



# Partnership for a Healthy Community Board Meeting

March 25, 2021  
1:00pm-2:30pm  
Teams

## AGENDA

1. **Approve 02/25/2021 meeting minutes (Action) (Pages 2-3)**
2. **Board Business**
  - a. Board Members (Action) **(Pages 4-6)**
  - b. Onboarding New Board Members/New Member Orientation (Discussion) *(Holly Bill)*
  - c. Approval of the 2020 Annual Report (Action) **(Pages 7-21)**
  - d. CHNA Survey (Discussion) **(Pages 22-27)**
3. **Committee Updates**
  - a. Mental Health & Substance Use **(Pages 28-31)**
  - b. HEAL **(Pages 32-33)**
  - c. Cancer **(Pages 34-35)**
  - d. Data Team
4. **Member Announcements**

**Next Meeting:**  
Thursday, April 22, 2021  
1:00pm-2:30pm  
TBD



## Partnership for a Healthy Community Board Meeting Minutes February 25, 2021

### Members Present via Microsoft Teams:

|                    |                  |
|--------------------|------------------|
| Monica Hendrickson | Amy Fox          |
| Beth Crider        | Holly Bill       |
| Sally Gambacorta   | Tricia Larson    |
| Joel Shoemaker     | Adam Sturdavant  |
| Kate Green         | Larry Weinzimmer |
| Ann Campen         | Chris Setti      |
| Greg Eberle        | Tim Heth         |
| Lisa Fuller        |                  |

### Others Present:

|              |             |
|--------------|-------------|
| Amanda Smith | Amy Roberts |
|--------------|-------------|

### Approval of 01/28/2020 Meeting Minutes

Mr. Weinzimmer made a motion to approve the meeting minutes from the January 28, 2021 meeting. Motion was seconded by Mr. Setti. Motion carried (14,0).

### **Ms. Larson entered the meeting at 1:04pm.**

### Board Business

#### Reorganization of Committee Structure

Ms. Hendrickson stated her and Ms. Fuller met and discussed the structure. Moving forward, Ms. Hendrickson and Mr. Heth will no longer Chair the Data Committee, and Ms. Amanda Smith will. Also, Ms. Smith will be attending the four priority area meetings as the Data Representative. Ms. Smith will no longer be able to be the Support person for HEAL or Cancer's priority area meetings. They Chairs for HEAL and Cancer will need to find another Support person to fill that role. Ms. Smith stated that she is looking to reset everything to see what can be accomplished quickly with data and what challenges come up. Ms. Hendrickson noted that in March the priority areas should have their dashboards "audited" with Ms. Smith.

#### 2021 Co-Chair Annual Objectives

Ms. Hendrickson stated that their short-term goals, for the next two months are the Annual Meeting and the Data Review and Reset with Ms. Smith. For mid-term goals, the next two-eight months would be the next CHNA and to engage the Marketing Committee and an Intern. For long-term goals, into the next year, to review and update the by-laws and to formalize the Partnership – 501(c)3. There was some discussion around preparing for the upcoming CHNA.

#### Annual Meeting/Annual Report

The Board discussed the results from the Doodle Poll and decided on Monday, March 22<sup>nd</sup> from 9:00-11:00 for the Annual Meeting. Ms. Roberts will send out a calendar invite to block the date to the Board and the Co-Chairs. Ms. Hendrickson asked if Mr. Setti has staff that would be willing to help with setting up the technical side of the meeting and Mr. Setti stated he would ask his staff. Ms. Bill asked about using the template from the Annual Report from last year. The Board agreed that would be best. The Board will not meet again prior to the Annual Meeting date set, so the Annual Report will need to be approved via email. Mr. Shoemaker stated that he can be an editor

for the report. Ms. Hendrickson suggested a meeting in between Mr. Shoemaker, Mr. Heth, Mr. Eberle, & Ms. Bill to go work on the Annual Report. Ms. Hendrickson asked for a draft a week before the meeting. The format that has always been used in the past was Canva. Ms. Hendrickson stated that her and Ms. Roberts will work on an agenda for the meeting.

### **Committee Updates**

#### **Mental Health & Substance Use**

Ms. Bill stated at the last meeting there was a presentation from AMT's Kelly Walsh – talking about what happens when someone calls 911. They are looking at ways to help the EMTs, as they have a higher rate of suicide. Kelly is hoping to form a First Responder Mental Health Task Force. Also, Helping EMTs Help Others – the training chapter is very small and EMTs are uncomfortable asking individuals if they are feeling suicidal/are suicidal and they would like more training on how to ask those questions. Ms. Bill would like a deeper dive in the CHNA data, if they targeted specific audiences from their own data – who would that be. Also, looking deeper into anxiety, depression, and stress. Next month this group will join together but have 2 different breakout groups and identify leads for each objective area. Ms. Bill highlighted the areas on the dashboard for the data is still needing.

#### **HEAL**

Mr. Eberle also agreed this temple was very helpful. Shanita sent out a copy of the HEAL newsletter, which was shared with the Board for things that are going on in the community. They are continuously building with new members and have a better direction of what they're looking for. Ms. Fox stated for Food Insecurity, they did turn in the Community Foundation grant application and are now waiting. They are pushing out the food pantry network videos and did some of their first policy work.

#### **Cancer**

Mr. Heth stated the Cancer group met twice and the minutes should be posted on the discussion board. Ms. Smith stated at one of the meetings they talked about what can be done around the marketing, possibly in radio and Healthy Cells. There was also data discussion to make sure the different providers match, so they're comparing apples to apples.

### **Member Announcements**

Ms. Fuller shared that OSF on the MSS practices, they are going live on March 2<sup>nd</sup> and will be doing a deployment of social determinants of health questionnaires and referrals to community resources. Community nurses will go live in March with the same questionnaires. This will be another source of data the Board can get.

**Next Meeting: March 25, 2021**

**1:00-2:30**

**Microsoft Teams**

# Amelia Boyd, MBA/MHA, FACHE

[ameliagb1@yahoo.com](mailto:ameliagb1@yahoo.com)

Phone: 321-213-1667

7676 Pin Oak Drive, Manito Illinois

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## **STRATEGIC PLANNING, DEVELOPMENT & MARKETING EXECUTIVE**

Senior level executive responsible for a variety of roles including strategic planning, marketing, patient satisfaction, process engineering and business development for healthcare facilities and systems of all sizes and configurations.

Longstanding track record producing actionable results managing multi-disciplinary teams that include representatives from managed care, legal, marketing, health plans, IT, project management, facilities and construction while fostering collaboration by utilizing data-driven decision making.

Experience supporting the growth and stabilization of existing markets and networks working with senior leadership, facility and clinical leaders, physicians (both independent and affiliated) and front-line staff to develop innovative plans and strategies to grow volumes, enhance in-network retention, develop partnerships and create new and complementary businesses and services for the system and community.

## **Professional Experience**

### **UnityPoint Health, Peoria IL**

**November 2018 - Present**

#### **Regional VP Strategy & Planning – Central Illinois**

Responsible for the organization and direction of the planning, business development, process engineering and marketing activities of the UnityPoint Central Illinois Region, its subsidiary corporations and strategic business units. The fundamental purpose is to achieve earnings growth through:

- Geographic expansion,
- Service development and enhancement,
- Market segmentation,
- Diversification and evaluation of existing services and
- Business process re-engineering.

### **SSM Health, St Louis, MO**

**November 2015 – October 2018**

#### **System VP Strategic Development Mid/Northwest Missouri**

Oversee regional strategy and business development activities including development of annual and 5-year strategic plans, medical group strategies, local joint ventures and rural health business development for 3 hospitals and 27 physician offices. Initiatives included:

- Development of telemedicine capabilities for multiple service lines including collaboration with system hospitals for Tele-NICU, Tele-ED and Tele-Stroke;
- Establishment of Direct to Employer strategies with both large and small employers in primary and secondary service areas to expand commercial payor mix;
- Physician strategies to grow revenue-generating service lines through alignment with employed and independent proceduralists, recruitment of primary and specialty care providers and selective placement of clinics and ambulatory services;
- Design of analytics and strategies to increase in-network retention for ambulatory services and
- Identification, implementation and monitoring of marketing plans for existing service lines and new technologies and services the market.



**Hutchinson Regional Healthcare System, Hutchinson, KS** **November 2014 – October 2015**  
**Vice President Marketing & Business Development**

Responsible for Hutchinson Regional Healthcare System's corporate strategic planning, marketing and business development resulting in the execution of enhanced existing and new business ventures. Oversee the broad functional areas of marketing, advertising, public relations, media relations, market research and government relations. Champion, model and promote service excellence philosophies and behaviors at all levels to enhance the overall patient experience.

Projects included:

- Evaluation of financial viability of a merger or acquisition with another healthcare entity;
- Redesign of the system's internet, incorporating new technology including, bill pay, appointment scheduling, online purchasing and baby pictures;
- Development of Master Facility Plan incorporating both short-term and long-term goals;
- After completing the bi-annual Board of Directors Strategic Planning retreat, development of the system Strategic Map and System Plan to cascade system goals throughout the organization.

**Health First, Rockledge, FL** **November 2007 – October 2014**  
**Director of Business Development & Strategic Planning**

Responsible for Health First corporate strategic planning and business development resulting in the execution of enhanced existing and new business ventures.

- Technology evaluation, market analysis and proforma development resulting in purchase of 2<sup>nd</sup> daVinci Robot. Since installation 46% increase in robotic surgeries and the addition of thoracic surgeries to the specialty mix;
- Utilizing internal financial and clinical data, identified opportunity for the development of Vein & Vascular Center with cosmetic component that resulted in over 200 procedures in 4 months;
- Identified market opportunity in Heart & Vascular service line to create a Valve Clinic. Managed business planning, financial analytics and space identification that resulted in clinic opening and a positive revenue stream in the first 3 months.
- Building on the success of the "own use" pharmacy, created a discharge pharmacy for patients discharged from tertiary facility. As of 10/14, dispensing an average of 700 scripts a month, all new revenue to the system.
- Following acquisition of a 150-person medical group resulting in 235,000 sq ft. of additional medical office space, outpatient imaging, lab, therapy and cancer services, managed the evaluation and integration of services into the system based on geographic location, utilization and community need.
- Creation of physician supply and demand analysis methodology and supporting data to assist senior leadership in formulating strategy for acquisition, affiliation or alignment of physicians by specialty and geographic area over the next 5-7 years.

**Manager of Business Development** **October 2005 – October 2007**

Develop new growth and partnership opportunities and leverage current products and services.

- Managed the successful submission of the Certificate of Need for the Health First Viera Hospital, an 84-bed \$166M facility that was opened on time and under budget in April 2011.
- Define strategies for identifying target markets and competition to grow Health First's market presence.
- Perform market research and analyze financial data to identify and structure new business.

**Senior Project Manager – Patient Relations** **October 2001 – September 2005**

Coordinate and oversee planning assessment, implementation, and evaluation of all patient satisfaction programs and initiatives directed towards the achievement of the highest level of patient satisfaction.

## **Education**

- Master of Business Administration/Health Administration, Florida Institute of Technology – graduated cum laude;
- Bachelor of Science in Journalism (Public Relations), double minor in English and Psychology, West Virginia University – graduated cum laude.

## **Professional Development**

- Fellow, American College of Healthcare Executives
- Mentor – American College of Healthcare Executives
- Lean Yellow Belt

## **Professional Memberships**

- American College of Healthcare Executives
- Public Relations Society of America
- Society for Healthcare Strategy & Market Development
- Greater Peoria Economic Development Council Executive Committee 2019-2020
- United Way Campaign Chair – UnityPoint Central Illinois 2019-2020
- American Heart Association Central Illinois Heart Ball Executive Leadership Team 2021
- Board of Directors Jefferson City Chamber of Commerce 2015-2018
- Board of Directors SSM Health St. Mary's Hospital – SSMHealth St. Mary's Audrain 2015-2018
- Zonta – Jefferson City 2015-2018
- American Heart Association Board Member, Jefferson City 2015-2018
- United Way Finance Committee Hutchinson KS 2015



# PARTNERSHIP FOR A HEALTHY COMMUNITY

2020 ANNUAL REPORT



Partnership for a  
Healthy Community

[healthyhoi.org](http://healthyhoi.org)

[WWW.HEALTHYHOI.ORG](http://WWW.HEALTHYHOI.ORG)

## 2020 Board Members

**Lisa Fuller, Co-Chair**  
OSF Saint Francis

**Monica Hendrickson, Co-Chair**  
Peoria City/County Health Department

**Tim Heth, Vice-Chair**  
UnityPoint Health

**Amy Fox, Secretary**  
Tazewell County Health Department

**Hillary Aggertt**  
Woodford County Health Department

**Holly Bill**  
Hult Center for Healthy Living

**Ann Campen**  
Tazwood Center for Wellness

**Beth Crider**  
Peoria Regional Office of Education

**Len Ealey**  
Pekin Public School District

**Greg Eberle**  
Hopedale Medical Complex

**Sally Gambacorta**  
Advocate Eureka Hospital

**Tricia Larson**  
Tazewell County Board of Health

**Joel Shoemaker**  
Illinois Prairie District Public Library

**Adam Sturdavant**  
OSF Medical Group - Pediatrics

**Larry Weinzimmer**  
Bradley University

**Jennifer Zammuto**  
Heart of IL United Way

# Partnership for a Healthy Community

We are pleased to present the 2020 Partnership for a Healthy Community Annual Report.

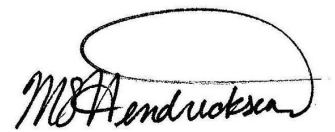
The Partnership for a Healthy Community (PFHC) began 2020 excited to start our new three-year cycle as a tri-county partnership with strong leadership and implementation plans in place. However, the past year was certainly not what we had expected or planned for. Before we knew it, our focus shifted to the COVID-19 pandemic, ensuring the safety and health of our communities. While 2020 had many challenges, we were no less encouraged that our priority groups were able to continue their work, never losing sight of the needs of our community. We were able to continue initiatives within our partnership to address the health priorities of Peoria, Tazewell, and Woodford counties.

Though we were unable to move the metrics as much as we had planned due to the pandemic, we still reflect on the first year of the 2020-2022 cycle inspired by the success of the Partnership and all involved. The PFHC continues to expand collaborations, increase shared funding, and create a culture between organizations towards our vision.

The PFHC Board is proud of the work of our Action Teams and looks forward to tackling the challenges ahead of us as a partnership.



Lisa Fuller, Co-Chair



Monica Hendrickson, Co-Chair



**Partnership for a  
Healthy Community**

healthyhoi.org

## Executive Summary

The successful adoption of the 2020-2022 Community Health Improvement Plan (CHIP) demonstrated the capacity and sustainability of the Partnership's multi-sector approach in addressing health within the tri-county. In 2020, the Partnership for a Healthy Community continued to address priority health concerns, despite the COVID-19 pandemic setbacks. The Partnership and its Action Teams will continue to expand the collaborative strategies in priority areas, and begin planning and conducting a new Community Health Needs Assessment (CHNA) and Improvement Plan (CHIP) beginning summer 2021.

### Highlight: 2020-2022 CHNA/CHIP

The Partnership for a Healthy Community (PFHC) continued to monitor and implement strategies identified in the 2020-2022 Community Health Improvement Plan (CHIP).

PFHC will continue to strategically focus on Mental Health, Substance Use, Healthy Eating/Active Living, and Cancer.

Additionally, Reproductive Health and Data Collaboration will be on-going projects in the new cycle.

The PFHC will begin conducting a new CHNA summer 2021.



# Mental Health

*Improve mental health among tri-county residents through preventative strategies and increased access to services.*

The Mental Health Action Team strived to improve mental health through a variety of evidence-based strategies outlined in the Implementation Plan. During 2020, the Action Team held meetings with the Substance Use Action Team, as many committee members work in both areas. The teams helped to improve trauma-informed practices throughout local schools, increase access to Mental Health First Aid trainings and suicide prevention education, and continued to increase the number of behavioral health providers throughout primary, specialty, and prompt care settings.

## Navigating the Virtual World

COVID-19 INCREASED THE NEED FOR MENTAL HEALTH SERVICES

Our community hospitals responded to this increased demand by offering virtual mental health care visits and online mental health resources. Our hospitals are continuing to advocate for mental health telehealth services to be reimbursed by insurance plans in hopes to increase access for those who need it most.

## Suicide Prevention in Central Illinois

**968** tri-county residents trained in suicide prevention in 2020

**Evidence-based suicide prevention education is available for Youth & Adults throughout the tri-county!**

- teachers
- parents & caregivers
- administrators
- businesses
- media representatives
- public health workers
- security guards
- healthcare workers
- ...everyone!

To learn about suicide prevention trainings and education for yourself or your team, please email Hult Center for Healthy Living [info@hulthealthy.org](mailto:info@hulthealthy.org) or call (309) 692-6650.

## Increasing Access to Mental Health Care

The Action Team has been working to increase the number of providers in the tri-county with behavioral health care integrated into the clinic setting. Incorporating behavioral health services into clinic settings helps improve access to mental health services and **produces better health outcomes** for our community members.



# Mental Health First Aid

Mental Health First Aid is a skills-based training course that teaches participants how to recognize a mental health crisis and properly refer someone to help. We can provide this training in-person or virtually at low- or no-cost. In 2020, the Mental Health Action Team formed a cadre of Mental Health First Aid Trainers who are able to train individuals throughout the tri-county. ALGEE, the Mental Health First Aid koala mascot, helps participants remember the 5-step action plan.

There are a variety of courses available:

- **Adult Mental Health First Aid** is appropriate for anyone age 18 and older who wants to learn how to help a person who may be experiencing a mental health related crisis or problem. The adult course is available in both English and Spanish.
- **Youth Mental Health First Aid** is primarily intended for adults age 18 and older to learn how to help young people experiencing mental health challenges or crises. It reviews the unique risk factors and warning signs of mental health problems in adolescents ages 12-18 and emphasizes the importance of early intervention.
- **Special trainings and certificates** are available for **older adults, EMT/fire, and higher education.**

## Do you want to be certified in Mental Health First Aid?

To inquire about a Mental Health First Aid Training for yourself or your team, please visit [www.healthyhoi.org](http://www.healthyhoi.org).

# 2,025

tri-county residents are certified in Mental Health First Aid



MENTAL  
HEALTH  
FIRST AID

Recognize the signs.

Know how to respond.

Be a lifeline.

A.L.G.E.E.



# Substance Use

**Reduce substance use to protect the health, safety, and quality of life for tri-county residents.**

The Substance Use Action Team has a variety of strategies designed to reduce substance use in the tri-county area. Efforts in criminal justice, harm reduction, youth education, and mass media campaigns are just a few of the ways the team is working to improve health.

The action team is using three strategies to **reduce the proportion of tri-county adolescents never using substances:**

**#1 MASS MEDIA CAMPAIGNS**

**#2 YOUTH LEADERSHIP PROGRAMS**

**#3 TECHNOLOGY-ENHANCED CLASSROOM INSTRUCTION**

## YOUTH LEADERSHIP PROGRAMS

Community partners are identifying high school students who are interested in becoming **Certified Peer Educators!**

To learn about this opportunity, please email [info@hulthealthy.org](mailto:info@hulthealthy.org).



## MASS MEDIA CAMPAIGNS

The Mental Health Action Team selected Mass Media Campaigns as a strategy to help spread awareness of chemically-impaired driving, underage drinking, and binge drinking. Tazewell County Health Department took the lead on this initiative. The Illinois Youth Survey Data became available in late 2020. The team has created messaging based on this data and will focus on alcohol, marijuana, and prescription drugs. Check out the Tazewell Teen Initiative (TTI) Facebook Page to learn more about their efforts and help spread awareness.



**Find Tazewell Teen Initiative on Facebook @tazewellteeninitiative and help us promote safety and responsible behavior among teens.**



# Substance Use

THERE ARE THREE STRATEGIES TO HELP REDUCE THE RATE OF DRUG-INDUCED DEATHS IN THE TRI-COUNTY.

#1 **CRIMINAL JUSTICE**

#2 **HARM REDUCTION EFFORTS**

#3 **TECNOLOGY-ENHANCED CLASSROOM INSTRUCTION**

Narcan is saving approximately **8 people** each month in the tri-county area.

*Source: Opioid Hub, Peoria City/County Health Department*

## Overdose Data

**200+**

Number of ED visits in 2020 related to opioid overdose for Peoria, Tazewell, and Woodford Counties

**971**

In 2020, the number of Narcan administrations reported by the Narcan Advisory Group

There is now an online Opioid Hub where you can view the data that the Narcan Advisory group has collected over the past 3 years.

**[Click here to visit the online Opioid Hub!](#)**

## TECNOLOGY-ENHANCED CLASSROOM INSTRUCTION

- The Action Team set a goal, outlined in the Implementation Plan, to have at least nine schools enroll in an online **Prescription Drug Safety Program**.
- In total, 11 schools participated in the program in 2020. 716 students throughout the tri-county region participated in the program.

**All middle and high schools in the tri-county have access to the Prescription Drug Safety program at no cost, thanks to funding provided by UnityPoint Health. To enroll, please email [info@hulthealthy.org](mailto:info@hulthealthy.org).**

**716**

STUDENTS PARTICIPATED IN VIRTUAL PRESCRIPTION DRUG SAFETY EDUCATION



# Healthy Eating Active Living

*Foster and promote healthy eating and active living to reduce chronic disease and food insecurity in the tri-county area.*

## Addressing Food Insecurity with HEAL Food System Partners (FSP)

HEAL Food System Partners surveyed adequacy of the foods provided by the food banks and pantries as it relates to nutrition and cultural needs and preferences.

*Funding for the HEAL Food System Partners is provided, in part, by Community Foundation of Central Illinois.*

In 2020, HEAL FSP conducted a survey among food pantry guests and volunteers to increase advocacy and support for local and healthy procured foods.

### Survey Results:

Both food pantry guests and volunteers wanted:

### Healthy recipes

**Fruits** were the most requested support for food pantry guests and managers  
**Vegetables & Lean Meats**

## GROW A ROW

Farmers donate extra produce to pantries.

**5**

**18,626**

Gardens participated

Pounds of fresh foods distributed



Illinois Extension | Fulton-Mason-Peoria-Tazewell Unit

## Food Pantry Network

Led by University of Illinois Extension SNAP-Ed and Tazewell County Health Department, Food Pantry Network-HOI (FPN-HOI) consists of 80 members and counting and has led the charge in mobilizing local food, resources, and funds to support and broaden access of healthy foods to families in the community most in need.

## 12 Mobile Pantries

**1,500+ USDA Farmer's to Families boxes distributed**  
**Over 30,000 pounds of food**



# Healthy Eating Active Living

## Addressing Youth Obesity with Interactive Education

### Time Away from Screens

University of Illinois Extension provided K -12 youth with STEAM (Science, Technology, Engineering, Agriculture and Mathematics) activity kits in effort engage in learning without a screen.

**University of Illinois Extension partnered with food pantries, schools and community organizations to distribute 826 kits in Woodford County.**



*Photo was taken prior to the COVID-19 pandemic.*

### Healthy Kids U in Motion

The family-based weight management program, Healthy Kids U in Motion, is a 10-week program that helps children ages 8 -15 and their families develop healthier habits through hands-on games, activities, and education.

### Healthy Cents

University of Illinois Extension collaborated with HEAL-Food System Partners (HEAL-FSP) to provide **virtual nutrition classes** reaching low-income adults in the tri-county.

### Illinois State Physical Activity and Nutrition program (ISPAN)

ISPAN has been continuing work on continuity of care in community support of breastfeeding. Our Region is focusing to support through CenteringPregnancy.

**22 certified lactation specialists were trained in 2020**

## Addressing Adult Obesity with the Diabetes Prevention Program

The Diabetes Prevention Program is a year-long evidence-based program that offers participants support and accountability as they strive to make lasting lifestyle changes to prevent/delay the onset of type 2 diabetes. To learn more about enrolling for this program, please email [info@hulthealthy.org](mailto:info@hulthealthy.org).

### A Certified Lifestyle Coach works with participants to:

- Increase exercise to 150+ minutes per week
- Reduce body weight by 5-7%

**56 adults enrolled in the Diabetes Prevention Program**

**407 pounds lost**



# Cancer

Reduce the illness, disability and death caused by lung, breast, and colorectal cancer in the tri-county area.

## OBJECTIVES:

By 2022, reduce the female breast cancer age-adjusted death rate by 1%.

By 2022, reduce the colorectal cancer age-adjusted death rate by 1%.

By 2022, reduce the lung cancer age-adjusted death rate by 1%.

## Screening by the Numbers

**Lung Cancer:** Increase the number of low-dose CT lung cancer screenings provided to qualifying individuals in the tri-county.

2,976 CT lung cancer  
screenings in 2020  
(2020 data)

Baseline = 2,203  
2020 = 2,976

**Breast Cancer:** Increase the percentage of women aged 50-74 who have had a mammogram in the past two years.

71.6% Peoria  
70.5% Tazewell  
72.6% Woodford  
(2018 data)

Healthy People  
2030 Target = 77.1

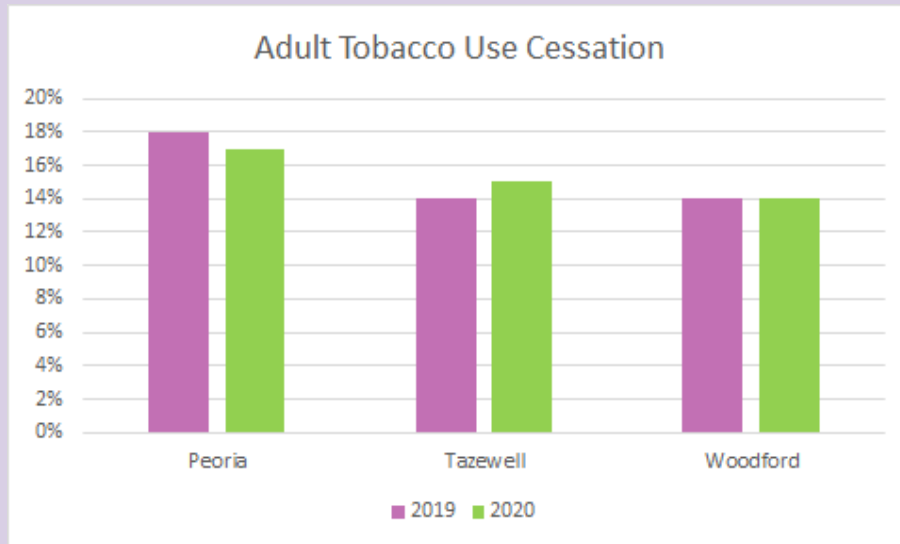
**Colorectal Cancer:** Increase percentage of respondents aged 50-75 who have had either a fecal occult blood test in the past year, a sigmoidoscopy in the past five years AND a fecal occult blood test in the past three years, or a colonoscopy exam in the past ten years.

63.8% Peoria  
66.0% Tazewell  
69.9% Woodford (2018 data)

Healthy People  
2030 Target = 74.4

# Cancer

**Strategy: Reduce the percentage of adults in the tri-county who are current smokers**

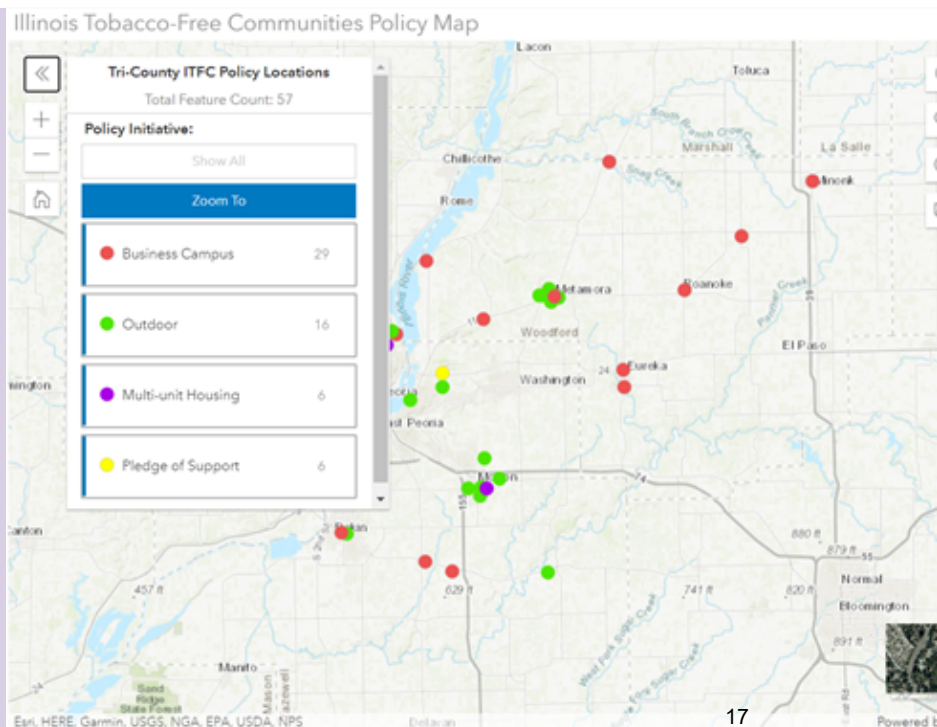


**Smoking tobacco is the single most important preventable cause of illness and death in the United States.**

**Nationally, smoking is responsible for 1 in 5 deaths.**

To request assistance in making your multi-unit housing spaces, businesses, or outdoor spaces smoke-free, email [peoriahealth@peoriacounty.org](mailto:peoriahealth@peoriacounty.org) or visit [Illinois Tobacco-Free Communities on PFHC website](https://www.illinois.gov/Health/ITFC).

*Capture of interactive map from [healthyhoi.org](http://healthyhoi.org) showing the number of new tobacco-free spaces. Last year the tri-county team helped enact 19 more policies bringing the total from several years of advocacy to 57!*



# Reproductive Health

To improve and promote reproductive and sexual health of adolescents and young adults.

## Baseline Information:

- 851 cases of chlamydia in Peoria County, 562.7 in Illinois.
- 323.3 cases (per 100,000) of gonorrhea in Peoria, 165.2 in Illinois.
- 9.0% preterm birth in Peoria County, 6.0% in Tazewell and Woodford Counties.

#1

**Decrease chlamydia and gonorrhea among 15-24 year olds by December 31, 2022**

- Comprehensive sexual education offered in schools
- 5 P's
- Provider education and expedited partner therapy

#2

**Expand outreach, education and marketing efforts in alignment with Getting to Zero Illinois.**

- Behavioral interventions to prevent HIV and other STIs
- LGBTQ and PrEP education
- Outreach and engagement via GYT events

#3

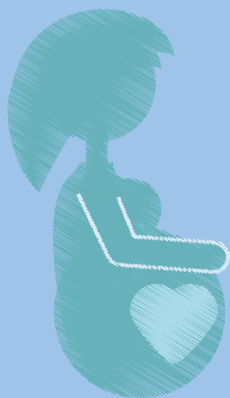
**Decrease preterm birth among Peoria County infants from 9.0% to 8.0% by December 31, 2022**

- CenteringPregnancy
- Preconception
- Home visiting

## CenteringPregnancy

*Improved health outcomes for both mothers and infants.*

To address preterm birth rates as well as access to prenatal care, the Reproductive Health Action Team adopted CenteringPregnancy as an evidence-based program to address risk factors and improve birth outcomes. The program uses a cohort approach in which women due near the same time receive healthcare and wraparound support. The results are improved health outcomes for both mother and infant.



**52** Participants

**89.4%** Singleton births at fullterm births

CenteringPregnancy  
Peoria



# 2020-2022 **Community Health Needs Assessment & Improvement Plan**

In 2019, the Partnership for a Healthy Community embarked on the planning of the 2020-2022 Community Health Improvement Plan (CHIP). The PFHC Board adopted a collaborative approach including a focus on identifying social determinants of health and their impact on health priorities.

The Community Health Needs Assessment (CHNA) was used to assist in identification of health concerns and included primary and secondary data from a variety of sectors and community survey on perception. The PFHC hosted a meeting with over 100 community members representing various sectors to prioritize four strategic health priorities.

## **Mental Health**

Improve mental health among tri-county residents through preventative strategies and increased access to services.

## **Substance Use**

Reduce substance use to protect the health, safety, and quality of life for tri-county residents.

## **Healthy Eating & Active Living**

Foster and promote healthy eating and active living to reduce chronic disease and food insecurity in the tri-county area.

## **Cancer (Breast, Lung, & Colorectal)**

Reduce the illness, disability and death caused by breast, lung, and colorectal cancer in the tri-county area.

# TRANSPARENCY & ACCOUNTABILITY

## *healthyhoi.org*

The Partnership for a Healthy Community (PFHC) recognizes that to impact true change, the work of those involved needs to be open and available to the communities we serve. Our goal of transparency and accountability is to create an informed public, support collaborations, and provide a platform for engaging a variety of stakeholders.

Beginning in 2020, the new [WWW.HEALTHYHOI.ORG](http://WWW.HEALTHYHOI.ORG) website was launched and offers updated information on meetings, projects, and support innovation and partnerships. New features include discussion boards, centralized Action Team areas, and routine reporting.

The PFHC continues to seek additional partners agencies and those with lived experience to join the initiative to help create our vision for a thriving community that is inclusive, diverse, and sustainable to ensure health equity and opportunity for well-being for all.

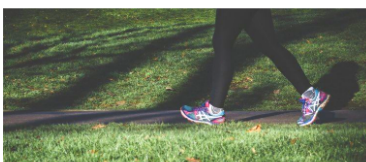


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## Partnership for a Healthy Community

*"The connection between the health and the dwelling of the population is one of the most important that exists."*  
Florence Nightingale

Healthy HOI is a community-driven partnership to improve health and wellness in the Heart of Illinois (HOI).







**Partnership for a  
Healthy Community**  
[healthyhoi.org](http://healthyhoi.org)

## APPENDIX 3. SURVEY

# COMMUNITY HEALTH-NEEDS ASSESSMENT SURVEY

### INSTRUCTIONS

We want to know how you view our community, so we are inviting you to participate in a research study about community health needs. Your opinions are important! This survey will take about 10 minutes to complete. All of your individual responses are confidential. We will use the survey results to better understand and address health needs in our community.

This survey was reviewed by the Committee on the Use of Human Subjects and Research, Bradley University Institutional Review Board (IRB) in June, 2018  
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## COMMUNITY PERCEPTIONS

1. What would you say are the three (3) biggest **HEALTH ISSUES** in our community?

- |  |  |
|--|--|
| <input type="checkbox"/> Aging issues, such as Alzheimer’s disease, hearing loss, memory loss, arthritis | <input type="checkbox"/> Early sexual activity   |
| <input type="checkbox"/> Cancer  | <input type="checkbox"/> Heart disease/heart attack                                    |
| <input type="checkbox"/> Chronic pain  | <input type="checkbox"/> Mental health issues, such as depression, hopelessness, anger |
| <input type="checkbox"/> Dental health (including tooth pain)  | <input type="checkbox"/> Obesity/overweight  |
| <input type="checkbox"/> Diabetes  | <input type="checkbox"/> Sexually transmitted infections                               |
| <input type="checkbox"/> Other _____   |  |

2. What would you say are the three (3) most **UNHEALTHY BEHAVIORS** in our community?

- |   |   |
|---|---|
| <input type="checkbox"/> Angry behavior/violence    | <input type="checkbox"/> Drug abuse (legal drugs) |
| <input type="checkbox"/> Alcohol abuse              | <input type="checkbox"/> Lack of exercise         |
| <input type="checkbox"/> Child abuse                | <input type="checkbox"/> Poor eating habits       |
| <input type="checkbox"/> Domestic violence          | <input type="checkbox"/> Risky sexual behavior    |
| <input type="checkbox"/> Drug abuse (illegal drugs) | <input type="checkbox"/> Smoking                  |
| <input type="checkbox"/> Other _____                |   |

3. What would you say are the three (3) most important factors that would improve your **WELL-BEING?**

- |   |   |
|---|---|
| <input type="checkbox"/> Access to health services  | <input type="checkbox"/> Job opportunities                    |
| <input type="checkbox"/> Affordable clean housing   | <input type="checkbox"/> Less hatred & more social acceptance |
| <input type="checkbox"/> Availability of child care | <input type="checkbox"/> Less poverty                         |
| <input type="checkbox"/> Better school attendance   | <input type="checkbox"/> Less violence                        |
| <input type="checkbox"/> Good public transportation | <input type="checkbox"/> Safer neighborhoods/schools          |
| <input type="checkbox"/> Healthy food choices       | <input type="checkbox"/> Other _____                          |

## ACCESS TO CARE

The following questions ask about your own health and health choices. Remember, this survey will not be linked to you in any way.

### Medical Care

1. When you get sick, where do you go? (Please choose only one answer).

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Clinic/Doctor's office | <input type="checkbox"/> Emergency Department | <input type="checkbox"/> I don't seek medical attention |
| <input type="checkbox"/> Urgent Care Center     | <input type="checkbox"/> Health Department    | <input type="checkbox"/> Other _____                    |

2. In the last YEAR, was there a time when you needed medical care but were not able to get it?

- Yes (please answer #3)       No (please go to #4: Prescription Medicine)

3. If you were not able to get medical care, why not? (Please choose all that apply).

- Didn't have health insurance.  Too long to wait for appointment.  
 Couldn't afford to pay my co-pay or deductible.  Didn't have a way to get to the doctor.

Are there any other reasons why you could not access medical care?

### Prescription Medicine

4. In the last YEAR, was there a time when you needed prescription medicine but were not able to get it?

- Yes (please answer #5)  No (please go to #6: Dental Care)

5. If you were not able to get prescription medicine, why not? (Please choose all that apply).

- Didn't have health insurance.  The pharmacy refused to take my insurance or Medicaid.  
 Couldn't afford to pay my co-pay or deductible.  Didn't have a way to get to the pharmacy.

Are there any other reasons why you could not access prescription medicine?

### Dental Care

6. In the last YEAR, was there a time when you needed dental care but were not able to get it?

- Yes (please answer #7)  No (please go to #8: Mental-Health Counseling)

7. If you were not able to get dental care, why not? (Please choose all that apply).

- Didn't have dental insurance.  The dentist refused my insurance/Medicaid  
 Couldn't afford to pay my co-pay or deductible.  Didn't have a way to get to the dentist.

Are there any other reasons why you could not access a dentist?

### Mental-Health Counseling

8. In the last YEAR, was there a time when you needed mental-health counseling but could not get it?

- Yes (please answer #9)  No (please go to next section – HEALTHY BEHAVIORS)

9. If you were not able to get mental-health counseling, why not? (Please choose all that apply).

- Didn't have insurance.  The counselor refused to take my insurance/Medicaid  
 Couldn't afford to pay my co-pay or deductible.  Embarrassment.  
 Didn't have a way to get to a counselor.

Are there any other reasons why you could not access a mental-health counselor?

## HEALTHY BEHAVIORS

The following questions ask about your own health and health choices. Remember, this survey will not be linked to you in any way.

### Exercise

1. In the last WEEK how many times did you participate in exercise, (such as jogging, walking, golf, weight-lifting, fitness classes) that lasted for at least 30 minutes?

- None (please answer #2)  1 – 2 times  3 - 5 times  More than 5 times

2. If you answered “none” to the question about exercise, why didn’t you exercise in the past week? (Please choose all that apply).

- Don’t have any time to exercise.                       Don’t like to exercise.  
 Can’t afford the fees to exercise.                       Don’t have child care while I exercise.  
 Don’t have access to an exercise facility.                       Too tired.

Are there any other reasons why you could not exercise in the last week?

### Healthy Eating

3. On a typical DAY, how many **servings/separate portions** of fruits and/or vegetables did you have? An example would be a banana (but not banana flavored pudding).

- None (please answer #4)                       1 – 2                       3 - 5                       More than 5

4. If you answered “none” to the questions about fruits and vegetables, why didn’t you eat fruits/vegetables? (Please choose all that apply).

- Don’t have transportation to get fruits/vegetables                       Don’t like fruits/vegetables  
 It is not important to me                       Can’t afford fruits/vegetables  
 Don’t know how to prepare fruits/vegetables                       Don’t have a refrigerator/stove  
 Don’t know where to buy fruits/vegetables

Are there any other reasons why you do not eat fruits/vegetables?

5. Where is your primary source of food? (Please choose only one answer).

- Grocery store                       Fast food                       Gas station                       Food delivery program  
 Food pantry                       Farm/garden                       Convenience store                       Other \_\_\_\_\_

6. What are the biggest challenges to eating healthy in our community? (Please choose all that apply).

- Knowledge                       Convenience                       People don’t care                       Physical challenge/Disability  
 Cost                       Time                       No healthy options                       Transportation                       Other

7. Please check the box next to any of the health conditions that you have. (Please choose all that apply).

If you don’t have any health conditions, please check the first box and go to question #9: Smoking.

- I do not have any health conditions                       Diabetes                       Mental-health conditions  
 Allergy                       Heart problems                       Stroke  
 Asthma/COPD                       Overweight                       Other \_\_\_\_\_  
 Cancer                       Memory problems

8. If you identified any conditions in Question #7, how often do you follow an eating plan to manage your condition(s)?  Never                       Sometimes                       Usually                       Always                       Not applicable

### Smoking

9. On a typical DAY, how many cigarettes do you smoke, or how many times do you use electronic vaping?

- None                       1 - 4                       5 - 8                       9 - 12                       More than 12

### General Health

10. Where do you get most of your medical information? (Please choose only one answer).

- Doctor                       Friends/family                       Internet                       Pharmacy                       Nurse at my church

11. Do you have a personal physician/doctor?  Yes  No
12. How many days a week do you or your family members go hungry?  
 None  1–2 days  3–5 days  More than 5 days
13. In the last 30 DAYS, how many days have you felt depressed, down, hopeless?  
 None  1–2 days  3 – 5 days  More than 5 days
14. In the last 30 DAYS, how often has your stress and/or anxiety stopped you from your normal daily activities?  
 None  1–2 days  3 - 5 days  More than 5 days
15. In the last YEAR have you talked with anyone about your mental health?  
 Yes (please answer #16)  No (please go to #17)
16. If you talked to anyone about your mental health, who was it?  
 Doctor/nurse  Counselor  Family/friend  Other \_\_\_\_\_
17. On a typical DAY, how often to do you use substances (either legal or illegal) to make yourself feel better?  
 None  1–2 times  3-5 times  More than 5 times
18. When you were a child, did a parent or other adult often swear at you, insult you or make you feel afraid?  
 Yes  No
19. Do you feel safe where you live?  Yes  No
20. In the past 5 years, have you had a:
- |   |                              |                             |   |
|---|------------------------------|-----------------------------|---|
| Breast/mammography exam                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not applicable |
| Prostate exam                           | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not applicable |
| Colonoscopy/colorectal cancer screening | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Not applicable |

**Overall Health Ratings**

21. My overall physical health is:  Below average  Average  Above average  
 22. My overall mental health is:  Below average  Average  Above average

**INTERNET**

1. How interested would you be in health services provided through Internet or phone?  
 1 Not interested  2 Somewhat interested  3 Extremely interested
2. Can you get free wi-fi in public locations?  Yes  No
3. Do you have Internet in your home (or where you live)? For example, can you watch Youtube?  
 Yes (please go to next section – BACKGROUND INFORMATION)  No (please answer #4)
4. If don't have Internet, why not?  Cost  No available Internet provider  Data limits  
 I don't know how  Other \_\_\_\_\_

## BACKGROUND INFORMATION

1. What county do you live in?

Peoria       Tazewell       Woodford       Other

2. What is your Zip Code? \_\_\_\_\_

3. What type of health insurance do you have? (Please choose all that apply).

Medicare       Medicaid       Private/Commercial       None (Please answer #4)

4. If you answered “none” to the question about health insurance, why **don’t** you have insurance? (Please choose all that apply).

Can’t afford health insurance       Don’t need health insurance  
 Don’t know how to get health insurance       Other \_\_\_\_\_

5. What is your gender?       Male       Female

6. What is your age?       Under 20       21-35       36-50       51-65       Over 65

7. What is your racial or ethnic identification? (Please choose only one answer).

White/Caucasian       Black/African American       Hispanic/Latino  
 Pacific Islander       Native American       Asian/South Asian  
 Multiracial       Other: \_\_\_\_\_

8. What is your highest level of education? (Please choose only one answer).

Grade/Junior high school       Some high school       High school degree (or GED)  
 Some college (no degree)       Associate’s degree       Bachelor’s degree  
 Graduate or professional degree       Other: \_\_\_\_\_

9. What was your household/total income last year, before taxes? (Please choose only one answer).

Less than \$20,000       \$20,001 to \$40,000       \$40,001 to \$60,000  
 \$60,001 to \$80,000       \$80,001 to \$100,000       More than \$100,000

10. What is your housing status?

Do not have       Have housing, but worried about losing it       Have housing, **NOT** worried about losing it

11. How many people live with you? \_\_\_\_\_

12. What is your job status? (Please choose only one answer).

Full-time       Part-time       Unemployed       Homemaker  
 Retired       Disabled       Student       Armed Forces

Is there anything else you’d like to share about your own health goals or health issues in our community?

---

**Thank you very much for sharing your views with us!**

# Mental Health

Goal: Improve mental health among tri-county residents through preventive strategies and increased access to services



| Objectives  | Source  | Frequency | Baseline  | 2020                                   | 2021 | 2022 |
|---|---|-----------|---|--|------|------|
| By December 31, 2022, decrease the number of suicides in the tri-county area by 10%.  | IDPH<br>Suicide Deaths (per 100,000)                | Annual    | 10.9 Peoria<br>12.0 Tazewell<br>15.8 Woodford                 |  |      |      |
| By December 31, 2022, decrease the number of residents in the tri-county areas who reported feeling depressed in the past 30 days by 10%.   | CHNA survey   | 3 years   | 54% 0<br>28% 1-2<br>9% 3-5<br>9% 5+                           |  |      |      |
| By December 31, 2022, decrease the number of residents in the tri-county areas who reported feeling anxious or stressed in the past 30 days by 10%.   | CHNA survey   | 3 years   | 60% 0<br>25% 1-2<br>8% 3-5<br>7% 5+                           |  |      |      |
| By December 31, 2022, decrease the number of residents in the tri-county areas who reported considering suicide in the past 12 months by 10%.   | CHNA survey   | 3 years   | 17.17 Tri-County<br>18 Peoria<br>19.5 Tazewell<br>14 Woodford |  |      |      |
| Strategies  | Source  |           | Baseline  | 2020                                   | 2021 | 2022 |
| <b>Increase knowledge of mental health and reduce stigma by providing Mental Health First Aid (MHFA) and Youth Mental Health First Aid (YMHA):</b> <i>Establish baseline and increase certifications in the Tri-county by 10% (2,176)</i> | Mental Health First Aid Quarterly Report            | Quarterly | 1,227 MHFA<br>751 YMHFA<br>1,978 Total                        | 1,264 MHFA<br>861 YMHFA<br>2,125 Total |      |      |
| <b>Universal school-based suicide awareness &amp; education programs:</b> <i>Establish baseline and increase number of students in the Tri-county receiving suicide prevention education by 10% (4,386)</i>                               | Hult Center for Healthy Living & Community Partners | Annual    | 3,988   | 968                                    |      |      |
| <b>School based social emotional instructions:</b> <i>Establish baseline and increase number of trauma-informed schools in the Tri-county by 10%</i>  | Regional Offices of Education & Community Partners  | Annual    | 0   | 0                                      |      |      |



|  |                                |        |  |  |  |  |
|--|--------------------------------|--------|--|--|--|--|
| <b>Behavioral health primary care integration</b> ( <i>Increase number of providers in primary care settings by 10%, increase number of providers in specialized care settings by 10%, and increase number of providers in prompt care settings by 10%</i> ) | Community Partners-OSF and UPH | Annual | 19 Primary<br>1 Specialty<br>0 Prompt                        | 19 Primary<br>1 Specialty<br>0 Prompt                        |  |  |
| <b>Poor Mental Health Days:</b> <i>Decrease the average number of mentally unhealthy days reported in past 30 days (age-adjusted) in the tri-county.</i>   | County Health Rankings         | Annual | 4.0 Peoria<br>3.5 Tazewell<br>3.3 Woodford<br>(2019)         | 3.9 Peoria<br>3.8 Tazewell<br>3.7 Woodford<br>(2020)         |  |  |
| <b>Mental Health Provider Rate:</b> <i>Increase the mental health provider rate in providers per 100,000 population.</i>   | County Health Rankings         | Annual | 450:1 Peoria<br>570:1 Tazewell<br>3,870:1 Woodford<br>(2019) | 420:1 Peoria<br>550:1 Tazewell<br>3,500:1 Woodford<br>(2020) |  |  |

Last Updated: 3/22/2021

## Substance Use

Goal: Reduce substance use to protect the health, safety, and quality of life for tri-county residents.



| Objectives   | Source   | Frequency | Baseline   | 2020          | 2021 | 2022 |
|--|--|-----------|--|---------------|------|------|
| By December 31, 2022, reduce the rate of drug-induced deaths within the tri-county region by 10% from 22.2 per 100,000 tri-county residents to 20.0 per 100,000.   | 2018 IL Vital Records Overdose Data<br>Rate of Drug-Induced Deaths per 100,000 | Annual    | 51 Peoria<br>26 Tazewell<br>3 Woodford<br>(2017-2018)  | TBD           |      |      |
| By December 31, 2022, increase the proportion of adolescents reporting never using substance (alcohol, any tobacco/vaping, cigarettes, inhalants, marijuana) in the last year in the tri-county area by 5% | Illinois Youth Survey  | Annual    | 8 <sup>th</sup><br>33 Peoria<br>29 Tazewell<br>20 Woodford<br>10 <sup>th</sup><br>37 Peoria<br>40 Tazewell<br>34 Woodford<br>12 <sup>th</sup><br>53 Peoria<br>61 Tazewell<br>53 Woodford | TBD           |      |      |
| Strategies   | Source   |           | Baseline   | 2020          | 2021 | 2022 |
| <b>Criminal Justice and Harm Reduction Efforts:</b><br><i>Reduce overdoses by 10% through use of Narcan and stable housing for frequent utilizers</i>  | <a href="#">IDPH</a>   | Annual    | 10.66 Peoria<br>7.66 Tazewell<br>2.85 Woodford<br>(2019)   | TBD           |      |      |
| <b>Criminal Justice and Harm Reduction Efforts:</b><br><i>Increase Narcan distribution in the Tri-county by 10%.</i>   | Narcan Advisory Groups   |           |  |               |      |      |
| <b>Criminal Justice and Harm Reduction Efforts:</b><br><i>Increase Narcan administrations in the Tri-county by 10%.</i>  | Narcan Advisory Groups   | Annual    | 682<br>(2019)  | 971<br>(2020) |      |      |
| <b>Technology-Enhanced Classroom Instructions:</b><br><i>Enroll nine Tri-County schools in Drugs Safety programs to increase knowledge</i>   | UnityPoint Health & Everfi   | Annual    | 0  | 11            |      |      |

|   |  |        |   |              |  |  |
|---|--|--------|---|--------------|--|--|
| <b>Mass media campaign against chemically impaired driving and underage drinking and binge drinking</b> | Tazewell County Health Department/Kerri Viets/ OSF | Annual |   |              |  |  |
| <b>Youth Leadership Programs:</b> <i>Increase number of students certified as peer educators by 10%</i> | Hult Center for Healthy Living                     | Annual | 0 | 5 Certified? |  |  |

Last Updated: 3/22/2021

## Healthy Eating Active Living Priority Action Team

Goal: To foster and promote healthy eating and active living to reduce chronic disease and food insecurity in the tri-county area.



| Objectives   | Source                 | Frequency | Baseline   | 2020   | 2021 | 2022 |
|--|------------------------|-----------|--|--|------|------|
| By 2022, reduce the proportion of adults considered obese by 2%  | County Health Rankings | Annual    | 33% Peoria<br>33% Tazewell<br>28% Woodford<br>(2019) | 36% Peoria<br>33% Tazewell<br>27% Woodford<br>(2020) |      |      |
| By 2022, reduce the proportion of youth (Grade 8-12), who self-reported overweight and obese by 2%   | Illinois Youth Survey  | Annual    | 11-17%<br>overweight<br>13% obese                    |  |      |      |
| By 2022, decrease food insecurity in populations residing in Peoria, Tazewell, and Woodford Counties by 1%   | County Health Rankings | Annual    | 15% Peoria<br>10% Tazewell<br>9% Woodford<br>(2019)  | 14% Peoria<br>9% Tazewell<br>8% Woodford<br>(2020)   |      |      |
| Strategies   | Source                 | Frequency | Baseline   | 2020   | 2021 | 2022 |
| <b>Community-based social support for physical activity and nutrition:</b> <i>Increase the number of participants completing the Diabetes Prevention Program</i>   | ?                      | Annual    | TBD  | TBD  |      |      |
| <b>Community-based social support for physical activity and nutrition:</b> <i>Increase the number of times respondents participated in exercise that lasted for at least 30 minutes in the last week</i> | CHNA                   | 3 years   | 23% 0<br>33% 1-2<br>32% 3-5<br>12% 5+                |  |      |      |
| <b>Community-based social support for physical activity and nutrition:</b> <i>Increase the number of servings/separate portions of fruit and/or vegetables respondents eat on a typical day</i>          | CHNA                   | 3 years   | 5% 0<br>55% 1-2<br>35% 3-5<br>5% 5+                  |  |      |      |
| <b>Community-based social support for physical activity and nutrition:</b> <i>Decrease the percentage of adults age 20 and over reporting no leisure-time physical activity.</i>                         | County Health Rankings | Annual    | 21% Peoria<br>25% Tazewell<br>23% Woodford<br>(2019) | 22% Peoria<br>25% Tazewell<br>23% Woodford<br>(2020) |      |      |
| <b>Community-based social support for physical activity and nutrition:</b> <i>Increase the percentage of population with adequate access to locations for physical activity.</i>                         | County Health Rankings | Annual    | 84% Peoria<br>83% Tazewell<br>75% Woodford<br>(2019) | 82% Peoria<br>84% Tazewell<br>75% Woodford<br>(2020) |      |      |

|   |  |             |  |  |  |  |
|---|--|-------------|--|--|--|--|
| <b>Community-based social support for physical activity and nutrition:</b> Decrease the percentage of population who are low-income and do not live close to a grocery store. | County Health Rankings   | Annual      | 7% Peoria<br>10% Tazewell<br>2% Woodford<br>(2019) | 7% Peoria<br>10% Tazewell<br>2% Woodford<br>(2020) |  |  |
| <b>Breast Feeding Promotion Programs:</b><br>Breast feeding rates, number of sites supportive of breastfeeding, number centering pregnancy sites, Breastfeeding outreach ?    | WIC, Peoria Head Start/ Early Head Start<br>OSF Breast Feeding Resource center | TBD         | TBD  | TBD  |  |  |
| <b>Family-based physical activity interventions:</b><br>Days physically active for a total of at least 60 minutes in the last 7 days (IYS)                                    | Illinois Youth Survey  | Annual      |  |  |  |  |
| <b>Multi-component obesity prevention interventions:</b> Fruit/Vegetable consumption in the last 7 days (IYS)   | Illinois Youth Survey  | Annual      |  |  |  |  |
| <b>Create Multi-sector partnerships and networks:</b><br>pounds of food distributed, back pack meals?<br>Food boxes?*   | Food Pantry<br>Network/HEAL Food System Partners                               | Annual (CY) |  |  |  |  |
| <b>Create Multi-sector partnerships and networks:</b><br>number of persons served   | Food Pantry<br>Network/HEAL Food System Partners                               | Annual (CY) |  |  |  |  |
| <b>Create Multi-sector partnerships and networks:</b><br>IRIS (# of referrals for food insecure individuals/families)   | Food Pantry<br>Network/HEAL Food System Partners                               | Annual (CY) |  |  |  |  |

\*18 mobile food drives, 1132 USDA boxes distributed, 280 backpack meals, 20 emergency boxes

Last Updated: 3/22/2021

## Cancer (breast, lung, colorectal)

Goal: Reduce the illness, disability and death caused by breast, lung, and colorectal cancer in the tri-county area



| Objectives   | Source  | Frequency | Baseline   | 2020   | 2021 | 2022 |
|--|---|-----------|--|--|------|------|
| By 2022, reduce the female breast cancer age-adjusted death rate by 1%   | National Cancer Institute   | Annual    | 22.7 Peoria<br>18.7 Tazewell<br>24.4 Woodford<br>(2011-2015) | 19.7 Peoria<br>19.9 Tazewell<br>26.7 Woodford<br>(2014-2018) |      |      |
| By 2022, reduce the colorectal cancer age-adjusted death rate by 1%  | National Cancer Institute   | Annual    | 17.6 Peoria<br>17.6 Tazewell<br>20.7 Woodford<br>(2011-2015) | 10.5 Peoria<br>12.7 Tazewell<br>15.0 Woodford<br>(2014-2018) |      |      |
| By 2022, reduce the lung cancer age-adjusted death rate by 1%  | National Cancer Institute   | Annual    | 86.9 Peoria<br>84.3 Tazewell<br>56.6 Woodford<br>(2011-2015) | 42.8 Peoria<br>43.3 Tazewell<br>38.5 Woodford<br>(2014-2018) |      |      |
| Strategies   | Source  | Frequency | Target   | 2020   | 2021 | 2022 |
| <b>Breast cancer screenings:</b> <i>Increase the percentage of women aged 50-74 who have had a mammogram in the past two years.</i>  | <u>CDC - PLACES</u>   | Annual    | 77.1<br>(HP 2030 Target)                                     | 71.6 Peoria<br>70.5 Tazewell<br>72.6 Woodford<br>(2018)      |      |      |
| <b>Colorectal cancer screenings:</b> <i>Increase percentage of respondents aged 50-75 who have had either a fecal occult blood test in the past year, a sigmoidoscopy in the past five years AND a fecal occult blood test in the past three years, or a colonoscopy exam in the past ten years.</i> | <u>CDC - PLACES</u>   | Annual    | 74.4<br>(HP 2030 Target)                                     | 63.8 Peoria<br>66.0 Tazewell<br>69.9 Woodford<br>(2018)      |      |      |
| <b>Lung cancer screenings:</b> <i>Increase the number of low-dose CT lung cancer screenings provided to qualifying individuals in the tri-county</i>   | OSF Saint Francis Medical Center<br>UnityPoint Health<br>Carle Eureka                             | Bi-Annual | ↑ 2,203  | 2,976  |      |      |
| <b>Tobacco screenings:</b> <i>Increase the number of patients aged 18 years and older who were screened for tobacco use in primary care offices one or more times within 24 months</i>   | OSF Saint Francis Medical Center<br>UnityPoint Health<br>Carle Eureka<br>Hopedale Medical Complex |           |  |  |      |      |

|  |   |        |  |  |  |  |
|--|---|--------|--|--|--|--|
|  | Heartland Health Services   |        |  |  |  |  |
| <b>Adult tobacco use cessation:</b> <i>Reduce the percentage of adults in the tri-county who are current smokers</i>   | County Health Rankings  | Annual | 18% Peoria<br>14% Tazewell<br>14% Woodford<br>(2019)                               | 17% Peoria<br>15% Tazewell<br>14% Woodford<br>(2020) |  |  |
| <b>Youth tobacco use cessation:</b> <i>Reduce the percentage of 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> graders who report using any tobacco or vaping products in the past year</i> | Illinois Youth Survey   | Annual | Peoria<br>Tazewell<br>Woodford   | Peoria<br>Tazewell<br>Woodford                       |  |  |
| <b>Tobacco free policies:</b> <i>Increase the number of tobacco free policies in the tri-county area</i>   | Peoria City/County, Tazewell County & Woodford County Public Health | Annual | 22   | 19   |  |  |
| <b>Smoke Free Illinois Act compliance checks:</b> <i>Increase the number of compliance checks to ensure compliance with the Smoke Free Illinois Act completed in the tri-county area</i>         | Peoria City/County, Tazewell County & Woodford County Public Health | Annual | Peoria<br>166 Tazewell<br>50 Woodford  | Peoria<br>250 Tazewell<br>110 Woodford               |  |  |
| <b>Radon mitigation systems:</b> <i>Increase the proportion of tri-county homes with an operating mitigation system</i>  | Illinois Emergency Management Association (IEMA)                    | Annual | 14,933 Peoria<br>9,998 Tazewell<br>2,937 Woodford<br>(Sites tested from 2003-2018) | TBD  |  |  |

Last Updated: 3/22/2021