members.

Focus Group One – Community Leaders and Partners

- Mental health services to address isolation (COVID, seniors, others)
- Address the loss of population and infrastructure in small communities
- Transportation to out-of-the-area in-patient care for substance use disorders
- Affordable and available rental housing in Monticello
- Continued collaboration on planning for emergencies and disasters
- Better access to nursing home care or home healthcare for seniors
- Crisis training for first responders
- Mental health counseling for youth
- Access to timely and efficient care in the small communities
- Improved access to non-emergency transportation
- A SANE (Sexual Assault Nurse Examiner) Nurse
- Affordable housing – *not just low income*
- Address resource and “brain drain”

- Continue to improve awareness of Kirby Medical Center and its many services, programs, and partnerships
- Address the need for more flexibility in public transportation
- Improve outreach for seniors including, but beyond, direct care
- Expand social services in Monticello to easier access in the rest of the county
- Provide more and broader support groups

Focus Group Two – Medical Professionals and Partners

- Mental health services at all levels for youth
- Address gaps in transportation for local services and distant appointments
- Increase local opportunities for safe socialization and recreation for youth
- Explore formation of a community-based program to address planning and provision of services for seniors
- Opportunities for socialization for seniors
- Continue the momentum of community partnerships resulting from COVID
- Available affordable local counseling for youth and adults
- Recruit additional primary care providers
- Improve services for mental health concerns and substance use disorders
- Emphasis on services for anxiety, depression, and other mental health issues
- Create community awareness of need to pay attention to isolated seniors
- Plan to address the potential long-term impacts of COVID
- Inform the public of the need to get back to preventive care, screenings, etc.
- Address loss of community service organizations
- Plan for healthcare provider shortages at all levels, especially nursing
- Bridge the gap for patients that are technologically unable or unwilling in the face of shortages of employees
- Increased access for transfers for persons with mental health issues and substance use disorders
- Social and emotional learning opportunities for youth





Age Group



Ethnicity



Race



Disability

DATA ANALYSIS

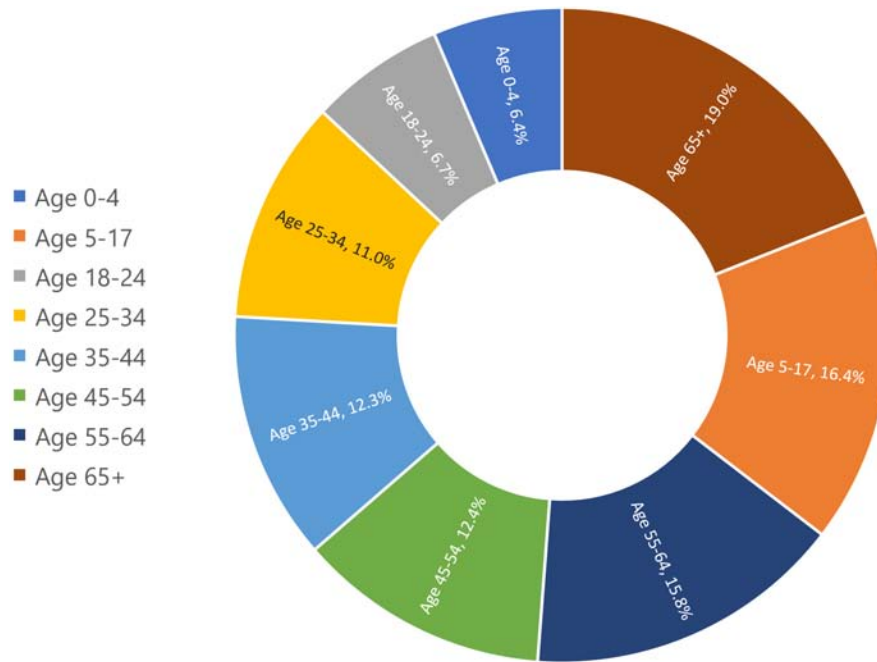
DEMOGRAPHICS

Total Population by Age Group

Report Area	Age 0-4	Age 5-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+
Kirby Medical Center	1,076	2,766	1,123	1,859	2,069	2,096	2,659	3,199
Champaign County, IL	11,531	28,054	48,373	30,456	22,928	20,477	22,144	25,959
Douglas County, IL	1,329	3,584	1,597	2,447	2,349	2,203	2,669	3,445
Macon County, IL	6,503	17,017	9,307	12,473	12,140	12,552	15,043	20,493
Piatt County, IL	983	2,713	1,121	1,802	2,003	2,112	2,533	3,134
Illinois	767,193	2,124,333	1,192,806	1,770,290	1,644,531	1,672,220	1,656,724	1,942,534
United States	19,767,670	53,661,722	30,646,327	45,030,415	40,978,831	42,072,620	41,756,414	50,783,796

Data Source: US Census Bureau, American Community Survey, 2015-19. Source Geography: Tract

Total Population by Age Groups, Kirby Medical Center Service Area



Total Population by Ethnicity

Report Area	Total Population	Hispanic or Latino Population	Hispanic or Latino Population, Percent	Non-Hispanic Population	Non-Hispanic Population, Percent
Kirby Medical Center	16,847	226	1.34%	16,621	98.66%
Champaign County, IL	209,922	12,518	5.96%	197,404	94.04%
Douglas County, IL	19,623	1,425	7.26%	18,198	92.74%
Macon County, IL	105,528	2,405	2.28%	103,123	97.72%
Piatt County, IL	16,401	222	1.35%	16,179	98.65%
Illinois	12,770,631	2,186,387	17.12%	10,584,244	82.88%
United States	324,697,795	58,479,370	18.01%	266,218,425	81.99%

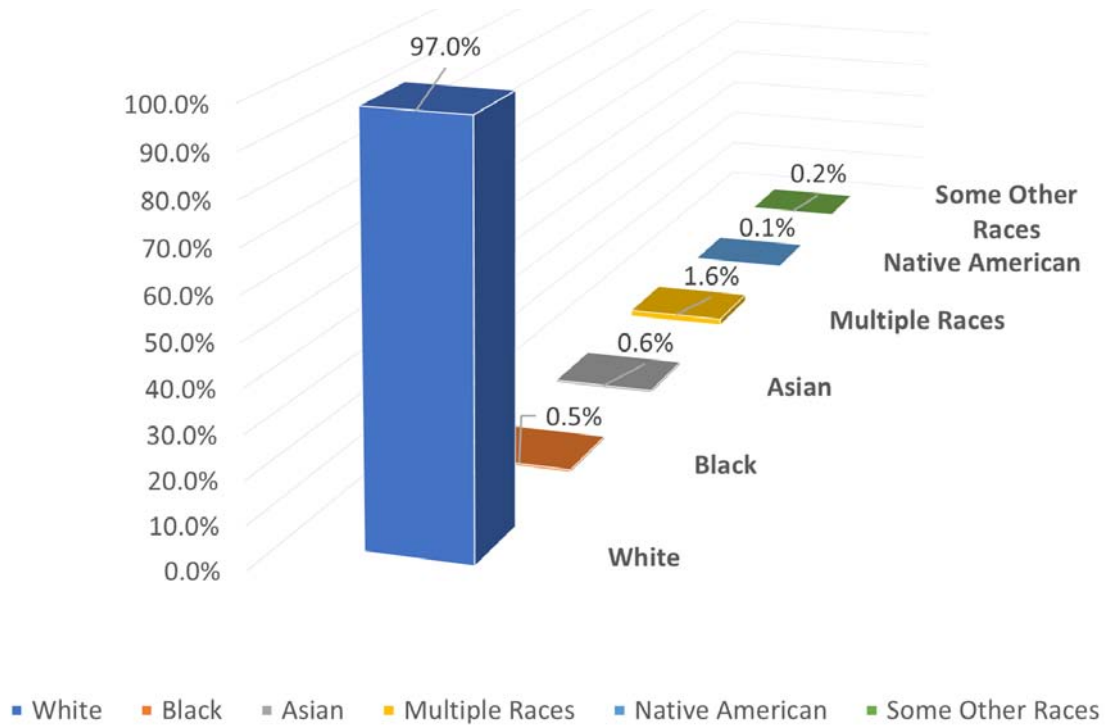
Data Source: US Census Bureau, American Community Survey, 2015-19. Source geography: Tract

Total Population by Race Alone

Report Area	White	Black	Asian	Native American / Alaska Native	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Races
Kirby Medical Center	16,343	91	93	10	0	40	270
Champaign County, IL	150,820	28,283	22,579	348	179	2,137	5,576
Douglas County, IL	18,792	135	131	130	14	176	245
Macon County, IL	82,154	15,658	1,064	249	19	548	5,836
Piatt County, IL	15,914	91	88	9	0	39	260
Illinois	9,134,903	1,813,590	698,524	33,460	4,477	757,231	328,446
United States	235,377,662	41,234,642	17,924,209	2,750,143	599,868	16,047,369	10,763,902

Data Source: US Census Bureau, American Community Survey, 2015-19. Source geography: Tract

Total Population by Race Alone, Kirby Medical Center Service Area



Population with any Disability

This indicator reports the percentage of the total civilian non-institutionalized population with a disability. The report area has a total population of 16,793 for whom disability status has been determined, of which 2,199 or 13.09% have any disability. This indicator is relevant because disabled individuals comprise a vulnerable population that requires targeted services and outreach by providers.

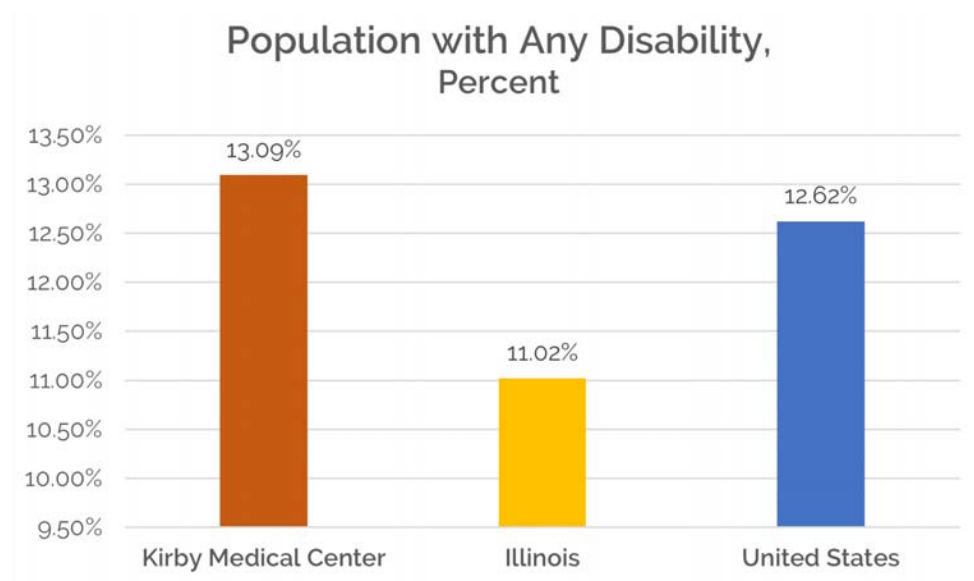
Report Area	Total Population (For Whom Disability Status Is Determined)	Population with a Disability	Population with a Disability, Percent
Kirby Medical Center	16,793	2,199	13.09%
Champaign County, IL	208,115	18,653	8.96%
Douglas County, IL	19,464	2,252	11.57%
Macon County, IL	103,150	15,538	15.06%
Piatt County, IL	16,347	2,184	13.36%
Illinois	12,591,483	1,388,097	11.02%
United States	319,706,872	40,335,099	12.62%

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey, 2015-19. Source geography: Tract → [Show more details](#)

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey, 2015-19. Source geography: Tract



SOCIAL DETERMINANTS OF HEALTH

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

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

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

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

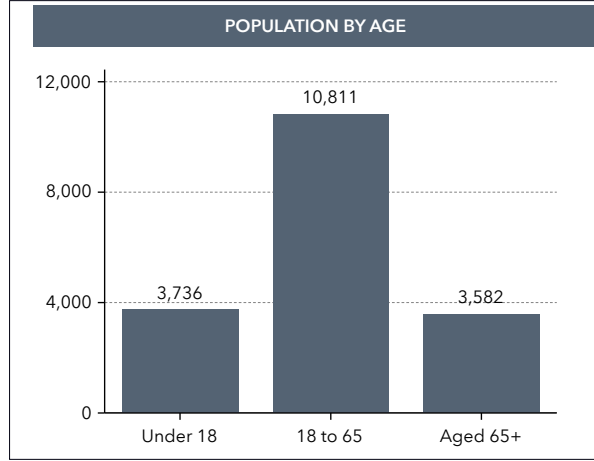
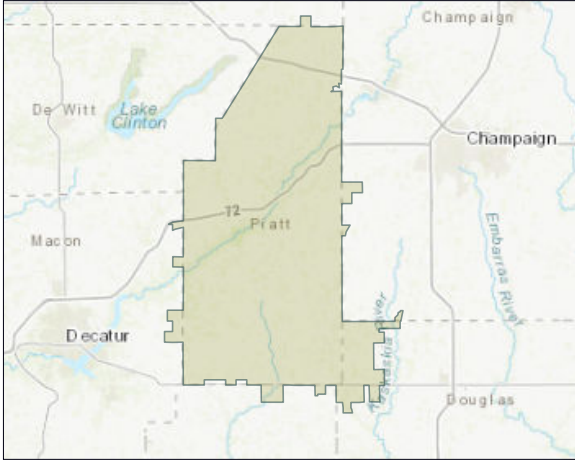
Some of the social determinant indicators reflected in the data include:

- 1,871 households with disability
- 425 households below the poverty level (6%)
- Median household income is \$67,079, which is higher than Illinois but lower than the U.S.

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

Kirby Medical Center Service Area

AT RISK POPULATION PROFILE Geography: County



18,129 Population	7,472 Households	2.42 Avg Size Household	44.4 Median Age	\$67,079 Median Household Income	\$162,390 Median Home Value	92 Wealth Index	231 Housing Affordability	9 Diversity Index
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AT RISK POPULATION

1,871
Households With Disability

3,856
Population 65+

221
Households Without Vehicle

Language Spoken (ACS)	Age 5-17	18-64	Age 65+	Total
English Only	2,795	9,622	3,249	15,666
Spanish	22	154	2	178
Spanish & English Well	22	141	2	165
Spanish & English Not Well	0	14	0	14
Spanish & No English	0	0	0	0
Indo-European	121	218	31	370
Indo-European & English Well	121	218	31	370
Indo-European & English Not Well	0	0	0	0
Indo-European & No English	0	0	0	0
Asian-Pacific Island	16	73	1	90
Asian-Pacific Isl & English Well	16	61	1	78
Asian-Pacific Isl & English Not Well	0	12	0	12
Asian-Pacific Isl & No English	0	0	0	0
Other Language	0	0	14	14
Other Language & English Well	0	0	14	14
Other Language & English Not Well	0	0	0	0
Other Language & No English	0	0	0	0

POVERTY AND LANGUAGE

6%
Households Below the Poverty Level

425
Households Below the Poverty Level

0
Pop 65+ Speak Spanish & No English

POPULATION AND BUSINESSES

14,949
Daytime Population

575
Total Businesses

4,612
Total Employees

Economic Stability

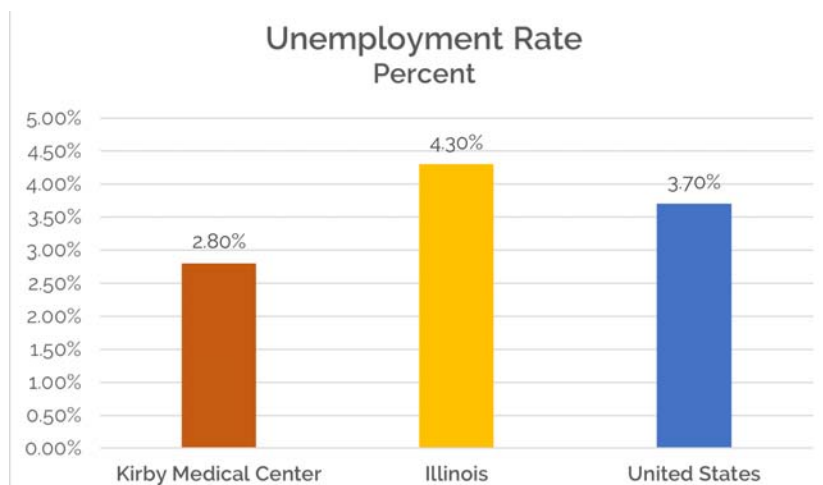
Economic and social insecurity often are associated with poor health. Poverty, unemployment, and lack of educational achievement affect access to care and a community's ability to engage in healthy behaviors. Without a network of support and a safe community, families cannot thrive. Ensuring access to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

Employment – Unemployment Rate

Total unemployment in the service area for the current month equals 249 or 2.8% of the civilian, non-institutionalized population age 16 and older (non-seasonally adjusted). This indicator is relevant because unemployment creates financial instability and barriers to access including insurance coverage, health services, healthy food, and other necessities that contribute to poor health status.

Report Area	Labor Force	Number Employed	Number Unemployed	Unemployment Rate
Kirby Medical Center	8,918	8,669	249	2.8%
Champaign County, IL	110,366	106,818	3,548	3.2%
Douglas County, IL	9,923	9,663	260	2.6%
Macon County, IL	45,712	43,100	2,612	5.7%
Piatt County, IL	8,541	8,303	238	2.8%
Illinois	6,320,577	6,046,500	274,077	4.3%
United States	162,825,074	156,786,647	6,038,427	3.7%

*Note: This indicator is compared to the state average.
Data Source: US Department of Labor, Bureau of Labor Statistics, 2021 - August. Source geography: County*



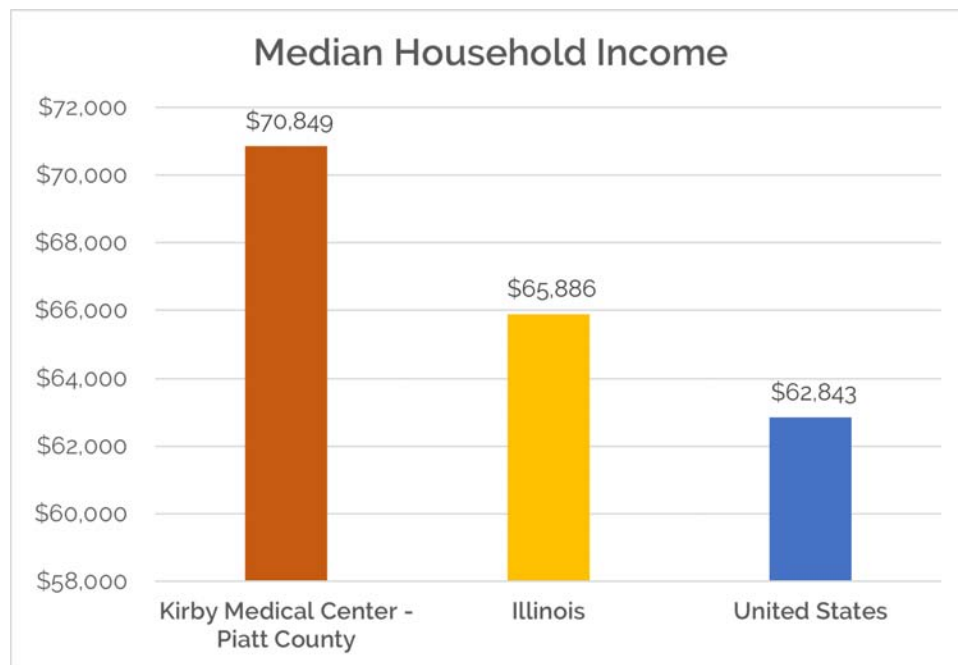
Note: Unemployment data changes monthly, and the numbers reported here depend on the date the data was collected for this report.

Income – Median Household Income

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

Report Area	Total Households	Average Household Income	Median Household Income
Kirby Medical Center	6,910	\$79,963	No data
Champaign County, IL	82,369	\$74,803	\$52,797
Douglas County, IL	7,613	\$71,081	\$56,714
Macon County, IL	43,912	\$69,280	\$50,480
Piatt County, IL	6,692	\$81,088	\$70,849
Illinois	4,846,134	\$92,395	\$65,886
United States	120,756,048	\$88,607	\$62,843

*Note: This indicator is compared to the state average.
Data Source: US Census Bureau, American Community Survey, 2015-19. Source geography: Tract*

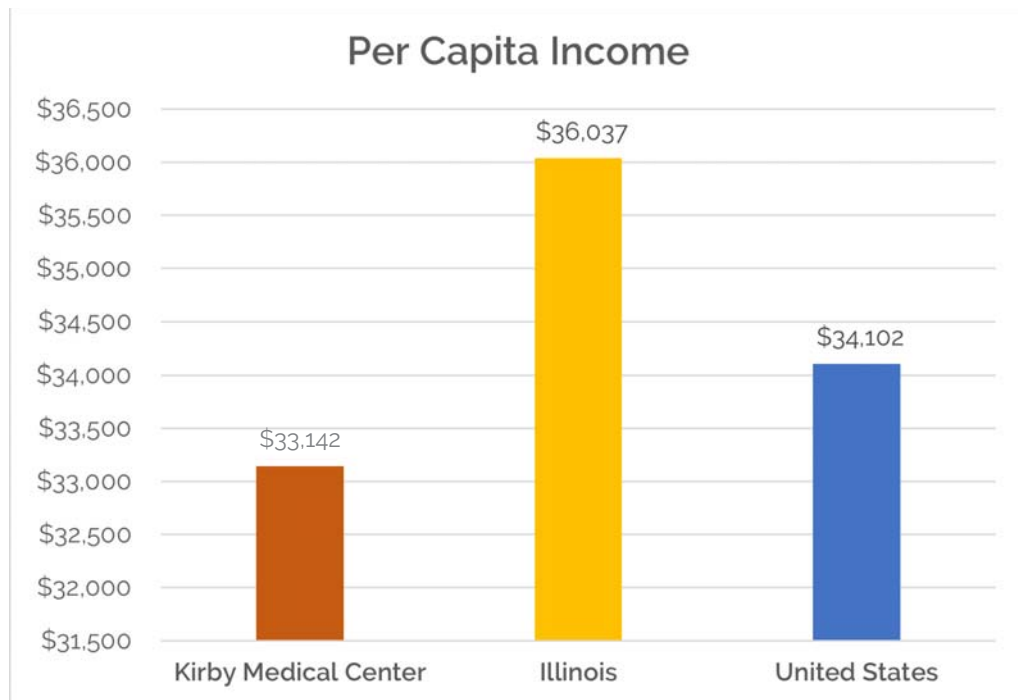


Income - Per Capita Income

The per capita income for the report area is \$33,142. This includes all reported income from wages and salaries as well as income from self-employment, interest or dividends, public assistance, retirement, and other sources. The per capita income in this report area is the average (mean) income computed for every man, woman, and child in the specified area.

Report Area	Total Population	Total Income (\$)	Per Capita Income (\$)
Kirby Medical Center	16,847	\$558,358,900	\$33,142
Illinois	12,770,631	\$460,223,394,200	\$36,037
United States	324,697,795	\$11,073,131,694,900	\$34,102

*Note: This indicator is compared to the state average.
Data Source: US Census Bureau, American Community Survey, 2015-19. Source geography: Tract*

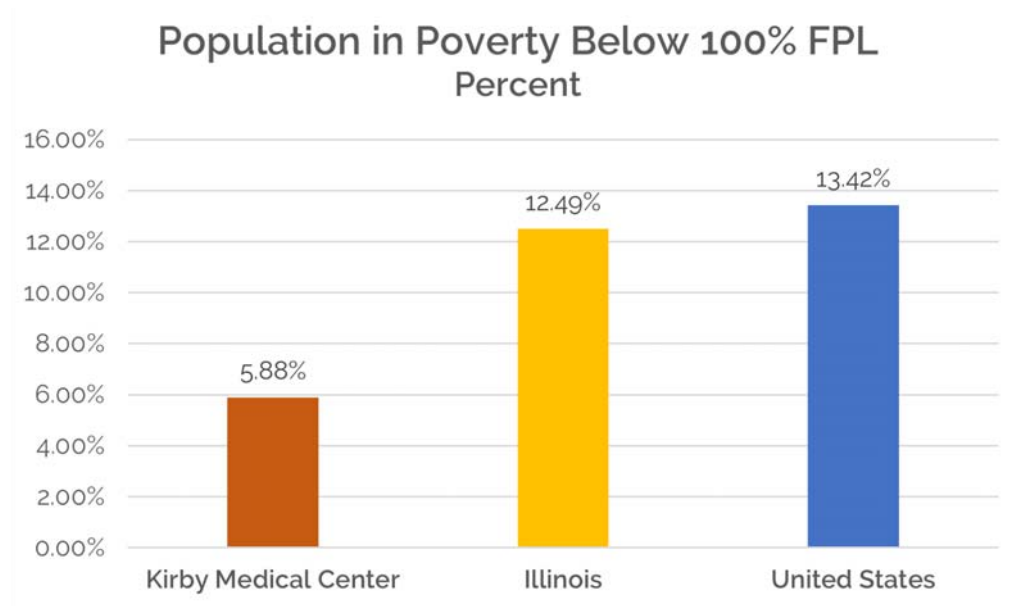


Poverty – Population Below 100% FPL

Poverty is considered a key driver of health status. Within the service area, 5.88% or 969 individuals are living in households with income below the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, health food, and other necessities that contribute to poor health status.

Report Area	Total Population	Population in Poverty	Population in Poverty, Percent
Kirby Medical Center	16,779	969	5.88%
Illinois	12,474,842	1,557,873	12.49%
United States	316,715,051	42,510,843	13.42%

*Note: This indicator is compared to the state average.
Data Source: US Census Bureau, American Community Survey, 2015-19. Source geography: Tract*

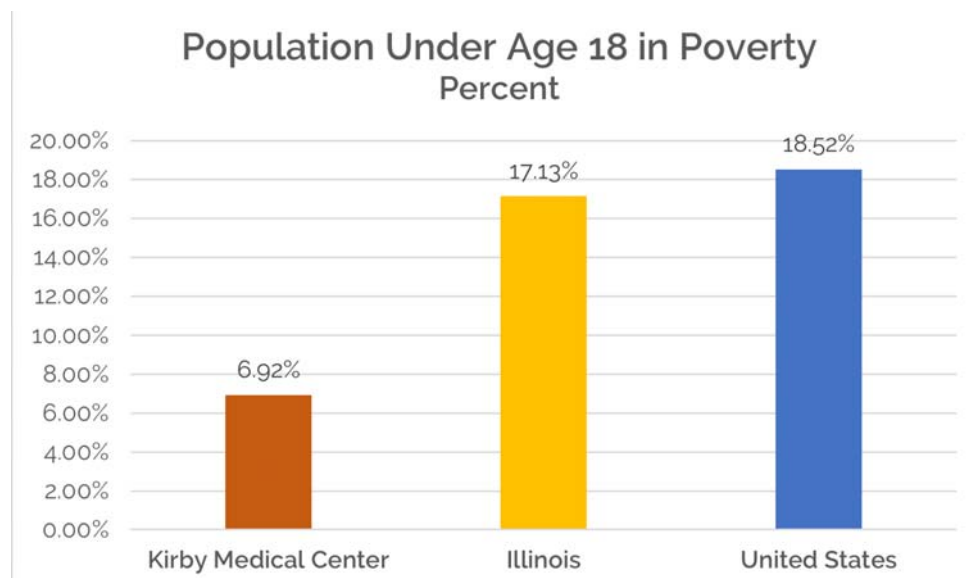


Poverty – Children Below 100% FPL

In the service area, 6.92% or 264 children aged 0-17 are living in households with income below the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.

Report Area	Total Population	Population Under Age 18	Population Under Age 18 in Poverty	Percent Population Under Age 18 in Poverty
Kirby Medical Center	16,779	3,815	264	6.92%
Champaign County, IL	194,198	38,395	6,065	15.80%
Douglas County, IL	19,296	4,745	709	14.94%
Macon County, IL	102,004	23,160	5,909	25.51%
Piatt County, IL	16,328	3,664	191	5.21%
Illinois	12,474,842	2,852,051	488,516	17.13%
United States	316,715,051	72,235,700	13,377,778	18.52%

*Note: This indicator is compared to the state average.
Data Source: US Census Bureau, American Community Survey, 2015-19. Source geography: Tract*

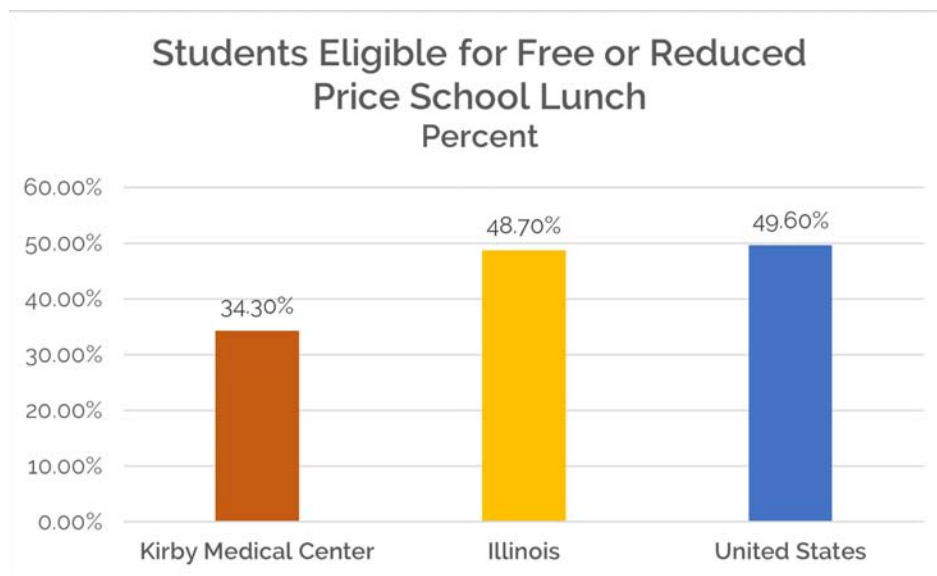


Poverty – Children Eligible for Free/Reduced Price Lunch

Free or reduced price lunches are served to qualifying students in families with income between under 185 percent (reduced price) or under 130% (free lunch) of the U.S. federal poverty threshold as part of the federal National School Lunch Program (NSLP). Out of 15,998 total public school students in the service area, 5,491 were eligible for the free or reduced price lunch program in the latest report year. This represents 34.30% of public school students, which is lower than the state average of 48.7%.

Report Area	Total Students	Students Eligible for Free or Reduced Price Lunch	Students Eligible for Free or Reduced Price Lunch, Percent
Kirby Medical Center	15,998	5,491	34.30%
Champaign County, IL	25,350	13,252	52.3%
Douglas County, IL	3,016	1,215	40.3%
Macon County, IL	15,842	8,643	54.6%
Piatt County, IL	3,073	945	30.8%
Illinois	1,942,839	945,552	48.7%
United States	50,829,148	25,226,683	49.6%

*Note: This indicator is compared to the state average.
Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: County*

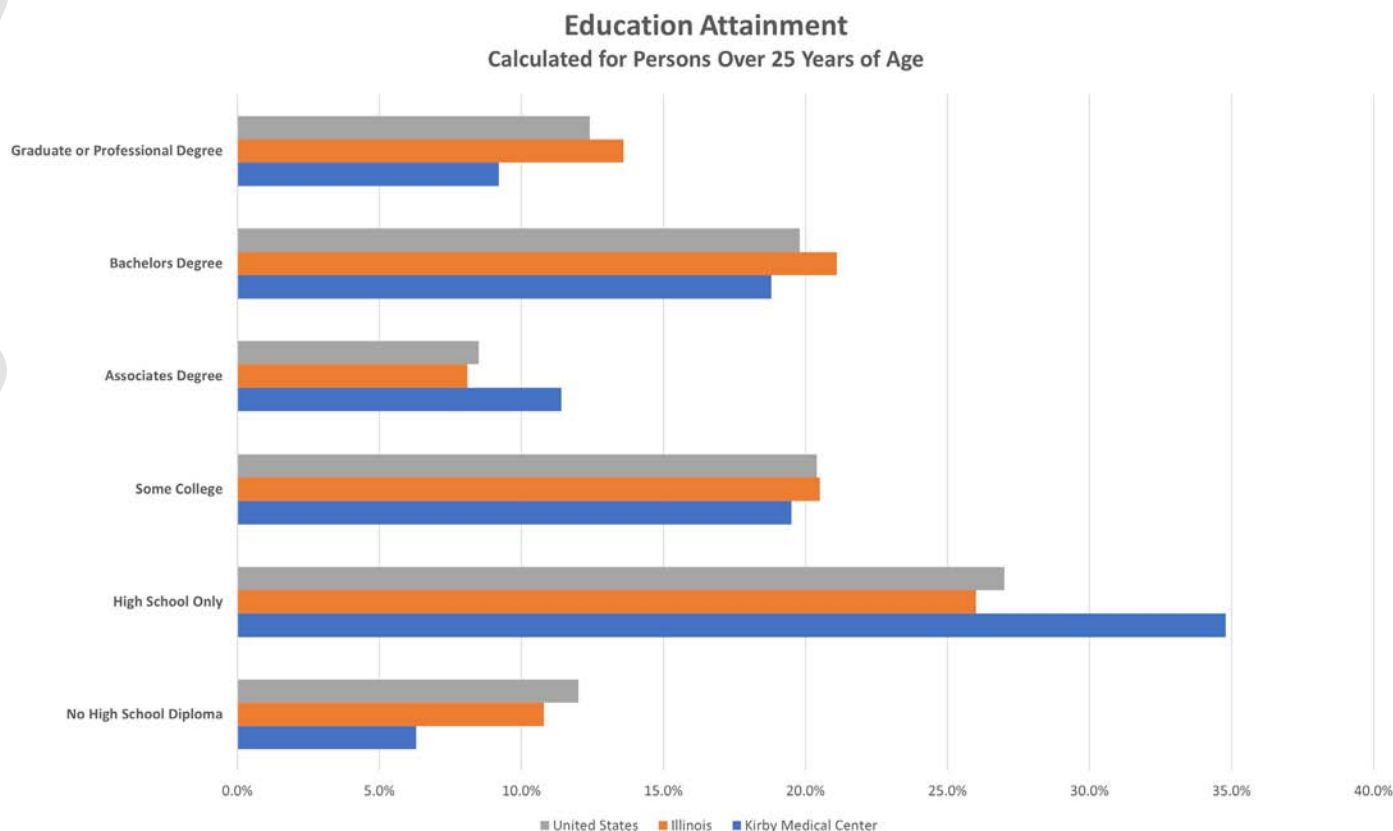


Education – Attainment

Educational attainment shows the distribution of the highest level of education achieved in the report area and helps schools and businesses to understand the needs of adults, whether it be workforce training or the ability to develop science, technology, engineering, and mathematics opportunities. Educational attainment is calculated for persons over 25, and is an estimated average for the period from 2014 to 2019. For the selected area, 18.8% have at least a college bachelor's degree, while 34.8% stopped their formal educational attainment after high school.

Report Area	No High School Diploma	High School Only	Some College	Associates Degree	Bachelors Degree	Graduate or Professional Degree
Kirby Medical Center	6.3%	34.8%	19.5%	11.4%	18.8%	9.2%
Illinois	10.79%	26.0%	20.5%	8.1%	21.1%	13.6%
United States	12.00%	27.0%	20.4%	8.5%	19.8%	12.4%

*Note: This indicator is compared to the state average.
Data Source: U.S. Census Bureau, American Community Survey, 2015-19. Source geography: County*

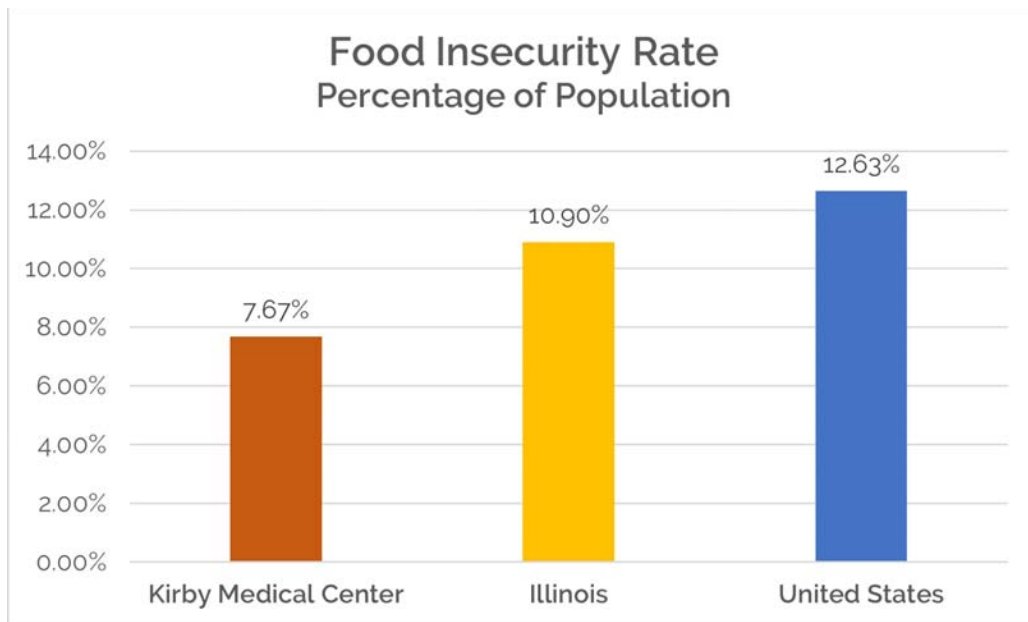


Food Insecurity Rate

Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food. This indicator reported the estimated percentage of the population that experienced food insecurity at some point during the report year. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food.

Report Area	Total Population	Food Insecure Population, Total	Food Insecurity Rate
Kirby Medical Center	17,178	1,316	7.67%
Champaign County, IL	208,333	31,250	15.00%
Douglas County, IL	19,787	1,860	9.40%
Macon County, IL	107,643	15,070	14.00%
Piatt County, IL	16,400	1,230	7.50%
Illinois	12,807,064	1,395,970	10.90%
United States	325,717,422	41,133,950	12.63%

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



HEALTH AND WELLNESS INDICATORS

Physical Inactivity

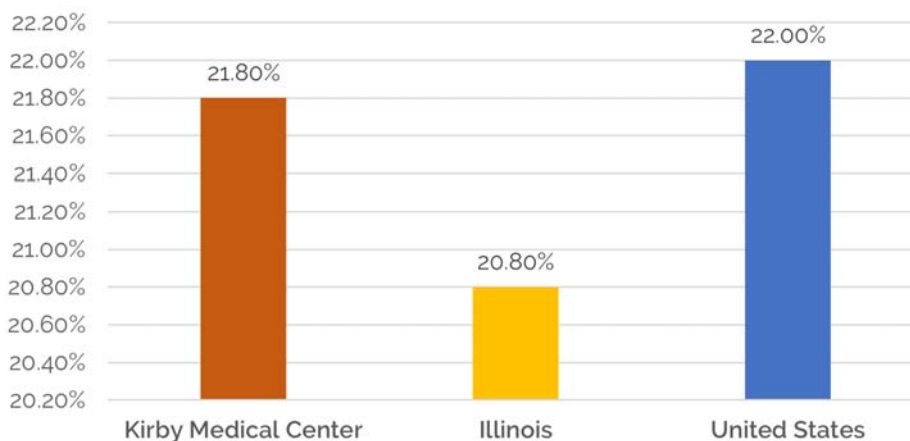
Within the service area, 101,754 or 21.8% of adults aged 20 and older self-report no active leisure time, based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?" This indicator is relevant because current behaviors are determinants of future health, and this indicator may illustrate a cause of significant health issues, such as obesity and poor cardiovascular health.

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

Report Area	Population Age 20+	Adults with No Leisure Time Physical Activity	Adults with No Leisure Time Physical Activity, Percent
Kirby Medical Center	450,746	101,754	21.8%
Illinois	9,534,605	2,043,592	20.8%
United States	239,878,217	54,200,862	22.0%

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

Physical Inactivity Percentage of Population



CHRONIC ILLNESS

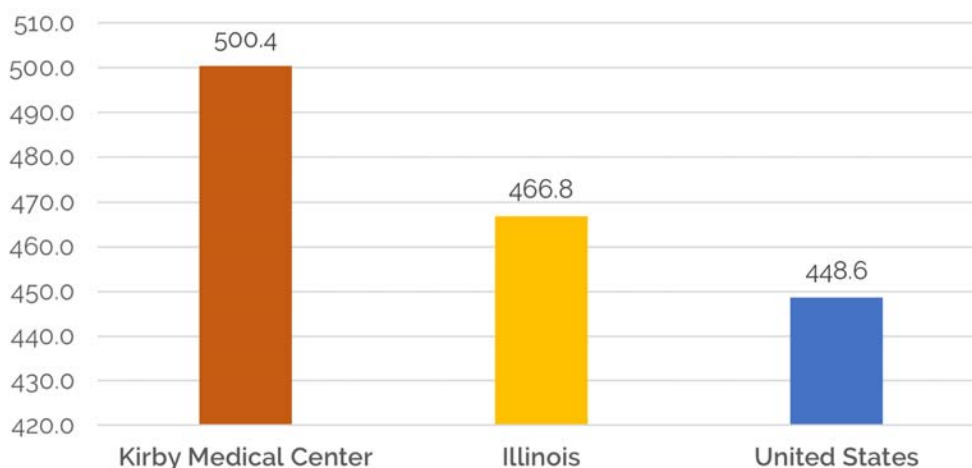
Cancer Incidence – All Sites

This indicator reports the age-adjusted incidence rate (cases per 100,000 population per year) of cancer (all sites), adjusted to 2000 U.S. standard population age groups (under age 1, 1-4, 5-9, ..., 80-84, 85 and older). Within the report area, there were 114 new cases of cancer reported. This means there is a rate of 500.4 for every 100,000 total population.

Report Area	Estimated Total Population	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Population)
Kirby Medical Center	22,783	114	500.4
Champaign County, IL	199,283	890	446.6
Douglas County, IL	25,101	124	494.0
Macon County, IL	144,895	792	546.6
Piatt County, IL	22,365	111	496.3
Illinois	14,903,598	69,570	466.8
United States	379,681,007	1,703,249	448.6

*Note: This indicator is compared to the state average.
Data Source: State Cancer Profiles. 2014-18. Source geography: County*

**Cancer Incidence Rate
(# per 100,000 Population)**

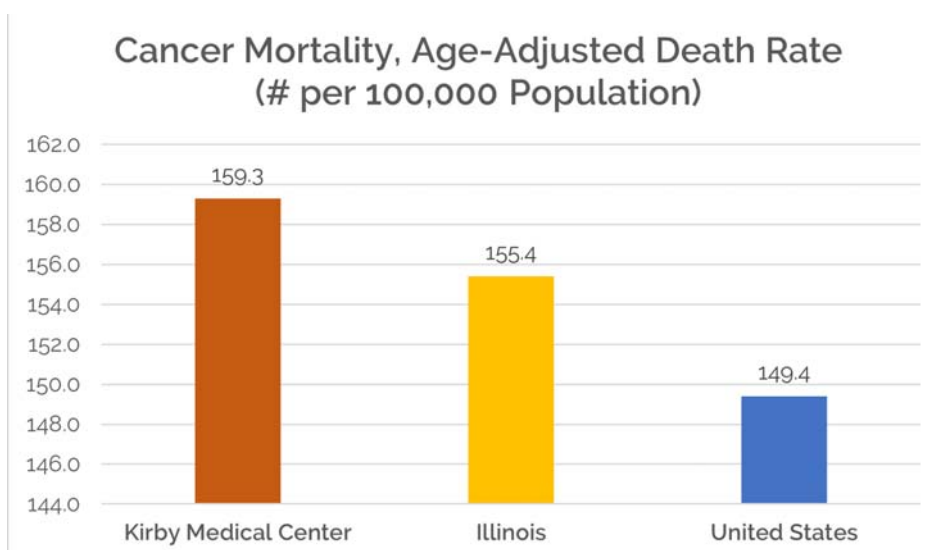


Mortality – Cancer

This indicator reports the 2016-2020 five-year average rate of death due to malignant neoplasm (cancer) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for service areas from county level data, only where data is available. This indicator is relevant because cancer is a leading cause of death in the United States. Within the service area, there are a total of 193 deaths due to cancer. This represents an age-adjusted death rate of 159.3 per every 100,000 total population. *Note: Data are suppressed for counties with fewer than 20 deaths in the timeframe.*

Report Area	Total Population, 2016-2020 Average	Five Year Total Deaths, 2016-2020 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
Kirby Medical Center	17,182	193	225.2	159.3
Champaign County, IL	209,336	1,388	132.6	133.3
Douglas County, IL	19,566	224	229.0	170.6
Macon County, IL	104,817	1,355	258.5	174.0
Piatt County, IL	16,420	188	229.0	158.1
Illinois	12,720,799	120,341	189.2	155.4
United States	326,747,554	2,998,371	183.5	149.4

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, National Vital Statistics System, Accessed via CDC WONDER, 2015-2019. Source geography: County



Chronic Conditions – Adult

Chronic Lower Respiratory Disease

These tables present the percentage of adults ever diagnosed with Chronic Lower Respiratory Disease and Coronary Heart Disease. The data is reflected by county and the entire service area and provides comparisons within the service area.

Report Area	Total Population (2019)	Percentage of Adults Ever Diagnosed with Chronic Lower Respiratory Disease
Kirby Medical Center	17,511	7.1%
Champaign County, IL	209,689	5.50%
Douglas County, IL	19,465	8.50%
Macon County, IL	104,009	8.60%
Piatt County, IL	16,344	7.10%
Illinois	12,671,821	6.1%
United States	328,239,523	6.6%

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

Coronary Heart Disease

Report Area	Total Population (2019)	Adults Ever Diagnosed with Coronary Heart Disease (Crude)	Adults Ever Diagnosed with Coronary Heart Disease (Age-Adjusted)
Kirby Medical Center	17,511	6.3%	No data
Champaign County, IL	209,689	4.90%	5.50%
Douglas County, IL	19,465	7.50%	6.00%
Macon County, IL	104,009	7.80%	6.00%
Piatt County, IL	16,344	6.60%	5.00%
Illinois	12,671,821	5.7%	5.2%
United States	328,239,523	6.2%	5.4%

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

High Blood Pressure

These tables present the percentage of adults ever diagnosed with High Blood Pressure and High Cholesterol. The data is reflected by county and the entire service area and provides comparisons within the service area.

Report Area	Total Population (2019)	Percentage of Adults with High Blood Pressure
Kirby Medical Center	17,511	32.6%
Champaign County, IL	209,689	26.90%
Douglas County, IL	19,465	35.00%
Macon County, IL	104,009	37.30%
Piatt County, IL	16,344	33.30%
Illinois	12,671,821	31.2%
United States	328,239,523	32.6%

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

High Cholesterol

Report Area	Total Population (2019)	Percentage of Adults with High Cholesterol
Kirby Medical Center	17,511	34.4%
Champaign County, IL	209,689	26.90%
Douglas County, IL	19,465	34.60%
Macon County, IL	104,009	34.20%
Piatt County, IL	16,344	35.20%
Illinois	12,671,821	31.3%
United States	328,239,523	33.6%

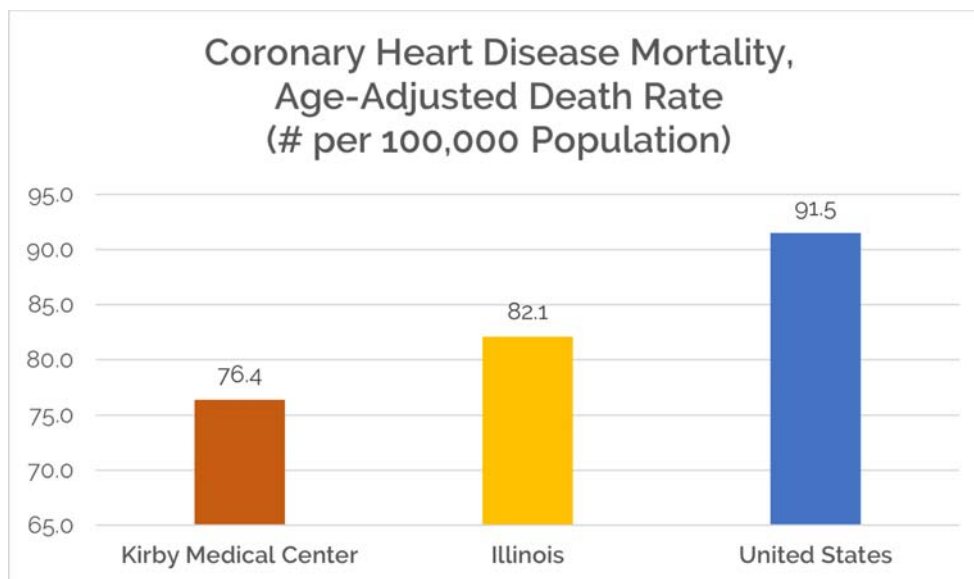
Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the 500 Cities Data Portal, 2018.

Mortality – Coronary Heart Disease

This indicator reports the 2016-2020 five-year average rate of death due to coronary heart disease (ICD10 Codes I20-I25) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for service areas from county level data, only where data is available. This indicator is relevant because coronary heart disease is a leading cause of death in the United States. Within the report area, there are a total of 92 deaths due to coronary heart disease. This represents an age-adjusted death rate of 76.4 per every 100,000 total population. *Note: Data are suppressed for counties with fewer than 20 deaths in the timeframe.*

Report Area	Total Population, 2016-2020 Average	Five Year Total Deaths, 2016-2020 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
Kirby Medical Center	17,182	92	107.2	76.4
Champaign County, IL	209,336	688	65.7	66.4
Douglas County, IL	19,566	69	70.5	50.2
Macon County, IL	104,817	473	90.3	58.1
Piatt County, IL	16,420	95	115.7	81.5
Illinois	12,720,799	64,237	101.0	82.1
United States	326,747,554	1,838,830	112.5	91.5

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention: National Vital Statistics System. Accessed via CDC WONDER: 2015-2019. Source geography: County



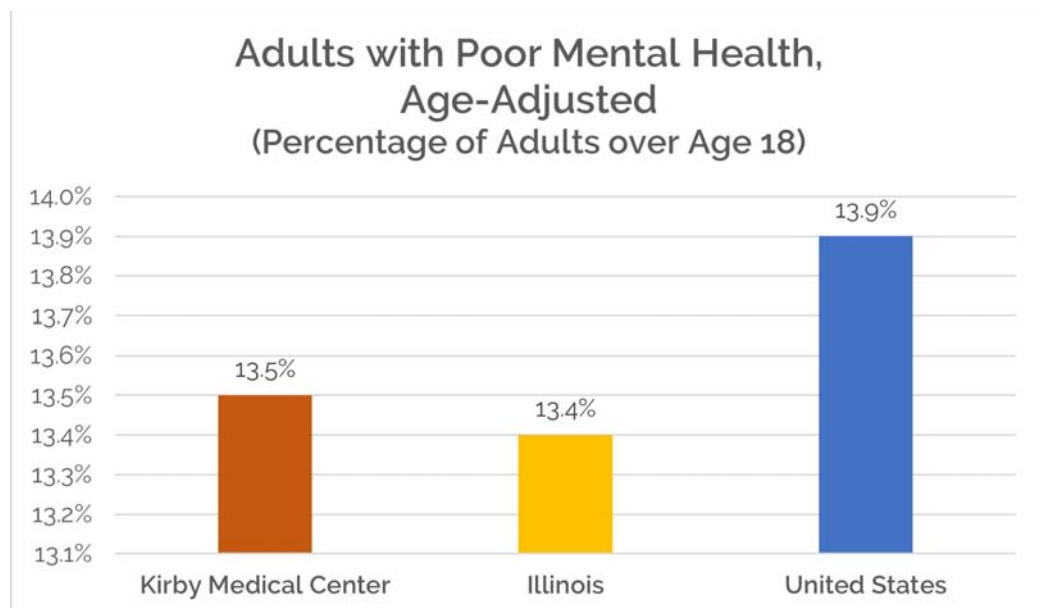
MENTAL HEALTH

Poor Mental Health

This indicator reports the percentage of adults aged 18 and older who report 14 or more days during the past 30 days during in which their mental health was not good.

Report Area	Total Population (2019)	Adults with Poor Mental Health (Crude)	Adults with Poor Mental Health (Age-Adjusted)
Kirby Medical Center	17,511	13.5%	No data
Champaign County, IL	209,689	14.60%	13.90%
Douglas County, IL	19,465	15.10%	15.90%
Macon County, IL	104,009	14.90%	15.90%
Piatt County, IL	16,344	12.90%	13.90%
Illinois	12,671,821	13.1%	13.4%
United States	328,239,523	13.6%	13.9%

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

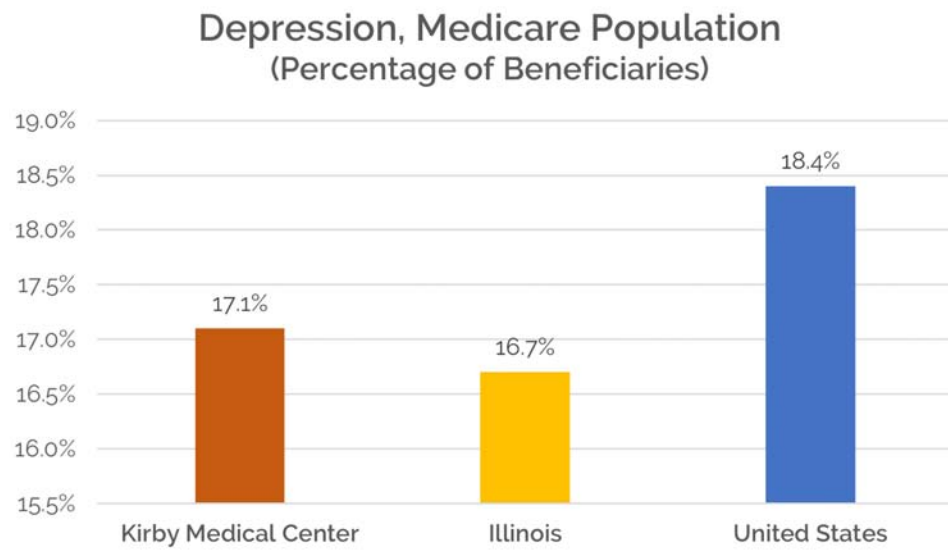


Depression (Medicare Population)

This indicator reports the number and percentage of the Medicare fee-for-service population with depression. Data are based upon Medicare administrative enrollment and claims data for Medicare beneficiaries enrolled in the fee-for-service program. Within the report area, there were 360 beneficiaries with depression based on administrative claims data in the latest report year. This represents 17.1% of the total Medicare fee-for-service beneficiaries.

Report Area	Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with Depression	Beneficiaries with Depression, Percent
Kirby Medical Center	2,104	359.85	17.1%
Champaign County, IL	13,881	2,364	17.0%
Douglas County, IL	2,395	417	17.4%
Macon County, IL	19,934	3,853	19.3%
Piatt County, IL	1,993	340	17.1%
Illinois	1,443,297	240,827	16.7%
United States	33,499,472	6,163,735	18.4%

Note: This indicator is compared to the state average. Data Source: Centers for Medicare and Medicaid Services, CMS - Geographic Variation Public Use File, 2018. Source geography: County.

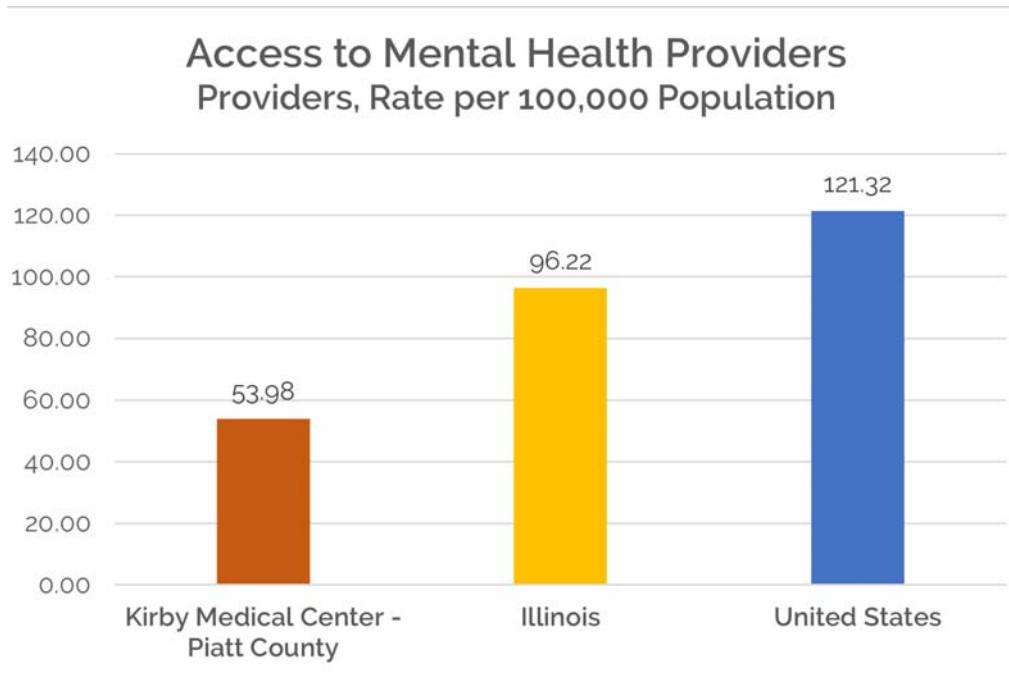


Access to Care – Mental Health

This indicator reports the number of mental health providers in the report area as a rate per 100,000 total area population. Mental health providers include psychiatrists, psychologists, clinical social workers, and counselors that specialize in mental health care.

Report Area	Total Population (2020)	Number of Facilities	Number of Providers	Providers, Rate per 100,000 Population
Kirby Medical Center	No data	1	7	No data
Champaign County, IL	205,865	33	414	201.10
Douglas County, IL	19,740	1	0	0.00
Macon County, IL	103,998	11	57	54.81
Piatt County, IL	16,673	1	9	53.98
Illinois	12,812,508	2,533	12,328	96.22
United States	334,735,155	51,215	406,109	121.32

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



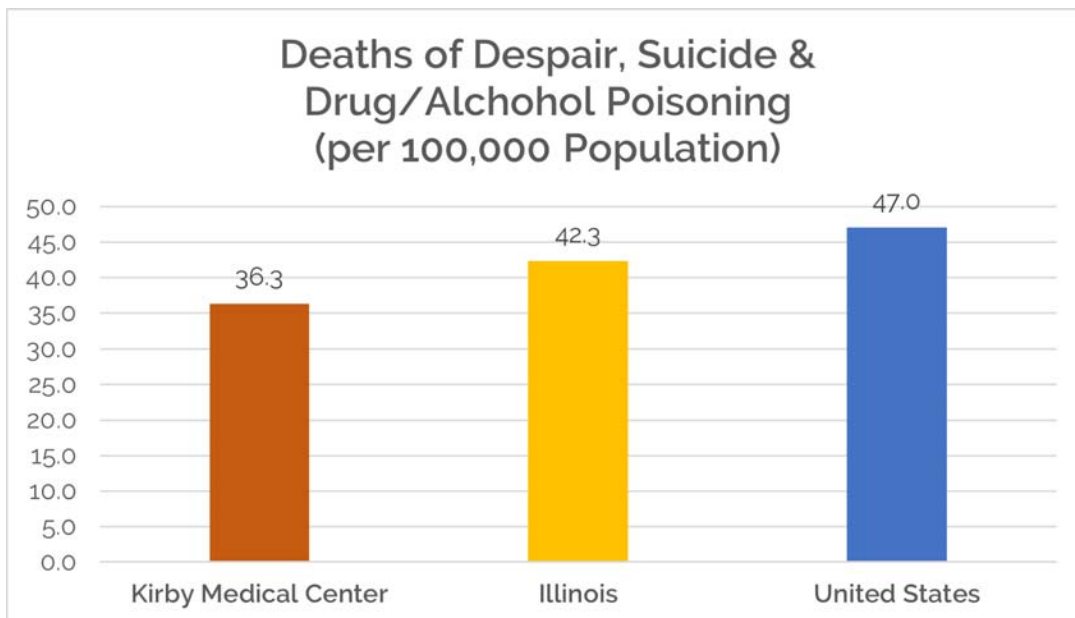
BEHAVIORAL HEALTH

Deaths of Despair – Suicide + Drug/Alcohol Poisoning

This indicator reports average rate of death due to intentional self-harm (suicide), alcohol-related disease, and drug overdose, also known as “deaths of despair,” per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for service areas from county level data, only where data is available. This indicator is relevant because death of despair is an indicator of poor mental health. Within the service area, there were 33 deaths of despair. This represents an age-adjusted death rate of 36.3 per every 100,000 total population.

Report Area	Total Population, 2016-2020 Average	Five Year Total Deaths, 2016-2020 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
Kirby Medical Center	17,182	33	37.9	36.3
Champaign County, IL	209,336	392	37.5	40.4
Douglas County, IL	19,566	32	32.7	31.2
Macon County, IL	104,817	263	50.2	47.1
Piatt County, IL	16,420	30	36.5	34.8
Illinois	12,720,799	28,231	44.4	42.3
United States	326,747,554	806,246	49.4	47.0

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER, 2015-2019. Source geography: County



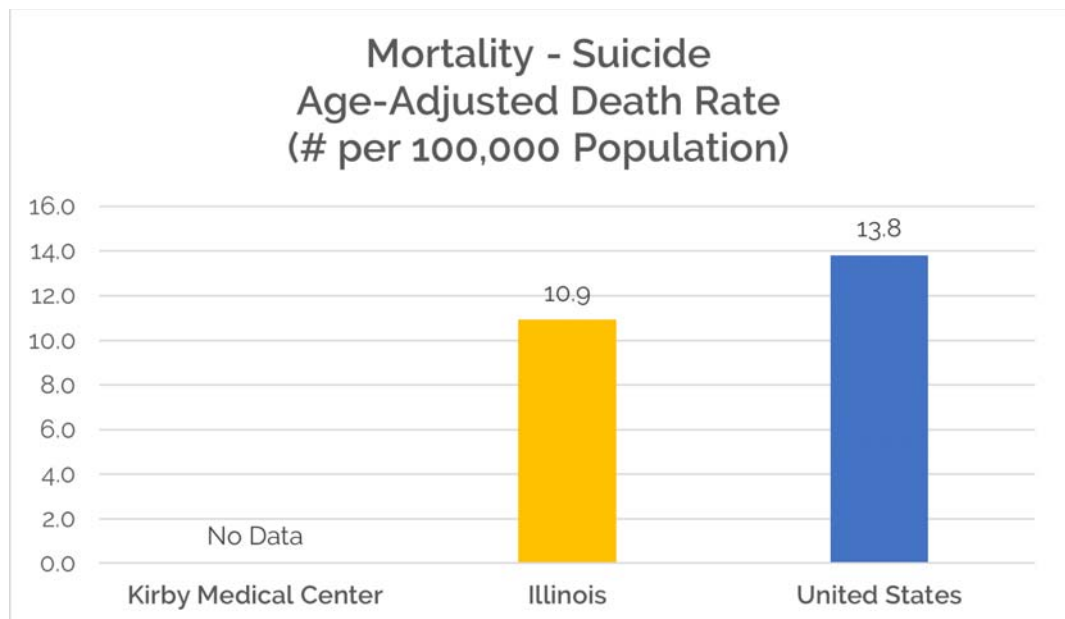
Mortality – Suicide

This indicator reports the 2016-2020 five-year average rate of death due to intentional self-harm (suicide) per 100,000 population. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because suicide is an indicator of poor mental health.

Note: Data are suppressed for counties with fewer than 20 deaths in the time frame.

Report Area	Total Population, 2016-2020 Average	Five Year Total Deaths, 2016-2020 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
Kirby Medical Center	17,182	No data	No data	No data
Champaign County, IL	209,336	130	12.4	13.0
Douglas County, IL	19,566	12	No data	No data
Macon County, IL	104,817	71	13.6	12.7
Piatt County, IL	16,420	No data	No data	No data
Illinois	12,720,799	7,178	11.3	10.9
United States	326,747,554	233,972	14.3	13.8

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, National Vital Statistics System, Accessed via CDC WONDER, 2015-2019. Source geography: County

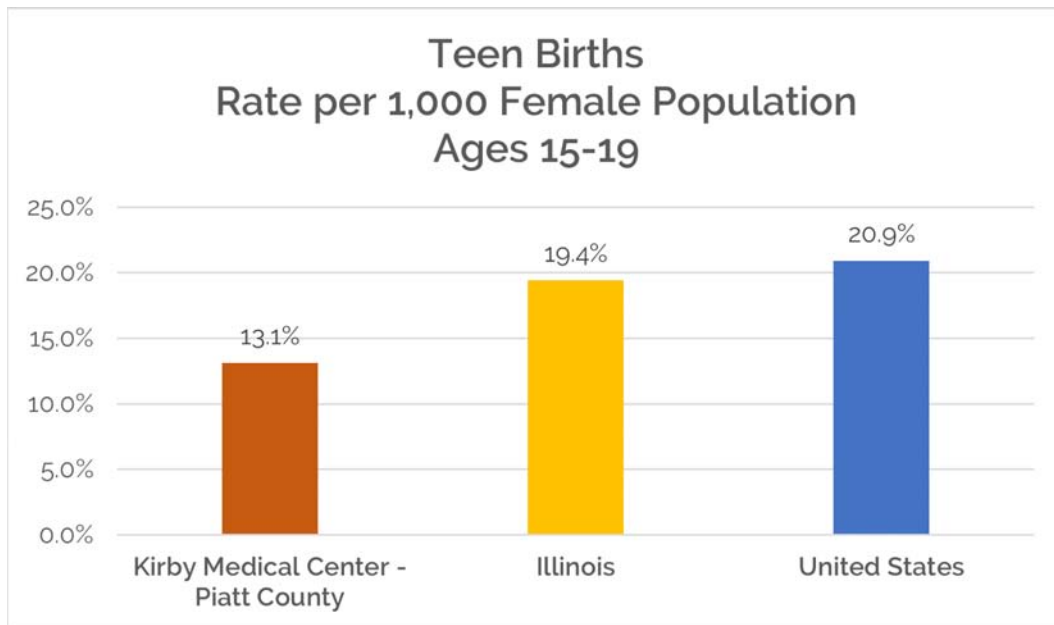


Teen Births

This indicator reports the seven-year average number of births per 1,000 female population aged 15-19.

Report Area	Female Population Age 15-19	Teen Births, Rate per 1,000 Female Population Age 15-19
Champaign County, IL	70,201	12.2
De Witt County, IL	3,299	23.3
Ford County, IL	2,971	23.2
Iroquois County, IL	5,843	25.2
Livingston County, IL	7,397	24.5
McLean County, IL	54,822	10.3
Piatt County, IL	3,656	13.1
Vermilion County, IL	16,299	45.4
Illinois	5,783,508	19.4
United States	144,319,360	20.9

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



SUBSTANCE USE

Alcohol – Heavy Alcohol Consumption

Excessive drinking is defined as the percentage of the population who reports at least one binge drinking episode involving five or more drinks for men and four or more per day for women, over the same time period. Alcohol use is a behavioral health issue that is also a risk factor for a number of negative health outcomes, including: physical injuries related to motor vehicle accidents, stroke, chronic diseases such as heart disease and cancer, and mental health conditions such as depression and suicide. There are a number of evidence-based interventions that may reduce excessive/binge drinking; examples include raising taxes on alcoholic beverages, restricting access to alcohol by limiting days and hours of retail sales, and screening and counseling for alcohol abuse (*Centers for Disease Control and Prevention, Preventing Excessive Alcohol Use, 2020*).

Report Area	Total Population (2018)	Adults Reporting Excessive Drinking	Percentage of Adults Reporting Excessive Drinking
Champaign County, IL	209,983	43,337	20.64%
Douglas County, IL	19,479	4,162	21.37%
Macon County, IL	104,712	22,234	21.23%
Piatt County, IL	16,396	3,819	23.29%
Illinois	12,741,080	2,743,995	21.54%
United States	327,167,434	62,733,046	19.17%

Note: This indicator is compared to the state average. Data Source: University of Wisconsin Population Health Institute, County Health Rankings, 2018. Source geography: County.

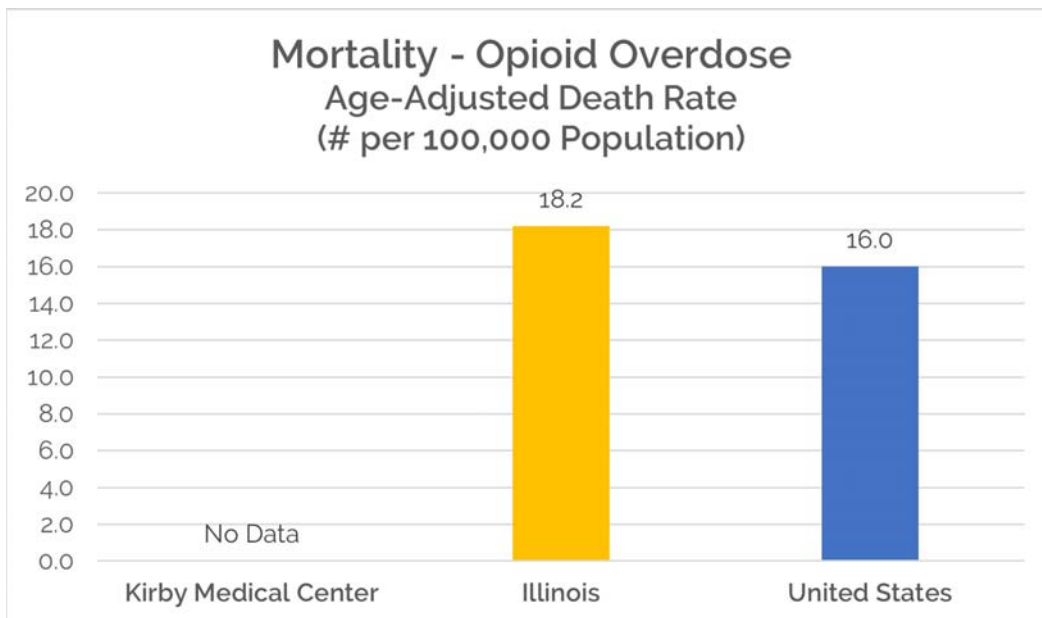
Mortality – Opioid Overdose

This indicator reports the 2016-2020 five-year average rate of death due to opioid drug overdose per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because opioid drug overdose is the leading cause of injury deaths in the United States, and they have increased dramatically in recent years.

Note: Data are suppressed for counties with fewer than 20 deaths in the timeframe.

Report Area	Total Population, 2016-2020 Average	Five Year Total Deaths, 2016-2020 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
Kirby Medical Center	17,182	11	12.2	No data
Champaign County, IL	209,336	144	13.8	15.3
Douglas County, IL	19,566	No data	No data	No data
Macon County, IL	104,817	69	13.2	15.2
Piatt County, IL	16,420	10	No data	No data
Illinois	12,720,799	11,559	18.2	18.2
United States	326,747,554	256,428	15.7	16.0

Note: This indicator is compared to the state average. Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER, 2015-2019. Source geography: County.



DIVERSITY AND MINORITY HEALTH STATUS

Population in Poverty Race Alone, Percent

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

Report Area	Total Population	State Percentile	National Percentile
Kirby Medical Center	17,510	63	61
Champaign County, IL	192,752	59	59
Douglas County, IL	19,623	73	71
Macon County, IL	101,302	77	75
Piatt County, IL	16,401	61	58
Illinois	12,550,547	No data	49
United States	320,934,417	No data	No data

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

EMERGENCY PREPAREDNESS

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





Creating a Post-COVID Response



Addressing Transportation Gaps



Locations and Patterns of Poverty



Mental Health and Wellness Needs

IDENTIFICATION AND PRIORITIZATION OF NEEDS

PROCESS

The steering group was comprised of representatives from both focus groups (law enforcement, faith-based providers, mental health service providers, and schools), and members serving persons likely to be unserved, underserved, or otherwise experiencing unmet needs. This group met virtually on January 17, 2021, to identify and prioritize significant health needs.

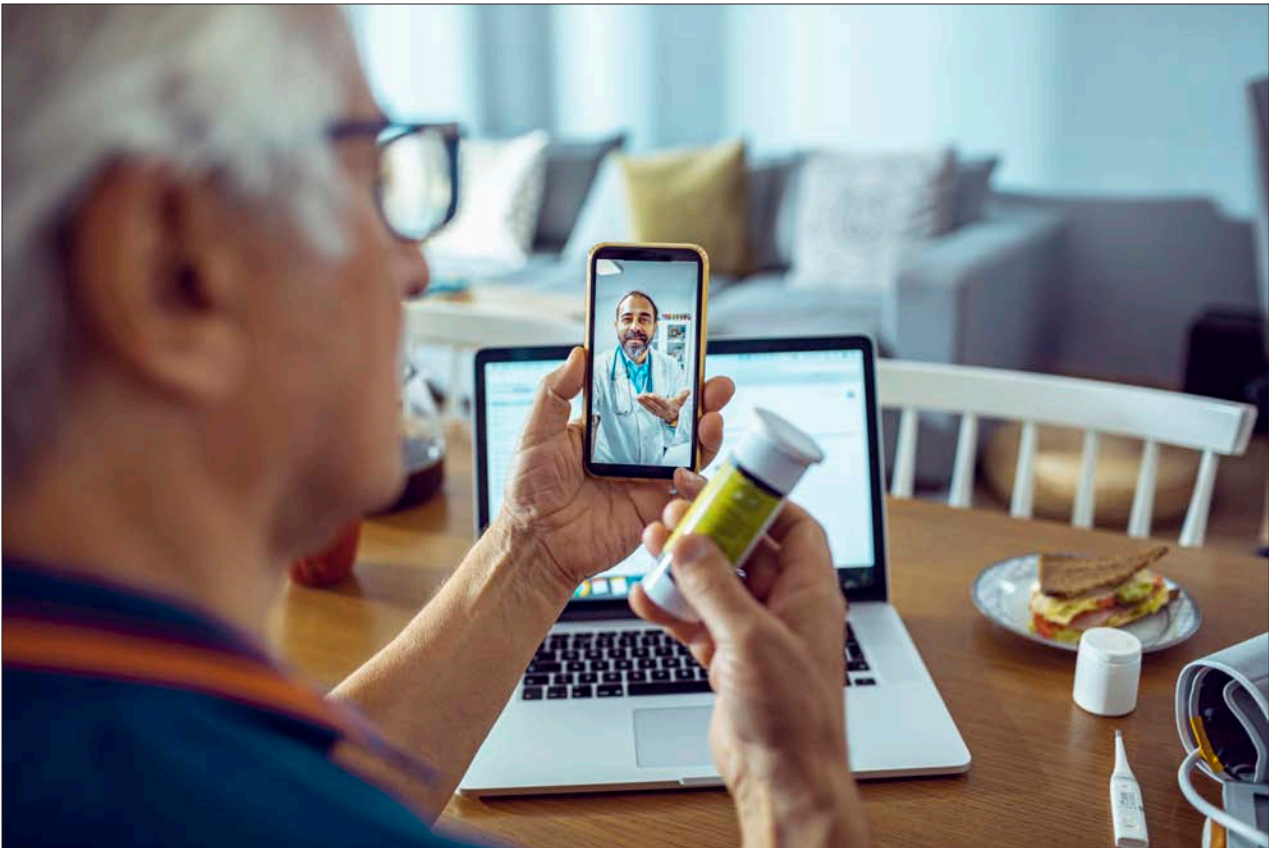
The group reviewed notes from the focus groups and summaries of data reviewed by the consultant which included SparkMap, ESRI, Illinois Department of Public Health, CDC, USDA, Illinois Department of Labor, HRSA, County Health Rankings and Roadmaps, National Cancer Institute, and other resources.

DESCRIPTION OF THE COMMUNITY HEALTH NEEDS IDENTIFIED

Following the review, the group identified and then prioritized the following as being the significant health needs facing the Kirby Medical Center service area.

1. Create a community-wide post-COVID response for adults and youth
2. Identify and address gaps in transportation related to:
 - Flexibility in and outside of Kirby Medical Center service area for transportation to and from local appointments
 - Transportation to out-of-the-area substance use disorder and other mental health services
3. Identify location and patterns of poverty within the Kirby Medical Center service area and address issues related to scattered or isolated poverty
4. Identify and plan to address mental health and wellness needs across the Kirby Medical Center service area







Resources



Partners



Volunteers



Government

RESOURCES AVAILABLE TO MEET PRIORITY HEALTH NEEDS

HOSPITAL RESOURCES

Services at Kirby Medical Center

- Administration
- Kirby Medical Group
- Kirby Health and Wellness
- Quality and Community Advisory Committee of the Governing Board
- Marketing
- Wellness

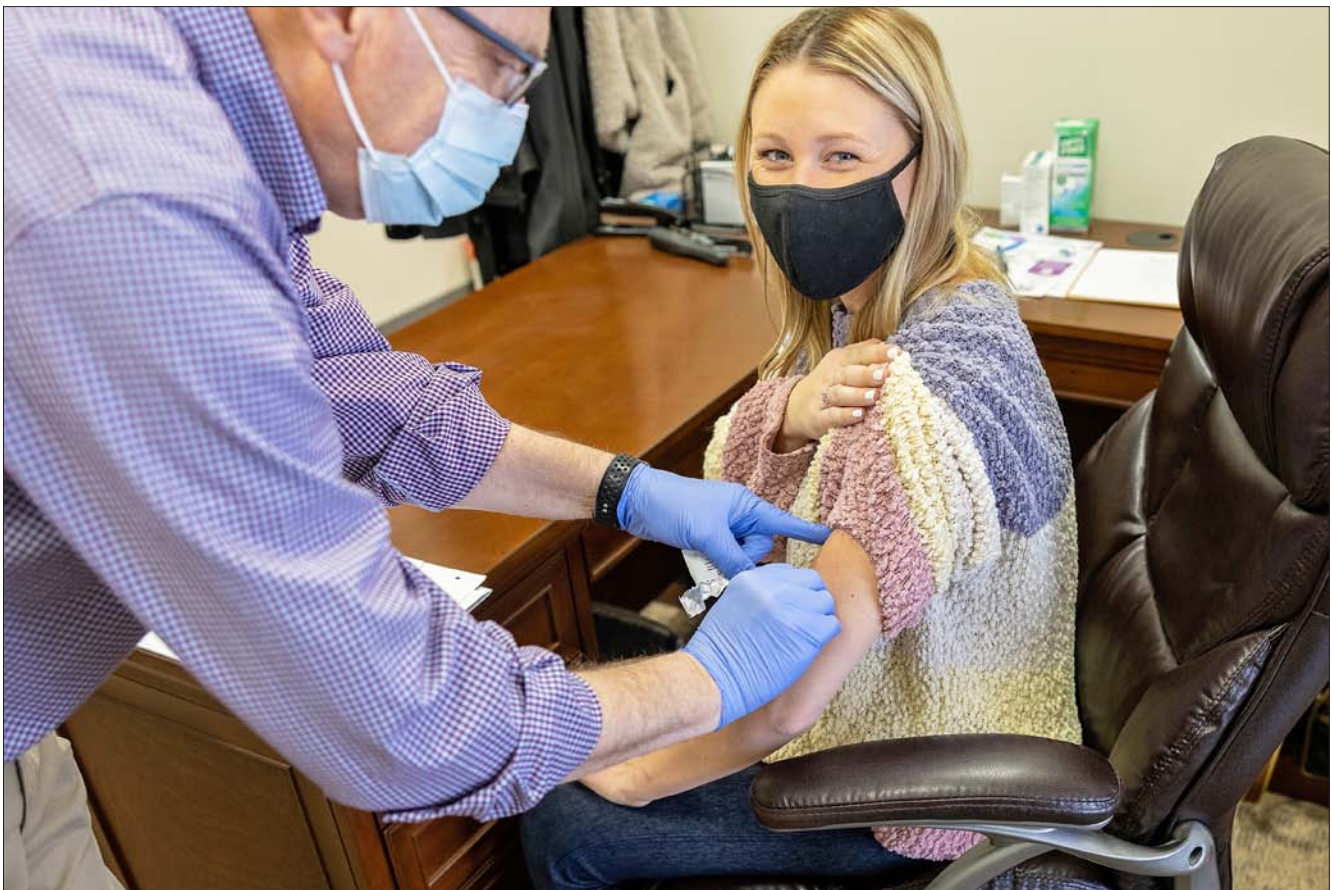
HEALTHCARE PARTNERS OR OTHER RESOURCES, INCLUDING TELEMEDICINE

- Piatt County Health Department
- Mental health agencies, providers, and organizations

COMMUNITY RESOURCES

- Schools
- Community leaders
- Local government leaders
- Community organizations
- Faith-based organizations
- Piatt County Sheriff
- Faith In Action – *services for seniors*







Documentation



Online Presence



Comments



Implementation

DOCUMENTING AND COMMUNICATING RESULTS

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

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



Creating a Post-COVID Response



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IMPLEMENTATION STRATEGY

PLANNING PROCESS

The Implementation Strategy was developed through a facilitated meeting involving key administrative staff at Kirby Medical Center on January 18, 2022. The group reviewed the needs assessment process completed to that point and considered the prioritized significant needs and supporting documents. They discussed steps taken to address the previous Community Health Needs Assessment. They also considered internal and external resources potentially available to address the current prioritized needs.

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

The group addressed the needs with the following strategies:

1. Create a community-wide post-COVID response for adults and youth

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

- Kirby Medical Center will collaborate with local officials, providers, agencies, and organizations within the communities to recognize the potential post-COVID needs of the communities and begin to analyze, assist, and move together toward solutions.

Anticipated impacts of these actions:

- The collaborative approach to post-COVID is expected to prepare the communities, optimize their combined resources and provide pro-active, realistic, complementary approaches to the issues anticipated post-COVID including improvement of physical and mental health services, advancement of community well-being, and opportunities for socialization of all age levels.

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

- Administration
- Kirby Medical Group
- Kirby Health and Wellness
- Quality and Community Advisory Committee of the Governing Board

Planned collaboration between the hospital and other facilities:

- Local government officials
- Public Health
- Schools
- Mental health agencies, providers, and organizations
- Community organizations
- Faith-based organizations

2. Identify and address gaps in transportation related to:

- Flexibility in and outside of Kirby Medical Center service area for transportation to and from local appointments
- Transportation to out-of-the-area substance use disorder and other mental health services

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

- Kirby Medical Center will investigate ways to make availability of KMC van service better known.
- Kirby Medical Center will collaborate with the Sheriff to explore transfers out-of-the-area for mental health and substance use disorder services.

Anticipated impacts of these actions:

- Kirby Medical Center anticipates that the selected actions will increase community awareness of additional available, flexible, local transportation options and address transportation needs for out-of-the-area services for persons with mental health issues and substance use disorders.

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

- Administration
- Marketing

Planned collaboration between the hospital and other facilities:

- Piatt County Sheriff

3. Identify location and patterns of poverty within the Kirby Medical Center service area and address issues related to scattered or isolated poverty

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

- Kirby Medical Center will utilize new U.S. Census and other data in combination with input from local government officials and faith-based organizations to identify poverty in the smaller communities and rural areas, analyze its impact to health and wellness, and plan for mitigation.

Anticipated impacts of these actions:

- Kirby Medical Center anticipates that the actions described will lead to improvement of the health and wellness of those in poverty within the hospital's service area.

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

- Administration
- Quality and Community Relations Committee of the Governing Board
- Wellness

Planned collaboration between the hospital and other facilities:

- Local government officials
- Faith-based organizations
- Faith In Action – *services for seniors*

4. Identify and plan to address mental health and wellness needs across the Kirby Medical Center service area

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

- Kirby Medical Center will continue new mental health services
- Kirby Medical Center will continue community wellness programming including education, cooperation with food pantries, and other providers
- Kirby Medical Center will work to increase community understanding of the links between physical and mental wellness

Anticipated impacts of these actions:

- Kirby Medical Center anticipates that the actions described will help to better address health and wellness needs across the service area through development of new services and programs, improved collaboration among providers, and better understanding of the concepts of health and wellness, their interaction, and their importance to each other.

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

- Health and wellness

Planned collaboration between the hospital and other facilities:

- Schools
- Food pantries
- Local businesses
- Kirby Medical Group
- Piatt County Mental Health
- Other mental health counselors and providers





Focus Groups



Administration



Organizations



Business

REFERENCES AND APPENDIX

Community Members – Focus Group One

John Carter, Monticello Police Department

Scott Harris, Atwood Board Member and first responder

Larry Stoner, City of Monticello

Jerry Dusenberry, Monticello Christian Church

Mark Vogelzang, Piatt County Sheriff

Karla Bradley, Kirby Medical Center Board of Directors

Rachel LeJeune, Willow Tree Missions

Jill Maxey, Willow Tree Missions

Sheila Greenwood, Bement C.U.S.D. #5

Adam Clapp, Monticello C.U.S.D. #25

Tony Kirkman, Piatt County Mental Health Executive Director
and The Kirby Foundation Board Member

John Rupkey, Monticello Fire & Rescue

Ray Spencer, Piatt County Board

Medical Providers and Professionals – Focus Group Two

Tony Kirkman, Piatt County Mental Health Executive Director
and The Kirby Foundation Board Member

Sheila Lanker, RN, Monticello C.U.S.D. #25

Leslie Sheets, Director of Nursing, Kirby Medical Center

Stephanie Whooley, Christie Clinic

Jennifer Moss, Chief Clinical Officer, Kirby Medical Center

Crystal Alexander, EMS/Ambulance Services, Kirby Medical Center

Dr. Narain Mandhan, Chief Medical Officer, Kirby Medical Center

Dr. Kevin Kim, Carle

Identification and Prioritization Group

Mark Vogelzang, Piatt County Sheriff

Tony Kirkman, Piatt County Mental Health Executive Director
and The Kirby Foundation Board Member

Jill Maxey, Willow Tree Missions Executive Director

Mary Vogt, Bement School Superintendent

Leadership Planning Group

Narain Mandhan, Chief Medical Officer, Kirby Medical Center

Jennifer Moss, Chief Clinical Officer, Kirby Medical Center

Andrew Buffenbarger, Chief Compliance Officer, Kirby Medical Center

Anna Crawford, Wellness Coordinator, Kirby Medical Center

Tony Kirkman, Piatt County Mental Health Executive Director
and The Kirby Foundation Board Member



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