MISSION: TO IMPROVE THE HEALTH OF THE PEOPLE AND COMMUNITIES WE SERVE.

Community Health Needs Assessment and Implementation Strategy
2023

BJC HealthCare

Encompass Health

The Rehabilitation Institute of Southern Illinois

Table of Contents

Executive Summary

The Rehabilitation Institute of Southern Illinois (TRISI) has provided comprehensive health care services to the St. Clair County community since opening in February 2022. The 40-bed, inpatient rehabilitation hospital, a strategic partnership between Encompass Health and BJC HealthCare, has established effective partnerships toward the goal of improving the health of its community. (See Appendix A for additional information).

In the Patient Protection and Affordable Care Act (PPACA) passed in March 2010, nonprofit hospitals are mandated to conduct community health needs assessment (CHNA) reports every three years. As part of that process, each hospital is required to solicit input from those who represent the broad interests of the community served by the hospital as well as those who have special knowledge and expertise in public health and underserved populations.

The Rehabilitation Institute of Southern Illinois completed its first CHNA in 2023. Plans call for its second CHNA to be completed in December 2025 to align with the schedule of the other Illinois BJC HealthCare hospitals.

As part of this assessment, each hospital is required to define its community. Once the community is defined, input must be solicited from those who represent the broad interests of the community served by the hospital, as well as those who have special knowledge and expertise in the area of public health. This process occurred in two phases.

In the past, community stakeholder health needs assessments were conducted in person via a moderated discussion. Due to COVID-19, BJC HealthCare, along with collaborative health system and hospital partners, conducted an online survey for the safety of community stakeholders. The survey provided stakeholders an opportunity to rank community health needs compiled by these partners.

During phase two, findings from the stakeholder survey were reviewed and analyzed by an internal hospital work group of clinical and non-clinical staff. Using multiple sources, including Conduent Healthy Communities Institute, a secondary data analysis was conducted to further assess the identified needs. This analysis identified unique health disparities and trends evident in St. Clair County when compared to the state.

After completion of the comprehensive assessment process, the hospital will focus on one priority: Stroke.

The analysis and conclusions will be presented and reviewed for approval by the Board of Directors at The Rehabilitation Institute of Southern Illinois.

Community Description

GEOGRAPHY

The Rehabilitation Institute of South Illinois (TRISI) is a member of BJC HealthCare, one of the largest, nonprofit health care organizations in the country. BJC HealthCare hospitals serve urban, suburban, and rural communities through 14 hospitals and multiple community health locations primarily in the greater St. Louis, southern Illinois, and mid-Missouri regions.

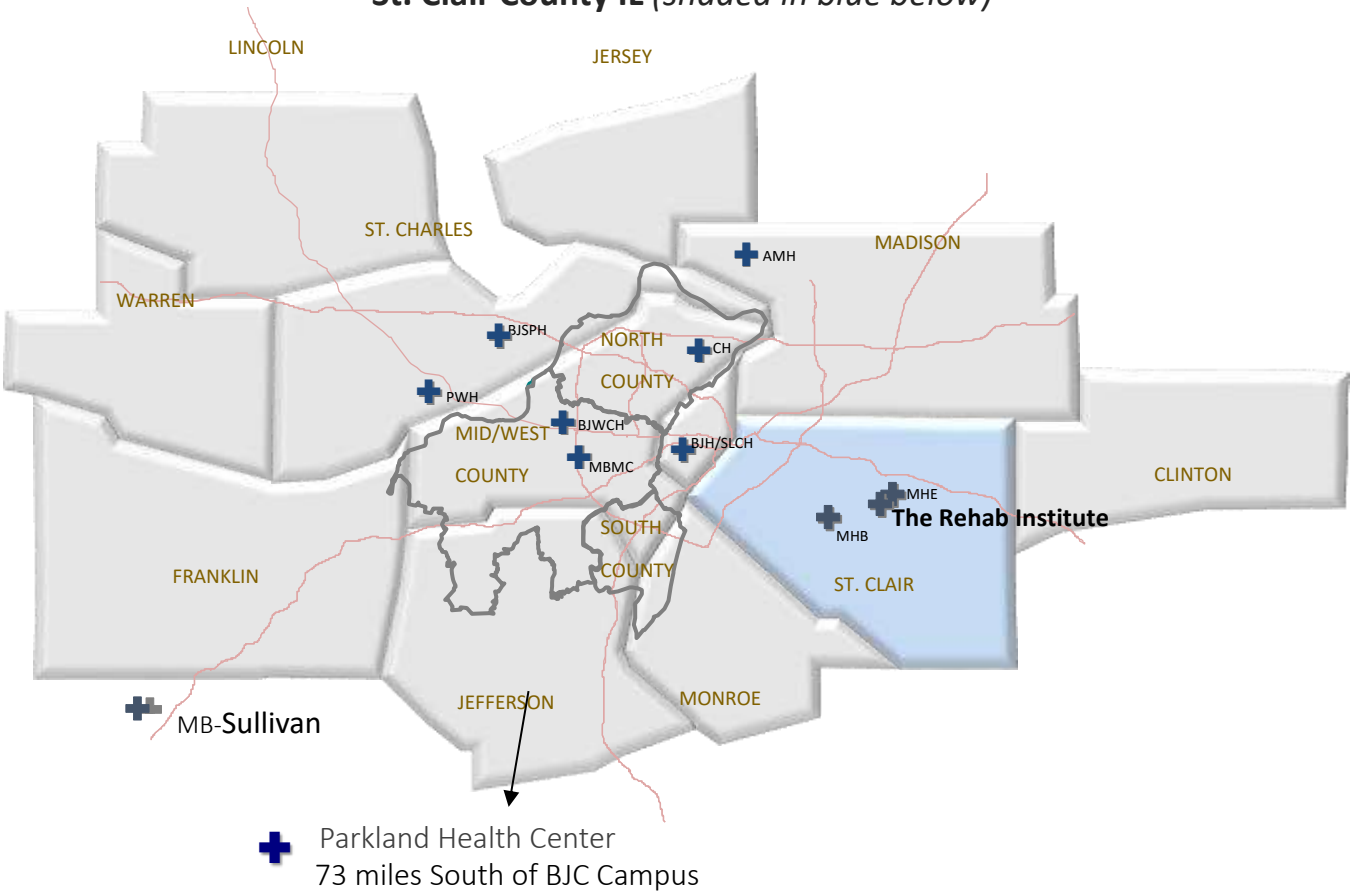
TRISI is located at 2351 Frank Scott Pkwy E, Shiloh, IL, 62269, and considered part of the greater St. Louis metropolitan area.

For the CHNA, TRISI defined St. Clair County as its community. The Rehabilitation Institute of Southern Illinois primary service area is represented by the shaded blue area of the map.

The Rehab Institute of Southern Illinois

Primary Service Area:

St. Clair County IL *(shaded in blue below)*



POPULATION

Population and demographic data are necessary to understand the health of the community and plan for future needs. In 2021, St. Clair County reported a total population estimate of 254,796 compared to the state population of 12,671,469. St. Clair County comprised 2.0 percent of the state population. From April 2020 to July 2021, the county and the state population decreased 1.0 percent.

TABLE 1: BRIEF DEMOGRAPHIC OF ST. CLAIR COUNTY VS. ILLINOIS		
	ST. CLAIR COUNTY	ILLINOIS
POPULATION, PERCENT, APRIL 1, 2020	270,056	12,830,632
TOTAL POPULATION (2021) JULY 1, ESTIMATE	254,796	12,671,469
PERCENT POPULATION BY GENDER (2021)		
GENDER	ST. CLAIR COUNTY	ILLINOIS
Female	51.5	50.6
Male	48.5	51.5
PERCENT POPULATION BY RACE/ETHNICITY (2021)		
RACE/ETHNICITY	ST. CLAIR COUNTY	ILLINOIS
White, alone	64.5	76.3
White, not Hispanic or Latino	60.8	60.0
Black/African American	30.6	14.6
Asian, alone	1.6	6.1
Hispanic or Latino	4.6	18.0
Two or More Races	2.8	2.2
American Indian & Alaska Native	0.4	0.6
Native Hawaiian & other Pacific Islander	0.1	0.1
Foreign Born Persons	3.1	13.9

Source: Conduent Healthy Communities Institute

INCOME

St. Clair County's median household income was $57,473 while the state's median household income was $68,428. The rate of persons living below the poverty level in St. Clair County was 14.4 percent compared to 12 percent in the state (2016-2020).

AGE

The age structure of a community is an important determinant of the health and health services it will need. The distribution of the population across age groups in the county was similar to the state.

SOCIAL-ECONOMIC INDICATORS

The percentage of children (21 percent) and families (10.1 percent) living below the poverty level was higher in the county when compared to the state (16.2 percent; 8.4 percent respectively) and the U.S. (17.5 percent; 9.1 percent) (2016-2020).

EDUCATION

Individuals who do not finish high school are more likely than those who finish high school to lack the basic skills required to function in an increasingly complicated job market and society. Adults with limited education levels are more likely to be unemployed, on government assistance or involved in crime. The Healthy People 2030 national health target is to increase the proportion of students who graduate high school within four years of their first enrollment in ninth grade to 90.7 percent. In St. Clair County, 91.7 percent of the population ages 25 and over had a high school diploma or higher education attainment compared to 89.7 percent in the state.

For many, having a bachelor's degree is the key to a better life. The college experience develops cognitive skills, and allows learning about a wide range of subjects, people, cultures and communities. Having a college degree also opens career opportunities in a variety of fields and is often the prerequisite to a higher-paying job. It is estimated that college graduates have about $1 million more in lifetime earnings than their peers without college degrees. In St. Clair County, 29.0 percent of the population ages 25 and older held a bachelor’s degree or higher compared to 35.5 percent in the state.

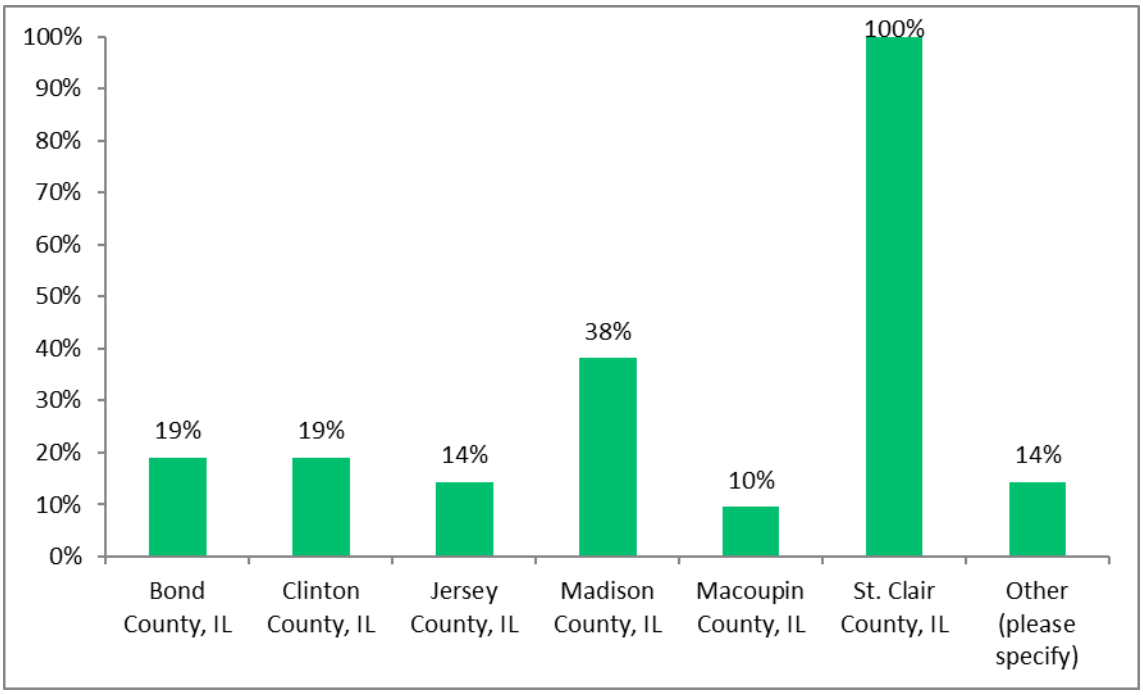
Additional demographic data on St. Clair County is available in Appendix B.

Conducting the 2023 CHNA

Primary Data Collection: ONLINE SURVEY

Due to COVID-19, BJC HealthCare, along with collaborative partners SSM Health; Mercy Hospital St. Louis and Mercy Hospital South; and the St. Luke's network of care, which includes St. Luke's Hospital and St. Luke's Des Peres Hospital, conducted online surveys for the safety of our employees and of our community stakeholders who represent the broad interests of the community served by each hospital and those with special knowledge or expertise in public health. In the past, to gather inputs from the community stakeholders, focus group were conducted in person via a moderated discussion. (See Appendix C for the Stakeholder Assessment Report and Appendix D for the list of Participating Community Stakeholders)

The following chart outlines the primary areas where stakeholders reside who responded to the survey.



Summary: Stakeholder Key Findings

Mental health was identified as the need of greatest concern and the need with the greatest potential to work together. Stakeholders viewed opportunities for more collaboration as a way to improve the health of the community. Additionally, stakeholders noted that the lack of nearby mental health services was the greatest risk to accessing health care, followed by transportation and inability to pay co-pays/deductibles.

When asked about the greatest risk for poor health outcomes, most stakeholders identified low-income populations as being at greatest risk, followed by the homeless and adults over age 65.

Poverty was noted among the social factors impacting communities most, followed by crime and violence and drugs/drug abuse.

Stakeholders felt that the COVID-19 pandemic's greatest impact on area residents was emotional: increased symptoms of anxiety and depression, along with loneliness and social isolation.

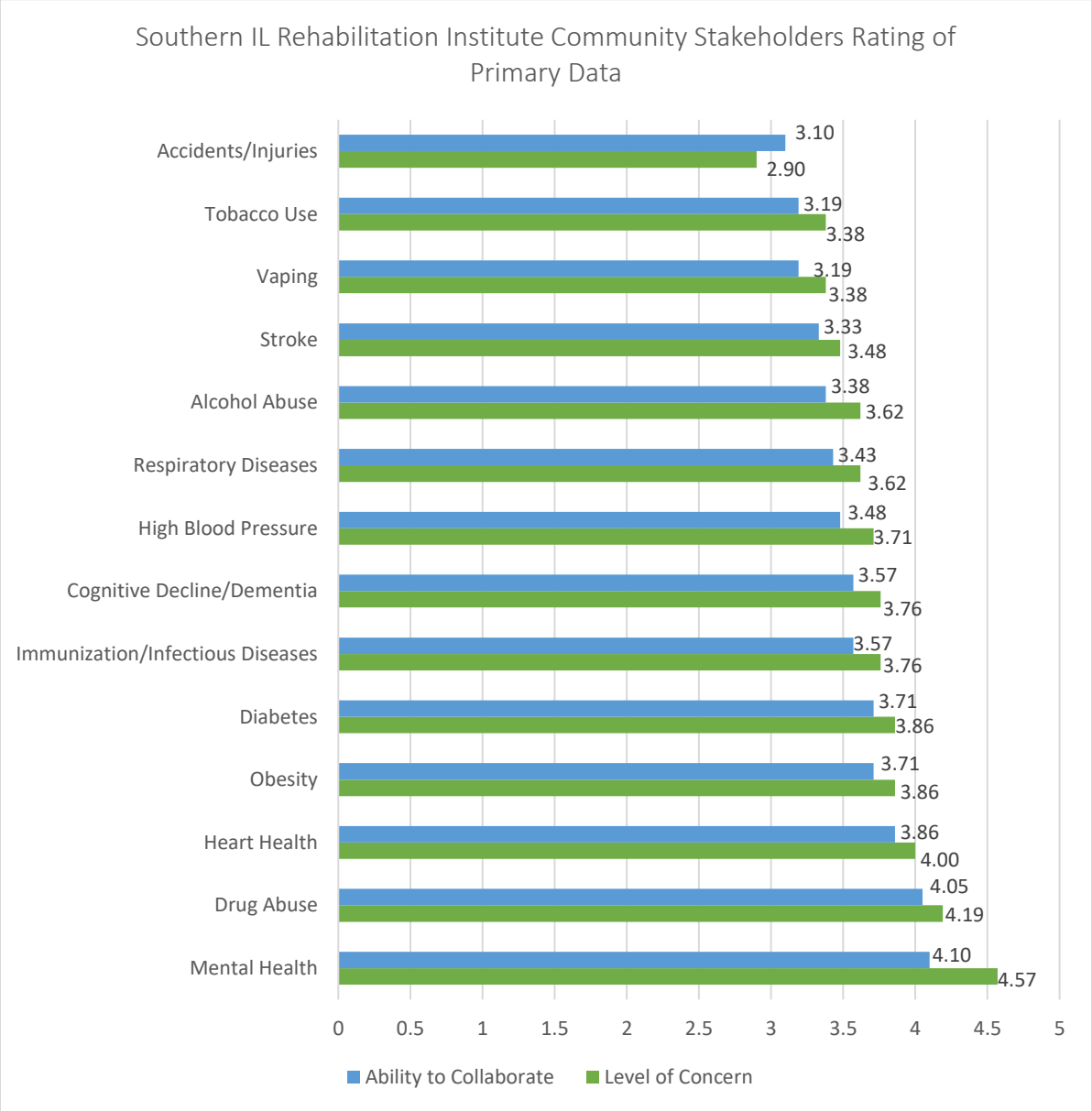
When asked about the largest gaps in resources, stakeholders noted the most gaps around mental health resources and transportation.

Stakeholders shared several community resources TRISI or area residents may be unaware of, including AGESmart, Healthier Together, Make Health Happen ESTL and Programs and Services for Older Persons.

East St. Louis, Belleville and Fairview Heights were identified by stakeholders as being vulnerable and at-risk communities.

RATING OF NEEDS

Community stakeholders were given the list of community health needs compiled by survey partners using results from the previous BJC Hospitals' CHNA. Stakeholders were directed to rank these needs on a scale of 1 (low) to 5 (high), based on their perceived level of community concern and the ability of community organizations to collaborate in addressing.



Mental health ranked highest in terms of ability to collaborate and level of concern.

Secondary Data Summary

Based on the needs reviewed by community stakeholders (see graph on previous page), key areas were identified for a secondary data analysis. These represent the areas of greatest concern identified by the stakeholders.

The majority of the analysis was completed comparing St. Clair County and Illinois. In order to provide a comprehensive overview (analysis of disparity and trend) of the most up-to-date secondary data from Conduent Healthy Communities Institute (HCI) was included for the needs listed below.

HCI, an online dashboard of health indicators for St. Clair County offers the ability to evaluate and track the information against state and national data and Healthy People 2020 and 2030 goals. Sources of data include the National Cancer Institute, Environmental Protection Agency, U.S. Census Bureau, U.S. Department of Education, and other national, state and regional sources.

- Asthma
- Diabetes
- Drug abuse
- Heart Disease
- Hypertension
- Immunization/Infectious Disease
- Mental health
- Obesity
- Stroke

A summary of the secondary data follows below. Additional secondary data is available in Appendix F.

ASTHMA

In 2021, 12 percent of St. Clair County's Medicare population had Chronic Obstructive Pulmonary Disease (COPD), which was one point higher than the Illinois rate of 12.0 percent.

DIABETES

Diabetes is a leading cause of death in the U.S. This disease can have harmful effects on most of the organ systems in the human body. It is a frequent cause of end-stage renal disease, non-traumatic lower-extremity amputation, and a leading cause of blindness among working-age adults. Persons with diabetes are also at increased risk for coronary heart disease, neuropathy and stroke. Diabetes disproportionately affects minority populations and the elderly, and its incidence is likely to increase as minority populations grow and the U.S. population becomes older.

In 2021, 28.0 percent of St. Clair County's Medicare population had diabetes, which was 3.0 points higher than the Illinois rate of 25.0 percent. This higher rate was consistent with the prior four years.

HEART DISEASE

Heart disease and stroke are among the most preventable diseases in the U.S. yet are the most widespread and costly health conditions facing the nation today. Heart disease and stroke are the first and third leading causes of death for both women and men.

Cerebrovascular disease is a leading cause of death in the United States, and although it is more common in older adults, it can occur at any age. The most important modifiable risk factor for cerebrovascular disease and stroke is high blood pressure. Other risk factors include high cholesterol, heart disease, diabetes mellitus, physical inactivity, obesity, excessive alcohol use and tobacco use.

For the three-year period ending 2020, St. Clair County had a 21.9 percent decrease of the age-adjusted death rate due to coronary heart disease when compared to the three-year period ending 2016. In comparison, Illinois had a 11.7 percent decrease during the same period.

For the three-year period ending 2020, St. Clair County's age-adjusted death rate due to stroke increased to 51.8. This rate was 31.1 percent higher than the state rate and 31.8 percent higher than the county's rate for the three-year period ending 2016.

INFECTIOUS DISEASE

In 2021, St. Clair County had a 3 point drop in the Medicare population who received pneumonia vaccinations to 8 percent, which is the lowest level in the past 5 years.

MENTAL/BEHAVIORAL HEALTH: MENTAL HEALTH

Individuals struggling with serious mental illness are at higher risk for homicide, suicide, and accidents as well as chronic conditions including cardiovascular and respiratory diseases and substance use disorders.

Suicide is a leading cause of death in the United States, presenting a major, preventable public health problem. More than 33,000 people kill themselves each year according to the Centers for Disease Control and Prevention.

For the three-year period ending 2020, the age-adjusted death rate due to suicide was 10.0. This was 8.3 percent lower than the state rate and 18.0 percent lower than the county rate for the three-year period ending 2019.

MENTAL/BEHAVIORAL HEALTH: SUBSTANCE / DRUG ABUSE

The majority of drug overdose deaths involve an opioid, and at least half of all opioid overdose deaths involve a prescription opioid. Since 1999, the rate of overdose deaths involving opioids (including prescription opioid pain relievers) has nearly quadrupled. According to the CDC, overdoses from prescription opioid pain relievers are a driving factor in the increase in opioid overdose deaths.

Drug overdose deaths are the leading cause of injury death in the United States, with over 100 drug overdose deaths occurring every day. The death rate due to drug overdose has been increasing over the last few decades. The majority of deaths due to pharmaceutical overdose involve opioid analgesics (prescription painkillers). Those who die from drug overdose are more likely to be male, Caucasian, or between the ages of 45 and 49. Although the majority of drug overdose deaths are accidental, they may also be intentional or of undetermined intent.

In 2018 vs. 2010, St. Clair County teens had a 24.0 percent increase in marijuana use and a 15.6 percent decrease in alcohol use.

OBESITY

The percentage of obese adults is an indicator of the overall health and lifestyle of a community. Obesity increases the risk of many diseases and health conditions including heart disease, type 2 diabetes, cancer, hypertension, stroke, liver and gallbladder disease, respiratory problems, and osteoarthritis.

For the five-year period ending 2019, 66.3 percent of St. Clair adults were overweight or obese. This is a 6.9 percent decline from the five-year period ending 2014, but an 8.9 percent increase from the five-year period ending 2009.

STROKE

In St. Clair County, for the four-year period ending 2020, African Americans had a 34.6 percent higher ager-adjusted death rate due to stroke compared to Whites.

Internal Work Group Prioritization Meeting

TRISI chose 5 employees to participate on an internal CHNA work group. (See Appendix E)

The work group met March 13, 2023, to review the purpose for the CHNA, role of the work group and goals for the project.

The 14 health needs identified by the stakeholders were reviewed and discussed. (Table 4)

Discussion and Ranking Process:

The work group used multi-voting techniques to allow the work group to narrow the list of 14 health needs identified by the stakeholders (Table 4) to a smaller list and to the final priorities. The work group came to a consensus based on the relative importance of the issues, problems or solutions by accounting for individual importance rankings in a team's final priorities. This technique allowed the work group to build commitment to the work group's choice through equal participation in the process.

TABLE 4: LIST OF COMMUNITY HEALTH NEEDS RANKED BY ST. CLAIR COUNTY COMMUNITY STAKEHOLDERS		
Accidents/Injuries	Heart Health	Obesity
Alcohol Abuse	High Blood Pressure	Stroke
Cognitive Decline/Dementia	Immunization/Infectious Diseases	Tobacco Use
Diabetes	Mental Health	Vaping
Drug Abuse	Respiratory Diseases	

The work group used the multi-voting technique by reviewing the 14 health needs and reached consensus by "Yes" and "No" to eliminate alcohol abuse, tobacco use and vaping due to the lack of specialty in those areas. Table 5 contains the 11 health needs that the work group consented to keep for further discussion.

TABLE 5: LIST OF COMMUNITY HEALTH NEEDS AFTER SECOND ELIMINATION BY TRISI INTERNAL WORKGROUP		
Accidents/Injuries	Heart Health	Respiratory Diseases
Cognitive Decline/Dementia	High Blood Pressure	Obesity
Diabetes	Immunization/Infectious Diseases	Stroke
Drug Abuse	Mental Health	

The work group then conducted another consensus vote among the 11 health needs from Table 5 to further narrow the list of health needs. The work group focused on financial, human and professional resources that TRISI currently has in place. The work group also did an inventory of

community organizations that may be addressing some of the needs listed on Table 5. Therefore, the group eliminated another four health needs (Table 6). The health needs eliminated included accidents/injuries, cognitive decline/dementia, immunization/infectious diseases, and respiratory diseases.

TABLE 6: FINAL LIST OF COMMUNITY HEALTH NEEDS FOR DISCUSSION BY TRISI INTERNAL WORKGROUP	
Diabetes	High Blood Pressure
Drug Abuse	Mental Health
Heart Health	Obesity
Stroke	

The work group held an in-depth discussion on each health need listed in Table 6. It was agreed that they have more impact on stroke when considering cognitive decline and dementia. Therefore, the group eliminated the later need. Through another consensus, the work group decided that heart health, high blood pressure and diabetes are the risk factors of stroke. However, they lacked the necessary resources to address those three health needs to be successful in preventing stroke. Therefore, those three health needs were also eliminated by consensus. The group had an intense conversation about drug abuse and mental health. Some members were supportive of those two health needs but failed to have the majority agreeing to select those as priorities. Those in favor of mental health and drug abuse were at the minority, therefore, there was no consensus to move on with those two health needs. The work group also discussed the length of time the facility has been open and felt that they do not have enough resources to engage in many needs. They are driven to show success through any selection of priority they made. At this point, they lack the necessary resources to fully demonstrate a successful result beyond one health need.

Obesity and stroke were the final two health needs the team discussed at length. The team then looked at activities that are being implemented by TRISI. The main activity TRISI is currently focusing on is stroke with its existing stroke team. With the current resources, including a knowledgeable staff on the topic and available financial resources in place, the work group felt that stroke may be their priority.

The work group were asked to answer four questions during the discussion in order to make sure that they will produce a successful result.

1) Is there currently an internal program or process in place to address the need?
2) If yes, are there any enhancements we can make?
3) Do we have the resources to address the need?
4) What is our ability to impact the identified need? (high, moderate and low)

After these questions were answered, the group agreed to focus on stroke because there are several resources available, including a stoke team at TRISI that works to educate the community and caregivers on stroke prevention.

Conclusion:

Based on its expertise and resources, TRISI identified one area to effectively address:

- Stroke Education and Prevention

After the consensus to address stroke, a meeting was held March 15, 2023, to address the strategies the stroke team are engaged in and for the work group to determine if the work that is been done by stroke team is feasible for the work group to use as its strategy.

At the conclusion, the work group decided and consented that they will build on the work of the stroke team and show successful results with the stroke education and prevention.

.

Appendices

Appendix A: About The Rehabilitation Institute of Southern Illinois

The Rehabilitation Institute of Southern Illinois (TRISI) is a joint-venture entity of BJC HealthCare and Encompass Health. TRISI is an inpatient rehabilitation facility comprised of 40 beds. Serving adult and geriatric patients, this hospital provides physician services, physical therapy, occupational therapy, speech-language pathology, nursing, respiratory care, pharmacy, nutrition services, dialysis services and case management. Diagnostic testing and laboratory are provided through contracted services.

Individuals are treated by a physician-led interdisciplinary team to achieve the greatest potential for independence and return home. Conditions treated include:

- Stroke
- Amputations
- Parkinson's Disease
- Multiple Sclerosis
- Brain Injury
- Multiple Trauma
- Hip Fractures
- Joint Replacement
- Neurological Disorders
- Spinal Cord Injury
- Other Orthopedic Injuries/Conditions

The hospital complies with local, state and federal regulations and is accredited by The Joint Commission (TJC).

Appendix B: St. Clair County Demographic

ST. CLAIR COUNTY VS. ILLINOIS DEMO+A1:C22GRAPHIC		
GEOGRAPHY	ST. CLAIR COUNTY	ILLINOIS
Land area in square miles, 2010	657.8	55,518.9
Persons per square mile, 2010	410.6	231.1
POPULATION		
Population, Percent, April, 2010	270,056	12,830,632
Population Estimate, Percent, July 1 2021	254,796	12,671,469
Population, Percent Change -April 1, 2020 (estimate base) to July 1, 2021	-1.0	-1.1
AGE		
Persons under 5 years, Percent, 2021	5.9	5.6
Persons under 18 years, Percent, 2021	23.4	22.1
Persons 65 years and over, Percent, 2021	16.9	16.6
GENDER		
Female persons, Percent, 2021	51.5	50.6
Male persons, Percent, 2021	48.5	51.5
RACE / ETHNICITY		
White alone, Percent, 2021	64.5	76.3
White alone, not Hispanic or Latino, Percent, 2021	60.8	60.0
Black or African American alone, Percent, 2021	30.6	14.6
Hispanic or Latino, Percent, 2021	4.6	18.0
Two or More Races, Percent, 2021	2.8	2.2
Asian alone, Percent, 2021	1.6	6.1
American Indian and Alaska Native alone, Percent, 2021	0.4	0.6
Native Hawaiian and Other Pacific Islander alone, Percent, 2021	0.1	0.1
Foreign Born Persons, Percent, 2016-2020	3.1	13.9
LANGUAGE		
Population Age 5+ with Language other than English Spoken at Home, Percent, 2016-2020	5.2	23.0

Source: Conduent Healthy Communities Institute

ST. CLAIR COUNTY VS. ILLINOIS DEMOGRAPHIC INCLUDING EDUCATION, INCOME & HOUSING		
	ST. CLAIR COUNTY	ILLINOIS
HOUSING		
Housing Units, July 1, 2021	115,117	5,440,401
Homeownership, Percent, 2016-2020	57.1	60.3
Median Value of Owner-Occupied Housing Units, dollars, 2016-2020	$134,800	$202,100
FAMILY & LIVING ARRANGEMENTS		
Households, 2016-2020	104,631	4,884,061
Persons Per Household Size, 2016-2020	2.46	2.54
EDUCATION		
High School Graduate or Higher, Percent of Persons Age 25+, 2016-2020	91.7	89.7
Bachelor's Degree or Higher, Percent of Persons Age 25+, 2016-2020	29.0	35.5
INCOME		
Median Household Income, (in 2020 dollars), 2016-2020	$57,473	$68,428
Per Capita Income in past 12 months, (in 2020 dollars), 2016-2020	$31,511	$37,306
People Living Below Poverty Level, Percent, 2016-2020	14.4	12.0

Source: Conduent Healthy Communities Institute

ST. CLAIR COUNTY VS. ILLINOIS & U.S. SOCIAL-ECONOMIC INDICATORS			
INDICATORS	ST. CLAIR COUNTY	ILLINOIS	U.S.
Percent Students Eligible for Free Lunch Program (2019-2020)	48.2	46.7	43.1
Percent Children Living Below Poverty Level (2016-2020)	21	16.2	17.5
Percent Families Living Below Poverty Level (2016-2020)	10.1	8.4	9.1
Percent Renters spending >30% of Household Income on Rent (2016-2020)	49.6	47	49.1
Percent Households With Cash Public Assistance (2016-2020)	2.6	2.3	2.4
Percent Homeownership (2016-2020)	57.1	60.3	56.9
Percent Unemployed Workers in Civilian Labor Force (February 2022)	5.1	5.0	4.1

Source: Conduent Healthy Communities Institute

Appendix C: St. Clair County Community Online Survey Report

STAKEHOLDER ASSESSMENT FOR THE REHABILITATION INSTITUTE
OF SOUTHERN ILLINOIS

Prepared by:
BJC Market Research
July 20, 2022

BACKGROUND

The Patient Protection and Affordable Care Act (PPACA) was passed in March 2010. It required that:

- Each 501(c)3 hospital must conduct a Community Health Need Assessment (CHNA) every three years.
- Each hospital must adopt an implementation strategy to meet the community health needs identified in the CHNA
- The CHNA and Implementation Plan must be widely available to the public.

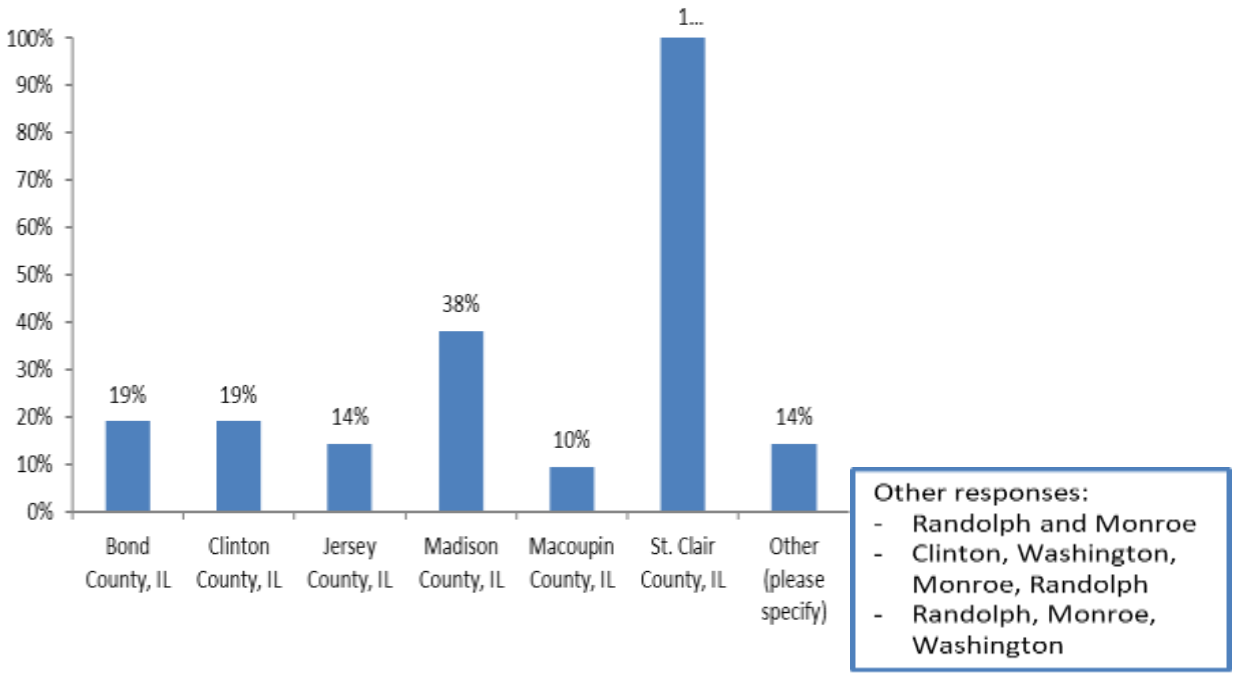
The assessment is required to consider **input from those who represent the broad interests of the community served by the hospital**, including those with special knowledge or expertise in public health.

METHODOLOGY

- In the past, community stakeholder health needs assessments were conducted in person via a moderated discussion.
- Due to COVID-19, BJC HealthCare, along with its collaborative partners, decided to conduct an online survey for the safety of our community stakeholders.
- On May 9th, an email was sent by Cassidy Hoelscher, CEO of The Rehabilitation Institute of Southern Illinois to 64 community stakeholders, inviting them to participate in the survey. Several reminders were sent out before it was closed for analysis.
- Twenty-one community members provided us with feedback for a 33% response rate.

MARKET DEFINITION

The Rehabilitation Institute of Southern Illinois is located in Shiloh, IL in St. Clair County. Stakeholders' clients represented not only St. Clair County, but also several counties in the surrounding areas. What does this mean?

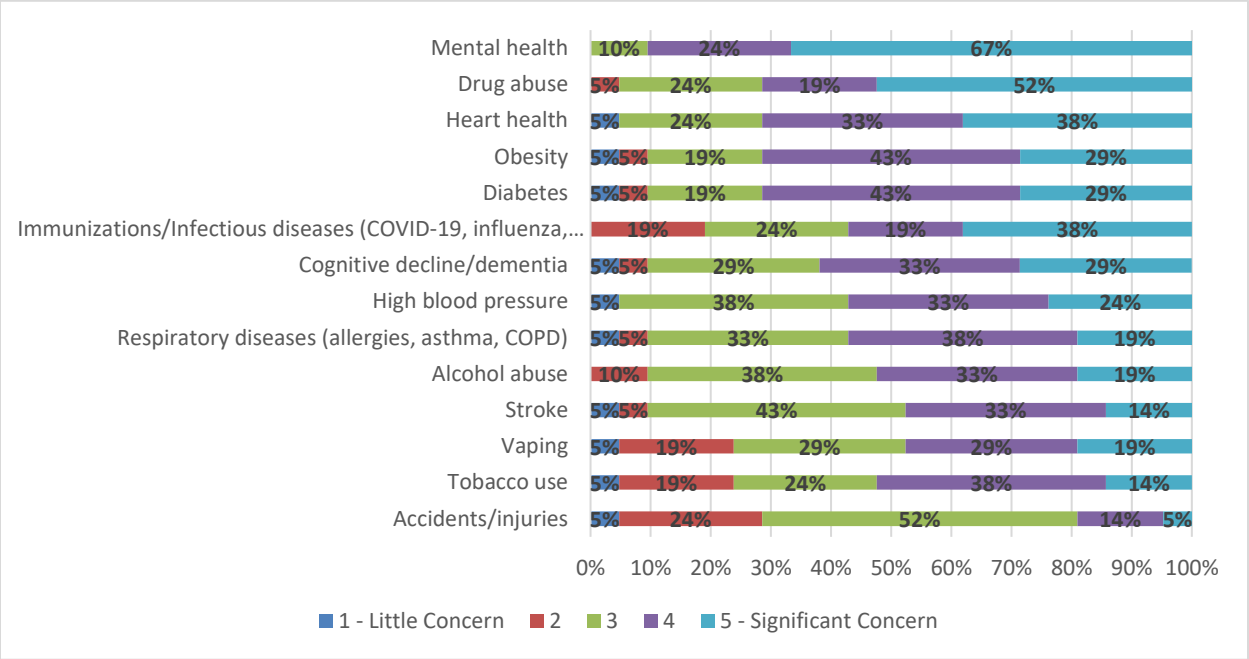


KEY FINDINGS

- Stakeholders identify **mental health** as being of greatest concern, with two-thirds rating it as a 5 (significant concern) on a scale of 1 to 5. **Drug abuse** and **heart health** are also highly rated with an average rating of 4 or higher.
- Stakeholders feel that there is the greatest potential to work together around the issue of **mental health,** and **immunizations/ infectious diseases,** followed by **heart health.**
- When all conditions are compared, **mental health** is at highest in level of concern, followed by **drug abuse**. They are tied in terms of the ability to collaborate.
- Stakeholders identify **lack of mental health services nearby** as being at greatest risk to accessing health care, followed by **transportation** and **inability to pay co-pays/deductibles.**
- Most stakeholders identify **low-income populations** as being at greatest risk for poor health outcomes, followed by the **homeless** and **adults over age 65**.
- Among social factors impacting communities, stakeholders identify **poverty** as most important. **Crime and violence** ranked second, followed by **exposure to drugs/drug abuse**.
- Stakeholders strongly agree that the greatest impact of COVID-19 on area residents have been emotional: **increased symptoms of anxiety and depression,** along with **loneliness and social isolation**.
- Stakeholders identified the largest resource gaps around **mental health resources** and **transportation**.
- Stakeholders identified several areas as being of new concern, especially around the area of **mental health.**
- Community resources of which The Rehabilitation Institute of Southern Illinois or area residents may be unaware include AGESmart, Healthier Together, Make Health Happen ESTL and Programs and Services for Older Persons.
- Stakeholders view opportunities for **more collaboration** as a way to improve the health of the community.
- A variety of areas were identified as being vulnerable and at-risk. These communities included **East St. Louis, Belleville** and **Fairview Heights.**

PRIORITY HEALTH NEEDS

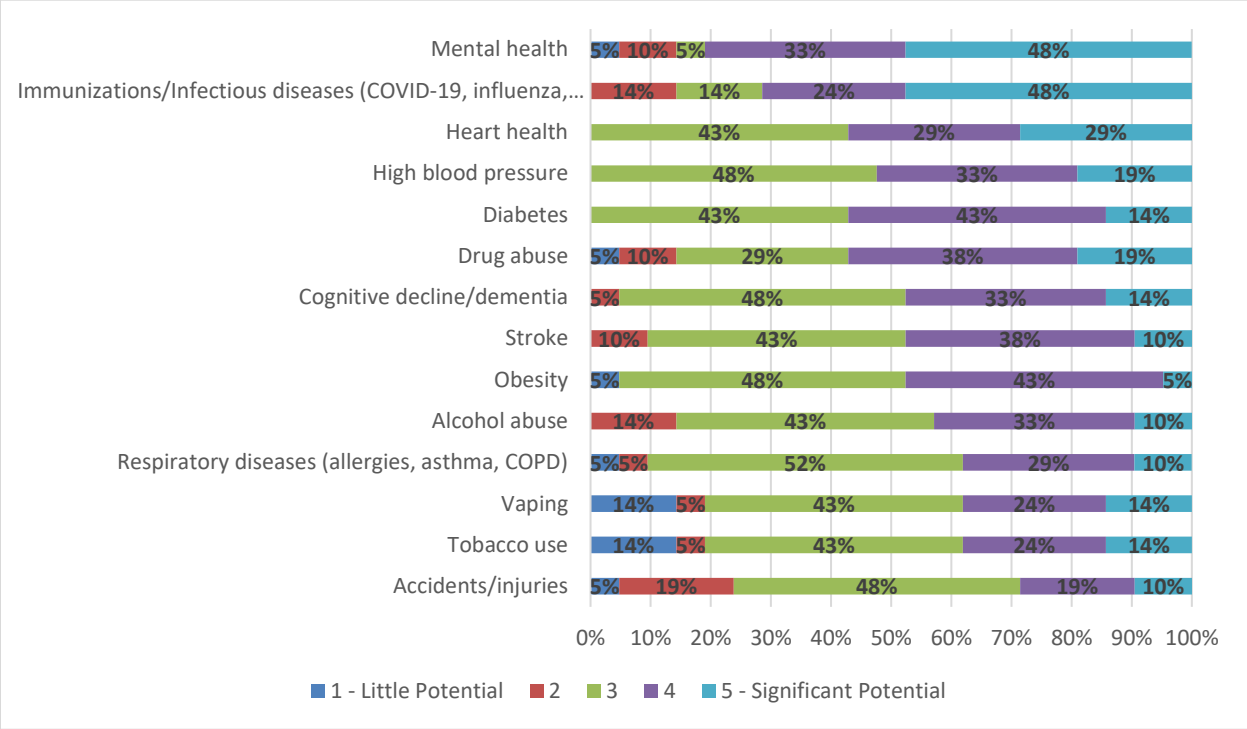
Stakeholders identify **mental health** as being of greatest concern, with two-thirds rating it as a 5 (significant concern) on a scale of 1 to 5. **Drug abuse** and **heart health** are also highly rated with an average rating of 4 or higher.



Q3 & Q4: *Thinking about The Rehabilitation Institute of Southern IL and the communities it serves, please rate your level of concern about each of these health needs on a scale 1 (little concern) to 5 (significant concern).*

NEEDS WITH GREATEST POTENTIAL FOR COLLABORATION

Stakeholders feel that there is the greatest potential to work together around the issue of **immunizations/ infectious diseases,** followed by **accidents/injuries**.

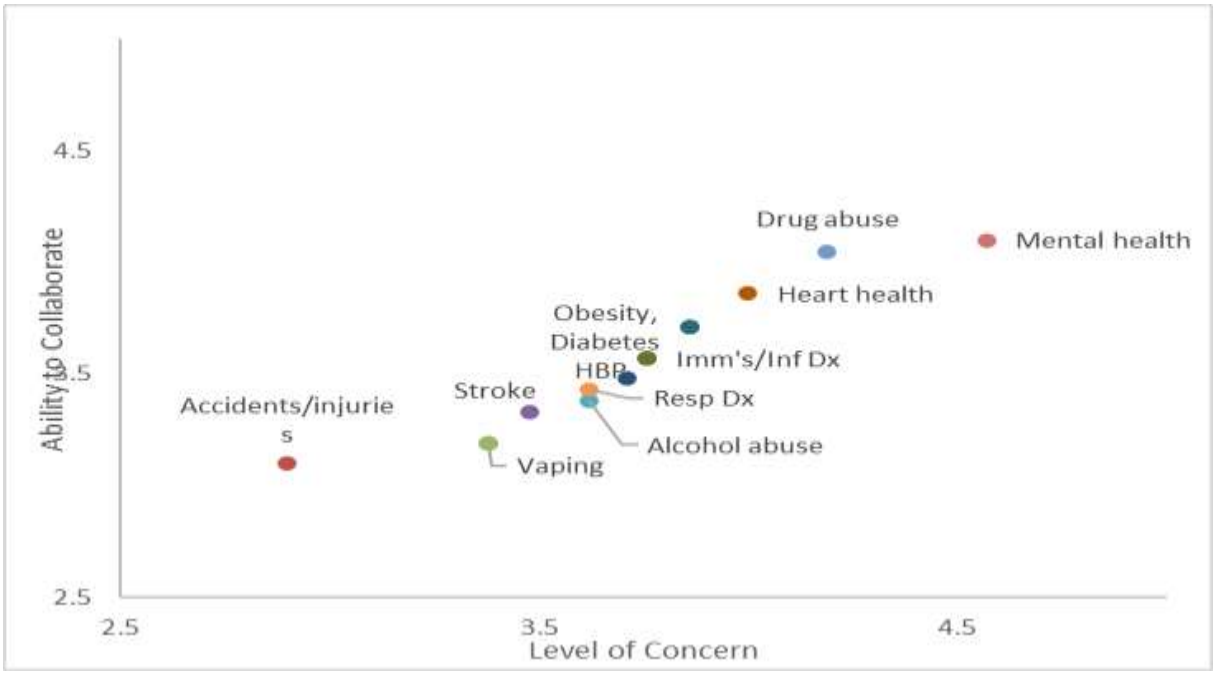


Q5 & Q6: *How would you rate the potential of community partners to work together to address each of these health needs? Please rate each on a scale 1 (little potential) – 5 (significant potential).*

LEVEL OF CONCERN BY ABILITY TO COLLABORATE

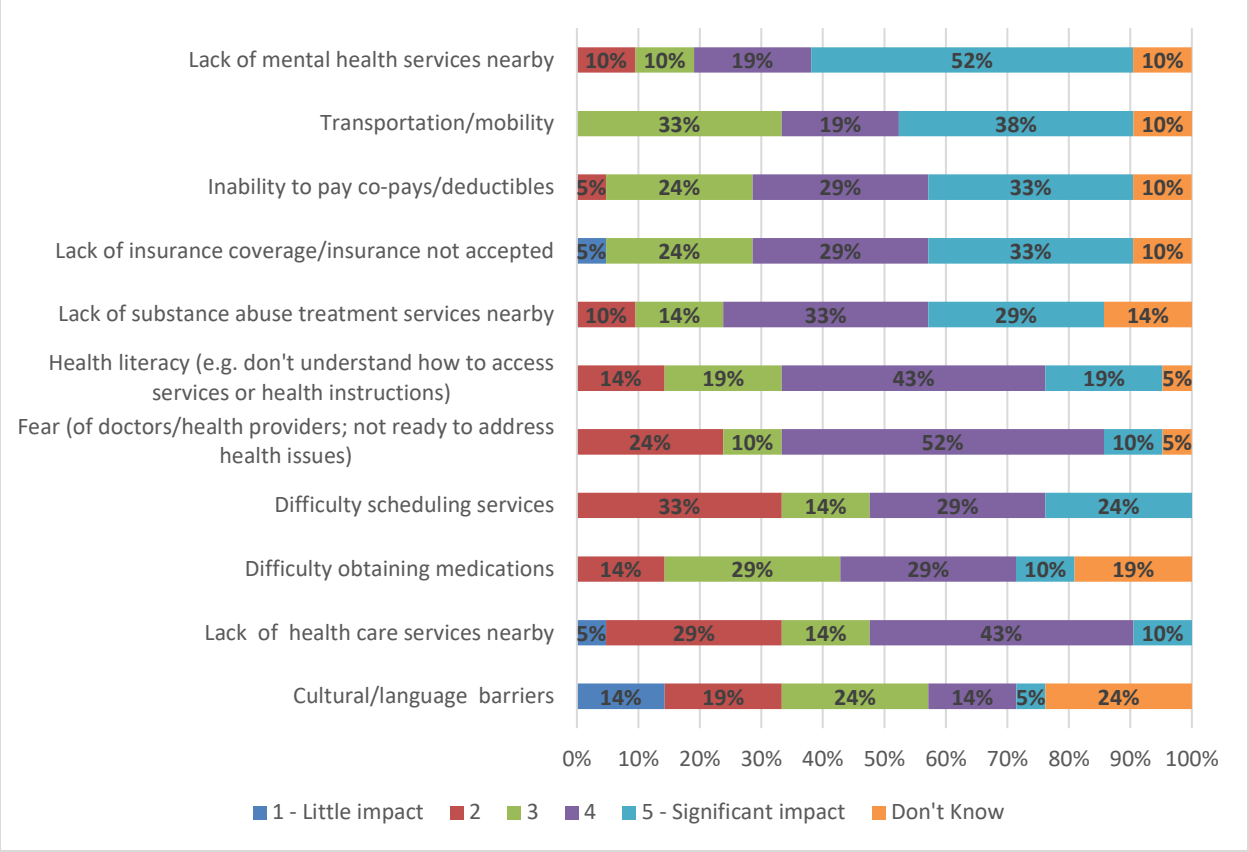
The stakeholders rate **mental health** as being at highest in level of concern, followed by **drug abuse**. They are tied in terms of collaboration.

HEALTH NEEDS	LEVEL OF NEEDS	ABILITY TO COLLABORATE
Mental Health	4.57	4.10
Drug Abuse	4.19	4.05
Heart Health	4.00	3.86
Obesity	3.86	3.71
Diabetes	3.86	3.71
Immunization/Infectious Diseases	3.76	3.57
Cognitive Decline/Dementia	3.76	3.57
High Blood Pressure	3.71	3.48
Respiratory Diseases	3.62	3.43
Alcohol Abuse	3.62	3.38
Stroke	3.48	3.33
Vaping	3.38	3.19
Tobacco Use	3.38	3.19
Accidents/Injuries	2.90	3.10



GREATEST BARRIERS TO ACCESS

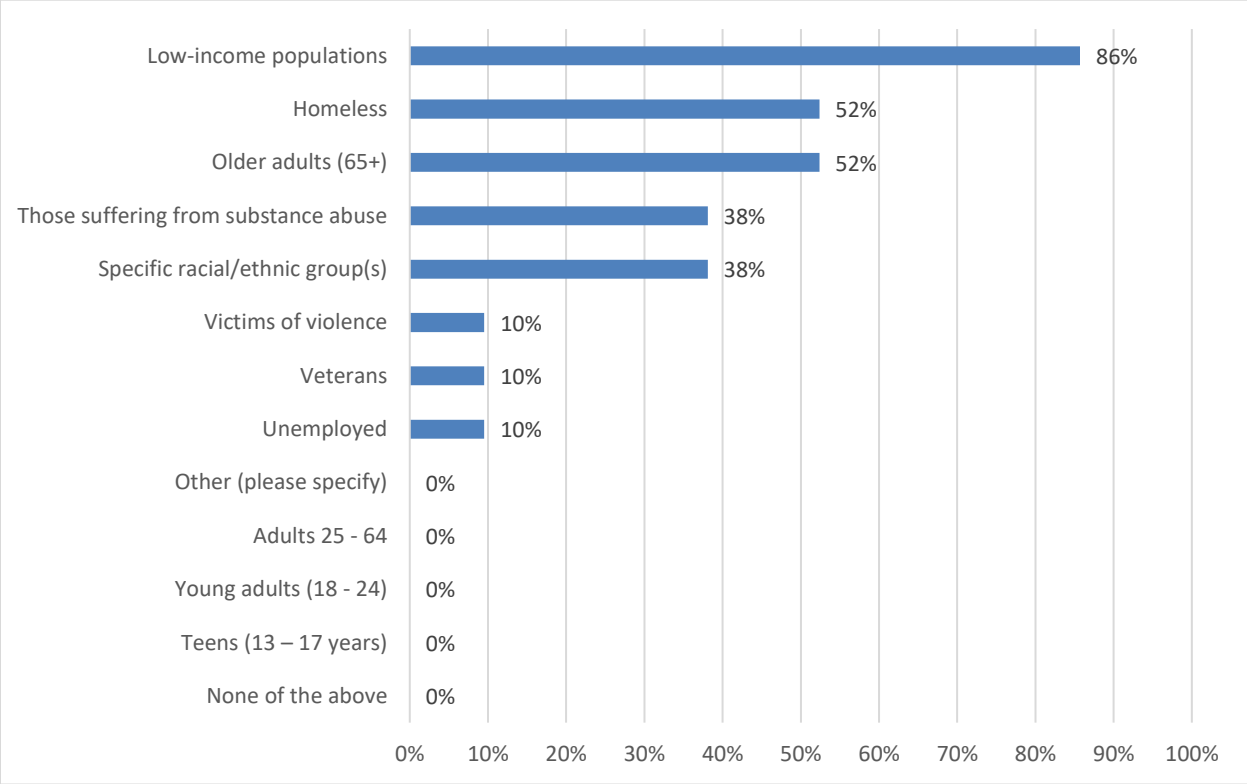
Stakeholders identify **lack of nearby mental health services** as having the greatest impact on access to health services. Several barriers were closely ranked next, including **transportation** and **co-pays and deductibles**.



Q7: How impactful are each of the following barriers to accessing health care at The Rehabilitation Institute of Southern Illinois? Rate each on a scale of 1 (little impact) – 5 (significant impact).

POPULATIONS AT GREATEST RISK

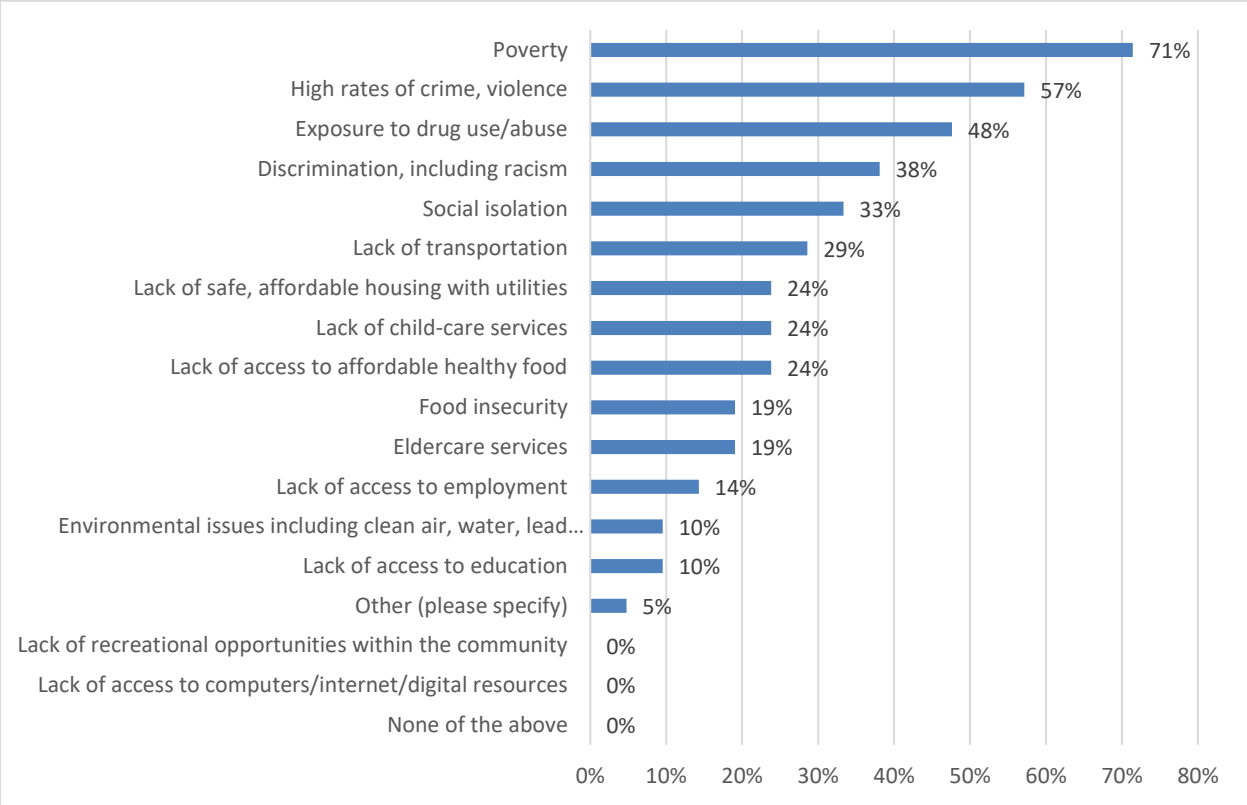
Most stakeholders identify **low-income populations** as being at greatest risk for poor health outcomes, followed by the **homeless** and **adults over age 65**.



Q8: *Among those populations served by The Rehabilitation Institute of Southern Illinois, which are most at risk for poor health outcomes? Pick no more than five.*

SOCIAL FACTORS IMPACTING THE COMMUNITY

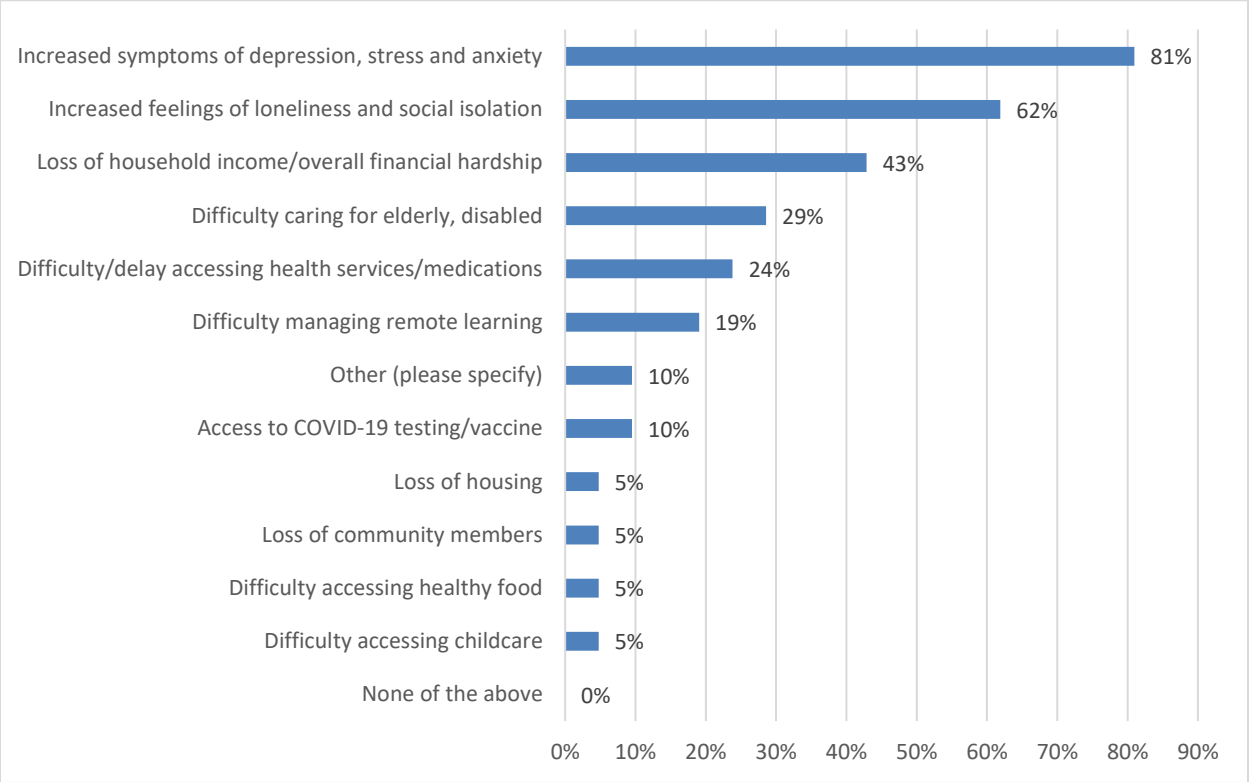
Stakeholders identify **poverty** as having the greatest impact on the communities served by The Rehabilitation Institute of Southern Illinois. **Crime and violence** ranked second, followed by **exposure to drugs/drug abuse**.



Q9: *Which of the following social factors have historically had the greatest impact on the health of the communities served by The Rehabilitation Institute of Southern Illinois? Pick no more than five.*

COVID-19'S IMPACT IN THE COMMUNITY

Stakeholders strongly agree that the greatest impact of COVID-19 on area residents have been emotional: **increased symptoms of anxiety and depression,** along with **loneliness and social isolation**.



Q10: *Thinking about the COVID-19 pandemic and its impact on St. Clair County, which of the following have had the greatest impact on the health of the community? Pick no more than three.*

BIGGEST GAPS IN RESOURCES

The stakeholders identified the largest resource gaps around **mental health resources** and **transportation**.

HEALTH NEED	GAP
Mental Health Resources (5 Comments)	Access to mental health services for our youth. Finding helpful resources can take months if not years in our community.
	Inpatient psychiatric care.
	Mental health support.
	Mental Health services.
	Local long term mental health.
	Short term behavioral health crisis services. Service only minimally present for St. Clair County residents with existing service located in Madison County.
Transportation (3 Comments)	Transportation to appointments.
	Transportation. Bus service within St. Clair Co. is sporadic.
	Transportation. Bus service within St. Clair Co. is sporadic.
Awareness of Community Resources	Education on services to community partners.
Lack of Access to Technology	Lack of internet or computer access to the poor and elderly.
Residential Substance Abuse Treatment	Lack of substance abuse centers for residential rehab. Currently addicts go to hospitals for wellness but cannot stay in ER. If a person is on IL state healthcare plan, there are no centers that will take addicts for residential treatment. Same for mental health. When an addict is ready to try to rehab even outpatient centers cannot take them and advise to come back the next day. A very vicious cycle for this population.
Resources to Address Poverty	Poverty and economic decline drive most all other health outcomes.
Services of Seniors	Funding for elderly patients healthcare needs such as affordance for caregivers in the home, diet/nutrition and medications.
Vocational Rehabilitation	Vocational rehab services.

Q11: *What are the biggest gaps in resources within this community to address the needs that you have identified? Please mention the need along with the missing resources.*

NEW/ADDITIONAL HEALTH/SOCIAL ISSUES

The stakeholders identified several areas as being of new concern. Many comments were around the area of **mental health.**

HEALTH NEED	DESCRIPTION
Mental Health	Nurses and CNAs working in the health care setting.
	Growing concern for mental health and drug abuse as well as gun violence and access to guns in the younger populations.
	Healthcare provider, mental health.
	Increasing mental health issues.
	Suicide for at risk populations.
Impact of COVID on Children	Effects on Covid on our youngest community members.
Non-Acute Care Insurance Coverage	Medicare/insurance cuts to hospital, home health, acute rehab and skilled nursing facility coverage.
Senior Care-Givers	Services offered to caregivers of older adults 65+.

***Q12**: What new/additional health or social issues are you aware of in this community that may not be widely known, yet are a concern for the future?*

COMMUNITY ASSETS THAT PROMOTE COMMUNITY HEALTH

The stakeholders mentioned a variety of community resources that The Rehabilitation Institute of Southern Illinois or area residents may be unaware. These included several area programs including AGESmart, Healthier Together, Make Health Happen ESTL and Programs and Services for Older Persons.

RESOURCE TYPES	RESOURCE
AGESmart (3 Mentions)	AgeSmart Community Resources enhance the lives of older adults, persons with disabilities, and veterans through advocacy, action, and answers on aging. https://www.agesmart.org.
Healthier Together	Healthier Together is a community-based movement that seeks to transform St. Clair County and the Metro East area into the top 25% of healthiest counties in Illinois by 2025, by creating opportunities so all residents can experience a safer, healthier quality of life. https://healthiertogether.net.
Make Health Happen ESTL	Make Health Happen ESTL is working to improve food access and promote healthy spaces in East St. Louis, Illinois. https://www.makehealthhappenestl.org/
SWIC Program for PSOP	Programs and Services for Older Persons (PSOP) staff provide a wide variety of direct and referral services to older adults, as well as their families and caregivers. The goal is to help older adults make the most of their health and independence while enjoying a rewarding lifestyle. PSOP has something for everyone! https://www.swic.edu/community/senior-programs/psop.
Socialization Opportunities	More social gatherings are occurring as we move past the pandemic.
Outdoor Resources	The bike trails and local farmer's markets.
Better Planning	Current efforts are underway to strategically align the 3 and 5 year community health improvement plans (CHIPs) of St. Clair County's two certified health departments and three hospitals - all of whom are mandated to conduct a community health needs assessment and develop CHIP.
Health Resources	Strong FQHC presence.

Q13: *Think about health assets or resources as people, institutions, services, supports built resources (i.e. parks) or natural resources that promote a culture or health. What are the health assets or resources that RISIL may not be aware of?*

IDEAS FOR IMPROVING THE HEALTH OF THE COMMUNITY

Many stakeholders suggested opportunities for **more collaboration** as a way to help improve the health of the community.

HEALTH NEED	DESCRIPTION
More Collaborations (7 Comments)	Actively participate in Healthier Together.
	Communication, awareness, collaborative work to meet finances/budgets of each institution/facility.
	Meetings.
	County leadership needs to be inclusive.
	They can find a way or platform to share resources.
	Share data, provide referrals for specialty services and care not always available for low-income populations.
	True collaboration on the part of providers. Treatment in silos continue to exist and resources are not shared. For example, placing a community mental health worker in the ED to facilitate linkage/referral to services. Person could assist with crisis response as well.
Case Management	Serving "masses" in the traditional way does not work. We need to create a system whereby each person has a strong advocate and case manager that they build a relationship with.

Q14: *How can The Rehabilitation Institute of Southern Illinois community stakeholders work together to use their collective strengths to improve the health of the community?*

COMMUNITIES AT GREATEST RISK

The stakeholders identified a variety of areas as being vulnerable and at-risk community. These included the communities of **East St. Louis, Belleville** and **Fairview Heights.**

HEALTH NEED	DESCRIPTION
Populations of East St. Louis and surrounding areas: Cahokia, Caseyville, Alorton, Centreville, Sauget, Washington Park (8 Mentions)	62201, 62202, 62203, 62204, 62205, 62206, 62207 The greater East St. Louis Area.
Belleville and Fairview Heights (5 mentions)	62220, 62221, 62223, 62226, 62208.
All of Them (5 Comments)	All communities are facing this, although many do not want to acknowledge the need.
	All communities will benefit from better community health.
	Belleville, East St. Louis, as well as rural areas in Randolph county.
	"Below the hill" including East St. Louis, Cahokia Heights and adjacent communities.
	5 East St. Louis Townships and newly formed Cahokia Heights.

Q15: *Which communities, neighborhoods or ZIP codes are especially vulnerable or at risk?*

NEXT STEPS

Using the input received from community stakeholders, the Rehabilitation Institute IL team will consult with its internal workgroup to evaluate this feedback. They will also consider other secondary data and determine whether/how their priorities should change. The final needs assessment and implementation plan is due by December 31, 2023.

APPENDIX D: ST. CLAIR COUNTY ONLINE SURVEY PARICIPATING STAKEHOLDERS

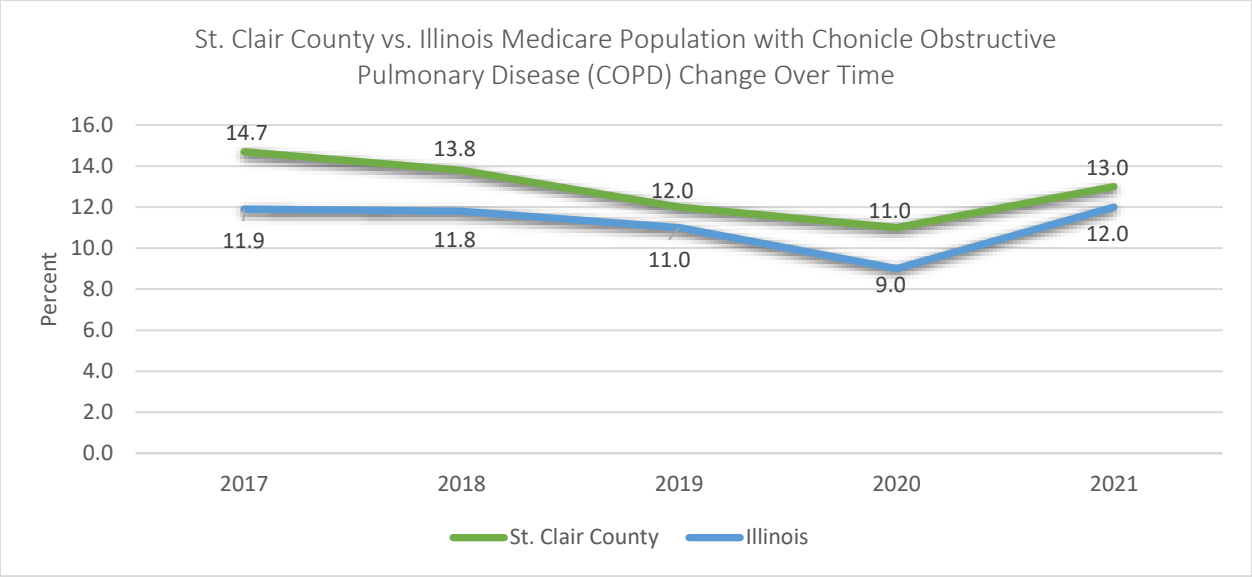
LAST NAME	FIRST NAME	ORGANIZATION	TITLE	CITY/TOWN	ZIP CODES
Arell-Martinez	Debbie	O'Fallon-Shiloh Chamber of Commerce	President/CEO	O'Fallon-Shiloh	62269
Bauer	Laura A	Community Volunteer	Volunteer	Belleville	62221
Bechtel	Staci	Red Bud Regional Home Care	Account Executive	Red Bud	62278
Boswell	Carla	Southwestern IL College #522 Programs and Services for Older Persons	PSOP Site Manager	Belleville	62220
Brauss	Matthew	Family Hospice of Belleville	Executive Director	Belleville	62226
Bryer	Keri	Memorial Care Center	Administrator	Belleville	62220
Denton	Walter	City of O'Fallon	City Administrator	O'Fallon	62269
Eichenlaub	Mark	St. Clair County Regional Office of Education #50	Regional Superintendent of Schools	Belleville	62220
Lambert	Ashlee	Caritas Family Solutions	Director of Philanthropy	Shiloh	62221
McQuaid	Elizabeth	St Clair Drug Prevention Alliance	Alliance Lead	Belleville	62206
Paeth	Joy M	AgeSmart Community Resources	CEO	O'Fallon	62269
Peters	Mark	Healthier Together	Executive Director	Belleville	62221
Phillipson	Lisa	Hospice of Southern Illinois	Community Education Director	Belleville	62220
Rosenzweig	Dana	St. Clair County Mental Health Board	Executive Director	Belleville	62220
Schifferdecker	Margaret	Greater Belleville Chamber of Commerce	Membership Manager	Belleville	62220
Schmidt	Leslie	Abbott EMS	Account Executive	Belleville	62226
Stewart	Douglas	Memorial Hospital - Belleville	Manager, Spiritual Care Services	Belleville	62226
Stidham	Michael K	Beacon Ministry	Program Director	Belleville	62226
Toennies	Shan	Adapt Health	Account Representative	Belleville	62223
Weil	David	SIHF Healthcare	Grants Director	Sauget	62206
Weis, PT, MHA	Jennifer	SSM Health Day Institute	Case Manager	O'Fallon	62269

APPENDIX E: THE REHABILITATION INSTITUTE OF SOUTHERN ILLINOIS INTERNAL WORKGROUP

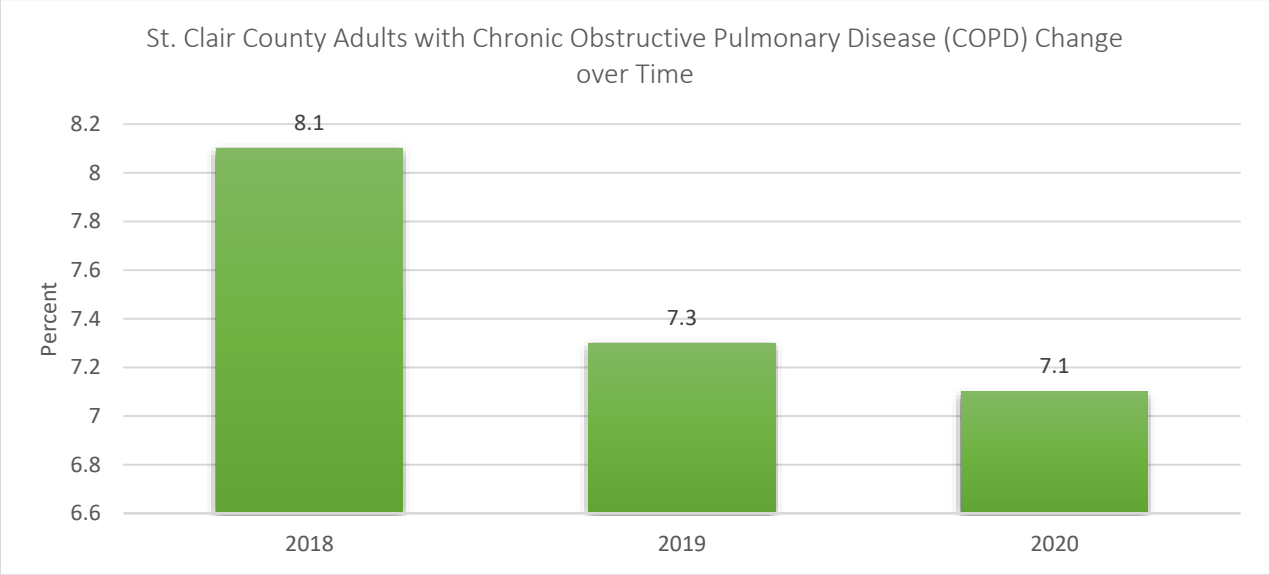
THE REHABILITATION INSTITUTE OF SOUTHERN ILLINOIS COMMUNITY HEALTH NEED ASSESSMENT INTERNAL WORK GROUP			
LAST NAME	FIRS NAME	TITLE	DEPARTMENT
Christ	Michelle	Executive Assistant	Administration
Hoelscher	Cassidy	Chief Executive Officer	Administration
Holdener	Laurie	Director, Quality & Risk	Quality
King	Karley	Program Manager	Marketing and Communication
Pearson	Barbara	Occupational Therapist	Therapy Department
Sanders	Kevisha	Hospital Educator	Infection Control

APPENDIX F: ST. CLAIR COUNTY SECONDARY DATA

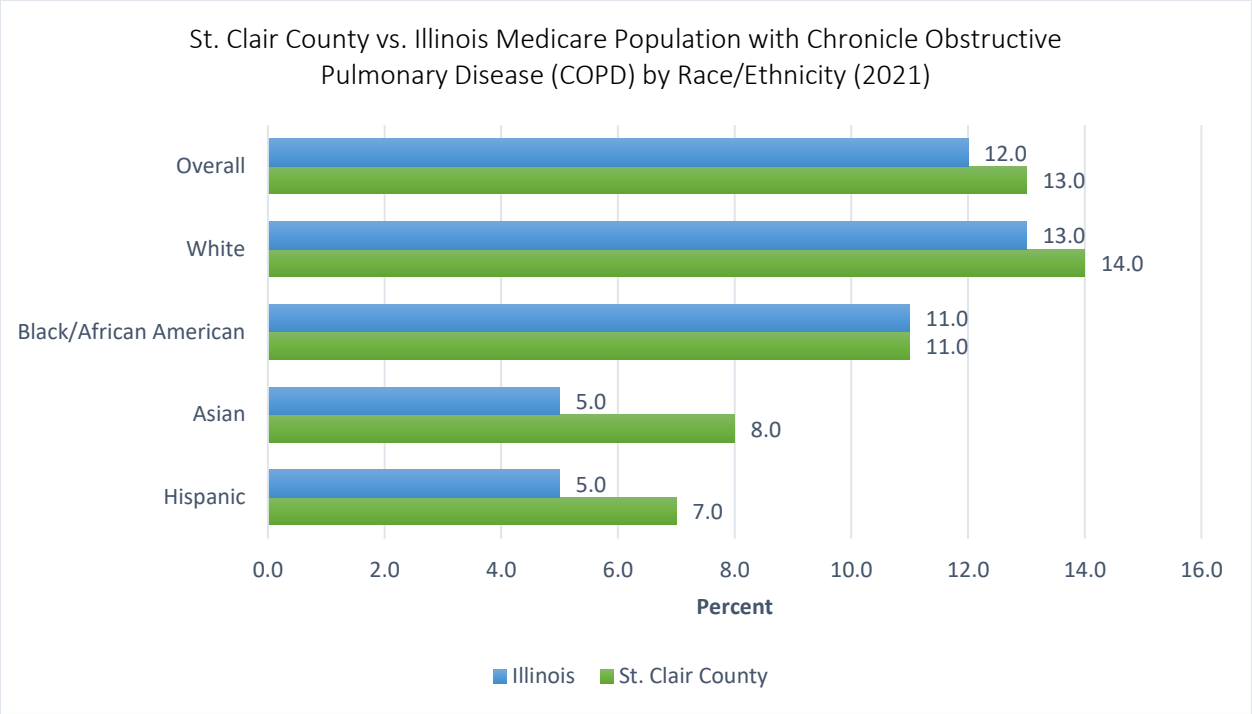
ASTHMA / CHRONIC OBSTRUCTIVE PULMONARY DISEASES



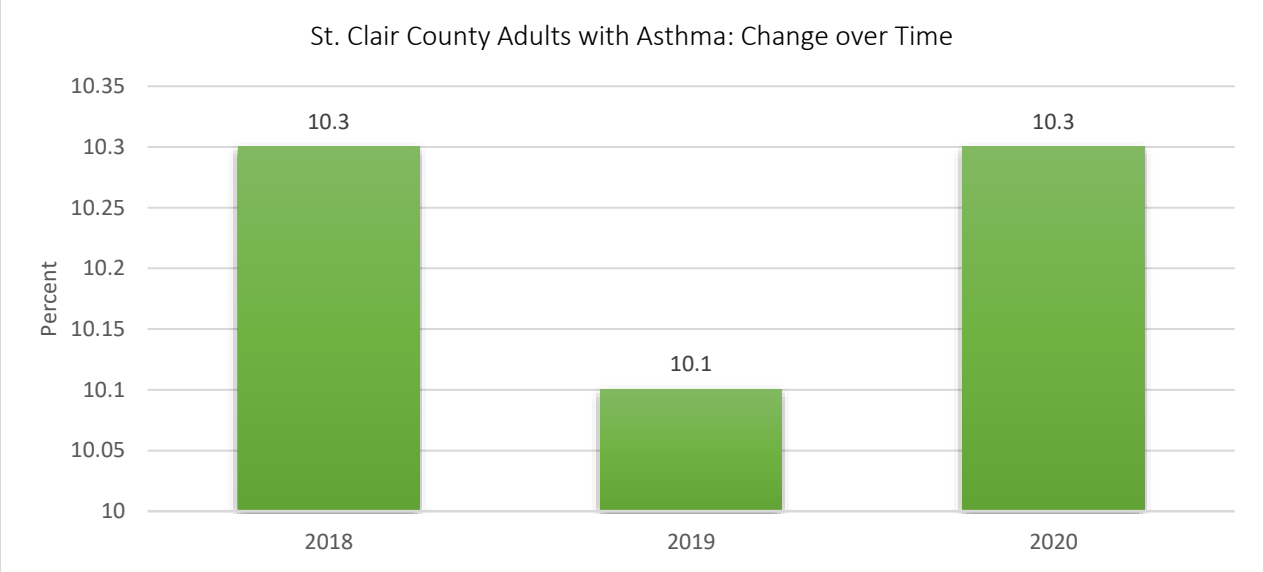
Source: Conduent Healthy Communities Institute



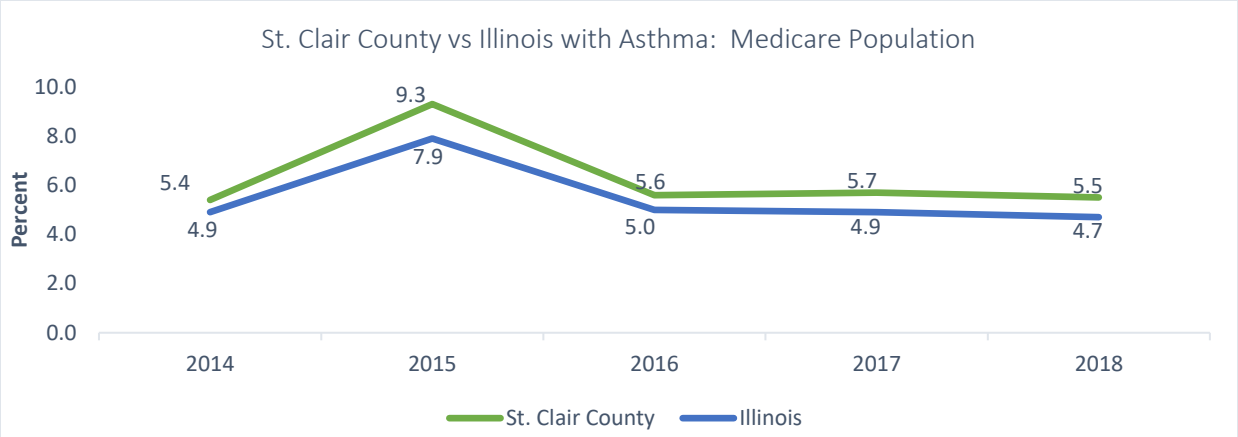
Source: Conduent Healthy Communities Institute



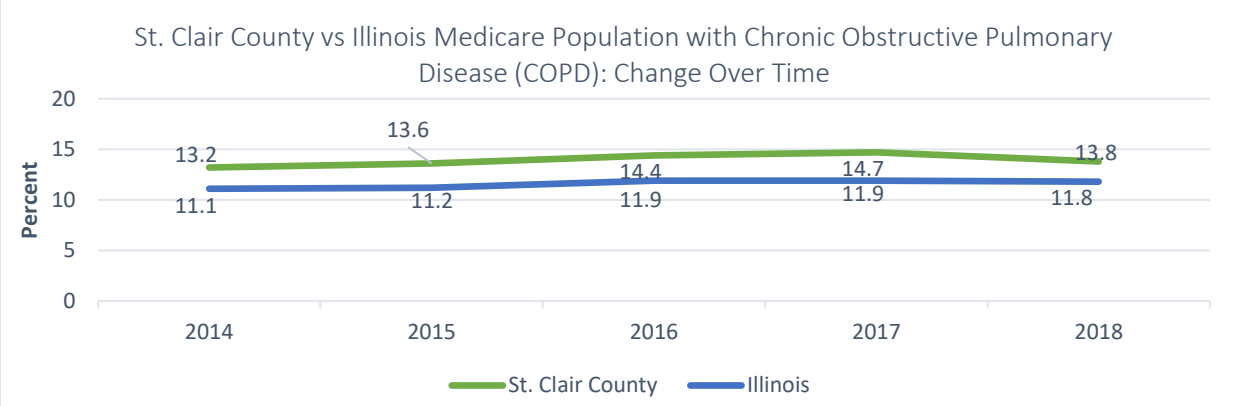
Source: Conduent Healthy Communities Institute



Source: Conduent Healthy Communities Institute

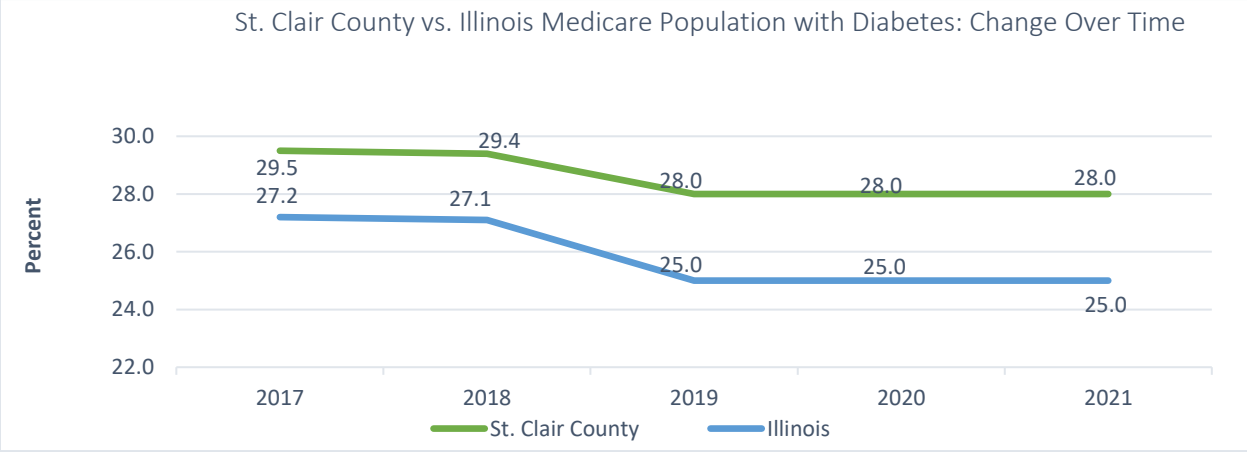


Source: Conduent Healthy Communities Institute

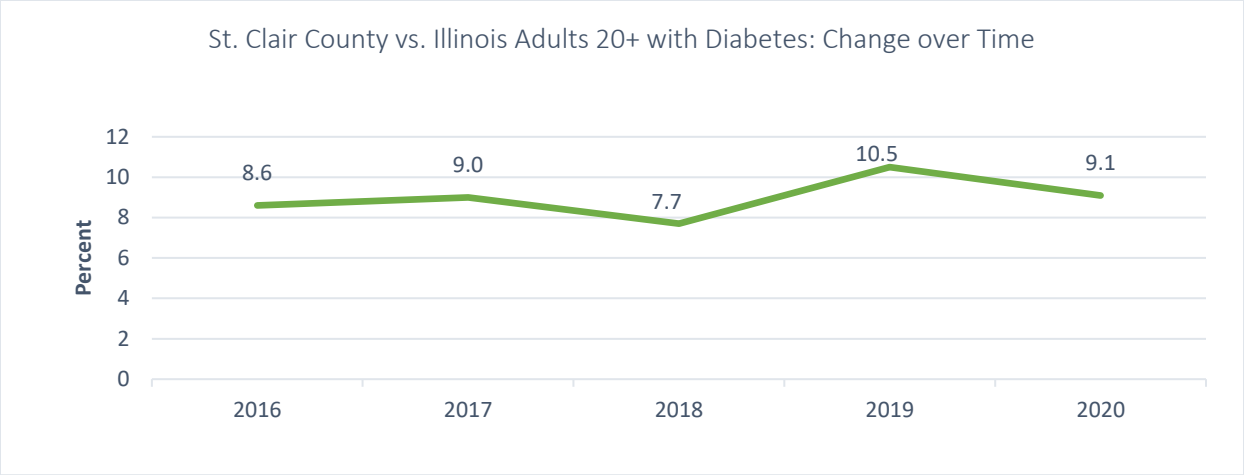


Source: Conduent Healthy Communities Institute

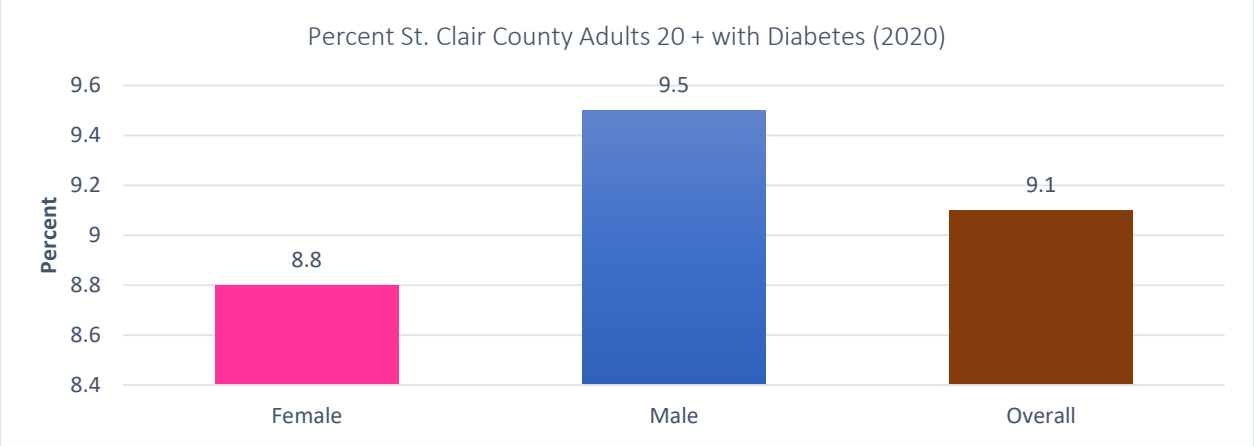
DIABETES



Source: *Conduent Healthy Communities Institute*

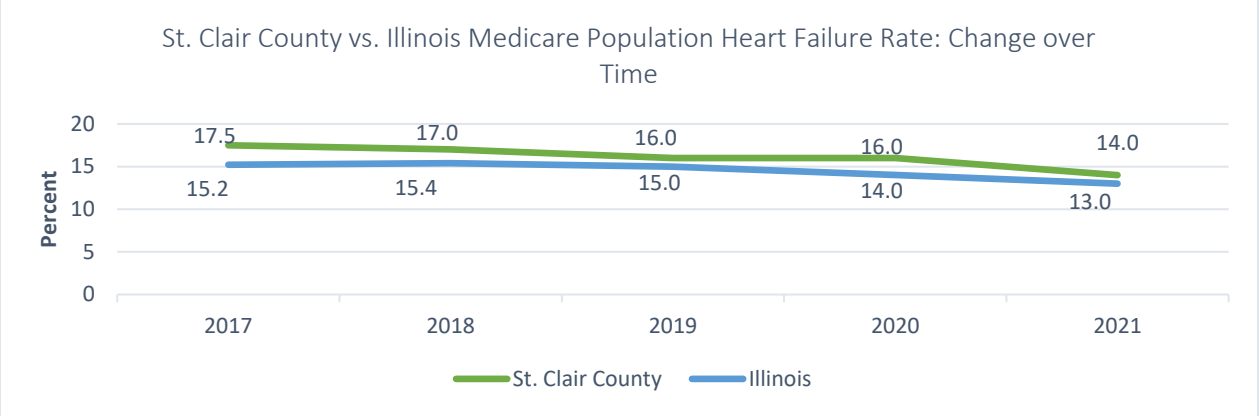


Source: *Conduent Healthy Communities Institute*

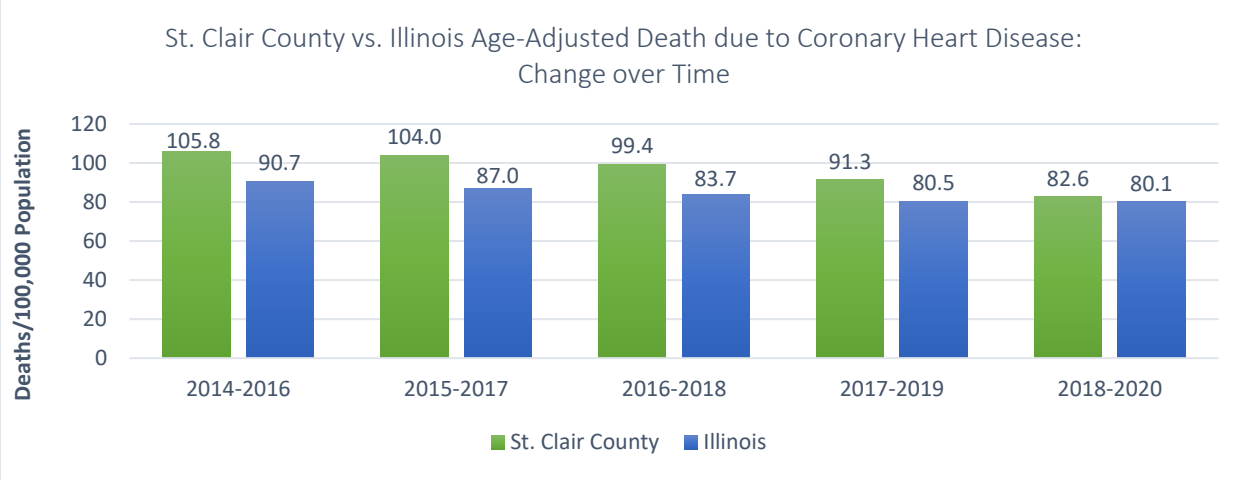


Source: *Conduent Healthy Communities Institute*

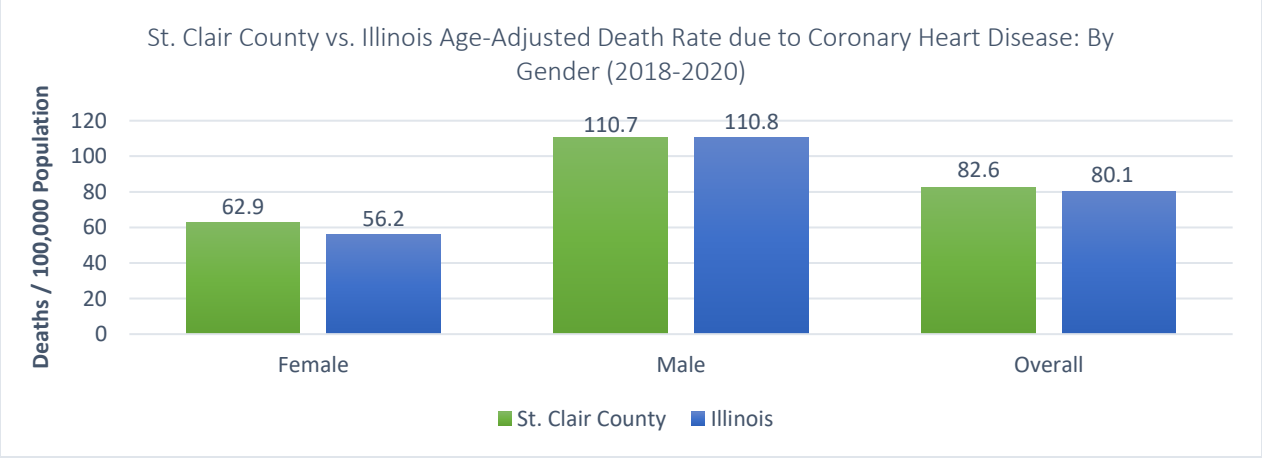
HEART DISEASE



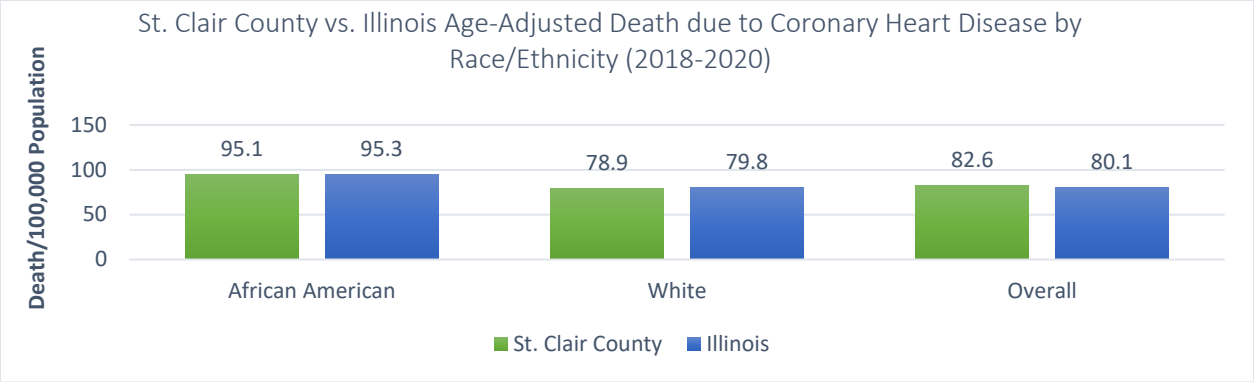
Source: *Conduent Healthy Communities Institute*



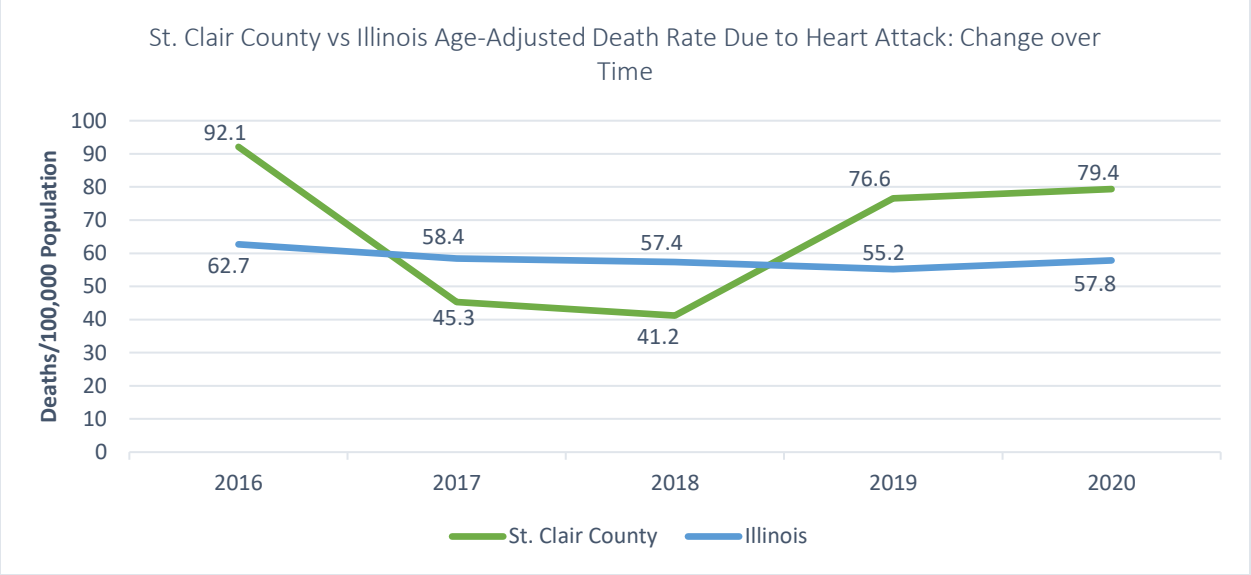
Source: *Conduent Healthy Communities Institute*



Source: *Conduent Healthy Communities Institute*

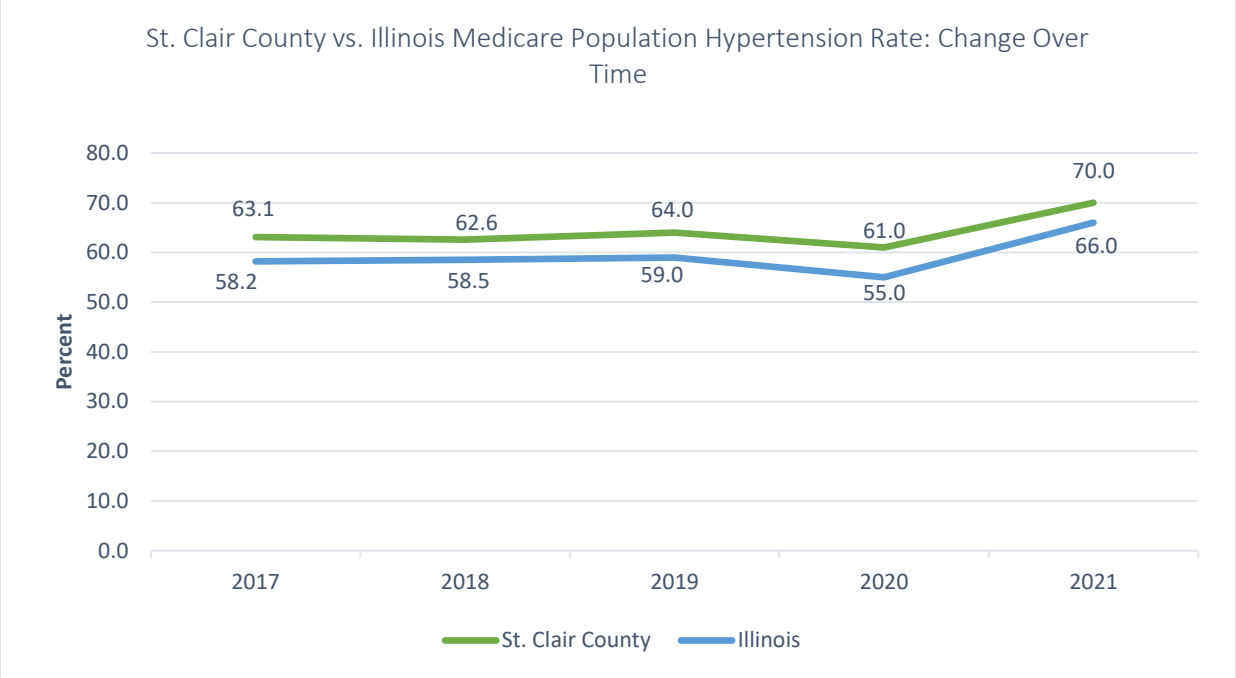


Source: *Conduent Healthy Communities Institute*

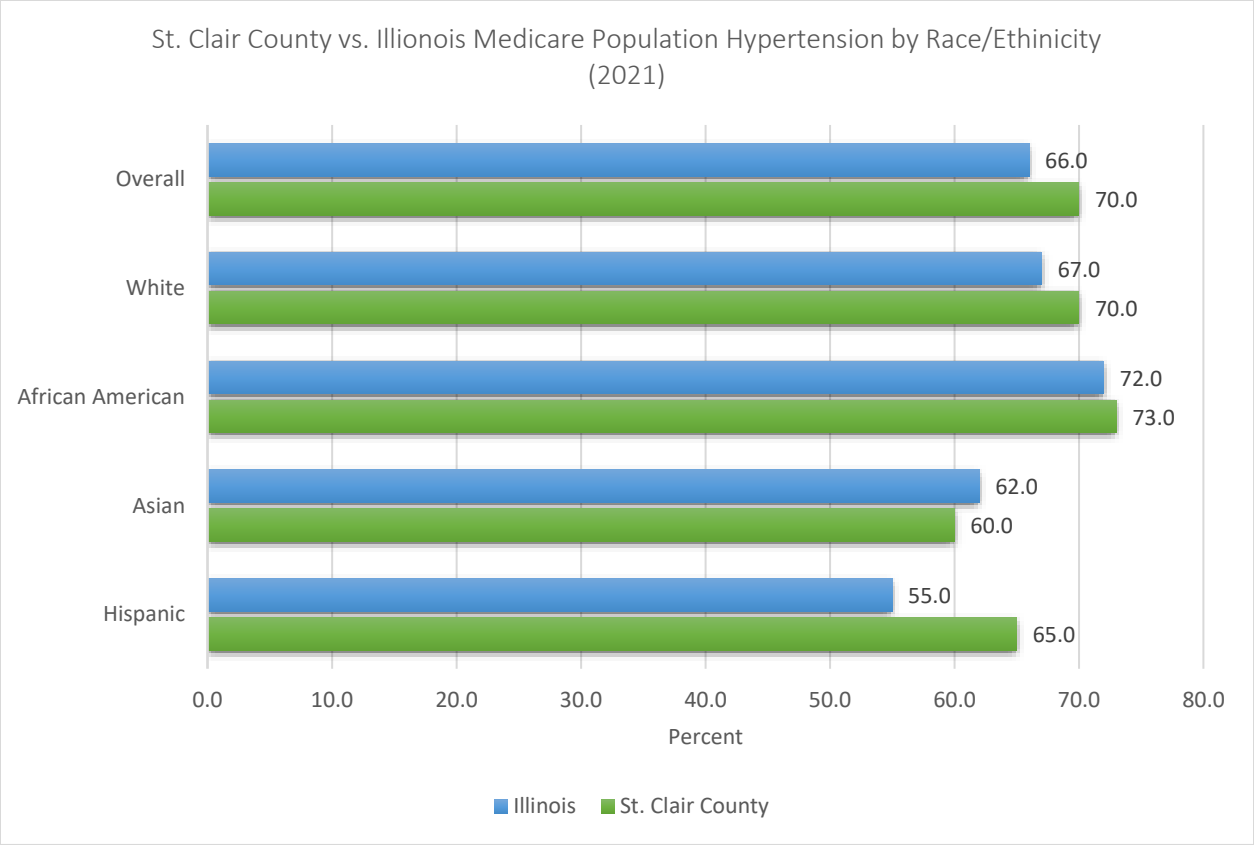


Source: *Conduent Healthy Communities Institute*

HYPERTENSION

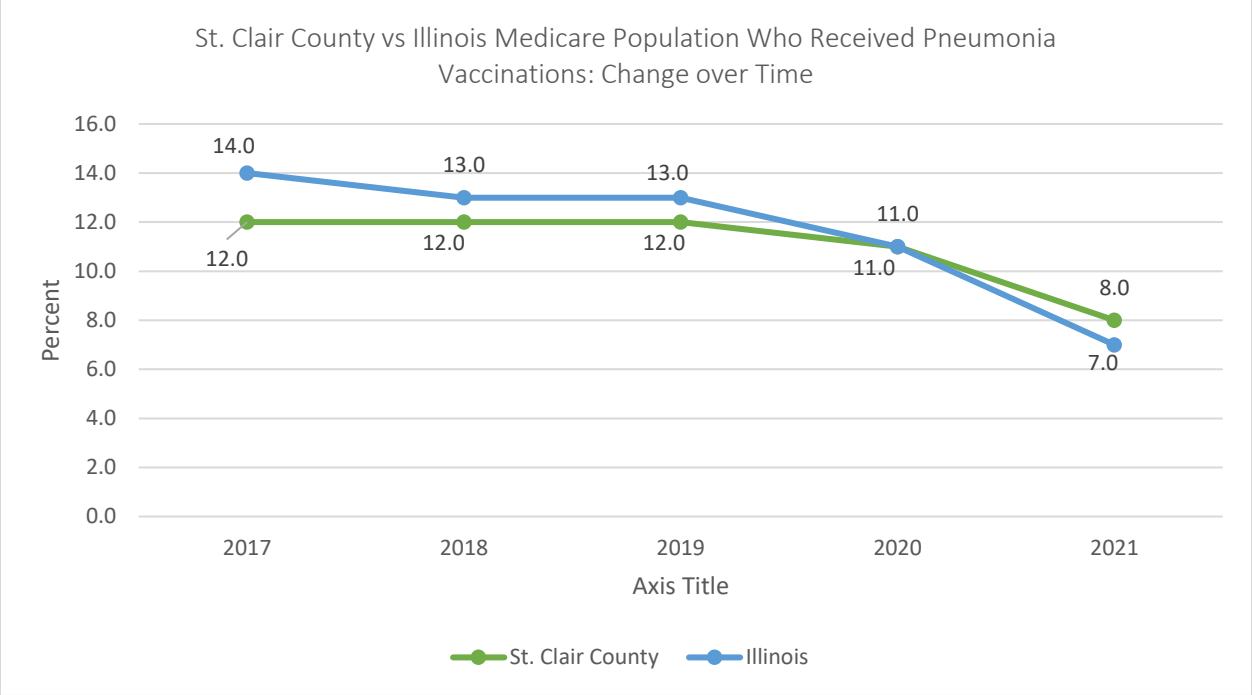


Source: Conduent Healthy Communities Institute

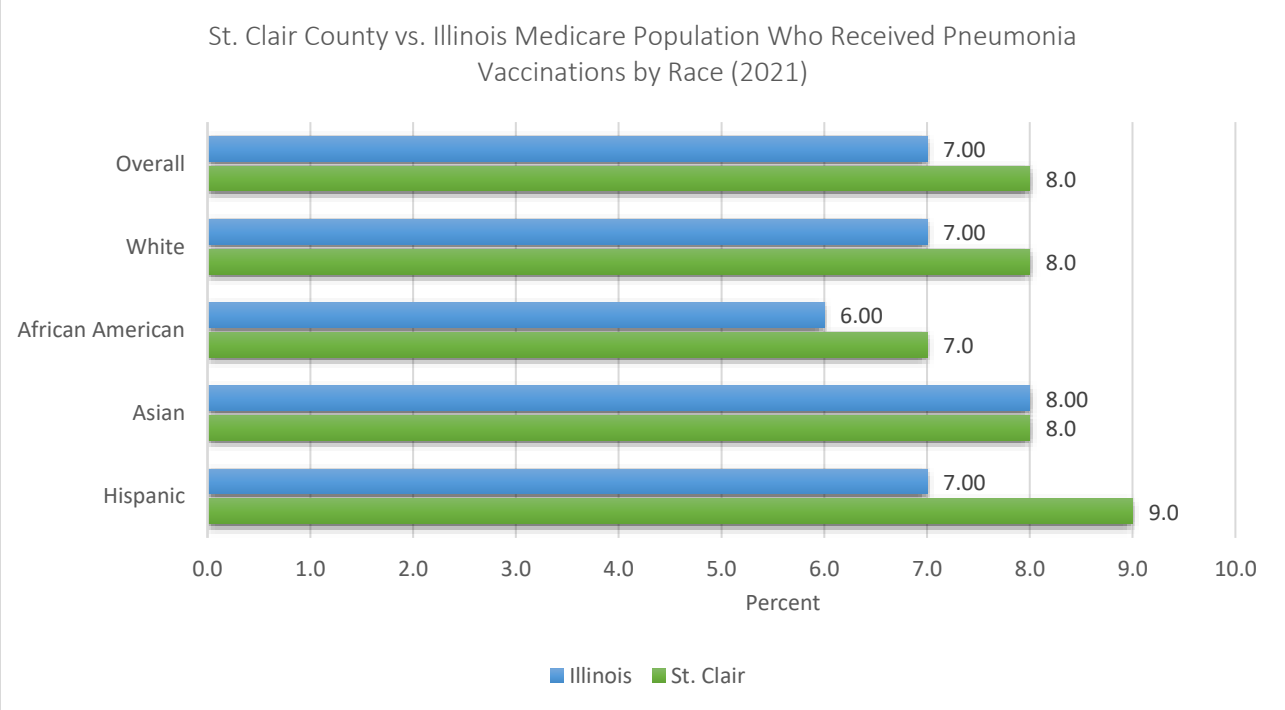


Source: Conduent Healthy Communities Institute

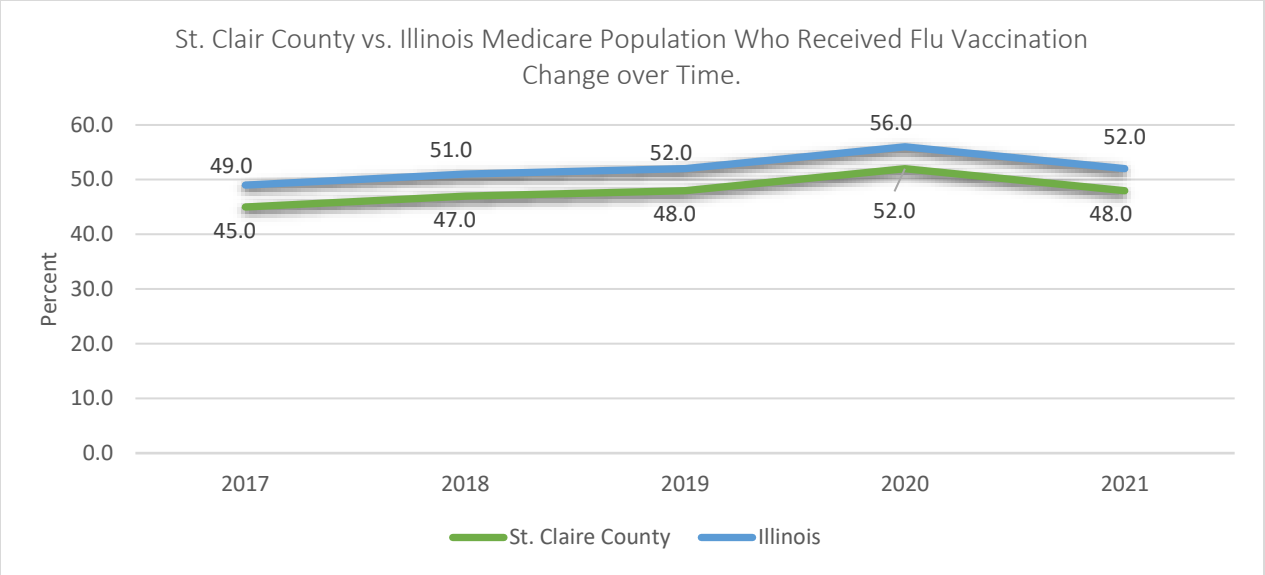
INFECTIOUS DISEASES



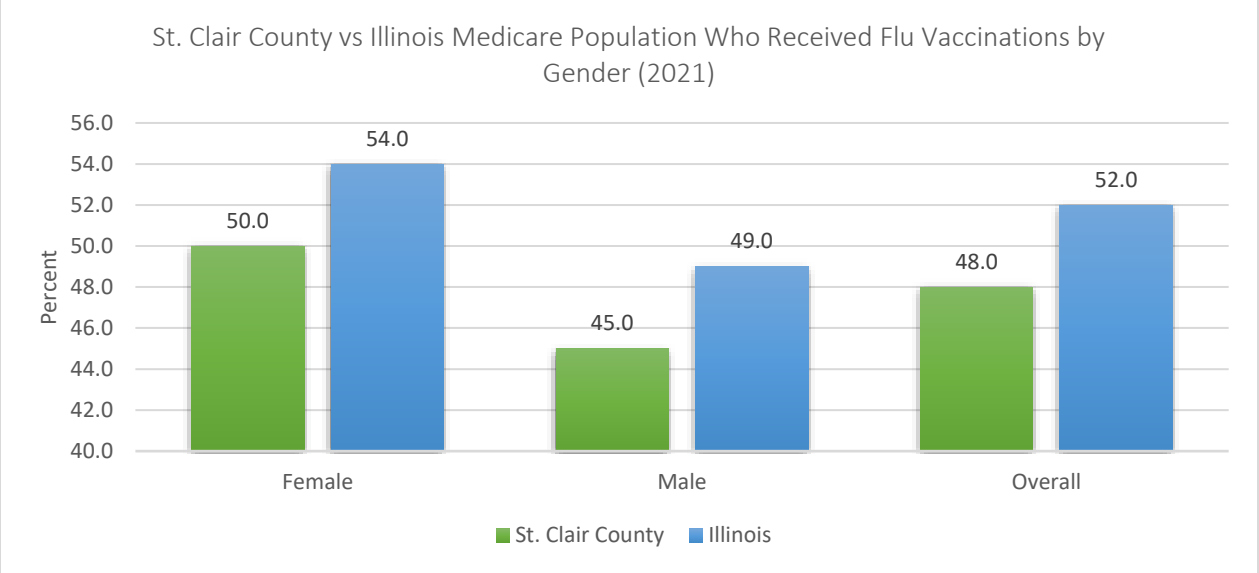
Source: Conduent Healthy Communities Institute



Source: Conduent Healthy Communities Institute

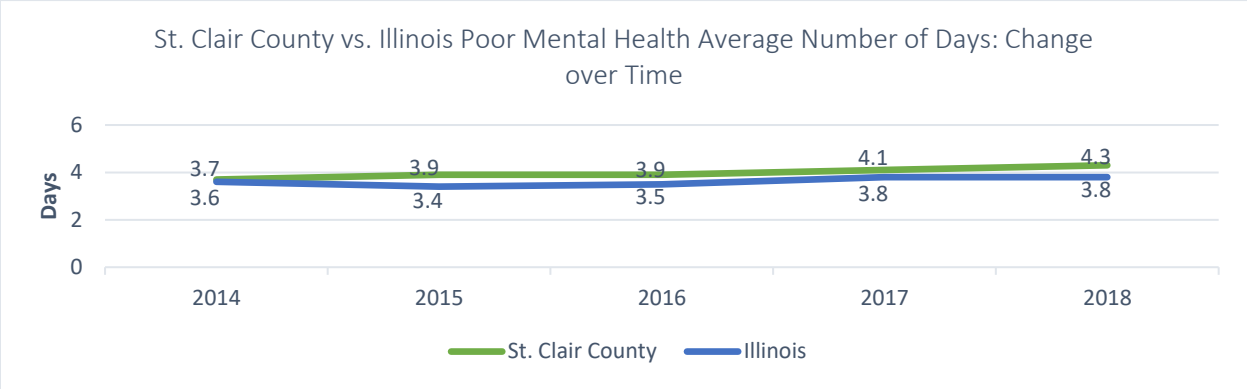


Source: Conduent Healthy Communities Institute

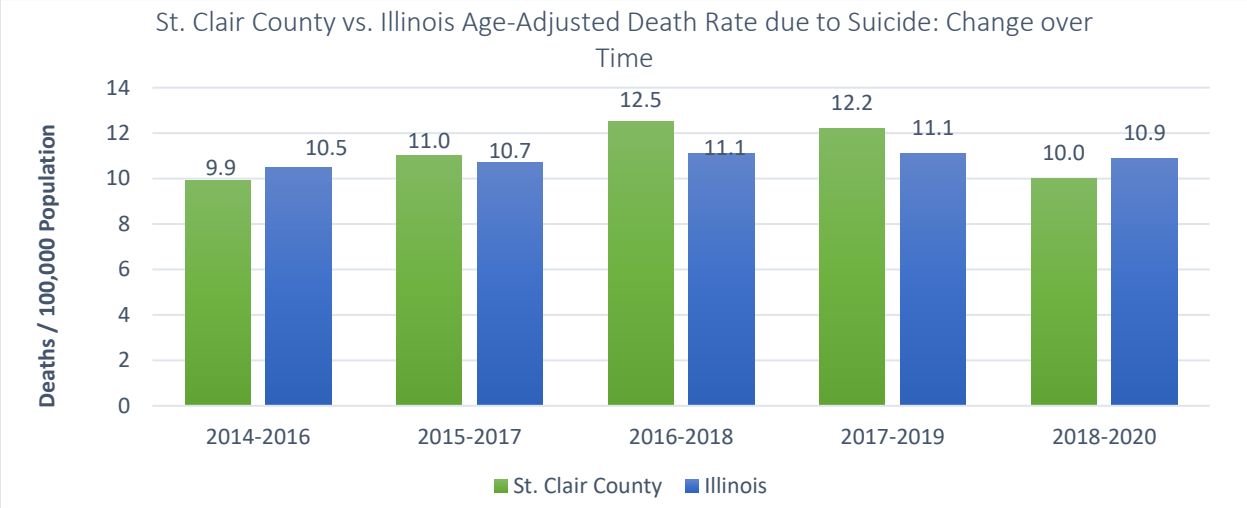


Source: *Conduent Healthy Communities Institute*

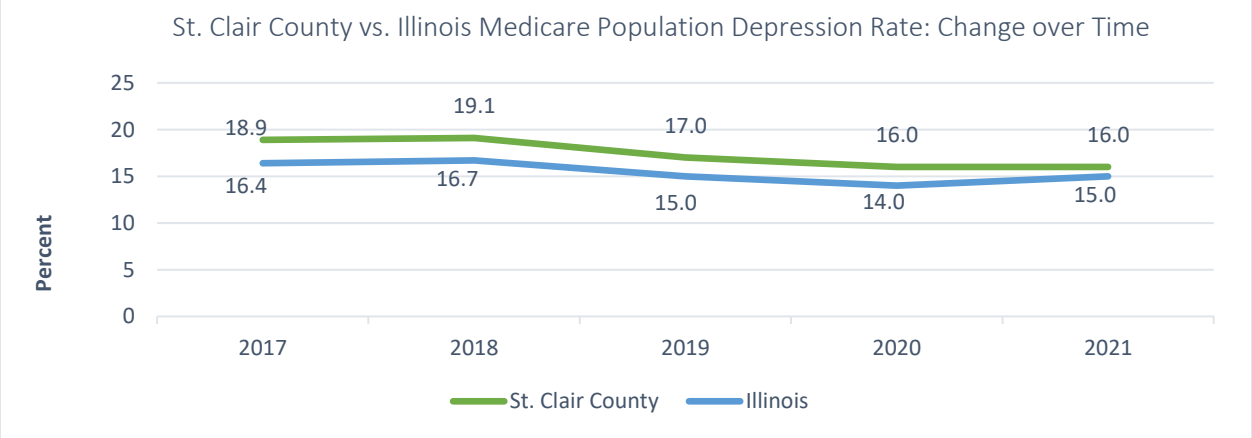
MENTAL /BEHAVIOR HEALTH: MENTAL HEALTH



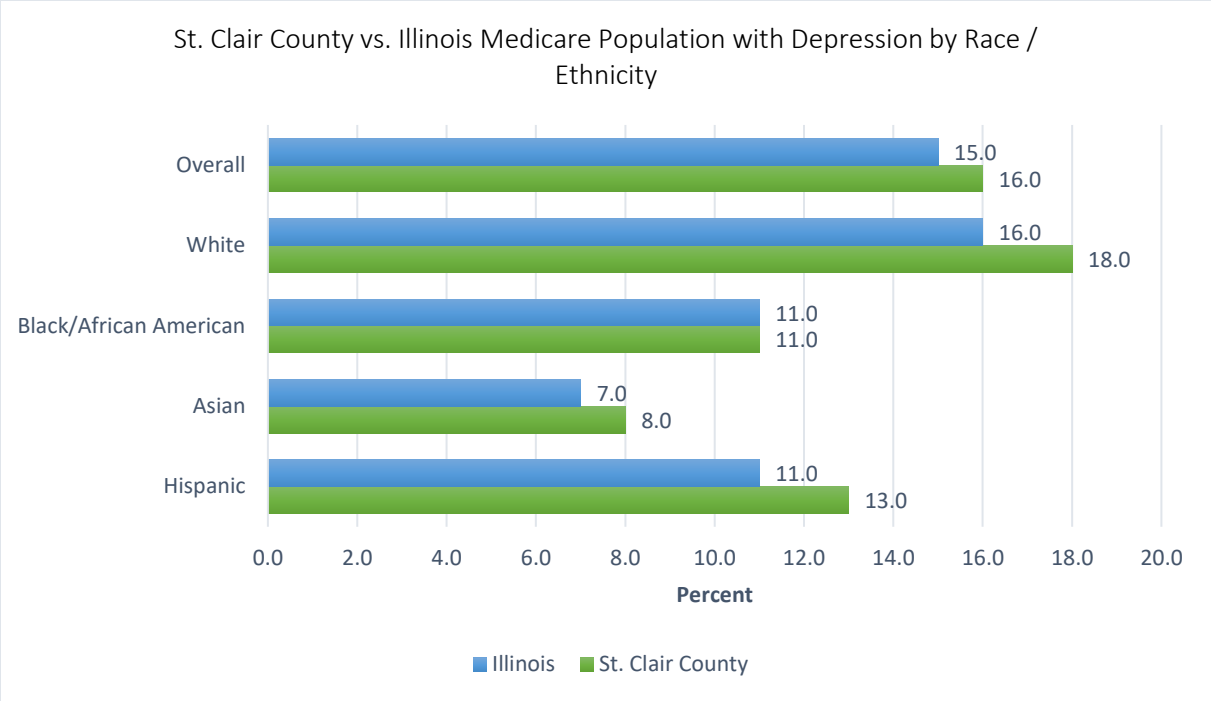
Source: Conduent Healthy Communities Institute



Source: Conduent Healthy Communities Institute

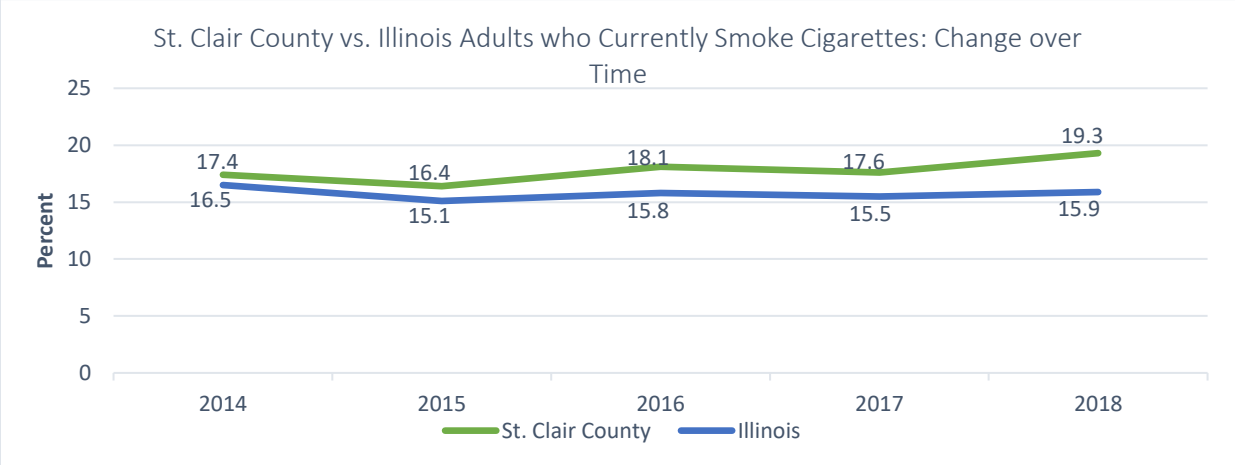


Source: Conduent Healthy Communities Institute

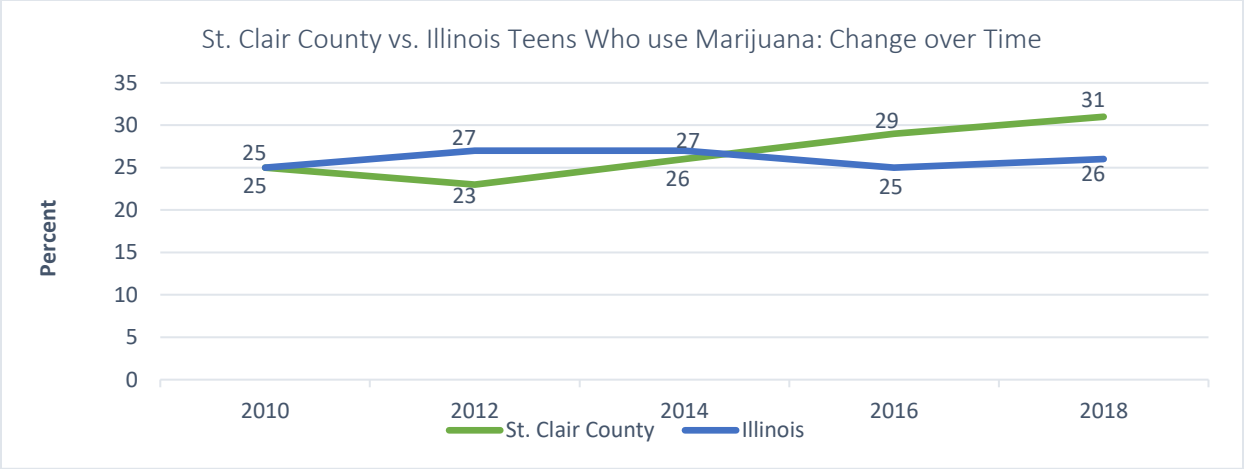


Source: Conduent Healthy Communities Institute

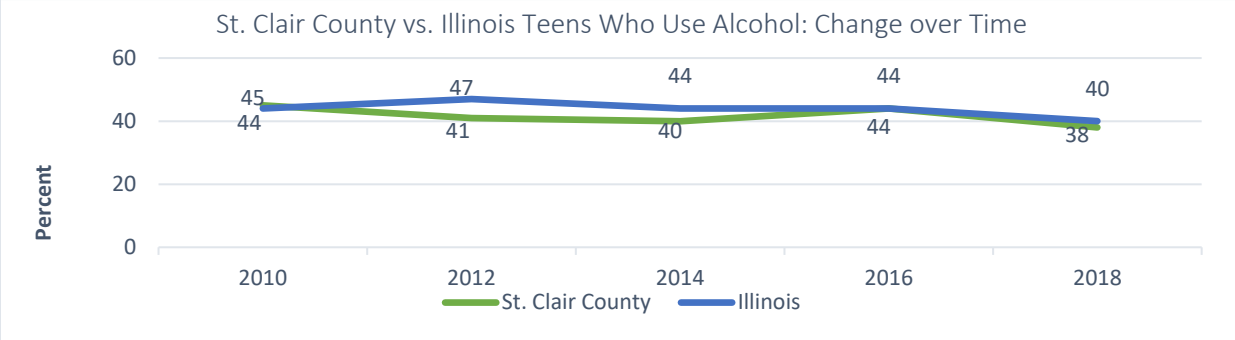
MENTAL / BEHAVIOR HEALTH: DRUG ABUSE



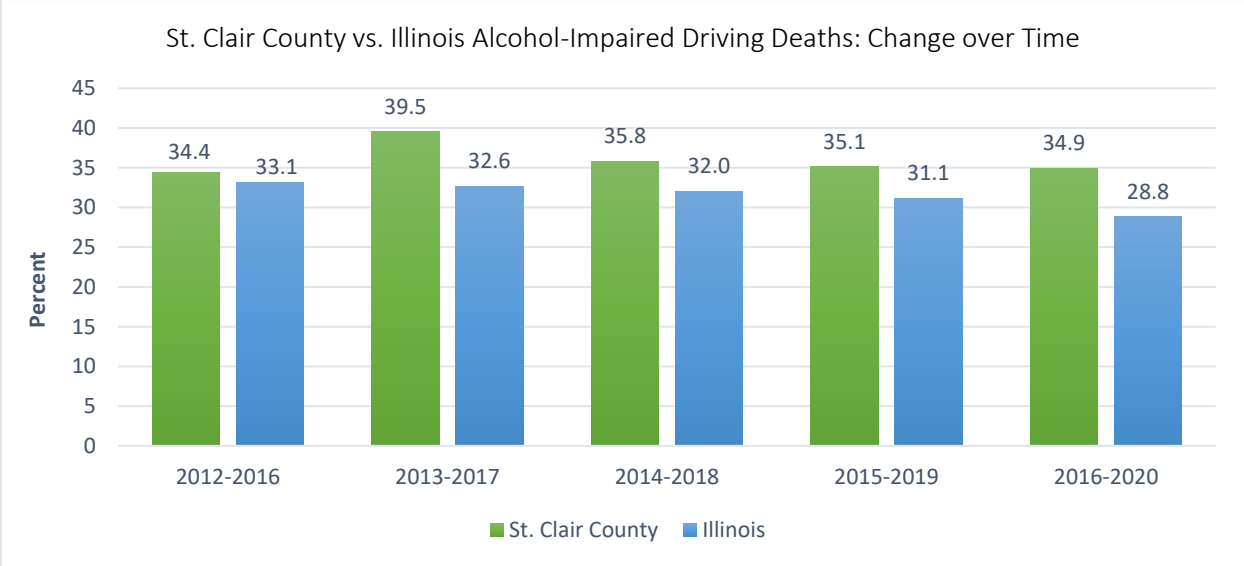
Source: Conduent Healthy Communities Institute



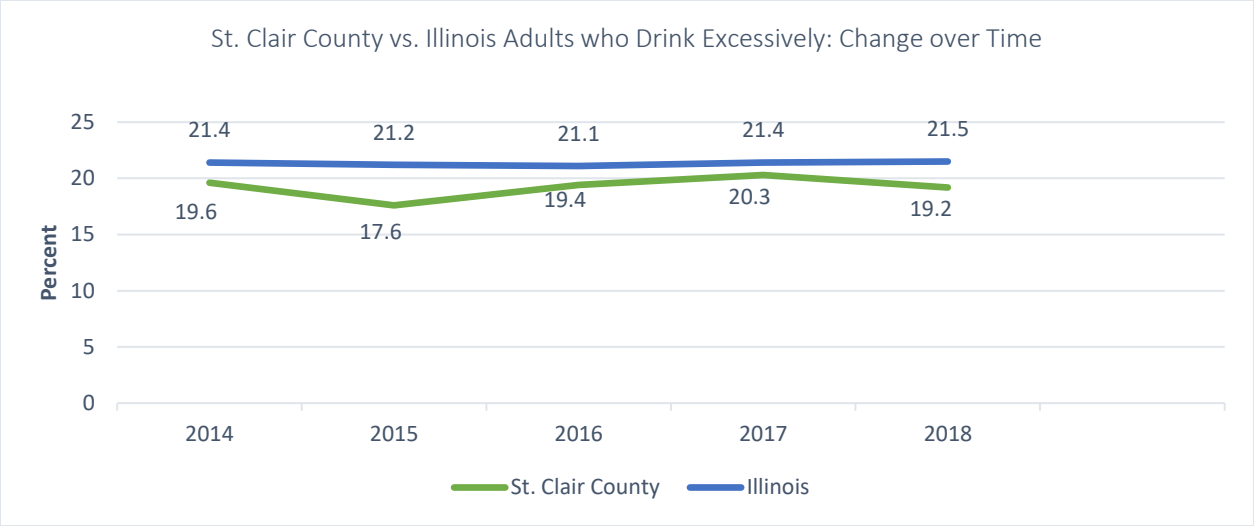
Source: Conduent Healthy Communities Institute



Source: Conduent Healthy Communities Institute

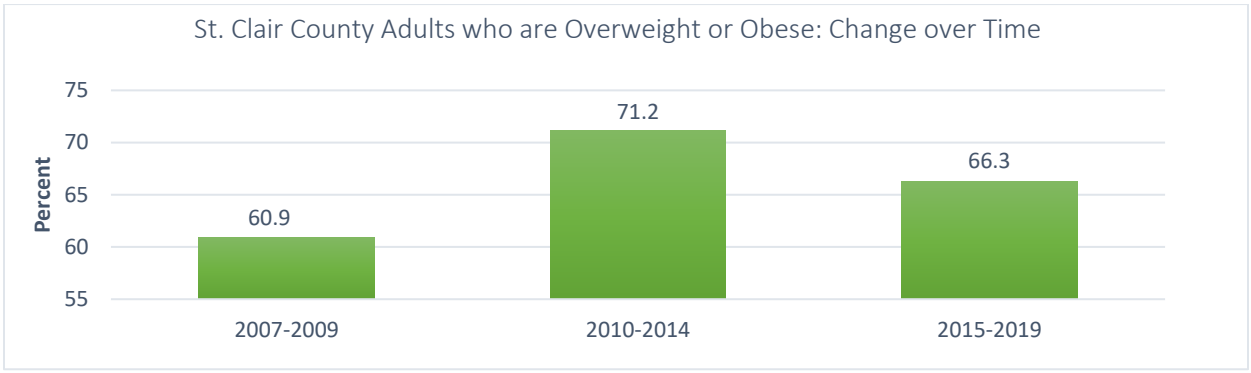


Source: Conduent Healthy Communities Institute

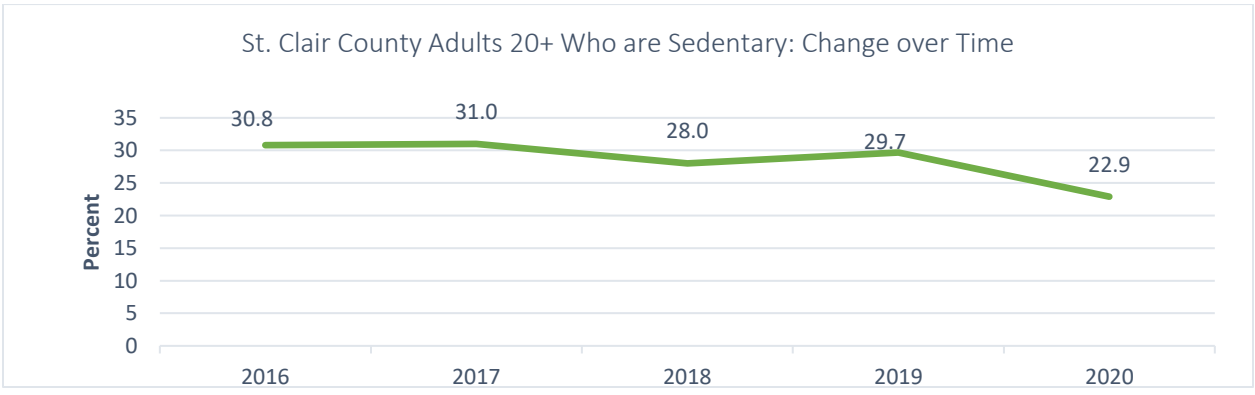


Source: Conduent Healthy Communities Institute

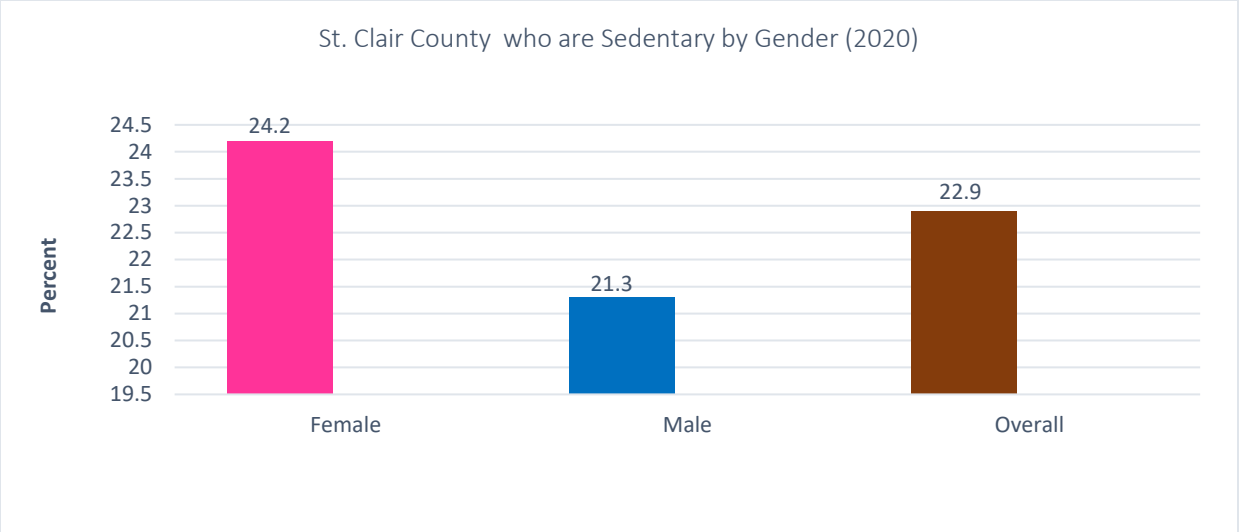
OBESITY



Source: *Conduent Healthy Communities Institute*

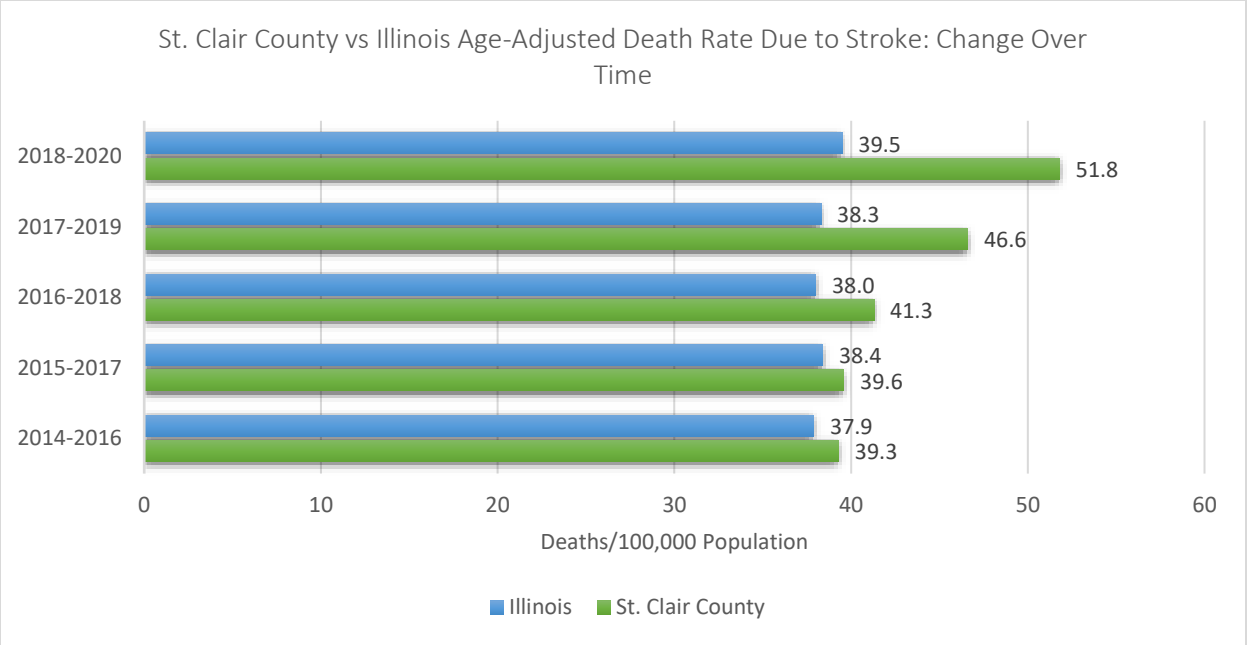


Source: *Conduent Healthy Communities Institute*

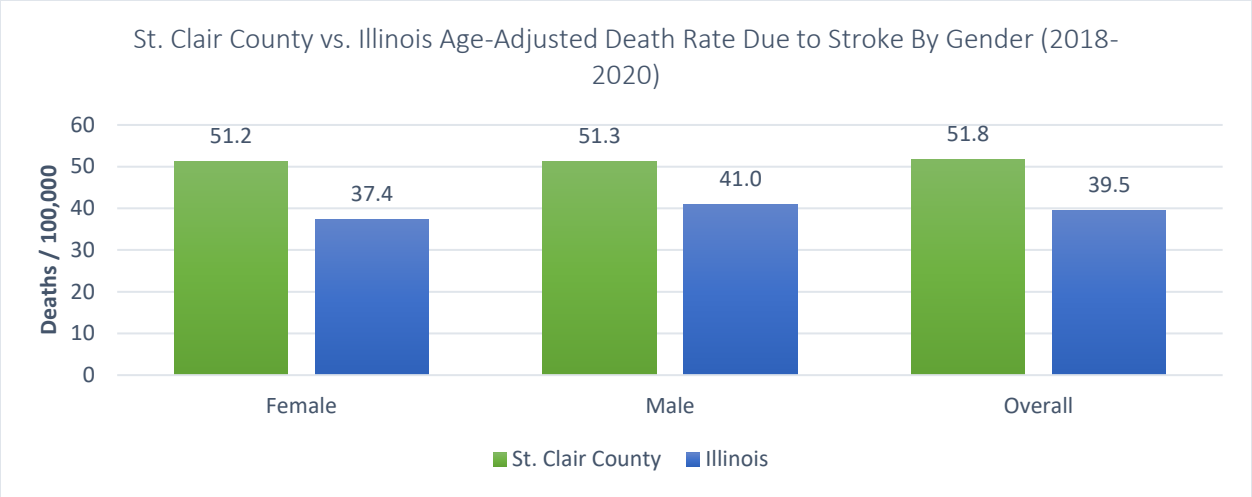


Source: *Conduent Healthy Communities Institute*

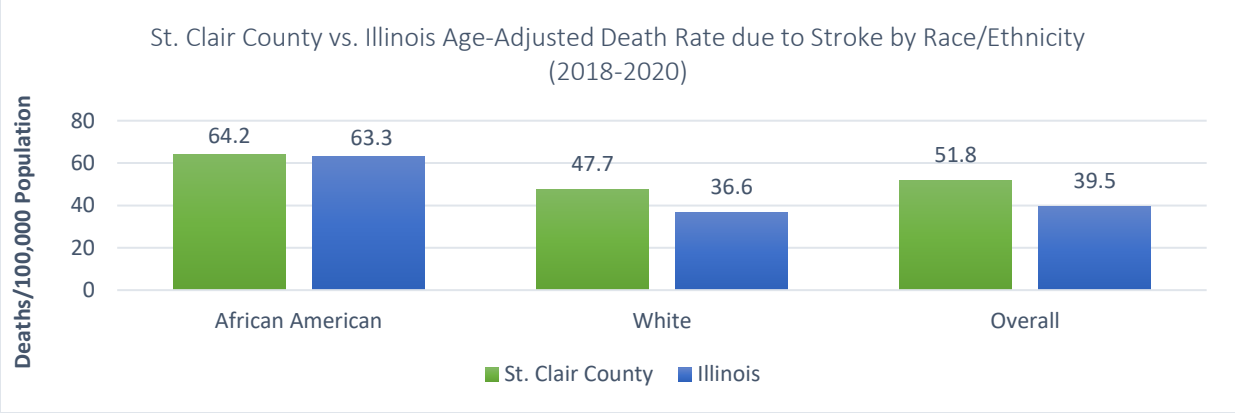
STROKE



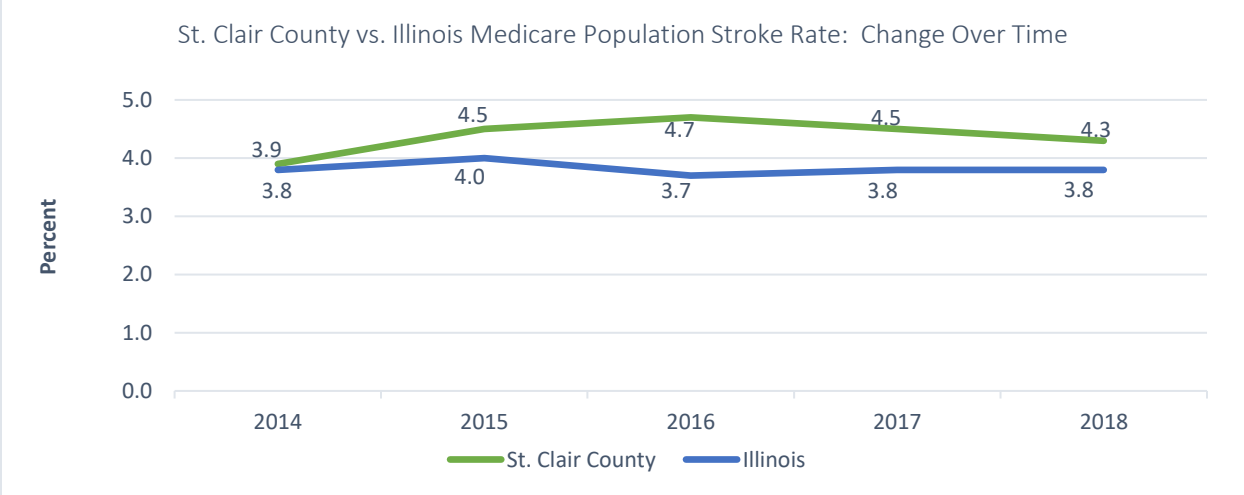
Source: *Conduent Healthy Communities Institute*



Source: *Conduent Healthy Communities Institute*



Source: *Conduent Healthy Communities Institute*



Source: *Conduent Healthy Communities Institute*

Implementation Strategy











I. COMMUNITY HEALTH NEED: STROKE

COMMUNITY HEALTH NEED TO BE ADDRESSED: STROKE

RATIONALE: Stroke is the fifth leading cause of death and of long-term disability in the United States and is the cause of almost 133,000 deaths annually. Low-income populations, some racial/ethnic groups, and people who live in certain geographic regions are more likely to have a stroke and to die of a stroke (Healthy People 2030). Every 40 seconds, someone suffers a stroke. Eighty percent of strokes are preventable. (American Stroke Association).

By knowing the signs and symptoms of stroke, individuals can take quick action. The stroke treatments that work best are available only if the stroke is recognized and diagnosed within 3 hours of the first symptoms. Many strokes are preventable through healthy lifestyle changes and working with a health care team to control health conditions that raise risk for stroke.

The Rehabilitation Institute of Southern Illinois will introduce a prevention strategy that will bring education and awareness to the St. Clair County community. The success of the strategy will depend on increased public and professional education efforts regarding stroke recognition, evaluation and treatment.

GOAL: Reduce the effects and probability of stroke through education and prevention.

OBJECTIVE: At least 80% of the community educational session participants will increase the overall knowledge of stroke risk factors, signs and symptoms at least by 10% from the post-test compared to pre-test at the end of the session.

ACTION PLAN:

1. Determine & align with venues whereby community education can be provided to adults.
2. Determine & align with venues whereby community education can be provided to youth.
3. Determine & align with community partners regarding stroke community education.
4. Follow a community education program(s) endorsed by the American Heart Association or other prominent authority on stroke.
5. Provide a pre and post-test to community education program participants.
6. Provide resource information to community education program participants.
7. Collect and analyze data from participant tests.

OUTCOMES:

1. Improve recognition of signs and symptoms, thus improving health outcomes for individuals who experience a stroke.
2. Improve associated health conditions, thus reducing risk and likelihood of stroke.

OUTCOMES MEASUREMENT:

Each community education participant will take a pre-test. At the end of the education program, the participant will take an identical post-test. Using a simple spreadsheet, pre and post-test scores will be entered and compared. Change will be measured by correct answers on pre-test subtracted from correct answers on post-test. A positive number from the calculation will be counted as demonstration of improved understanding. A ten percent increase from pre-post test results of at least 80 % of the participants will demonstrate success of the program.

II. COMMUNITY HEALTH NEEDS THAT WILL NOT BE ADDRESSED

ACCIDENTS/INJURIES

The Rehabilitation Institute of Southern Illinois is not a trauma center and lacks the resources to address this need.

ALCOHOL ABUSE

Other community partners are addressing this issue. The three-year plan for the St. Clair County Mental Health Board includes supporting programs to increase access to services for individuals with substance use.

COGNITIVE DECLINE/DEMENTIA

Other community partners are addressing this issue. The Rehabilitation Institute of Southern Illinois has chosen other needs for which it is better resourced to support.

DIABETES

Other community partners are addressing this issue. BJC has initiated a diabetes pilot program inclusive of meal provision, nutritional counseling, diabetes education and social support. Diabetes is a risk factor for stroke, which is an identified need that TRISI will address.

DRUG ABUSE

Other community partners are addressing this issue. The three-year plan for the St. Clair County Mental Health Board includes supporting programs to increase access to services for individuals with substance use.

HEART HEALTH

Other community partners are addressing this issue. The Rehabilitation Institute of Southern Illinois has chosen other needs for which it is better resourced to address. Heart health is a risk factor for stroke, which is an identified need that TRISI will address.

HIGH BLOOD PRESSURE

Other community partners are addressing this issue. The Rehabilitation Institute of Southern Illinois has chosen other needs for which it is better resourced to address. High blood pressure is a risk factor for stroke, which is an identified need that TRISI will address.

IMMUNIZATION/INFECTIOUS DISEASES

Other community partners are addressing this issue, in particular the health departments. The Rehabilitation Institute of Southern Illinois has chosen other needs for which it is better resourced to support.

MENTAL HEALTH

Other community partners are addressing this issue. The three-year plan of the St. Clair County Mental Health Board includes supporting programs to increase access to services for individuals with mental illness.

OBESITY

Other community partners are addressing this issue. The 2022-2026 Strategic Plan of the St. Clair County Health Department includes a goal to reduce the obesity rate for people with chronic diseases by 15% in the next 5 years. Obesity is a risk factor for stroke, which is an identified need that TRISI will address.

RESPIRATORY DISEASES

Many respiratory diseases are caused by tobacco uses, for example smoking. Other community partners, in particular the St. Clair County Mental Health Board, are addressing this issue. The Rehabilitation Institute of Southern Illinois has chosen to address other needs for which it is better resourced to support.

TOBACCO USE

Other community partners are addressing this issue. The three-year plan for the St. Clair County Mental Health Board includes actively supporting the efforts of the St. Clair County Drug Prevention Alliance to advance prevention efforts for substance use disorders. Tobacco use is a risk factor for stroke, which is an identified need that TRISI will address.

VAPING

Other community partners are addressing this issue. The three-year plan for the St. Clair County Mental Health Board includes actively supporting the efforts of the St. Clair County Drug Prevention Alliance to advance prevention efforts for substance use disorders.