

Fayette County Community Health Plan 2022-2027



Administrator
Kendra Craig, BS, IPEM

Fayette County Health Department

For
Illinois Department of Public Health
Springfield, Illinois

June 26, 2023

Priorities: Mental and Behavioral Health
 Substance Abuse
 Chronic Illness

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Fayette County Health Department

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December 14, 2022

Illinois Department of Public Health
Attn: IPLAN Program
Office of Policy, Planning and Statistics
525 W. Jefferson St., 2nd Floor
Springfield, IL 62761

RE: Organization capacity Assessment for Fayette County Health Department

As President of the Fayette County Board of Health, this letter is to inform you an Organization capacity Assessment has been completed. In addition to assessing the Fayette County Health Department's progress on meeting identified indicators, progress on previous actions plans was also reviewed for accomplishments and ongoing needs. New and revised action plans have been developed for areas with opportunity for improvement. Fayette County Health Department Administrator, Kendra Craig, involved members of the Fayette County Health Department's leadership staff in this process.

Mrs. Craig submitted details of the Organizational capacity Assessment to the local Board of Health for review and input. During their November 29, 2022 meeting, the Board of Health voted to accept the Fayette County Health Department's Organization capacity Assessment and accompanying actions plans.

Sincerely,

A handwritten signature in black ink that reads "Joe Wills".

Joe Wills, President

Fayette County Board of Health

Our Mission

"To Strengthen the Health and Well-Being of Our County Through Education, Disease Prevention and Compassionate Caregiving."

I. FAYETTE COUNTY HEALTH DEPARTMENT

The Fayette County Health Department is located in Vandalia, Illinois. In August of 1976 the Fayette County Health Department was established by county board resolution. Since the Health Department's creation, it has been located in three locations; the basement of the courthouse, 509 W. Edwards Street, and currently 416 W. Edwards Street.

The Fayette County Health Department is located in Vandalia, Illinois. In August of 1976 the Fayette County Health Department was established by county board resolution. Since the Health Department's creation, it has been located in three locations; the basement of the courthouse, 509 W. Edwards Street, and currently 416 W. Edwards Street.

The Fayette County Health Department is a not-for-profit unit of the local government of Fayette County, Illinois. The Health Department provides numerous services for the citizens of Fayette County. The Fayette County Health Department has a Home Health (visiting nurse) and Hospice program. The Health Department also has an Environmental Health program that provides newly constructed water well inspections and permits, newly constructed septic system inspections and permits, inspections of all food service establishments of Fayette County. The Health Department also has a Family and Clinical Services program that provides childhood and adult immunizations and lead screenings, testing for sexually transmitted diseases, Tuberculosis testing, foot care clinics, breastfeeding peer counselors, healthy family support workers, doulas, Narcan distribution, Tobacco Free Illinois, COVID testing and vaccinations, and WIC. The Health Department also maintains a county-wide emergency preparedness program in the event of a county disaster.

II. MISSION STATEMENT

This mission of the Fayette County Health Department is to strengthen the health and well-being of our county through education, disease prevention and compassionate caregiving.

III. PURPOSE

As per the Illinois Administrative Code, every health department within the state must “assess the health needs of the community by establishing a systematic needs assessment process that periodically provides information on the health status and health needs of the community” (Illinois Department of Public Health, 2017). Community health needs assessment is a crucial function for a public health department, as it aids in its responsibilities to monitor the local health status, but it also provides the opportunity to analyze and address health problems and hazards within the community. The Fayette County Health Department is then able to target these identified community health problems

through the implementation of policies and plans and advocate for them within the larger public health system. Through this assessment function, the public health system is provided with guidelines as to how to more efficiently address health problems within each jurisdiction.

Our department began an assessment process that would include as much participation as possible, as we desired community-wide contributions in regard to the health issues most affecting the community as a whole. Our department aimed to use the most comprehensive perspective of health as possible, as to include a large range of contributions from both area residents and also local service providers.

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

1. Healthcare access and quality including: access to health care, access to primary care, health insurance covers and health literacy.
2. Education access and quality including: high school graduation, enrollment in higher education, education attainment in general, language and literacy, early childhood education and development.
3. Social and community context-within which people live, learn, work and play including: civic participation, civic cohesiveness, discrimination and conditions within the workplace.
4. Economic stability, including: income, cost of living, socioeconomic status, poverty, employment, food security and housing stability.
5. Neighborhood and built environment including: quality of housing, access to transportation, availability of health food, air and water quality and crime and violence.

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

- 4,384 households with a disability
- 2,117 households below the poverty level (16%) with 5,297 households for Fayette County.
- Median household income is \$51,057, which is lower than both Illinois and the U.S. average. 25.30% or 1,817 children 0-17 are living with income below the Federal Poverty Level (FBL) and 17.23% or 3,421 individuals are living in household with income below (FPL)
- 16.20% have no high school diploma, and 40.2% only have a high school diploma.

The key elements of this community assessment were supported by local community-based coalitions. These representatives came from local governments, churches, businesses, civic organizations, and health care

providers. This diverse representation, working in collaboration with one another during multiple assessment processes, aided in the overall completion of the community assessment for our service area. We relied heavily on assessment processes fulfilled by our local hospital, SBL Fayette County Hospital, in integrating our results within the larger community context

IV. INTRODUCTION

The secretary of Health and Human Services released a document in September of 1990 titled *Healthy People 2000*. This publication sought to be a “national strategy for significantly improving the health of the nations over the coming decade. This document was the basis for the IPLAN (Illinois Project of Local Assessment of Needs) project, because it provided the statistical foundation for health problem reduction.

Since 1990, three updated versions of *Healthy People* have been released, titled *Healthy People 2010*, *Healthy People 2020* and *Healthy People 2030*. Within these documents are national rates for numerous health problems as well as objectives for health problem reductions. The baselines within these documents as well as those statistical data found in IPLAN Data Summary reports, Census Bureau, IDOT, IDOC, ISP, and other sources of information were used for this project.

Since the original *Healthy People 2000*, Illinois has implemented a plan of action for the health of its citizens. This plan of action was described in a publication titled *A Road to Better Health for All Illinois Citizens*. Contained in this publication are two suggestions for Illinois.

1. Local and statewide needs assessments to identify and describe public health needs.
2. A state health plan related to the national health objectives.

These suggestions included a community health needs assessment process for all local health departments. This was the preface and subsequent new rule for local health department certification, hence the IPLAN process. The process identified three priority health problems and developed strategies to reduce these problems within five years.

V. METHODS

Committee Participation Process

To ensure compliance with IPLAN requirements, initial planning was completed by the Fayette County Health Department’s internal leadership team. With the establishment of a timeline, the APEX-PH Community Process guided steps to analyzing community health concerns, establishing priorities, and developing the community health plan.

The Fayette County Health Department followed the eight recommended steps of the APEX-PH (Assessment Protocol for Excellence in Public Health) model:

1. Prepare for the Community Process.
2. Collect and Analyze Health Data.
3. Form a Community Health Committee.
4. Identify Community Health Problems.
5. Prioritize Community Health Problems.
6. Analyze Community Health Problems.
7. Inventory Community Health Problems.
8. Develop a Community Health Plan.

Fayette County Health Department and SBL Fayette County Hospital, coordinated the collection and analysis of demographic, social, economic and health data. To provide comprehensive assessment of the county current health status, data was accessed from various sources.

Fayette County Health Department's Administrator, Kendra Craig, served as the chairperson and coordinator for all committee meetings. A total of two committee meetings were held. The first meeting was designated for the community needs assessment, the second for the community health plan. The community needs assessment meeting was held on March 9, 2022. The community health plan meeting was held on May 17, 2022. All committee meetings were held virtually, with chairperson being located at the Fayette County Health Department, 416 West Edwards Vandalia, Illinois.

The role of the IPLAN committee was to identify health problems facing Fayette County residents and to differentiate between true health problems and risk factors. Once understood, the group prioritized health problems and ultimately choose three that they felt were the highest priority in Fayette County. After three health problems were identified, the committee discussed available resources to Fayette County residents and also potential barriers. Lastly, the committee decided on outcome objectives and intervention strategies to reduce these problems.

November 29, 2022 Meeting: The meeting began with a brief review of the prior meeting. The topics included were the definition of a health problem, the committee's 2022 priority health problems, and all associated data. Once the review was completed, the group analyzed each of the three health problems, Mental and Behavioral Health, and Chronic Illness to determine the risk, indirect, and direct contributing factors. The committee looked at all county and surrounding county resources and listed all potential barriers to prevention and treatments. Finally, the committee discussed goals and intervention strategies that could be implemented to decrease the prevalence of the health problem.

Committee Membership

The list of potential committee members was compiled. These persons were solicited by telephone and email for initial contact. After initial contact, each committee member was sent a letter containing a project summary, dates of virtual meetings, and a job description. A committee of fifteen Fayette County residents was selected. These people represented many diverse backgrounds, ages, and careers.

IPLAN Committee

- 1) Marcia Barth, CFO, SBL Fayette County Hospital
- 2) Elizabeth Washburn – FCHD Home Care Services
- 3) Jeff Ray – Chief of Police, City of Vandalia
- 4) Rev. Joe Lawson, Rehoboth Baptist Association
- 5) Aaron Alderson, Greater Fayette County Chamber of Commerce
- 6) Todd Stapleton, WPMB/WKRV Vandalia
- 7) Sandy Michel, Fayette County Economic Development
- 8) Greg Starnes, CEO SBL Fayette County Hospital
- 9) Pat Click, McKellar-Robertson-McCarty and Click
- 10) Kendra Craig, Fayette County Health Department
- 11) Heather Jackson, FCHD Director of Maternal Child Health
- 12) Allison Satterthwaite, FCHD Director of Public Health
- 13) Pam Parrish, SWAN Services
- 14) Jodi Smith, FCHD Director of Environmental Health
- 15) Kiley Depew, FCHD Director of Finance

Priority #1

MENTAL and BEHAVIORAL HEALTH

Definition

According to the Healthy People 2030 website, about half of all people in the United States will be diagnosed with a mental disorder at some point in their lifetime. Healthy People 2030 focuses on the prevention, screening, assessment, and treatment of mental disorders and behavioral conditions. The Mental Health and Mental Disorders objectives also aim to improve health and quality of life for people affected by these conditions.

Mental health is an important health concern throughout the state of Illinois as well as within our community. The State Health Improvement Plan (SHIP) noted the importance of this health concern partially due to the fact that in 2016-18, “nearly one out of every six Illinoisans reported experiencing poor mental health for more than one week in a month,” (2021). Behavioral health problems, relating to mental health, alcohol, and substance abuse problems, have also been reported to contribute to a large number of emergency department visits.

Mental disorders affect people of all age and racial/ethnic groups, but some populations are disproportionately affected. And estimates suggest that only half of all people with mental disorders get the treatment they need. The State Health Improvement Plan (SHIP) noted the importance of this health concern partially due to the fact that in 2016-18, “nearly one out of every six Illinoisans reported experiencing poor mental health for more than one week in a month,” (2021).

In addition, mental health and physical health are closely connected. Mental disorders like depression and anxiety can affect people’s ability to take part in healthy behaviors. Similarly, physical health problems can make it harder for people to get treatment for mental disorders. Increasing screening for mental disorders can help people get the treatment they need.

Rationale

Mental Illness was chosen as a priority health problem based on data according to the Survey Monkeys conducted through the Fayette County Health Department webpage and Facebook page. Mental Illness encompassed all forms including but not limited to anxiety disorders (post-traumatic stress disorder, obsessive compulsive disorder, panic disorder), phobias, attention deficit

disorder, eating disorders (anorexia and bulimia), and mood disorders (major depressive disorder, dysthymic disorder, bipolar disorder), self-injury, and suicide.

There has been a lot of research and increased understanding surrounding mental/behavioral health and MEB. Some of the developments have included understanding the commonality of MEB, identifying the greatest opportunities for prevention, and the importance of implementing interventions that are relevant to the target audiences. All of this progress supported the significance of understanding protective factors. Healthy People 2030 lists several applicable health objectives, including:

- MHMD-1: Reduce the suicide rate.
- MHMD-2: Reduce suicide attempts by adolescents.
- MHMD-3: Increase the proportion of children with mental health problems who get treatment.
- MHMD-4: Increase the proportion of adults with serious mental illness who get treatment.
- MHMD-5: Increase the proportion of adults with depression who get treatment.
- MHMD-6: Increase the proportion of adolescents with depression who get treatment.
- MHMD-7: Increase the proportion of people with substance use and mental health disorders who get treatment for both.
- MHMD-8: Increase the proportion of primary care visits where adolescents and adults are screened for depression.

Local Baselines

The Centers for Disease Control and Prevention noted that mental health and physical health are equally important components of overall health. With the population of Fayette County at 21,518, from 2016-2020 there were 23 deaths resulting from suicide, 16.10% identified as adults with poor mental health, 20 Mental Health Providers identified resulting in 1,088.8 persons per provider.

Outcome Objective

1. By 2027, decrease the percentage of Fayette County adolescents residents that have committed suicide to 3%.
2. By 2027, decrease the number of Fayette County residents seeking treatment in the emergency room for anxiety and mood-related disorder by .05%.

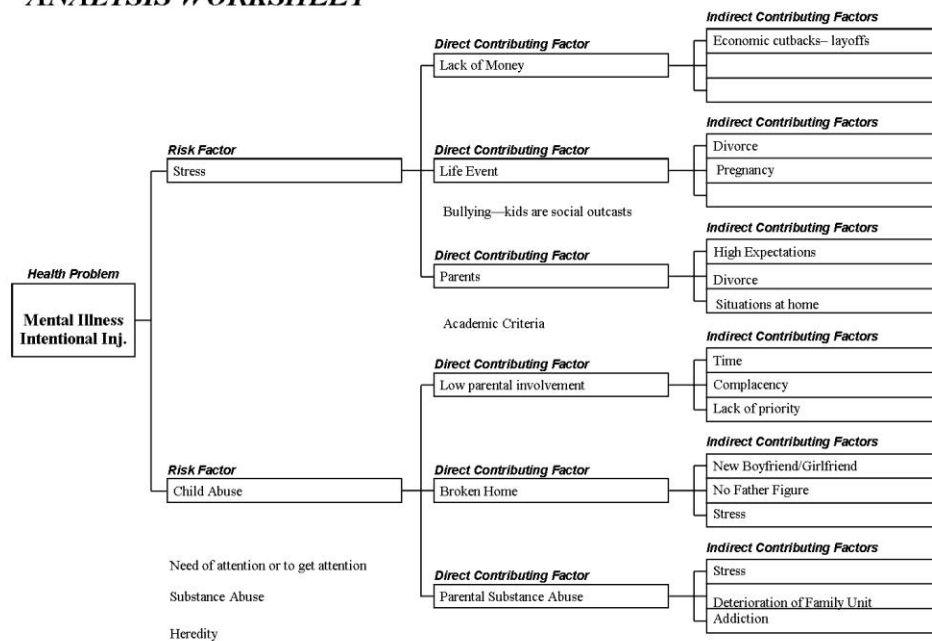
Baseline: 2022 Fayette County Illinois Community Health Plan Survey and Healthy People 2030.

Impact Objectives

1. By 2027, decrease the percentage of Fayette County residents that report the mental health and mental disorders. Baseline: identified as one of the top three health problems in our county with 71% reporting a problem.
2. By 2027, decrease the percentage of Fayette County residents that report mental health and mental disorders main barriers as education to our school age children. Baseline: 2022 Fayette County Illinois Community Health Plan Survey reported 28% of individuals report no education done at the school level.
3. By 2027, increase the number of educational opportunities to school age children. Baseline: 2022 Fayette County Illinois Community Health Plan Survey reported 28% of individuals report no education done at the school level.

Risk and Contributing Factor Analysis

HEALTH PROBLEM ANALYSIS WORKSHEET



Resources and Barriers

RESOURCES AND BARRIERS

Health Problem: Mental Illness

Resources:

1. Senior Renewal—psychologists and psychiatrists do both group and individual sessions for senior citizens.
2. Community Resource Center—hotline, assistance with placement for treatment.
3. Physicians
4. School Counselors—provides education events.
5. Churches
6. Our Place
7. Methodist Church

Barriers:

1. Social Stigma
2. Many persons are misdiagnosed or not diagnosed at all.
3. The persons themselves don't know they have a problem or think that it is temporary and will go away.
4. Other persons don't realize that others have a problem.
5. Persons go off of their medications when they feel better and don't think that they need them.
6. People associate mental illness with violence.

Intervention Strategies

Fayette County Health Department – IPLAN Intervention Strategies

Health Problem: Mental Illness

1. Educate teachers, coaches, and pastors, to recognize when there is a problem with a child or adult.
2. Assist schools with the creation and adoption of “no tolerance” policies against bullying, talking back.
3. Educate students about low self-esteem, making healthy choices, and consequences.
4. Work with the YMCA on after school program.
5. Provide support and educational materials for groups on mental illness such as ADHD, depression, panic disorders, etc.
6. Maintain active participation on the Fayette County Interagency Council and support initiative developed by the Council.
7. Create a “Moms Group” to allow parents to discuss thought and concerns with other parents.
8. Increase communication among local agencies, mental health providers and other stakeholders.

Actions planned to reduce the level of the Indirect contributing factors

1. Develop a screening tool with assistance from mental health providers for use with our Maternal and Child Health, Healthy Families of Illinois and Doula clients.
2. Explore community coalition involvements with schools and interagency counsel, and schools to develop a community plan to identify mental health, substance abuse and other issues faced by youth and to provide education around those issues and activities for youth that will promote mental health and substance abuse avoidance.
3. Advocate for funding of expanded local mental/behavioral health resources.

Anticipated impact of these actions:

1. Creation of a collaborative effort among healthcare providers and the community to address these issues.
2. Identify, coordinate and promote available local services.
3. Expand access to mental/behavioral health services throughout the community.

Planned collaboration between our agency and other facilities or organizations:

1. Fayette County Board of Health
2. Local Mental/Behavioral Health Providers
3. Schools
4. Interagency Council

Evaluation Plan to Measure Progress Towards Reach Objectives:

1. Tracking of referrals to treatment programs
2. Communication with Law Enforcement to provide education and referral sources.
3. Trained staff in Mental Health First Aid Course

Priority #2

SUBSTANCE ABUSE

Definition

Substance abuse, also known as drug abuse, refers to a maladaptive patterned use of a substance (drug) in which the user may or may not be considered dependent. Substance abuse/drug abuse is not limited to mood-altering or psycho-active drugs. Activity is also considered substance abuse when inappropriately used (as in steroids for performance enhancement in sports). Therefore, mood-altering and psychoactive substances are not the only drugs of abuse. More than 20 million people in the United States have a substance use disorder, and most of them don't get the treatment they need. Healthy People 2030 focuses on preventing substance use disorders, like drug or alcohol addictions, and helping people with these disorders get treatment.

According to the Healthy Illinois 2021 Plan updates 2021, Synthetic opioids related mortality was a major cause of death and showed rising rates. The increase began before the onset of the COVID-19 pandemic and is most likely associated with synthetic opioids such as fentanyl in the drug supply. Opioid mortality showed high rates across all age groups between 35 and 64 years. 3.7% decrease from 2017 to 2019 and an increase in 2020 due to synthetic opioid such as fentanyl in the drug supply

Rationale

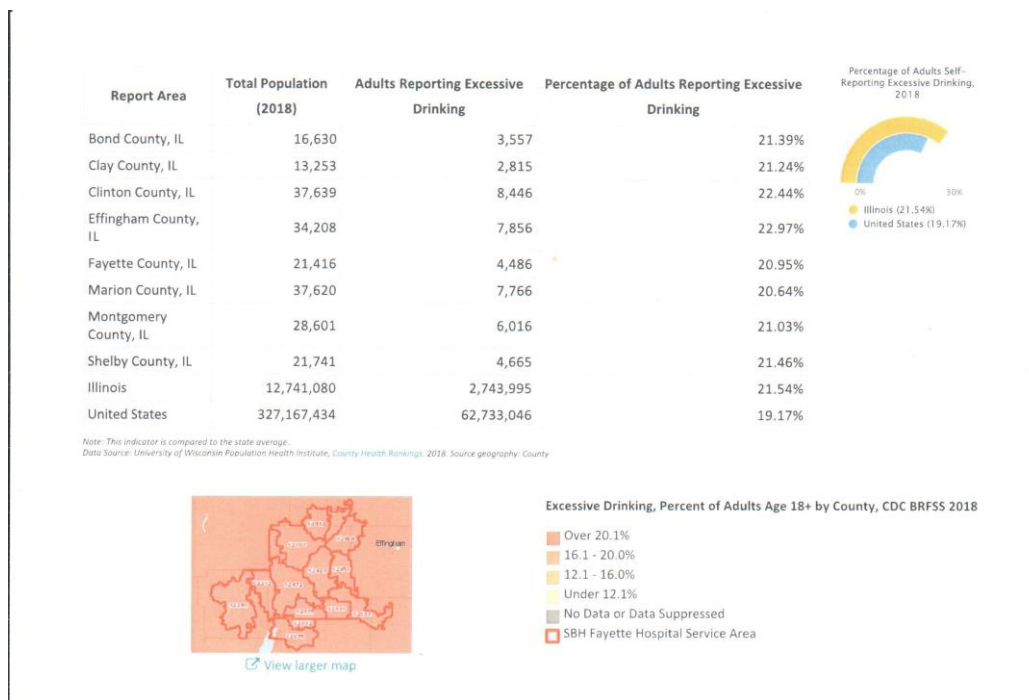
Substance abuse was chosen as a priority health problem based on Fayette County trends. Substance abuse encompassed all forms including but not limited

to alcohol, tobacco, and other drugs including prescription drug abuse. It was reported area, 3,557, or 21.39% adults self-reported excessive drinking in the last 30 days, which is less than the state rate of 21.54%. Data for this indicator was based on survey responses to the 2018 Behavioral Risk Factor Surveillance System (BRFSS) annual survey and are used for the 2021 County Health Rankings. Data collected by the IDPH revealed that tobacco use is considerably disproportionate in Fayette County both in terms of the general population and mothers during pregnancy. Healthy People 2030 several applicable health objectives, including :

- SU-18: Reduce the proportion of people who have opioid use disorder in the past year.
- SU-01: Increase the proportion of people with a substance use disorder who got treatment in the past year.
- SU-13: Reduce the proportion of people who had alcohol use disorder in the past year
- SU-15: Reduce the proportion of people who had drug use disorder in the past year.
- SU-Do1: Increase the number of admission to substance use treatment for injection drug use.

Local Baselines

Adults Reporting Excessive Drinking



Adult Current Smokers

Within the report area there are 21.5% adults who have smoked or currently smoke of the total population.

Report Area	Total Population (2019)	Adult Current Smokers (Crude)	Adult Current Smokers (Age-Adjusted)
SBH Fayette Hospital Service Area	38,362	21.5%	No data
Bond County, IL	16,426	19.00%	19.50%
Clay County, IL	13,184	20.60%	21.90%
Clinton County, IL	37,562	18.20%	18.70%
Effingham County, IL	34,008	18.20%	19.00%
Fayette County, IL	21,336	22.00%	23.10%
Marion County, IL	37,205	20.70%	21.80%
Montgomery County, IL	28,414	20.10%	21.30%
Shelby County, IL	21,634	19.20%	20.80%
Illinois	12,671,821	15.32%	15.66%
United States	328,239,523	15.30%	15.70%

Percentage of Adults who are Current Smokers

- SBH Fayette (21.5%)
- Illinois (15.32%)
- United States (15.30%)

Note: This indicator is compared to the state average.
Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the 300 Cities Data Portal, 2019. Source geography: Tract

Deaths of Despair (Suicide and Drug/Alcohol Poisoning)

Report Area	Total Population, 2016-2020 Average	Five Year Total Deaths, 2016-2020 Total	Crude Death Rate (Per 100,000 Population)	Age-Adjusted Death Rate (Per 100,000 Population)
SBH Fayette Hospital Service Area	36,884	83	45.2	43.4
Bond County, IL	16,618	35	42.1	41.6
Clay County, IL	13,217	19	No data	No data
Clinton County, IL	37,588	59	31.4	30.0
Effingham County, IL	34,160	64	37.5	37.2
Fayette County, IL	21,518	47	43.7	40.0
Marion County, IL	37,582	122	64.9	70.2
Montgomery County, IL	28,560	84	58.8	54.9
Shelby County, IL	21,622	43	39.8	36.6
Illinois	12,720,799	28,231	44.4	42.3
United States	326,747,554	806,246	49.4	47.0

Deaths of Despair, Age-Adjusted Death Rate (Per 100,000 Population)

- SBH Fayette (43.4)
- Illinois (42.3)
- United States (47.0)

Note: This indicator is compared to the state average.
Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System. Accessed via CDC WONDER, 2016-2020. Source geography: County

Outcome Objectives

- By 2027, reduce the proportion of people ages 21 years and over who engaged in excessive drinking in the past month. Target: 20.53 percent. Baseline: 20.95 percent of adults' self-report excessive drinking in the last 30 days.

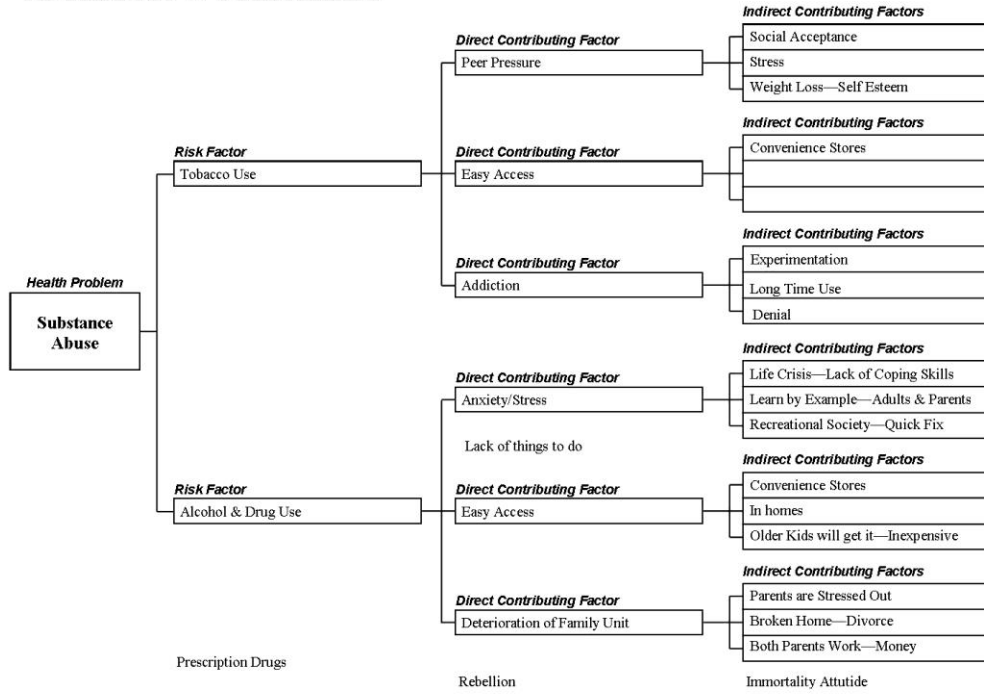
- 2: By 2027, reduce the proportion of person engaging in binge drinking of alcoholic beverages. Target: 1.3 percent. Baseline: 1.6% of persons' ages 12 years and over had a marijuana use disorders.
- 3 Reduce the proportion of people who had opioid use disorder in the past year. Target: .05 percent. Baseline: 0.7 % persons aged 12 years and over reported an opioid use disorder (heroin or prescription plan reliever) in the past 12 months in 2018.

Data Source: US Census Bureau, American Community Survey, 2015-2019.

Impact Objective

1. By year 2027, increase the proportion of people with a substance use disorder who received treatment in the past year to 14%. Baseline: 11.1% persons aged 12 years and over who needed substance use treatment received treatment at a specialty facility in the past 12 months in 2018. 2022 Fayette County Community Health Plan Survey.
2. By year 2017, reduce the number of admissions to substance use treatment for injections drug use. Baseline: 2022 Fayette County Community Health Plan Survey.
3. By year 2027, reduce the proportion of people who had alcohol use disorder in the past year. Baseline: 2022 Fayette County Community Health Plan Survey

HEALTH PROBLEM ANALYSIS WORKSHEET



RESOURCES AND BARRIERS

Health Problem: Substance Abuse

Resources:

1. Fayette County Health Department—tobacco program, nicotine patches, QuitLine.
2. Schools—High School students serve as peer helpers for Jr. High Students.
3. Fayette County Hospital—smoking cessation program, pneumonia diagnosis patients are offered cessation,
4. Physicians including ER physicians—screen patients for substance use.
5. St. Mary's Hospital in Centralia
6. Department of Children and Family Services
7. Child Hope—Counseling
8. Community Resource Center
9. Heartland in Effingham
10. AA/NA meets at the hospital
11. "Just say No" & DARE

Barriers:

1. Lack of services in the area. There is no where to send people who need help.
2. Parents who use substances
3. Apathy
4. Prescription drug abuse, pain patches
5. Lack of education, people who mix drugs and alcohol

Intervention Strategies

Fayette County Health Department – IPLAN Intervention Strategies

Health Problem: Substance Abuse

1. Education to the schools for students and teachers, including all Fayette County Schools and grade levels.
2. Counseling and support group programs for high school students like AA or NA.
3. Education and advertisement campaigns for very young kids, such as Kindergarten and Pre-K.
4. Computer software that ages kids to show them what they will look like if 20 years if they smoke.
5. Expand the high schools peer mentoring and peer listening programs.
6. Social Media posts to educate on the long-term effect of substance abuse.
7. Promote the FCHD Tobacco Free Community to business and community members.

Actions planned to reduce the level of the indirect contributing factors:

1. Provide the school districts in the county education sessions yearly.
2. Advocate for funding of expanded substance abuse education and resources.

Anticipated impact of these actions:

1. Creative of a collaborative effort among law enforcements and the community to address these issues:
2. Identify, coordinate and promote available local services and resources.
3. Ensure law enforcement, first responders, businesses, organization have supply of NARCAN.

Planned collaboration between our agency and other facilities or organizations:

1. Fayette County Board
2. Fayette County Board of Health
3. Schools
4. Law Enforcement
5. Interagency Council

Evaluation Plan to Measure Progress Towards Reach Objectives:

1. Tracking of business, organizations, schools and individuals that receive Narcan.
2. Communication with Law Enforcement to provide education and referral sources.
3. Trained staff in use of Narcan.

Priority 3: Chronic Disease Prevention

Definition

Chronic disease continues to be the top 5 leading causes of death for Fayette County residents. Chronic diseases are defined broadly as conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living or both. Chronic diseases such as heart disease, cancer, and diabetes are the leading causes of death and disability in the United States.

According to the Illinois Department of Public Health mortality statistics from 2021, Cancer was the primary cause of death at 19.2%, followed by Disease of the heart at 18% and COVID-19 at 12.2%. Cardiovascular disease in specific is a health priority for our community, and is also recognized as a in the State Health Improvement Plan (SHIP) because Heart Disease is the leading cause of death in the state of Illinois. Chronic Disease is a priority in the SHIP (2021).

Rationale

Chronic Disease was chosen as a priority health problem based on data according to the 2022 Fayette County Community Health Plan Survey conducted through the Fayette County Health Department webpage and Facebook page. Many chronic diseases are caused by a short list of risk behaviors including tobacco use and exposure to secondhand smoke, poor nutrition, including diets low in fruits and vegetables and high in sodium and saturated fats, physical inactivity and excessive alcohol use. Contributing Risk Factors include insufficient prevention and early diagnosis, payer source/individual financial resources, poor nutrition, physical inactivity and substance abuse. This priority area aligns with the Healthy People 2030 Objectives noted below:

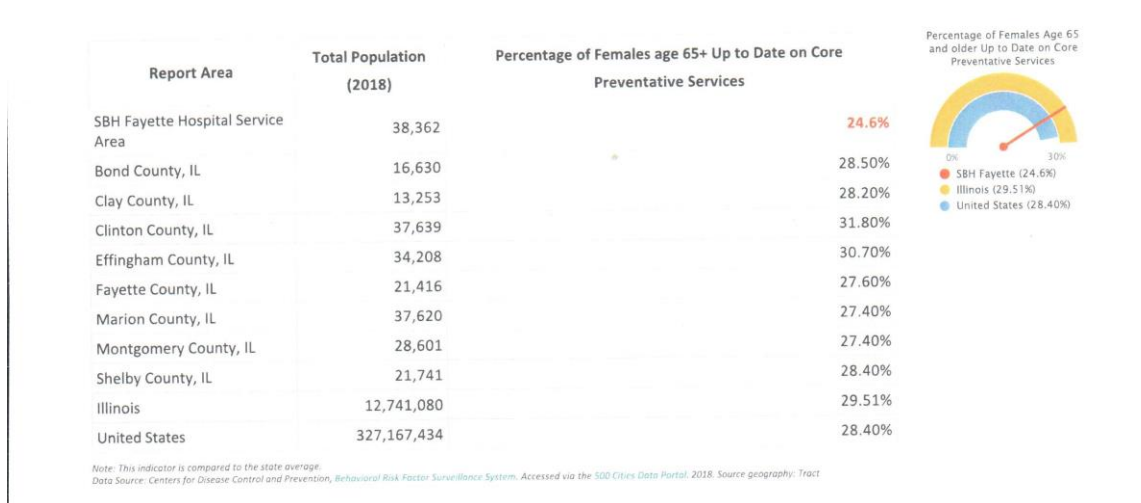
- HDS-01: Improve cardiovascular health in adults.
- HDS-02: Reduce coronary heart disease deaths.
- HDS-03: Reduce stroke deaths.
- HDS-04: Reduce the proportion of adults with high blood pressure.

- HDS-05: Increase control of high blood pressure in adults.
- HDS-06: Reduce cholesterol in adults.
- HDS-07: Increase cholesterol treatment in adults.
- HDS-08: Increase aspirin use for secondary prevention of atherosclerotic cardiovascular disease.
- HDS-09: Reduce heart failure hospitalization in adults.

Local Baselines

The Centers for Disease Control and Prevention noted that nothing kills more Americans than heart disease and stroke. More than 877,500 Americans die of heart disease or stroke every year—that’s one-third of all deaths. Each year in the United States, more than 1.7 million people are diagnosed with cancer, and almost 600,000 die from it, making it the second leading cause of death. More than 37 million Americans have diabetes, and another 96 million adults in the United States have a condition called prediabetes, which puts them at risk for type 2 diabetes.

Core Preventive Services



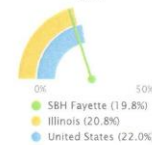
Top Five Diagnosed Cancers in Fayette County

Fayette County, Illinois	1 - Lung & Bronchus (All Stages^), 2014-2018	21	69.3
Fayette County, Illinois	2 - Prostate (All Stages^), 2014-2018	20	133.4
Fayette County, Illinois	3 - Breast (All Stages^), 2014-2018	15	101.5
Fayette County, Illinois	4 - Colon & Rectum (All Stages^), 2014-2018	13	43
Fayette County, Illinois	5 - Melanoma of the Skin (All Stages^), 2014-2018	6	23.3

Adults with no physical activity

Report Area	Population Age 20+	Adults with No Leisure Time Physical Activity	Adults with No Leisure Time Physical Activity, Percent
SBH Fayette Hospital Service Area	28,217.00	5,890	19.8%
Bond County, IL	12,929	2,715	20.0%
Clay County, IL	9,937	2,037	19.1%
Clinton County, IL	28,923	5,611	18.5%
Effingham County, IL	25,199	5,695	21.6%
Fayette County, IL	16,405	3,363	19.5%
Marion County, IL	27,817	6,370	21.6%
Montgomery County, IL	22,178	5,101	21.8%
Shelby County, IL	16,649	3,513	19.5%
Illinois	9,534,605	2,043,592	20.8%
United States	239,878,217	54,200,862	22.0%

Percentage of Adults with No Leisure-Time Physical Activity, 2019

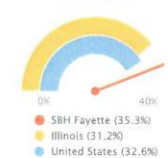


Note: This indicator is compared to the state average.
Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2019. Source geography: County

Adults with High Blood Pressure

Report Area	Total Population (2019)	Percentage of Adults with High Blood Pressure
SBH Fayette Hospital Service Area	38,362	35.3%
Bond County, IL	16,426	35.40%
Clay County, IL	13,184	38.10%
Clinton County, IL	37,562	33.80%
Effingham County, IL	34,008	34.10%
Fayette County, IL	21,336	37.30%
Marion County, IL	37,205	37.50%
Montgomery County, IL	28,414	37.80%
Shelby County, IL	21,634	37.70%
Illinois	12,671,821	31.2%
United States	328,239,523	32.6%

Percentage of Adults with High Blood Pressure



Note: This indicator is compared to the state average.
Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the SDG Cities Data Portal, 2019.

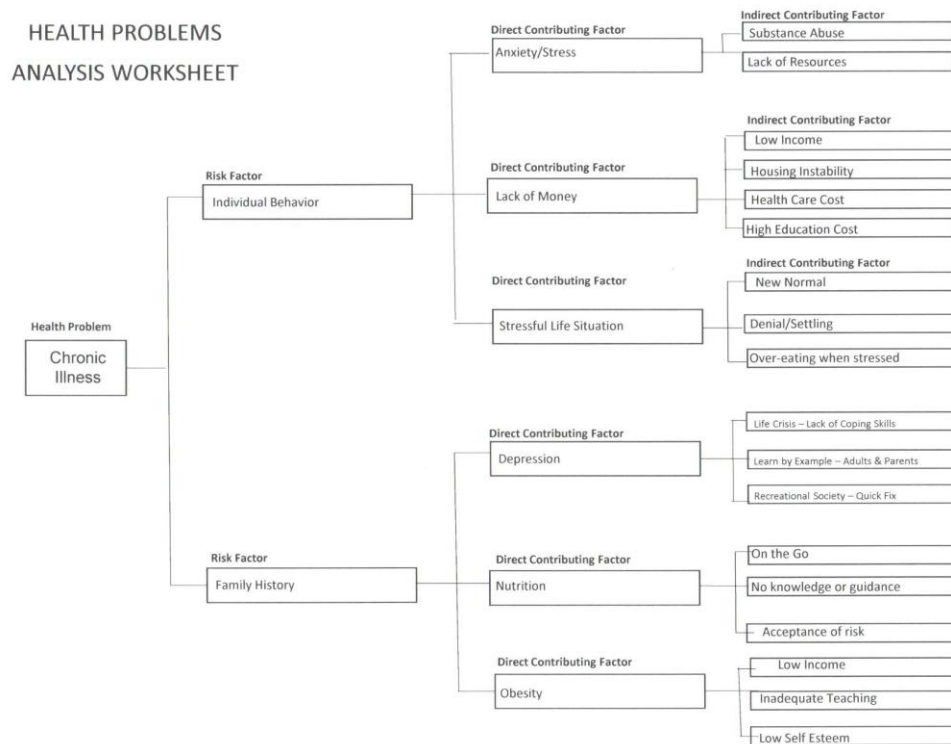
Outcome Objective

1. By 2027, increase the percentage of person seeking preventive services from 27.6 to 30% of Fayette County residents. Baseline: Center for Disease Control and Prevention.
2. Decrease the percentage of adult obesity in Fayette County from 38% to 35%. Baseline: County Health Rankings available in 2022.

Impact Objectives

1. By 2027, decrease the percentage of Fayette County residents that report poor or fair health from 21% to 23%. Baseline: identified as one of the top three health problems in our county with 71% reporting a problem.
2. By 2027, decrease the percentage of Fayette County residents that report physical inactivity as a barrier from 31% to 29%. Baseline: 2022 Fayette County Illinois Community Health Plan Survey reported 54% of individuals report no activity including obesity and being overweight.
3. Decrease the percentage of Fayette County residents that smoke from 22% to 20%. Baseline: 2022 Fayette County Illinois Community Health Plan Survey reported 54% of individuals report no activity including obesity and being overweight.

Risk and Contributing Factor Analysis



Resources and Barriers

RESOURCES AND BARRIERS

Health Problem: Chronic Illness

Resources:

1. Fayette County Health Department
2. SBL Fayette County Hospital
3. Local medical providers
4. University of Illinois Extension
5. American Heart Association
6. Local schools and college
7. Illinois Department of Public Health
8. Area media

Barriers:

1. Lack of Motivation
2. Limited Financial Resources
3. Limited availability of specialists in area
4. Local Culture
5. Limited number of appointments available with selected specialists

Intervention Strategies

Fayette County Health Department – IPLAN Intervention Strategies

Health Problem: Chronic Illness

1. Promotions of evidence-based smoking cessation programs
2. Encourage increase physical activity with a community walking program.
3. Reduce out-of-pocket costs to increase preventive screening for chronic illness. Special screening monthly.
4. Assess and promote worksite wellness programs.
5. Promote health food choices.
6. Support additional initiatives identified through collaboration with community partners.

Actions intended to be taken to address the health need:

1. Discussion with area medical providers about expanding access to screening services, developing a program for coordinated case management of those with cardiovascular disease.
2. Educate the public about cardiovascular disease and the importance of regular cholesterol screening.
3. Monitor progress of the actions above by observing numbers served.

Anticipated impact of these actions:

1. Expanded care coordination
2. Improved communication between Health Department staff, patients and providers.
3. Increased wellness education and activities for area residents.

Planned collaboration between our agency and other facilities or organizations:

1. SBL Fayette County Hospital
2. Area medical providers
3. Outreach sites
4. Senior Services

Evaluation Plan to Measure Progress Towards Reach Objectives:

1. Numbers of participants participating in the FIT Kit program.
2. Response from employers and results from potential interventions regarding worksite wellness activities.
3. Number of participants participating in Bio-annual LAB DAY at FCHD.

VII. Evaluation of 2017-2022 IPLAN Initiatives

Goals identified in the 2017-2022 IPLAN were also reviewed. The current status of intervention to address Mental Health, Cancer and Obesity were assessed and compared to the updated data collected and recent community survey. As the 2022-2027 community health plan was developed, the previous plan's outcome and impact objectives were evaluated.

Mental Health	2017 2020 Age-Adjusted Death Rate (Per 100,000 Population) 11.2	2020 Age-Adjusted Death Rate (Per 100,000 Population) 10.5	Decrease the number of Fayette County students that have attempted suicide or hurt themselves
	2017 Adults with Poor Mental Health	2019 Adults in Poor Mental Health	
Cancer	2014-2018 Cancer Incident Rate (Per 100,000 population) 441.9	2021 Cancer Incident Rate (Per 100,000 population) 458.3	Decrease the number of people who have not used tobacco or marijuana
Obesity	2017 Adults with no physical activity 12.4%	2019 Adults with no physical activity 19.5%	Increase the number that report no physical activity
	2017 % of adults Obese 24.5%	2019 % of adults Obese 22.3%	

Barriers:

1. Lack of specialty physicians in Fayette County resulting in less people to obtain appointments. Patient to Client ratio of 7,139 to 1.
2. Lack of funding to increase educations and awareness
3. Social determinants, low family income, poverty level. Family income average \$45,634
4. Local educational level. 13.6% with no high school education
5. Uninsured, Medicare or Medicaid residents.

IIIX. Conclusions

Minutes of all meeting were taken by Kendra Craig, Administrator.

A review of the State Health Improvement Plan 2021 was reviewed with the I-Plan team and by FCHD Administrator. The top two identified in the SHIP are also the same for Fayette County.

Evaluation and monitoring will be held bi-annually in coordination with the SBL, Fayette County Hospital during community members' meetings. For public announcement and education of IPLAN, a press release will be sent to all local media on the approved I-Plan stating the three health priorities that will be addressed and the plan. It was also notify public that the current I-Plan will be posted on the Fayette County Health Department's webpage for viewing.