

COMMUNITY HEALTH IMPROVEMENT PLAN

Clay County, IL

2017-2022



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Introduction and Method

Statement of Purpose: In March 2016, the Clay County Health Department completed the four MAPP assessments and led the Health for Generations Coalition through a process to identify the most important issues facing the community and write a plan on how to address these issues. The Health for Generation Coalition will use the Community Health Improvement Plan to direct efforts to improvement the health for all those who live, work, and play in Clay County.

Process: Each individual member of the Health for Generations Coalition was given the task of selecting the top 5 strategic issues. Responses were collected via Survey Monkey, a web-based survey tool. In March 2017, coalition members were emailed the link to the survey and the results of the 4 MAPP assessments. Coalition members were given two weeks to submit their responses.

The coalition responses were compiled and prioritized using the nominal group technique. The health issues were grouped into three strategic priorities. The results of the survey were shared with the Coalition at the end of March 2017.

Top 3 Strategic Issues:

- Tobacco and Substance Use
- Heart Disease and Obesity
- Access to Care and Cancer

Subcommittees were formed from each of the strategic priorities. Each subcommittee elected a group leader to facilitate and direct meetings. The subcommittees were responsible for developing a health improvement plan related to its respective strategic issues. Instructions on how to develop goals and interventions were emailed to each member. During the month of April the subcommittees convened to write their portion of the health improvement plan.

Strategic Issue #1: Tobacco & Substance Use

Goal: Reduce illnesses and deaths related to tobacco and substance use, including lung cancer, premature death, alcohol-impaired driving deaths, drug overdose deaths.

Rationale: The community CASPER survey and focus groups found that community members are very concerned about cancer. The type of cancer in Clay County with the highest incidence is lung cancer, with a rate of 79.5 per 100,000 population, compared to the state rate of 67.9 per 100,000 (Data source: State cancer profile 2009-2013). In 2015, approximately 16% of Clay County adults identified as current smokers compared to 15% in Illinois (Data source: County Health Rankings data). This is a leading cause of Clay County's poor health outcomes in lung cancer and heart disease. More than half of Clay County residents have been smokers at some time in their life (63.4%) making them at risk for lung cancer and heart disease (Data source: BRFSS 2011). Surveys in Clay County schools found higher incidence of youth who smoke than in Illinois. Additionally, maternal smoking rates were higher in Clay County than in Illinois.

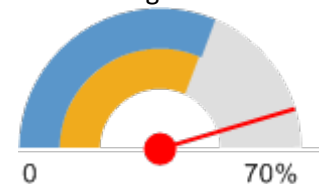
Illegal drug use was the 4th most commonly reported "important health issue" on the CASPER survey. Alcohol use was the 9th most important. The 2016 Illinois Youth Survey finds that by 12th grade, more than half of students (55%) had tried some type of substance including alcohol and drug (Data source: Illinois Youth Survey, 2016). 45% of driving deaths in Clay County were alcohol related, compared to 36% in Illinois (Data source: Fatality analysis data reporting system).

Supporting Data:

Former Tobacco Smokers Prevalence- Adults

Report Area	Survey Population (Adults Age 18)	Total Adults Ever Smoking 100 or More Cigarettes	Percent Adults Ever Smoking 100 or More Cigarettes
Clay County, IL	26,959	17,092	63.40%
Illinois	9,659,812	4,258,470	44.08%
United States	235,151,778	103,842,020	44.16%

Percent Adults Ever Smoking 100 or More Cigarettes



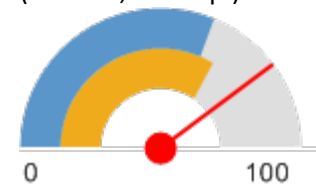
- Clay County, IL (63.40%)
- Illinois (44.08%)
- United States (44.16%)

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12. Source geography: County

Lung Cancer Incidence

Report Area	Estimated Total Population	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Pop.)
Clay County, IL	1,886	15	79.5
Illinois	1,370,544	9,306	67.9
United States	33,999,704	212,905	62.62

Annual Lung Cancer Incidence Rate (Per 100,000 Pop.)



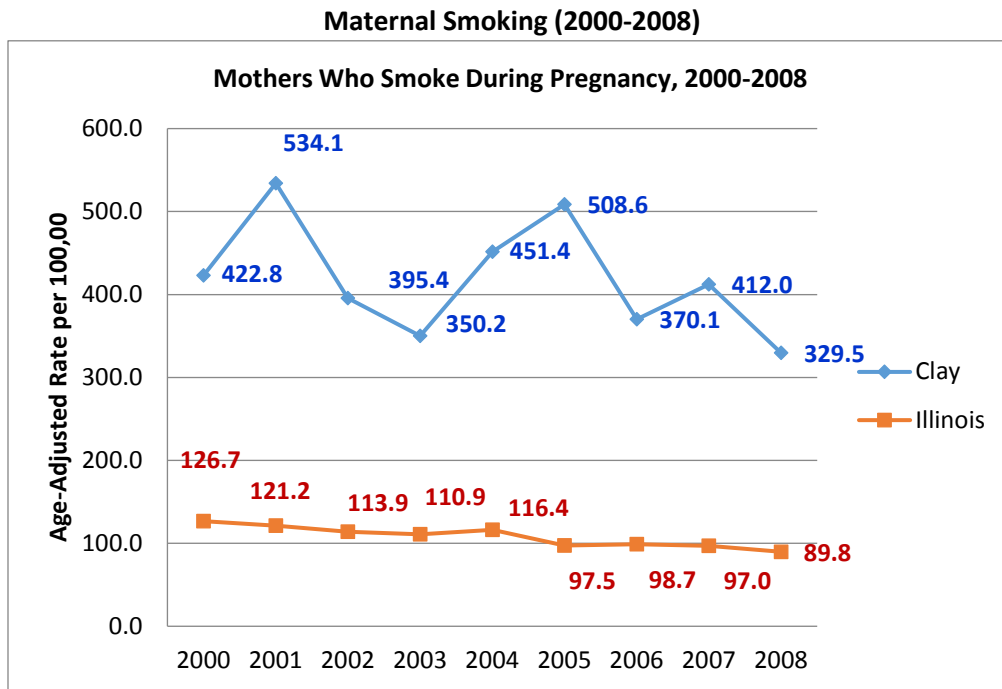
- Clay County, IL (79.5)
- Illinois (67.9)
- United States (62.62)

Data Source: State Cancer Profiles. 2009-13. Source geography: County* the age adjusted incidence rate (cases per 100,000 population per year)

The 2016 Illinois Youth Survey of 8th, 10th, and 12th graders in Clay County found that 13% of 8th graders had tried cigarettes, 15% of 10th graders and 35% of 12th graders. The most common sources of cigarettes for all

grades was from a friend of sibling. Other common sources included taking them from home without parents knowing and in 12th grade buying them from a gas station. Of 12th grade tobacco users, 25% reported that their parents gave them cigarettes. (*Data Source: Illinois Youth Survey. Clay County 2016*).

The Clay County Health Department conducted a survey in 2016 in all junior high and high school classroom in Clay and Richland Counties. The survey found that approximately 20.6% of students in Clay and Richland Counties reported using cigarettes in the past 30 days, and 10.2% of those students reported being current frequent users (*Data Source: Clay County Health Department Youth Tobacco Survey*).



Source: I-QUERY, IDPH Vital Statistics

The latest available data (2008) shows that maternal smoking rate is higher in Clay County than in Illinois, but is on a decreasing trend. More current data is not available.

From 2010-2014, 45% of driving deaths in Clay County were alcohol-related, compared to the Illinois average of 36% alcohol-impaired driving deaths (*Data Source: Fatality Analysis Reporting System*).

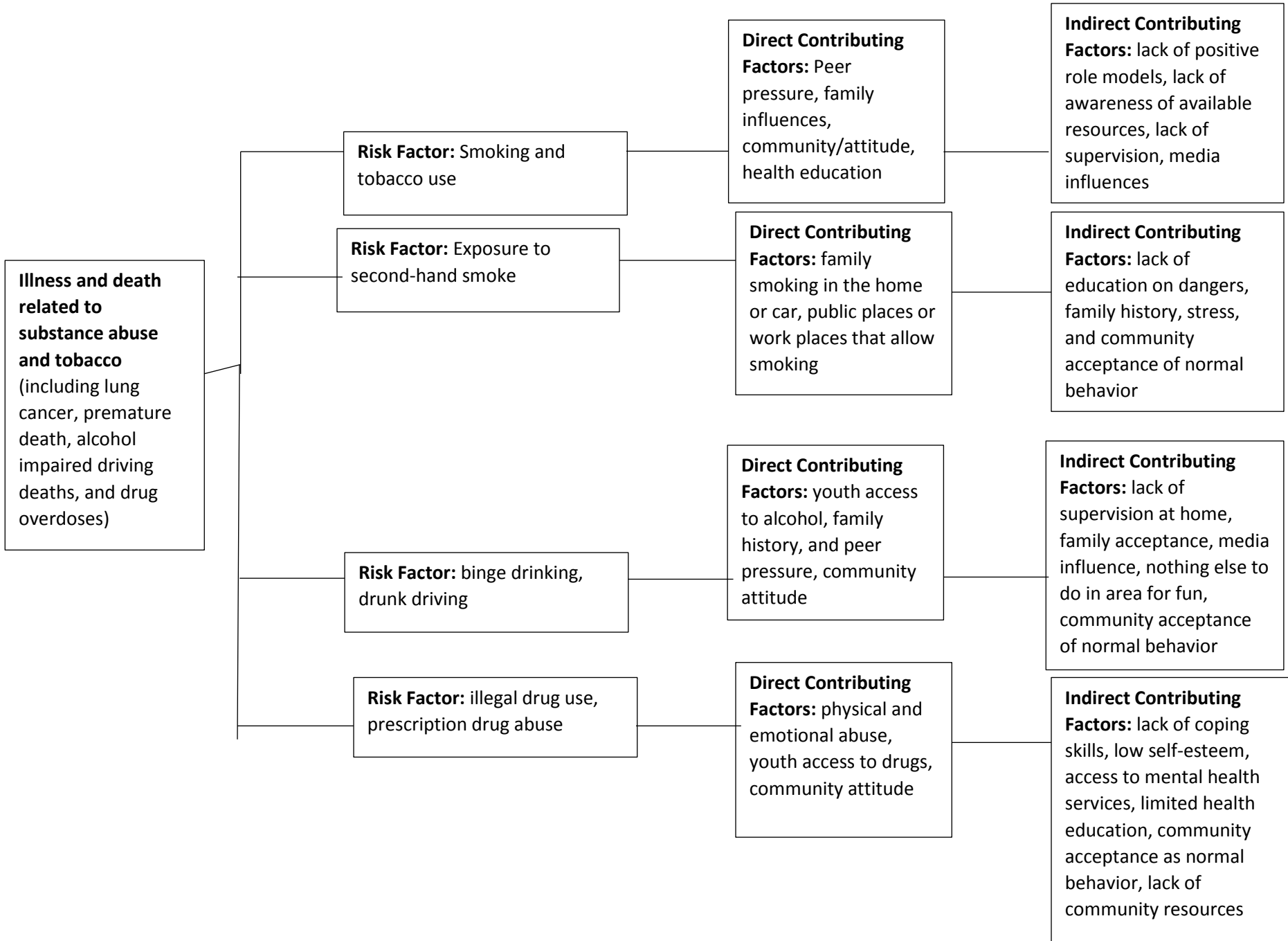
Clay County Youth Substance Use

Substance Used	8th Grade	10th Grade	12th Grade
Used Past Year			
Any Substance (including alcohol, cigarettes, inhalants or marijuana)	36%	39%	55%
Alcohol	36%	38%	49%
Any Tobacco Product (excluding e-cigarettes)	8%	12%	17%
Cigarettes	13%	15%	35%
Inhalants	3%	1%	0%
Marijuana	8%	10%	20%
Any Illicit Drugs (excluding marijuana)	4%	2%	3%
Crack/Cocaine	4%	1%	3%
Hallucinogens/LSD	2%	1%	0%
Ecstasy/MDMA	2%	1%	0%
Methamphetamine	2%	1%	0%
Heroin	2%	1%	0%
Any Prescription Drugs to get high	3%	2%	7%
Steroids	1%	0%	3%
Prescription Painkillers	3%	2%	4%
Other Prescription Drugs	3%	0%	3%
Prescription drugs not prescribed to you	8%	7%	7%
Over-the-Counter Drugs	4%	0%	1%

Illinois Youth Survey, Clay County 2016

Relation to Health People 2020: The following Healthy People 2020 targets were referenced to set objectives.

- Reduce the percentage of adults currently smoking to 12.0%.
- Increase the percentage of smokers who attempt to quit smoking within the past year to 80%
- Reduce the percentage of adolescents 8 – 12 who have used cigarettes within the past 30 days to 16%.
- Increase the percent of students who perceive great risk of harm associated with alcohol use to 44%.



Outcome Objective #1: By 2022, reduce the percent of adults who smoke to 14%.

- Baseline (2015): Clay County 16%, Illinois Benchmark 15% currently identify as smokers, Healthy People 2020 Target 12%
 - Data Source: County Health Rankings

Impact Objective 1.1: Increase the percent of smokers who attempt to quit smoking to 80% by 2019.

- Baseline (2011): Clay County 74.27%, Illinois Benchmark 61.21%, Healthy People 2020 Target 80%
 - Data Source: Behavioral Risk Factor Surveillance System (BRFSS), accessed through Community Commons. Additionally, can monitor the number of calls to the Illinois Tobacco QuitLine from Clay County residents on a monthly and yearly basis.
 - Interventions:
 - Educate health care providers on the Illinois Tobacco QuitLine and brief intervention method. (Baseline in 2017: 14 health care referral partners. Goal of increasing to at least 25)
 - Educate facilities that provide services to low-income populations on the Illinois Tobacco QuitLine.
 - Participate in factory health fairs and educate employees on the Illinois Tobacco QuitLine.
 - Explore partnerships with employers in Clay County to promote work-site based incentives and competitions to support individual cessation efforts.
 - Partner with WIC program at the Clay County Health Department to offer maternal smoking cessation tools to all mothers who smoke during pregnancy.
 - Develop partnerships with cancer prevention groups in Clay County to collaborate on efforts to reduce smoking and prevent lung cancer in the community.
 - Evidence-Base:
 - Incentives and competitions to increase smoking cessation among workers: <https://www.thecommunityguide.org/findings/tobacco-use-and-secondhand-smoke-exposure-incentives-and-competitions-increase-smoking-1>
 - QuitLine interventions: <https://www.thecommunityguide.org/findings/tobacco-use-and-secondhand-smoke-exposure-quitline-interventions>

Impact Objective 1.2: Prevent the initiation of smoking among adolescents and teens. By 2020, reduce the percent of youth in grades 8 – 12 who have smoked cigarettes in the past 30 days to 16%.

- Baseline (2016): Clay & Richland County youth 20.6%, Healthy People 2020 Target 16%
 - Data Source: Clay County Health Department Social Norms Survey, and Illinois Youth Survey
 - Interventions:
 - Utilize the power of peer pressure to promote social norms through a marketing campaign against smoking in Clay County schools.
 - Work with Clay County schools to start smoking education younger, based on survey results that show when most youth first start smoking.

- Through the Coalition against Drug Abuse (CADA), work with law enforcement to restrict sales of tobacco to minors.
 - Evidence-Base:
 - Social Marketing: <https://www.thecommunityguide.org/findings/tobacco-use-and-secondhand-smoke-exposure-quitline-interventions>
 - Community Mobilization to Restrict Sales to Minors: <https://www.thecommunityguide.org/findings/tobacco-use-and-secondhand-smoke-exposure-community-mobilization-additional-interventions>

Outcome Objective #2: By 2022, reduce the proportion of nonsmokers exposed to second hand smoke, by increasing the number of smoke-free public places & places of employment to 100%.

- Baseline (2016): All of Flora public parks are smoke-free, not all of Louisville or Clay City yet. The Smoke Free Illinois Act requires all indoor public places and places of employment to be smoke-free.
 - Data Source: Need to inventory number of public places and generate data to show percentage that are smoke-free. The Clay County Health Department tobacco coordinator tracks the number of Smoke Free Illinois Act violations and complaints. The Clay County Health Department tobacco coordinator tracks the number of establishments that have been inspected for compliance with the Smoke Free Illinois Act.

Impact Objective 2.1: Develop smoke-free policies at 100% of parks in Clay County by 2020.

- Baseline (2016): All of Flora public places are smoke-free, not all of Louisville or Clay City yet.
 - Data Source: Need to inventory number of public places and generate data to show percentage that are smoke-free.
 - Interventions:
 - Inventory parks in Clay County and generate data to show the percentage that are smoke-free.
 - Collaborate with North Clay School and North Clay Park Board to establish a smoke-free policy in Louisville Park.
 - Promote smoke-free events, such as school sporting events, by collaborating with local community groups and schools.
 - Evidence-Base:
 - Smoke-free policies for outdoor areas: <http://www.countyhealthrankings.org/policies/smoke-free-policies-outdoor-areas>

Impact Objective 2.2: Ensure that all indoor public places & places of employment comply with the Smoke Free Illinois Act by 2019

- Baseline (2016): The Clay County Health Department conducted 55 smoke-free Illinois Act compliance checks, and received one complaint.
 - Data Source: Clay County Health Department tobacco program coordinator.
 - Interventions:

- Conduct at least 120 Smoke Free Illinois compliance checks per year.
 - Evidence-Base:
 - Smoke-free policies:
 - <https://www.thecommunityguide.org/findings/tobacco-use-and-secondhand-smoke-exposure-smoke-free-policies>

Outcome Objective #3: By 2022, decrease the percentage of Clay County youth reporting alcohol use in the past year by 10% to 32% of 8th graders, 34% of 10th graders, and 44% of 12th graders.

- Baseline (2016): Clay County: 36% of 8th grade students, 38% of 10th grade students, and 49% of 12th grade students report alcohol use in the past year.
 - Data Source: Illinois Youth Survey

Impact Objective 3.1: By 2020, increase the percent of 8th and 10th grade parents/guardians in Clay County who have talked to their students about not using alcohol in the past year to 52% in 8th grade and 58% in 10th grade.

- Baseline (2016): 48% of 8th grade and 53% of 10th grade students in Clay County report in the last year parents/guardians talked to the about not using alcohol.
 - Data Source: Illinois Youth Survey
 - Interventions:
 - Send prevention post cards to all parents of 8th and 10th grade students three times per year encouraging them to talk to their children about alcohol.
 - Develop and promote three radio ads during high traffic time slots about talking to your children about alcohol.
 - Evidence-Base:
 - Using mass media against underage drinking:
 - <http://www.countyhealthrankings.org/policies/mass-media-campaigns-against-underage-binge-drinking>

Impact Objective 3.2: By 2020, increase the percent of Clay County 8th grade students who perceive great risk of harm associated with alcohol use to 44%.

- Baseline (2016): 38% of 8th grade students perceive great risk of harm associated with having five or more alcoholic drinks on a single occasion once or twice a week. Healthy People 2020 target of 44%.
 - Data Source: Illinois Youth Survey
 - Interventions:
 - Publish stall talk messages three times per year to display in all school bathroom stalls capturing the majority of target audience and emphasizing message of the danger of binge drinking.
 - Display posters in school high traffic areas and entrances on the dangers of binge drinking.
 - Evidence-Base:

- Media campaigns against binge drinking:

<http://www.countyhealthrankings.org/policies/mass-media-campaigns-against-underage-binge-drinking>

Other goals related to this strategic issue: (These goals either do not currently have adequate data sources, funding or partnerships to fully develop the objective, but are areas to further explore in the next five years)

- Create a mentorship program to connect at risk youth to positive role models
- Measure the impact of drug use in Clay County:
 - Work with the Coroner to quantify the number/rate of drug overdose deaths in Clay County
 - Work with Sherriff to monitor the number of drug related crimes in Clay County
 - Conduct community survey to quantify prescription drug and illicit drug abuse concerns
- Increase admissions to substance abuse treatment programs
- Reduce access to prescription drugs by holding drug take back events, and educating parents/guardians/grandparents on restricting access to minors.
- Develop performance measures and evaluate drug court program in Clay County

Community Resources Available for this Priority:

- Clay County Health Department
- Illinois Tobacco Quit Line
- Clay County Hospital Behavioral Health and COPE program
- Coalition against Drug Abuse
- Southeastern Illinois Counseling
- Clay County Cancer Crusaders
- Clay County Schools
- Clay County Sherriff
- Clay County Probation Assistant
- City of Flora Police Department

Estimated funding:

Enhance current programs using existing funding

Potential New Funding Sources/In-Kind Support

Explore new grants from federal or state sources to support Coalition against Drug Abuse (CADA) initiatives

Strategic Issue #2: Heart Disease & Obesity

Goal: Improve heart health and quality of life through promotion of healthful diets and active lifestyles to ultimately prevent heart attacks, strokes and premature death.

Rationale: The percentage of adults with heart disease in Clay County (11.3%) is significantly higher than the state (3.8%) and national averages (4.4%). Diseases of the heart is the leading cause of death in Clay County (IDPH Vital Statistics). The CASPER household survey found that more than half of households (59.2%) had at least one member with hypertension or heart disease. Additionally, heart disease was the third most commonly identified health concern by the community during the CASPER survey. Clay County's obesity rate has increased to 32% since 2004. Obesity was the second most commonly reported important health issues from Clay County citizens through the CASPER survey. The percentage of adults in Clay County who report no leisure time physical activity has grown over the last ten years to 33%. The CASPER survey showed that residents of the average Clay County household exercised 3 days in a week. 35% of Clay County households had residents that exercised every day! But, in 25% of Clay County households, no one exercised in the last 7 days.

Supporting Data:

Table 4.9 Heart Disease Prevalence

Report Area	Survey Population (Adults Age 18)	Total Adults with Heart Disease	Percent Adults with Heart Disease
Clay County, IL	26,959	3,048	11.3%
Illinois	9,681,141	369,926	3.8%
United States	236,406,904	10,407,185	4.4%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12. Source geography: County

Percent Adults with Heart Disease

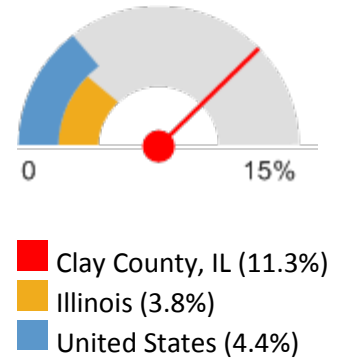
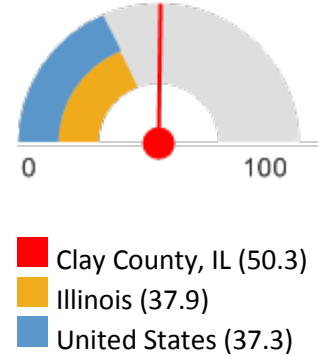


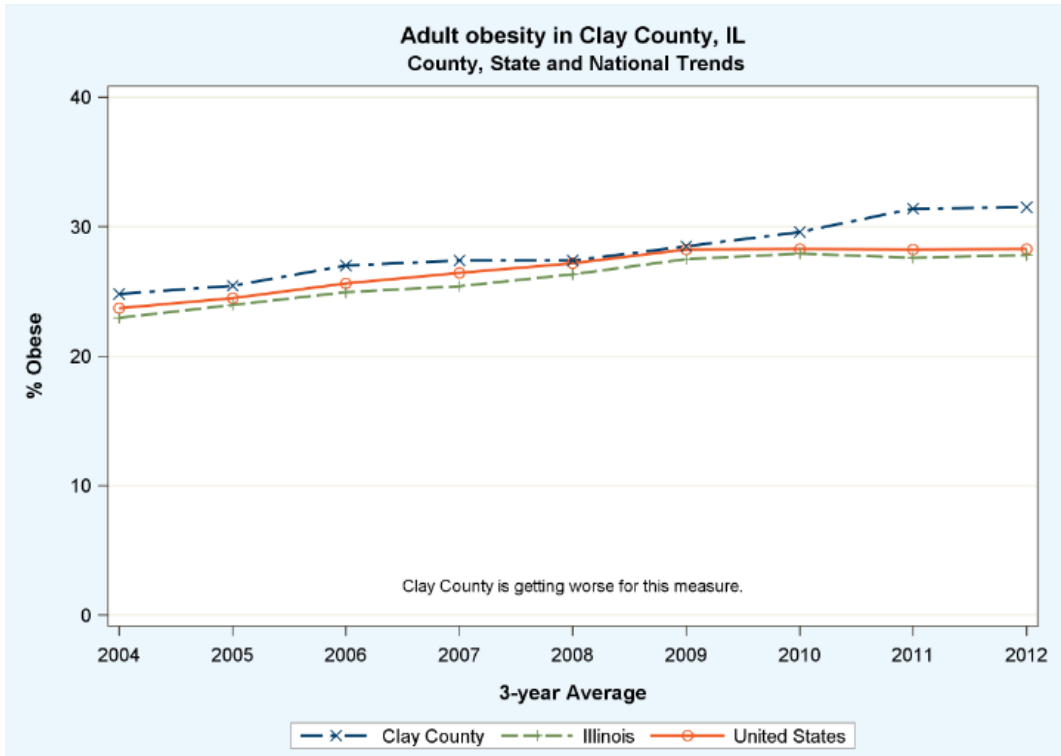
Table 4.9 Stroke Mortality Rate

Report Area	Total Population	Average Annual Deaths, 2010-2014	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Clay County, IL	13,679	10	76.03	50.3
Illinois	12,867,528	5,368	41.72	37.9
United States	313,836,267	129,754	41.34	37.3
HP 2020 Target				<= 33.8

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2010-14. Source geography: County

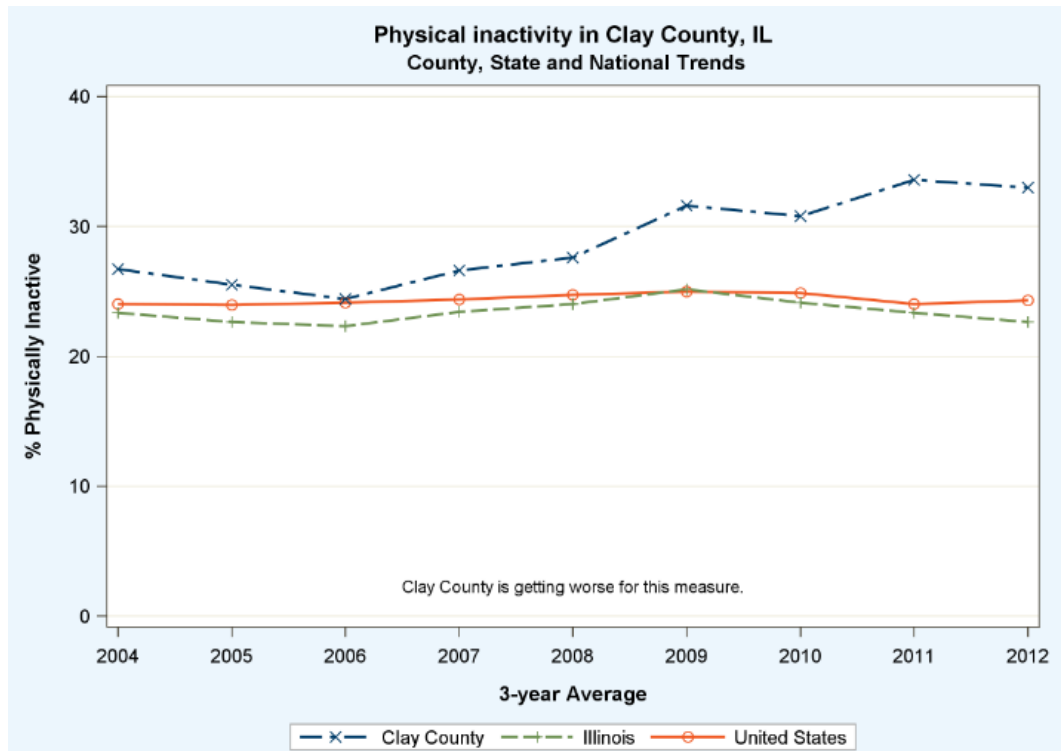
Stroke Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)



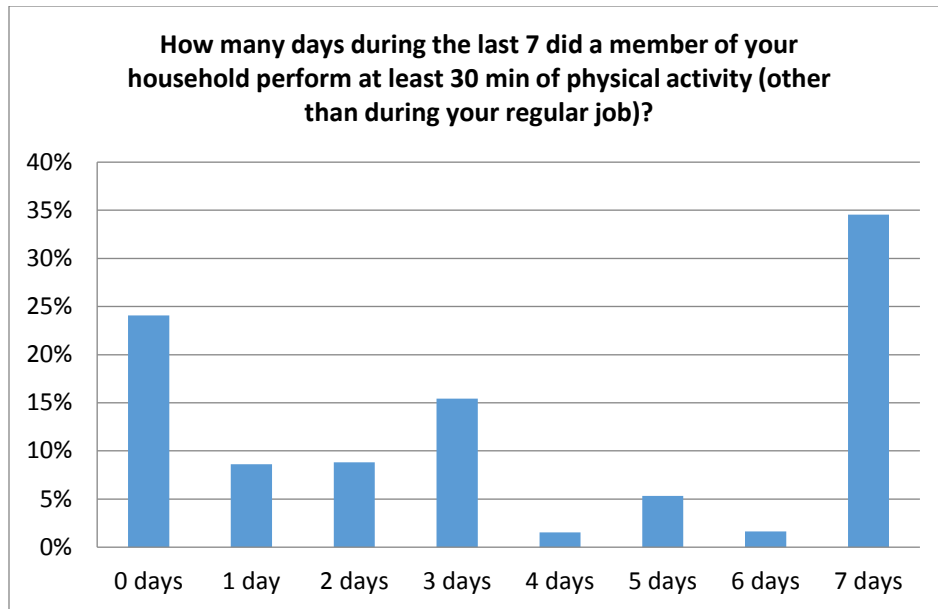


Data Source: County Health Rankings; National Diabetes Surveillance System; Diabetes Interactive Atlas

Physical Inactivity



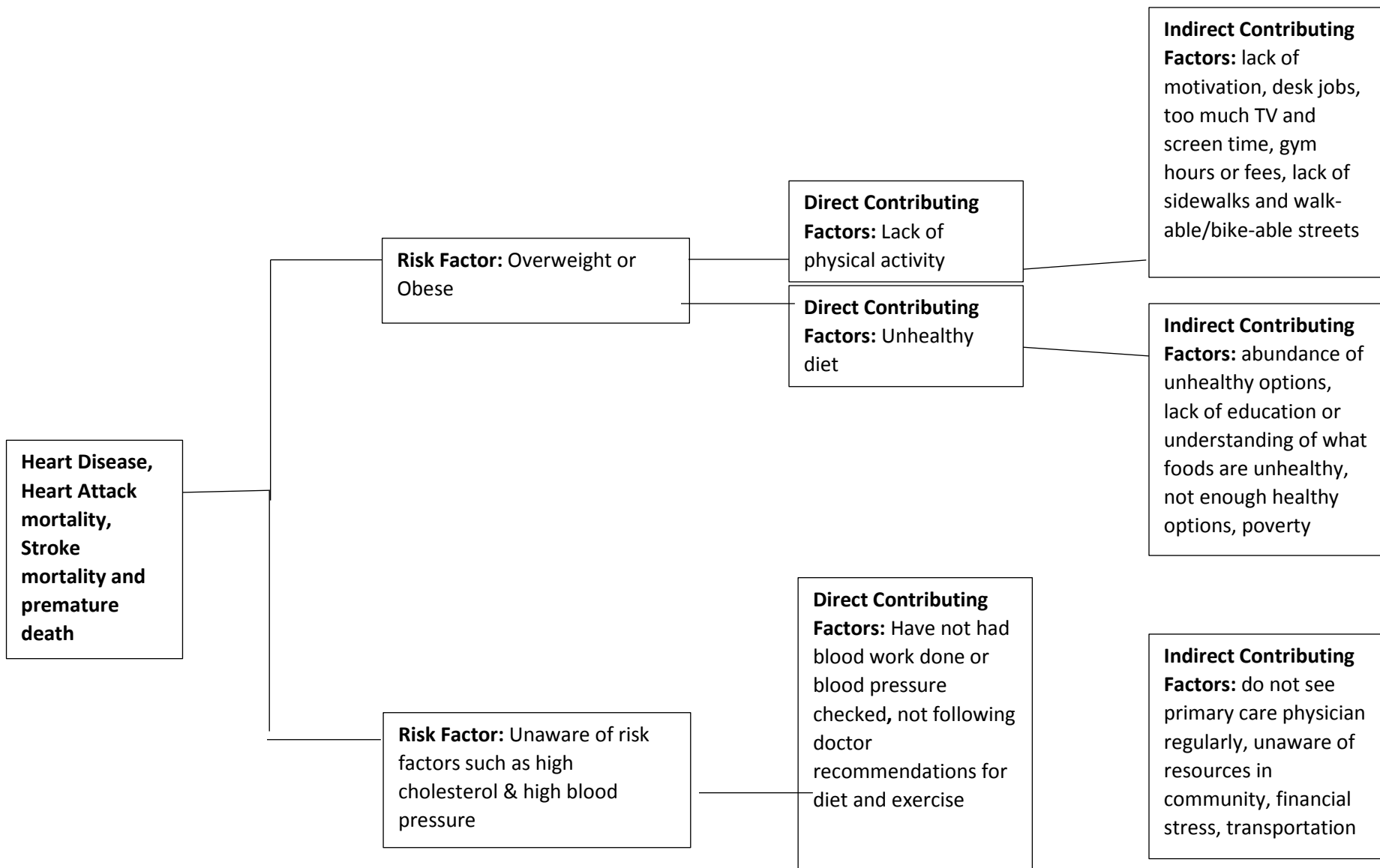
Data Source: County Health Rankings; CDC National Diabetes Surveillance System, Behavioral Risk Factor Surveillance System



Data Source: Clay County Health Department CASPER Survey. May 2016

Relation to Health People 2020: The following Healthy People 2020 targets were referenced to set objectives.

- Increase the proportion of adults at a healthy weight to 33.9%.
- Reduce the proportion of adults who get no leisure time physical activity to 32.6%.
- Reduce stroke mortality to 37.3 per 100,000.



Outcome Objective #1: By 2022, reduce the percent of adults with heart disease to 10%.

- Baseline (2011): Clay County 11.3%, Illinois Benchmark 3.0% currently has heart disease. No healthy people 2020 goal.
 - Data Source: Behavioral Risk Factor Surveillance System (BRFSS), accessed through Community Commons.

Impact Objective 1.1: By 2022, increase the proportion of adults who are at a healthy weight to 33.9%.

- Baseline (2011): Clay County 29.5% (70.5% are obese or overweight), Healthy People 2020 target to achieve 33.9% at healthy weight.
 - Data Source: Behavioral Risk Factor Surveillance System (BRFSS)
 - Interventions:
 - Launch a “Health for Generations” Facebook page and website. Utilize social media to share messaging campaigns about choosing healthy options (i.e. Rethink your drink, Swap it to Drop it).
 - Create a cookbook with heart healthy recipes and distribute throughout the community.
 - Promote breastfeeding through peer counselor program and community breastfeeding support initiatives.
 - Collaborate with schools, churches, and community groups to offer healthy options at community events (like school sporting event concession stands). Provide healthy ideas for snacks, such as water instead of soda, fresh fruit and vegetables, popcorn (without butter and salt), and promote healthy options at events using social media.
 - Explore restaurant health improvement initiatives. Work with restaurant owners to develop menu items that are low calorie, heart healthy, and contain fruits and vegetables. Promote healthy menu options using social media, and point of decision prompts in restaurant menus or signage on tables.
 - Promote local farmers market as a way to increase fruit and vegetable consumption.
 - Highlight success stories of local citizens who have lost weight and developed a healthier life style using social media.
 - Launch a community based weight loss challenge competition with local employers.
 - Evidence-Base:
 - Breastfeeding promotion program:
<http://www.countyhealthrankings.org/policies/breastfeeding-promotion-programs>
 - Community weight loss challenge:
<http://www.countyhealthrankings.org/policies/community-weight-loss-challenges>
 - Point of Purchase Marketing for healthy foods:
<http://www.countyhealthrankings.org/policies/point-purchase-prompts-healthy-foods>
 - SWAP it to DROP it campaign, restaurant program, marketing health, farmers market promotion : <http://heartsbeatback.org/about-us/fact-sheets>

Impact Objective 1.2: By 2020, reduce the proportion of adults who have no leisure time physical activity to 29%

- Baseline (2011): Clay County 33% report no leisure time physical activity, Illinois benchmark 25%, Healthy People 2020 target 32.6%.
 - Data Source: Behavioral Risk Factor Surveillance System (BRFSS), accessed through County Health Rankings
 - Interventions:
 - Launch a “Health for Generations” Facebook page and website. Utilize social media to promote physical activity opportunities in Clay County.
 - Offer free community exercise classes to try different types of exercise available in the community (yoga, Cross fit, Zumba, etc.)
 - Promote free senior aerobics exercise classes.
 - Start a community based support system to encourage walking and biking by scheduling regular times and locations for a group to meet to walk or bike together.
 - Invite gym owners and school gym teachers to participate in the coalition and design physical activity challenges among members/students.
 - Distribute point of decision prompts around the community and to worksite to encourage people to be active (i.e. take the stairs)
 - Evidence-Base:
 - Physical activity programs for older adults:
 - <http://www.countyhealthrankings.org/policies/activity-programs-older-adults>
 - Community fitness programs:
 - <http://www.countyhealthrankings.org/policies/community-fitness-programs>
 - Community-based social support for physical activity:
 - <http://www.countyhealthrankings.org/policies/community-based-social-support-physical-activity>
 - Community-wide physical activity campaigns:
 - <http://www.countyhealthrankings.org/policies/community-wide-physical-activity-campaigns>
 - Point of decision prompts for physical activity:
 - <http://www.countyhealthrankings.org/policies/point-decision-prompts-physical-activity>

Outcome Objective #2: By 2022, reduce stroke mortality to 45.2 per 100,000.

- Baseline (2014): Clay County 50.3 per 100,000, Illinois Benchmark 37.9 per 100,000. Healthy People 2020 goal of 37.3 per 100,000.
 - Data Source: CDC National Vital Statistics System, accessed via Community Commons.

Impact Objective 2.1: By 2019, increase the number of people who get annual blood work done by 10%.

- Baseline: Clay County Hospital and Health Department estimate number of blood work vouchers sold at community events, and number of blood tests done on an annual basis.
 - Data Source: Clay County Health Department and Clay County Hospital
 - Interventions:

- Offer low cost blood work, cholesterol checks and free blood pressure checks at community events.
 - Evidence base:
 - Reduce out-of pocket costs of cardiovascular disease preventative services: <https://www.thecommunityguide.org/findings/cardiovascular-disease-reducing-out-pocket-costs-cardiovascular-disease-preventive-services>

Impact Objective 2.1: By 2020, increase the number of people who are aware of the early warning symptoms and signs of a stroke and the importance of accessing rapid emergency care by calling 9-1-1 by 10%.

- Baseline: Needs to be generated by estimating the number of children educated through school programs, and adults through trainings, events, and media reach.
 - Data Source: Health for Generations subcommittee will track the number of people reached through school education programs, trainings, events and media.
 - Interventions:
 - Launch community based campaign through Health for Generations coalition to issue shared message on early warning signs of a stroke.
 - Participate in community events to educate the public on the early warning signs of strokes.
 - Evidence base:
 - Recognizing signs and symptoms of a Stroke: https://www.cdc.gov/dhds/docs/ss_coverdell_arkansas.pdf

Other goals related to this strategic issue: (These goals either do not currently have adequate data sources, funding or partnerships to fully develop the objective, but are areas to further explore in the next five years)

- Offer grocery store tours with a dietitian to identify healthy and budget-friendly options that can be purchased locally.
- Support local employers to offer work site wellness programs by providing work site wellness checklists. The Health for Generations coalition could host a worksite wellness symposium for local HR representatives to offer ideas and strategies to improve worksite wellness programs.
- Create a community garden or offer trainings through University of Illinois Extension Master Gardeners to promote growing your own fruit and vegetables.
- Develop more walk-able/bike-able communities through Complete Streets program.

Community Resources Available for this Priority:

- University of Illinois Extension
- Chamber of Commerce
- Clay County Health Department
- Local gyms

- Clay County Hospital
- Local worksite HR and work site wellness coordinators
- City of Flora
- Clay County Farm Bureau
- Clay County Master Gardeners
- Clay County School Districts
- American Red Cross
- Clay County Food Pantry
- Golden Circle Nutrition Program

Estimated funding:

Enhance current programs using existing funding.

Potential New Funding Sources/In-Kind Support

Explore new grants from federal or state sources to support Health for Generations Coalition initiatives

Strategic Issue #3: Access to Care & Cancer

Goal: Improve access to quality care and improve utilization of preventative services.

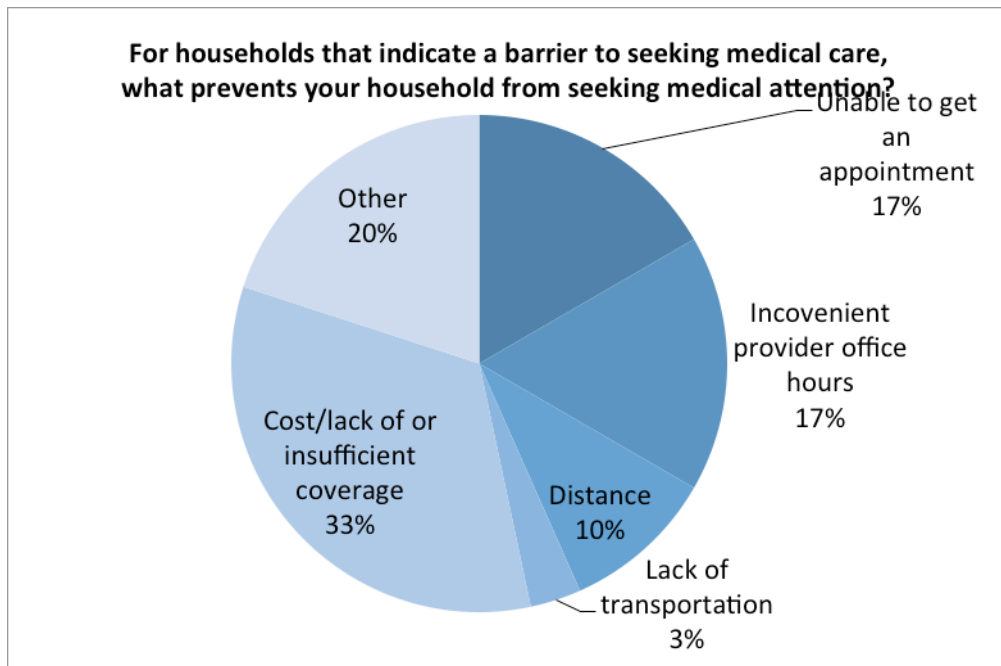
Rationale: The entirety of Clay County is designated as a “Health Professional Shortage Area” (HPSA), defined as having a shortage of primary medical care, dental, or mental health professionals. The access to primary care physicians is especially low. Clay County lost the only Medicaid dental provider in the County this year. During focus groups, access to health care came up in many forms and in all age groups. It was the #1 most common theme of all focus groups. In the CASPER survey, access to health care was one of the top 10 health issues important to Clay County residents. Households reported examples of issues such as: mental health service availability, specialized physicians, and cancer care out of the area. Cancer was the #1 most commonly reported important health issue to residents in Clay County from the CASPER survey. In fact, it was reported twice as many times as any other health issue. During focus groups, several people mentioned that they were concerned about Clay County’s cancer rate. There is a wide-spread perception in the community that cancer rates in Clay County are especially high. This is being included in the ‘Access to Health Care’ priority, to create objectives focused on encouraging the population to utilize cancer screening options available in Clay County. Clay County’s percentage of female Medicare enrollees age 67-69 that had at least one mammogram over a two-year period is decreasing below the State and National averages. Clay County’s cancer mortality rate is slightly higher than the Illinois and National Rate, all of which are higher than the Healthy People 2020 Target (160.6).

Supporting Data:

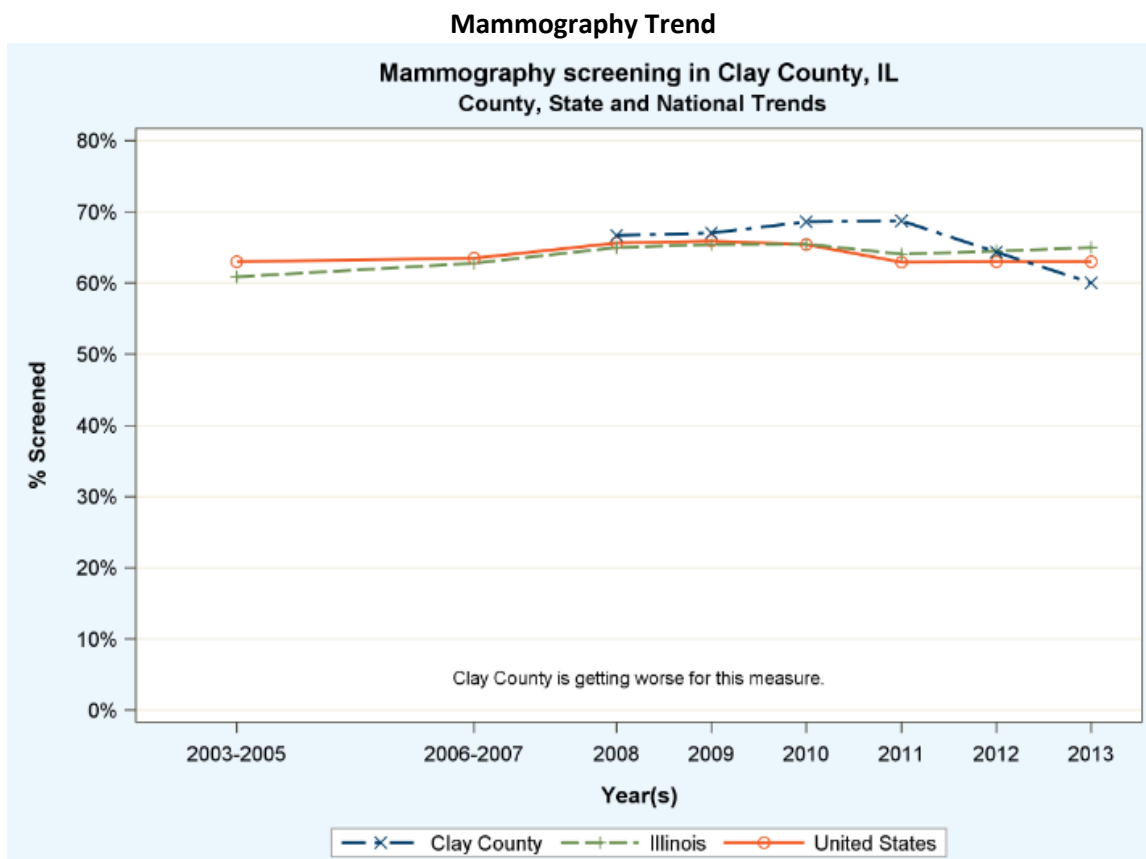
Primary Medical Care Provider in Clay County

	Frequency (n=169)	Projected households	Projected %	95% CI
Who does your household use for primary and ongoing medical care?				
Doctor's Clinic	145	5325	86.0%	78.6 - 93.4
Hospital ER	11	399	6.4%	1.2 - 11.7
Military	5	165	2.7%	0.4 - 5.0
Other	4	139	2.3%	0 - 4.5
Urgent Care/ Walk-in	3	91	1.5%	0 - 3.2
Don't Know	1	71	1.2%	0- 3.5

Data Source: Clay County Health Department CASPER Survey. May 2016.



Data Source: Clay County Health Department CASPER Survey. May 2016

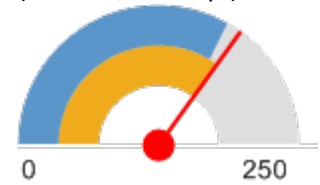


Source: County Health Rankings, Dartmouth Atlas of Health Care

Cancer Mortality Rate

Report Area	Total Population	Average Annual Deaths, 2010-2014	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Clay County, IL	13,679	33	244.18	174.5
Illinois	12,867,528	24,326	189.05	173.9
United States	313,836,267	581,919	185.42	166.3
HP 2020 Target				<= 160.6

Cancer Mortality, Age-Adjusted Death Rate (Per 100,000 Pop.)

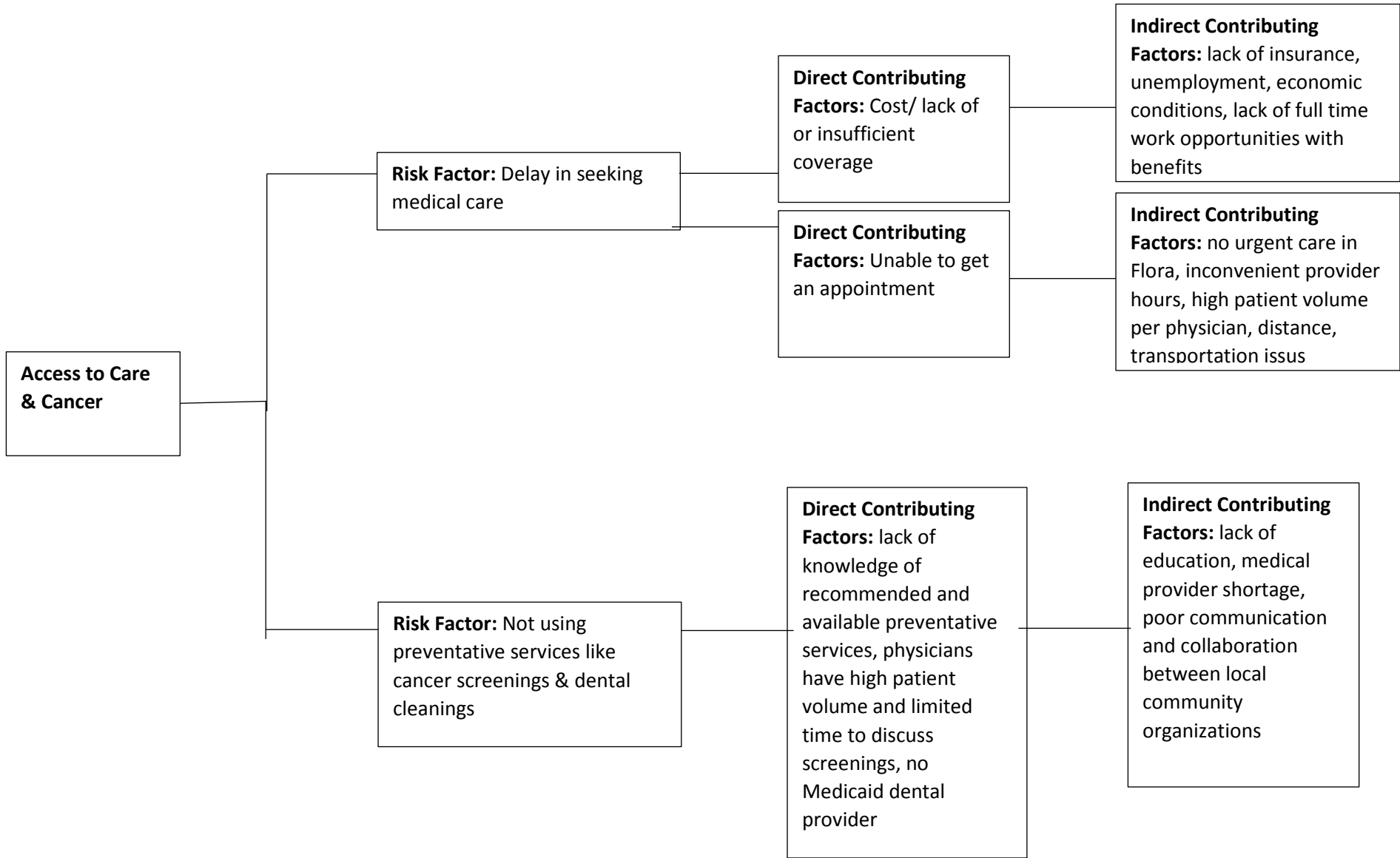


■ Clay County, IL (174.5)
■ Illinois (173.9)
■ United States (166.3)

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2010-14. Source geography: County

Relation to Health People 2020: The following Healthy People 2020 targets were referenced to set objectives.

- Increase the proportion of persons who have a specific source of ongoing care to 95%
- Decrease the proportion of persons who are unable to or delay ongoing medical care to 9%.
- Increase the percent of women who get breast cancer screenings to 81.1%



Outcome Objective #1: Increase the proportion of persons who have a specific source of ongoing care to 95% by 2022.

- Baseline (2016): Clay County 88.7% of households utilize doctor clinic of military for ongoing medical care, the other 11.3% use the ER, walk-in clinic, or don't have a doctor. The Healthy People 2020 goal is to increase the proportion of persons who have a specific source of ongoing care to 95%.
 - Data Source: Clay County Health Department CASPER Survey

Impact Objective 1.1: Reduce the proportion of persons who are unable to or delay obtaining medical care to 16% by 2020.

- Baseline (2016): Clay County 18% report a barrier to seeking medical care, including unable to get appointment, inconvenient hours, cost, and distance. The Healthy People 2020 goal is to decrease the proportion of persons who are unable to or delay ongoing medical care to 9%.
 - Data Source: Clay County Health Department CASPER Survey
 - Interventions:
 - Expand provider office hours and offer more walk-in clinic opportunities
 - Offer educational sessions to help people sign up for health insurance
 - Partner with CEFS transportation and FQHC to reduce barriers to medical care due to distance and transportation.
 - Distribute education through local industries on preventative services covered through insurance plans.
 - Evidence base:
 - Health insurance enrollment support:
<http://www.countyhealthrankings.org/policies/health-insurance-enrollment-outreach-support>
 - Health literacy interventions:
<http://www.countyhealthrankings.org/policies/health-literacy-interventions>

Outcome Objective #2: By 2022, increase the proportion of women who received breast cancer screenings to 81.1%

- Baseline (2011): 73% of women in Clay County had a mammogram in last year. The Healthy People 2020 target is to increase to 81.1%.
 - Data Source: Behavioral Risk Factor Surveillance System (BRFSS)

Impact Objective 2.1: Increase the percent of female Medicare enrollee's aged 67-69 that receive mammography screenings to 60.5% by 2020.

- Baseline (2014): Clay County 55%.
 - Data Source: Dartmouth Atlas of Health Care, accessed via County Health Rankings
 - Interventions:
 - Education through women's wellness events and messaging through Health for Generations Coalition social media
 - Education to local providers on cancer screening utilization data

Outcome Objective #3: By 2022, recruit 2 additional primary care physicians, and 1 additional dental provider.

- Baseline (2014): Clay County had 14.79 primary care physicians per 100,000 population and 67 dentists per 100,000 population.
 - Data Source: US Health and Human Services, Health Resources and Services Administration, Area Health Resource File, accessed via County Health Rankings.

Impact Objective 2.1: By 2022, recruit a dental provider to meet the needs of Medicaid population.

- Baseline (2017): Clay County 0 Medicaid dental providers.
 - Data Source: Health for Generations Coalition
 - Interventions:
 - Work as a coalition to identify methods to recruit dental providers or otherwise meet the dental needs of Medicaid population.

Impact Objective 2.1: By 2022, increase the percent of the population aged 25+ with a bachelor's degree or higher to 15%.

- Baseline (2014): 13.4% of Clay County's population age 25+ had a bachelor's degree or higher, compared to 31.9% in Illinois.
 - Data Source: U.S. Census Bureau
 - Interventions:
 - Recruit Clay County residents who are currently in Medical School or in medical careers to return and serve in Clay County.
 - Support health care career mentoring opportunities, and support the health occupations class.
 - Offer internship opportunities in public health or other health care field to help Clay County residents currently seeking bachelor's degrees.
 - Participate in career fairs to encourage high school students to enter medical careers.

Other goals related to this strategic issue: (These goals either do not currently have adequate data sources, funding or partnerships to fully develop the objective, but are areas to further explore in the next five years)

- Offer classes, training, or support groups for caregivers and residents with Alzheimer's and Dementia.
- Create a central resource manual that can be used to increase collaboration and communication about available resources in the community.

Community Resources Available for this Priority:

- Clay County Health Department
- Clay County Hospital
- Christopher Rural Health Planning Corps.
- Clay County Food Pantry
- Heritage Woods
- CEFS Public Transit
- Clay Home Health and Hospice
- Clay County Farm Bureau

Estimated funding:

Enhance current programs using existing funding

Potential New Funding Sources/In-Kind Support

Explore new grants from federal or state sources to support Health for Generations Coalition initiatives.