



COMMUNITY HEALTH NEEDS ASSESSMENT
October, 2024

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INTRODUCTION

Red Bud Regional is an acute care, critical access hospital offering medical and surgical services, emergency care, outpatient services, specialty clinics, and physician practices. The Joint Commission accredits the hospital is also an accredited chest pain center by the American College of Cardiology. They have been recognized by the American Heart Association and American Stroke Association's "Get with the Guidelines" Stroke Program.

Red Bud Regional's mission as an employer and healthcare provider is to provide safe, compassionate care. The medical staff is a key driver in building a culture centered on safety and quality. This foundation ensures that the community receives convenient, high-quality service.

Mission, Vision & Values

OUR MISSION: In keeping with our Christian heritage and tradition of service, the mission of Deaconess is to advance the health and well-being of our community with a compassionate and caring spirit.

OUR VISION: To be the preferred regional healthcare partner for patients, providers, employees, and payers, with equitable access to inclusive, innovative, efficient, top-quality healthcare for all.

OUR VALUES: At Deaconess, our values are based on our commitment to quality. We define quality as the continuous improvement of services to meet the needs and exceed the expectations of the customers we serve.

- Leadership for our community and region
- Excellence in quality, safety, and service
- Respect for all people without bias towards race, religion, gender/identity, sexual orientation, or any of the other ways in which people differ
- Integrity to do our best, even when no one is looking
- Innovation and a bias for action is encouraged
- Partnerships for the mutual benefit of other organizations, providers, employers, and community
- Accountability and Responsibility to consistently demonstrate an owner's mentality
- Kindness shapes our interactions with all

EXECUTIVE SUMMARY

Affordable Care Act (ACA) Provisions require charitable hospitals to conduct a Community Health Needs Assessment (CHNA). The CHNA is a systematic process involving the community in identifying and analyzing community health needs, assets, and resources to plan and act on priority community health needs.

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

ICAHN is a not-for-profit 501(c)(3) corporation established in 2003 to share resources, educate, promote operational efficiencies, and improve healthcare services for member critical access and rural hospitals and their communities.

With 60 member hospitals, ICAHN is an independent network governed by a nine-member board of directors. Standing and project development committees facilitate the network's overall activities. ICAHN continually strives to strengthen the capacity and viability of its members and rural health providers.

This Community Health Needs Assessment will guide the planning and implementation of healthcare initiatives that will allow the hospital and its partners to serve best Red Bud's emerging health needs and the surrounding area. The chief administrative officer coordinated the CHNA process.

A community focus group met in June 2024 to discuss overall health and wellness in the Red Bud Regional Hospital service area and to identify health concerns and needs in delivering healthcare and health services to improve fitness and reduce chronic illness for all residents. The focus groups included representation of healthcare providers, community leaders, community services providers, schools, faith-based organizations, local elected officials, public health, and others. Several members of these groups provided services to underserved and unserved persons as part of their roles.

The focus groups' findings, along with secondary data analyzed by the consultant, were presented to a focused group to identify and prioritize the significant health needs facing the community in August 2024.

IDENTIFICATION AND PRIORITIZATION ADDRESSING THE NEED

After their review and discussion, the identification and prioritization group advanced the goals and actions:

- 1. HEALTH EDUCATION:** Improve the community's overall health education through health promotion screenings and events in chronic disease management, cancer screenings, and health education.
- 2. ACCESS TO CARE:** Improve access to care by recruiting and retaining providers for specialty care clinics, mental health provision, and substance abuse treatment/services.
- 3. COMMUNITY COLLABORATION:** Improve community coordination by developing and maximizing health service partnerships.

ADDRESSING THE NEED CREATING THE PLAN

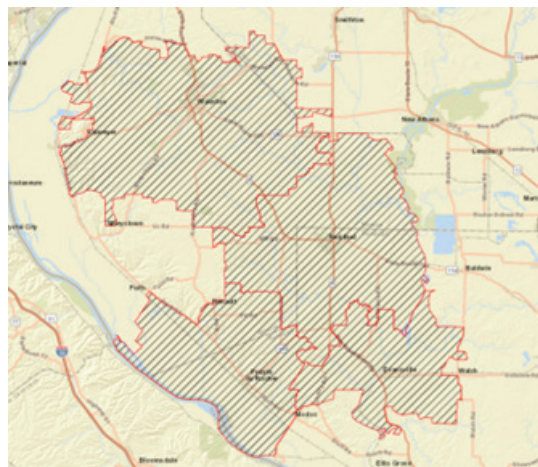
The group addressed the needs with the following strategies:

- Continue to bring specialty care services providers to the community as needed. This could include primary, specialty, and mental/behavioral health services.
- Investigate ways to create and strengthen community partnerships and to build relationships and collaboration.
- Promote Red Bud Regional services to the community through educational sessions, screenings, podcasts, etc. Promote the changes resulting from the partnership with Deaconess and the transition to a not-for-profit (charity care/patient assistance, etc.).

BACKGROUND

The Community Health Needs Assessment (CHNA) Process is conducted every three years. Since Red Bud Regional Hospital recently converted to a not-for-profit organization after joining Deaconess Illinois, this is its first CHNA.

AREA SERVED BY RED BUD REGIONAL HOSPITAL



For this CHNA, Red Bud Regional Hospital has defined its primary service area and populations as the general population within the geographic area in and surrounding Red Bud, Illinois, described below. The hospital's patient population includes all who receive care without regard to insurance coverage or eligibility for assistance.

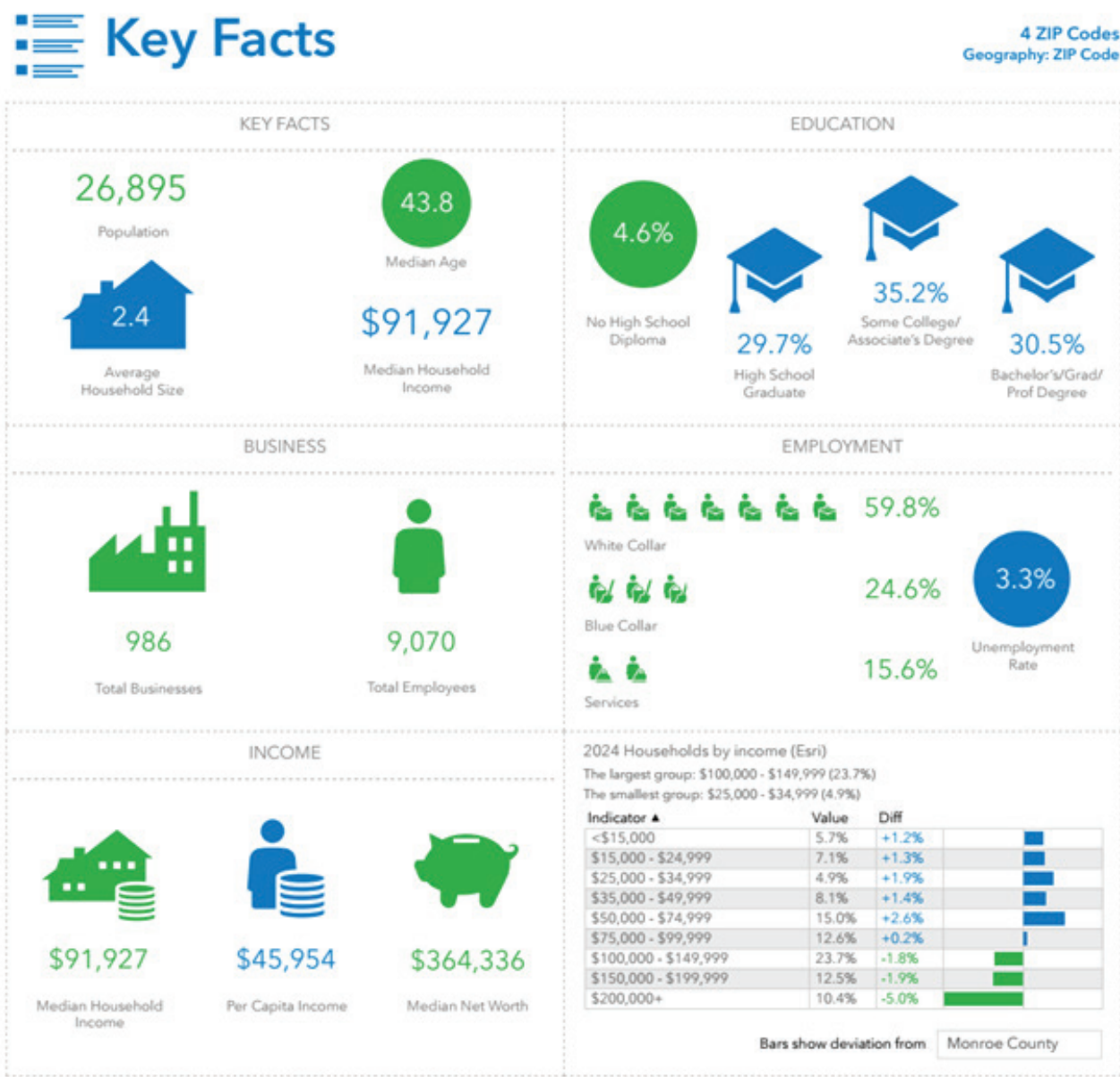
A total of 26,979 people live in the 362.98 square mile report area defined for this assessment according to the U.S. Census Bureau American Community Survey 2010-20 10-year estimates. The population density for this area, estimated at 73 persons per square mile, is less than the national average population density of 92 persons per square mile.

The service area, defined by zip code data, includes the following rural communities:

Red Bud Ruma Waterloo Evansville Prairie Du Rocher

The average household size of the area, at 2.42, is lower than in Illinois and the U.S. The median age is 43.8 years, higher than Illinois and the U.S. The largest education segment is high school graduates, followed by those with some college. 5.5% of the population has no high school diploma or GED, and 29.11% of the community's population has only a high school degree. Unemployment at the time of writing was 3.0%, roughly equivalent to the Illinois and United States unemployment rate averages. The average household income in the service area, \$124,8236, is approximately equal to the statewide or national average. The median household income is \$91,927.

KEY FACTS



KEY FACTS



SOCIAL DETERMINANTS OF HEALTH

The data and discussion on the following pages will investigate the social determinants in the Red Bud Regional service area. They will offer insight into the complexity of circumstances that impact physical and mental wellness. The infographic provides a snapshot of the at-risk population served by Red Bud Regional.

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

Healthcare Access and Quality includes access to healthcare overall, primary care, health insurance coverage, health literacy, compliance with recommended screenings, and incidents of certain health-related conditions.

Education Access and Quality include high school graduation rates, enrollment in higher education, educational attainment in general, language and literacy, and early childhood education and development.

Social and Community Context includes the incidents of homelessness, teen birth rates, juvenile arrest rates, and the incidents of young people not in school and not working.

Economic Stability includes average household income, rates of unemployment, cost of living, people living in poverty, employment, food security, and housing stability.

Neighborhood and Built Environment include the cost and quality of housing, access to transportation, access to healthy food, air and water quality, broadband access, access to fitness and recreation facilities, walkability, and rates of crime and violence.

PROCESS

ESTABLISHING THE CHNA INFRASTRUCTURE AND PARTNERSHIPS

Data Collection

DESCRIPTION OF DATA SOURCES - QUANTITATIVE/SECONDARY DATA

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

Source	Description
Behavioral Risk Factor Surveillance System	The largest continuously conducted telephone health survey in the world. It enables the Centers for Disease Control and Prevention (CDC), state health departments, and other health agencies to monitor modifiable risk factors for chronic diseases and other leading causes of death.
Spark Map	An online mapping and reporting platform powered by the Center for Applied Research and Engagement Systems (CARES) at the University of Missouri.
U.S. Census	National census data is collected by the US Census Bureau every ten years.
Centers for Disease Control	Through the CDC's National Vital Statistics System, states collect and disseminate vital statistics as part of the US's oldest and most successful intergovernmental public health data-sharing system.
County Health Rankings	Each year, the overall health of each county in all 50 states is assessed and ranked using the latest publicly available data through a collaboration of the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute.
American Communities Survey	A product of the U.S. Census Bureau, which helps local officials, community leaders, and businesses understand the changes in their communities. It is the premier source for detailed population and housing information about our nation.
Illinois Department of Employment Security	The state's employment agency that collects and analyzes employment information.
National Cancer Institute	Coordinates the National Cancer Program, which conducts and supports research, training, health information dissemination, and other programs concerning the cause, diagnosis, prevention, and treatment of cancer, rehabilitation from cancer, and the continuing care of cancer patients and the families of cancer patients

PROCESS

ESTABLISHING THE CHNA INFRASTRUCTURE AND PARTNERSHIPS

Data Collection

DESCRIPTION OF DATA SOURCES - QUANTITATIVE/SECONDARY DATA

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

Source	Description
Illinois Department of Public Health	IDPH is the state agency responsible for preventing and controlling disease and injury, regulating medical practitioners, and promoting sanitation.
Health Resources and Services Administration	The US Department of Health and Human Services develops national health professional shortage criteria and uses that data to determine the locations of Health Professional Shortage Areas and Medically Underserved Areas and Populations.
Local IPLANS	The Illinois Project for Local Assessment of Needs (IPLAN) is a community health assessment and planning process conducted every five years by local health jurisdictions in Illinois.
ESRI (Environmental Systems Research Institute)	An international supplier of Geographic Information System (GIS) software, web GIS and geodatabase management applications. ESRI allows for specialized inquiries at the zip code or other defined level.
Illinois State Board of Education	The Illinois State Board of Education administers public education in the state. Each year, it releases school “report cards” that analyze the makeup, needs, and performance of local schools.
United States Department of Agriculture	USDA, among its many functions, collects and analyzes information related to nutrition, local production, and food availability.

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

Secondary data is available in a separate document entitled **Red Bud Regional 2024 Secondary Data**.

Primary Data

Red Bud Regional convened a community focus group in June 2024. Attendees represented the communities served and special interest groups. Hospital board members, health and social service partners, the city of Red Bud, and educators were all represented. The Red Bud secondary data document provides a complete listing of participants.

PROCESS

ESTABLISHING THE CHNA INFRASTRUCTURE AND PARTNERSHIPS

Data Collection

Anecdotal data collected from the focused groups revealed the following.

THE TOP FIVE (5) STRENGTHS:

- Community focus on mental health and resources available
- Small town feel
- Compassionate care
- Strong industrial base
- Strong schools

THE TOP FIVE (5) OPPORTUNITIES THAT NEED TO BE ADDRESSED:

- Post-acute care/nursing home
- Obstetrical care for pre-and post-delivery
- More specialty services that stay long-term
- Resources for the growing homeless population
- Transportation needs

THE TOP FIVE (5) ASPIRATIONS

- All patients can receive care without bias
- Programs and care for the elderly
- Fill staffing needs/gaps
- Improve community collaboration/education
- Remodel buildings/provide services under one roof

DESCRIPTION OF THE COMMUNITY HEALTH NEEDS IDENTIFIED

After their review and discussion, the identification and prioritization group advanced the following needs as being the significant community health priorities facing the Red Bud Regional Hospital service area:

- 1. HEALTH EDUCATION:** Improve the community's overall health education through health promotion screenings and events in chronic disease management, cancer screenings, and health education.
- 2. ACCESS TO CARE:** Improve access to care by recruiting and retaining providers for specialty care clinics, mental health provision, and substance abuse treatment/services.
- 3. COMMUNITY COLLABORATION:** Improve community coordination by developing and maximizing health service partnerships.

PROCESS

ESTABLISHING THE CHNA INFRASTRUCTURE AND PARTNERSHIPS

Data Collection

RESOURCES AVAILABLE TO MEET PRIORITY HEALTH NEEDS

HOSPITAL RESOURCES

- Executive Team
- Hospital leadership team
- Hospital providers
- Marketing
- Dietician

HEALTHCARE PARTNERS OR OTHER RESOURCES, INCLUDING TELEMEDICINE

- Local Health Departments
- Behavioral and mental health service providers
- Providers in the community
- Deaconess Health

COMMUNITY RESOURCES

- Schools
- Community action agencies
- Community organizations
- Faith-based organizations
- Local governments
- Law Enforcement

DOCUMENTING AND COMMUNICATING RESULTS

This CHNA Report will be available to the community on the hospital's website, www.redbudregional.com. A hard copy may be reviewed at the hospital by inquiring with the Administrator's office.

There are no community comments since this is Red Bud Regional's first CHNA. However, a method for retaining written public comments and responses exists.

PLANNING PROCESS & IMPLEMENTATION STRATEGY

PLANNING PROCESS

The Implementation Strategy was developed by meeting with key Red Bud Regional Hospital administrative staff in June 2024. The group reviewed the needs assessment process completed to that point and considered the prioritized significant needs and supporting documents. They discussed steps taken to address the previous Community Health Needs Assessment. They are also regarded as internal and external resources potentially available to address the current prioritized needs.

The group then considered each of the prioritized needs. For each of the three priority areas, the actions the hospital intends to take were identified along with their anticipated impact, the resources the hospital intends to commit to, and the external collaborators the hospital plans to cooperate with to address the need.

The plan will be evaluated by periodic review of measurable outcome indicators with annual review and reporting.

IMPLEMENTATION STRATEGY

The group addressed the needs with the following strategies:

- 1. HEALTH EDUCATION:** Improve the community's overall health education through health promotion screenings and events in chronic disease management, cancer screenings, and health education.

Actions the hospital intends to take to address the health need

- Review patient educational documents to ensure understandable explanations of the patient's condition, care, and treatment. Educate patient care staff to reinforce the importance of this additional education with patients.
- Health fair in the community.
- Investigate a partnership with local schools utilizing employees to educate students on the benefits of an appropriate diet and exercise, strategies to improve their physical and mental health, chronic diseases and their management, and exposure to health careers and job opportunities at Red Bud Regional.
- Increase free or low-cost cancer screenings in the community.
- Radiology lung cancer screenings.
- Increase free or low-cost screenings for chronic diseases.
- Investigate support groups for patients suffering from chronic diseases.
- Rebranding the facility in the community to improve awareness of services and changes made since becoming a non-profit member of Deaconess Health.

Indicators that support this priority

- According to the community survey data, only 45% of the respondents say the community's health is "good."
- Chronic disease management was listed as the top need in the community by the community survey respondents.
- Obesity: Eating unhealthy or lacking healthy foods was rated as the second highest need of the community.
- Cancer incidents are higher in every category than the state or national averages, including all sites (2189.7/100,000 population), breast (664.7/100,000 population), cervical (12.1/100,000 population), colon-rectum (178.1/100,000 population), lung (334.4/100,000 population) and prostate (485.1/100,000 population).
- Deaths due to cancer are higher in the Red Bud area (211.3/100,000 population) as compared to Illinois (187.9) or the nation (182.7).

PLANNING PROCESS & IMPLEMENTATION STRATEGY

- Even with the increased rates of cancer and cancer deaths, 40% of survey participants had not participated in any cancer screenings in the previous year.
- Patients with recommended GI cancer screenings were at 68.8%, lower than the state or national average.
- Hospitalization of Medicare beneficiaries for stroke or heart disease was higher than the state or national averages.
- Adult obesity in Randolph County is 39%, higher than Illinois or the US at 34%.
- Adults who report they are smoking is 20%, higher than Illinois's 13% of the nation's 15%.
- Physical inactivity in adults aged > 20 was higher than normal. Only 16% report participating in physical activity outside of their jobs. The Illinois and national averages are > 20%.
- The percentage of patients with chronic conditions is higher than or equal to the state and national averages in COPD, depression, diabetes, heart disease, hypertension, and increased cholesterol. 72.5% of Medicare recipients in this area are treated for at least two (2) chronic conditions.

Anticipated impacts of these actions

- Community members will be more aware of their health and knowledgeable about how to maintain or improve it.

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

- Chief Administrative Officer
- Health Educators
- Marketing Team
- Primary Care Medical Staff

Planned collaboration between the hospital and other facilities or organizations:

- Community healthcare and social services providers
- Civic organizations

- 2. ACCESS TO CARE:** Improve access to care by recruiting and retaining providers for specialty care clinics, mental health provision, and substance abuse treatment/services.

Actions the hospital intends to take to address the health need

- Evaluate the primary and specialty care services needed in the community. Potentially recruit or provide those services through Deaconess Health partnerships.
- Evaluate the mental and substance abuse services provided in the community and the need for additional providers/services. Work with community partners and Deaconess Health to ensure gaps are filled as possible.
- Work with current providers in the service market area to retain their services to Red Bud Regional and the community.
- Evaluate internal processes within Red Bud Regional to ensure the best customer experience.

Indicators that support this priority

- Access to specialty care services was one of the primary opportunities identified by the on-site community meetings.
- Chronic disease management was listed as the top need in the community by the community survey respondents.

PLANNING PROCESS & IMPLEMENTATION STRATEGY

- The percentage of patients with chronic conditions is higher than or equal to the state and national averages in COPD, depression, diabetes, heart disease, hypertension, and increased cholesterol. 72.5% of Medicare recipients in this area are treated for at least two (2) chronic conditions.
- The on-site community group identified obstetrical care (pre- and post-delivery) as a top-five need.
- Teen births were higher than the state or national averages.
- The percentage of women who did not obtain prenatal care until the 7th month (or later) of pregnancy or didn't have any prenatal care before delivery was 6.89% compared to Illinois 5.68% and the United States 6.12%.
- The rate of babies born to mothers who reported smoking during their pregnancy was 16.3/100 live births compared to the Illinois rate of 4.8/100 live births.

Anticipated impacts of these actions

- Patients will be able to see needed specialists in the community.
- Patients will seek their care at Red Bud Regional versus other facilities.

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

- Chief Administrative Officer
- Specialty Clinic Practice Manager
- Primary Care Medical Staff
- Specialty Care Providers

Planned collaboration between the hospital and other facilities or organizations:

- Telehealth resources
- Deaconess Health
- Independent Healthcare Providers

3. COMMUNITY COLLABORATION: Improve community coordination by developing and maximizing health service partnerships.

Actions the hospital intends to take to address the health need

- Support and participate in the economic development committee in the community to create partnerships that will support the community's needs, such as access to jobs, access to healthy foods, transportation needs, housing needs, etc.
- Support and participate in (or develop) inner agency group meetings to ensure agencies understand what each does and the priorities that each is trying to address. This will potentially reduce duplication of services and allow more agency collaboration.
- Investigate the development of a resource guide to assist agencies and patients/residents in finding needed resources. This could include special needs groups (veterans, homeless, disabled, etc.).
- Develop charity care policy education for the community and share with providers.

PLANNING PROCESS & IMPLEMENTATION STRATEGY

Indicators that support this priority

- The on-site community group identified needs related to homelessness and lower socioeconomic sectors (access to healthy foods, transportation, etc.) as one of the top five opportunities.
- The community survey participants identified basic needs (healthy foods, adequate housing, transportation, healthcare, etc.) as one of the top five needs in the community.
- 20% of the community survey participants indicated that they had not gotten needed prescription medication in the past year because they could not afford it.
- 12.5% of the community survey participants needed or sought assistance from a food pantry in the past year.
- 22.18% of the community suffers from low food access. Low income and food access of 18.37% is higher than the state average of 16.57%. 10.7% of households in Randolph County receive state food assistance.
- 3.71% of students and youth enrolled in public schools (2019-2020) were defined as homeless. Homeless people may be sharing a household with other people, living in motels/hotels/campgrounds, in shelters, or maybe unsheltered. The state average is 2.16%.

Anticipated impacts of these actions

- Patients and community members will be able to meet their basic needs in their community. They will know where the resources are and will be able to get referrals to the appropriate agencies.
- Community agencies will be able to maximize their impact by working together to share resources.

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

- Chief Administrative Officer
- Specialty Clinic Practice Manager
- Primary Care Medical Staff

Planned collaboration between the hospital and other facilities or organizations:

- Community healthcare and social services partners
- Faith community
- Civic organizations
- Food pantries
- Homeless shelters/resources

Notes:

1. Statistics may vary slightly depending on the resource.

DATA

Data is an essential part of the Community Health Needs Assessment (CHNA). Secondary data is used as an adjunct to the anecdotal data gathered within the community. It is used to benchmark community data against state and national benchmarks and allows the entity to review and confirm or refute their intuitions about their community.

Healthy People 2030 was developed by the U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion with the goal of creating initiatives for health improvement based on national data. They have defined the Social Determinants of Health (SDOH) as the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. The areas of focus were developed to represent the broad categories/factors that can impact overall health.

Five areas of focus were defined as follows:

- **Education Access and Quality:** This includes access to educational opportunities, ranging from pre-school to post-secondary educational levels, vocational training, literacy levels, educational achievement, and language.
- **Economic Stability:** This includes employment levels, income, expenses/debt, and support.
- **Social and Community Context:** This includes homelessness, vehicle access, teen birth rates, juvenile and overall crime rates, and young people not in school and not working.
- **Healthcare Access and Quality:** Access to insurance, insurance types, access to primary and dental care, primary care utilization including prevention services, hospital and ED utilization, and healthy behaviors will be included in the dataset.
- **Neighborhood and Physical Environment:** This includes housing and transportation costs, environmental hazards, access to broadband and computers, access to fitness/exercise opportunities, and overall access to food.

Each community determines how to best extract their secondary data either by zip codes or counties defined as the entity primary/secondary service areas.

DEMOGRAPHIC DATA

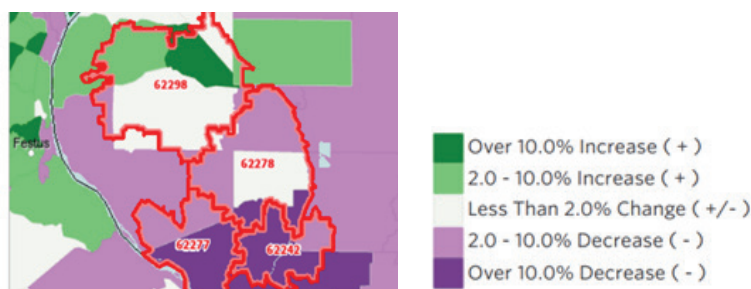
SERVICE AREA DEFINITION

Hospital service area defined by zip code data includes the following rural communities: Red Bud, Ruma, Waterloo, Evansville, and Prairie Du Rocher.

DEMOGRAPHICS DATA

- TOTAL POPULATION CHANGE, 2010-2020

Report Area	Total Population 2010	Total Population 2020	Percentage Change
Red Bud	26350	26979	2.39%
Illinois	12,830,633	12,812,508	-0.14%
United States	312,471,161	334,735,155	7.13%



- POPULATION BY GENDER

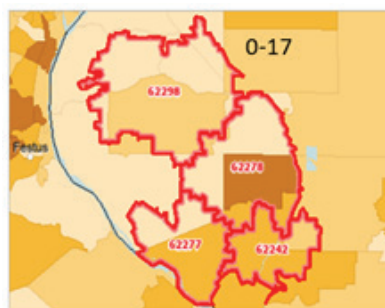
Report Area	Male	Male %	Female	Female %
Red Bud	13357	50.55%	13068	49.45%
Illinois	6,332,176	49.39%	6,489,637	50.61%
United States	163,206,615	49.50%	166,518,866	50.50%

- POPULATION UNDER AGE 18, AS A PERCENTAGE OF TOTAL POPULATION

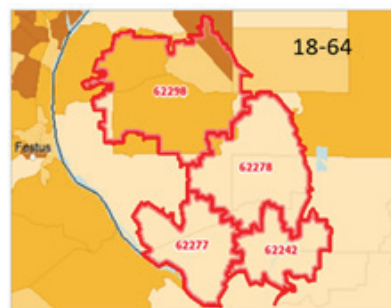
Report Area	Total Pop. <18	% of Total Pop.	Male	Male %	Female	Female %
Red Bud	5524	20.90%	2837	21.24%	2687	20.56%

- PERCENTAGE OF POPULATION, BY AGE GROUPS

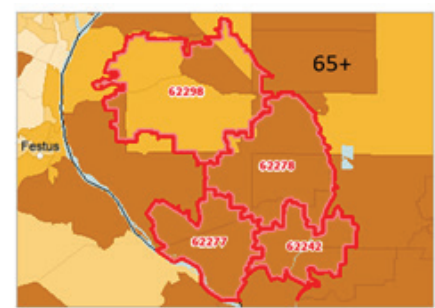
Report Area	< 18	18 – 64	65+
Red Bud	20.90%	58.61%	20.49%



Over 26.0%
23.1 - 26.0%
20.1 - 23.0%
Under 20.1%



Over 63.0%
60.1 - 63.0%
57.1 - 60.0%
Under 57.1%

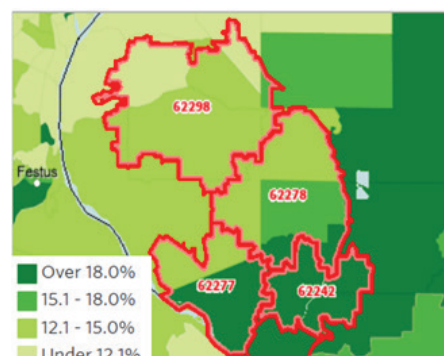


Over 20.0%
16.1 - 20.0%
12.1 - 16.0%
Under 12.1%

- POPULATION WITH ANY DISABILITY: this reports the percentage of the total civilian non-institutionalized population with a disability.

Report Area	% with a Disability
Red Bud	13.44%
Illinois	11.57%
United States	12.86%

Report Area	Under 18	18-64	65+
Red Bud	5.96%	9.63%	32.51%
Illinois	3.66%	8.97%	31.73%
United States	4.41%	10.32%	33.36%



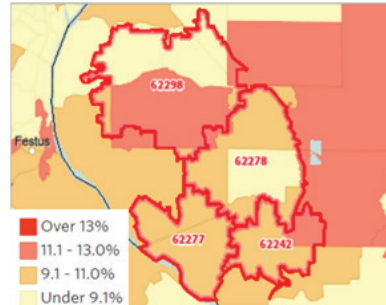
Over 18.0%
15.1 - 18.0%
12.1 - 15.0%
Under 12.1%

- DISABILITY BY TYPE

Report Area	Hearing	Vision	Cognitive	Ambulatory	Self-Care	Independent Living
Red Bud	5.12%	2.03%	4.36%	7.33%	2.38%	5.61%

- VETERAN POPULATION: the percentage of the population > age 18 that served but are not currently on active duty.

Service Area	Veterans %
Red Bud	9.02%
Illinois	5.23%
United States	6.64%



PRIMARY DATA

This data was collected at on-site meetings held in June 2024. Community members, providers, leaders, and employees of Red Bud Regional Hospital contributed to this data.

ATTENDEES:

Red Bud Onsite June 5, 2024

RBRH Board member (2)	Hospice of Southern Illinois (3)	ComWell (2)
City of Red Bud (2)	Randolph County YMCA	Birth to Five Illinois
Community Foundation of Red Bud	Red Bud Community members (4)	North County News
Red Bud Community YMCA	National Alliance on Mental Health SWI	Perandoe Special Education District

The attendees were polled at the facilitated meetings using the SOAR analysis tool.

STRENGTHS

We care about each other/small town feel - 6

ComWell: mental health - 4

Mental, substance, trauma, crisis, psych

Strong schools - 4

Strong industrial/jobs base: RBI, Steel Corp/economic stability - 3

Compassionate care - 3

Healthy Community Alliance: community-based collaboration - 2

Strong social community support - 2

Increased mental health support

Transportation – MRTB serves smaller communities as well as Red Bud

Established staff – long-term, high-quality - 2

Close to a medical center in St Louis

Stable financially - 2

Easy access

Good technology

Service offerings of hospital/specialists - 2

Urgent care

Affordable housing/utilities

Updated resources guide

NFP status

Medical staff – quality, engagement

Strong SWB program

OPPORTUNITIES

More specialties/that stay long-term - 4

A nursing home in the community closed - 3

OB deliveries/pre & post-natal care - 2

CAH reimbursement maximization

Health insurance reimbursement challenges

Providers with knowledge of special needs care

Support groups

Decrease cost of HC overall

Mobile unit to reach outlying areas

Staffing gaps

Homeless needs - 2

Affordable updates for technology

Transportation: esp. after hours - 2

Dental care for uninsured/Medicaid

The community doesn't know what is offered

Build urgent care

Reach the younger population – earlier to make good health choices

Health education for schools and community

Dementia friendly community

Pediatric care

Programs for youth - 2

Vocational training programs

Financial assistance for un or underinsured

Resources for Spanish speaking population

Early intervention for children – Pact in the county but not Red Bud

ASPIRATIONS

All can receive care regardless of ability to pay, race, etc. Without bias - 4

Programs and care for elderly - 4

Staffing gaps filled - 3

New/remodeled building; services including prevention under one roof - 3

Broader reach into outlying areas/increased awareness of services - 2

Solid peds program

Destination place for clinicians

HeadStart

Prenatal care: CPR, first aid, etc. - 2

Community collaboration so people don't fall through the cracks/no silos - 2

More specialists

New ED


Medicaid dentist

Community center - 2

Collaborated care mental, physical, etc.

RED BUD REGIONAL HOSPITAL QUESTIONNAIRE

Q1

 Save as ▼

In what county do you live?

Answered: 40 Skipped: 0

RESPONSES (40)

WORD CLOUD

TAGS (0)

Cloud View

List View

▼ Randolph

62.50%


25

▼ Monroe

20.00%

8

Q2

 Save as ▼

What is the zip code of your residence?

Answered: 40 Skipped: 0

RESPONSES (40)

WORD CLOUD

TAGS (0)

Cloud View

List View

▼ 62278

52.50%

21

▼ 62298

10.00%


4

▼ 62286

7.50%

3

Q3

 Save as ▼

How many people live in your household? Include everyone who has lived there for at least 2 months including yourself. Include anyone who is staying at your residence for less than 2 months, that has no other place to stay. DO NOT include anyone who is living another place for more than 2 months - like a college student living at school or a person in the Armed Forces on deployment.

Answered: 40 Skipped: 0

1-8


3-8

5-3

2-6

4-15

Q4

 Save as ▼


How many children younger than 18 years of age live in your household?

Answered: 40 Skipped: 0

0 – 21 2 – 13

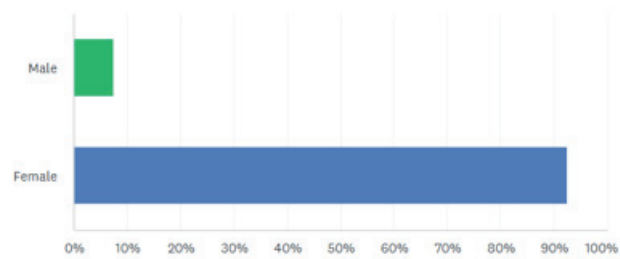
1 – 4 3 – 2

Q5

 Customize Save as ▼


What is your sex?

Answered: 40 Skipped: 0



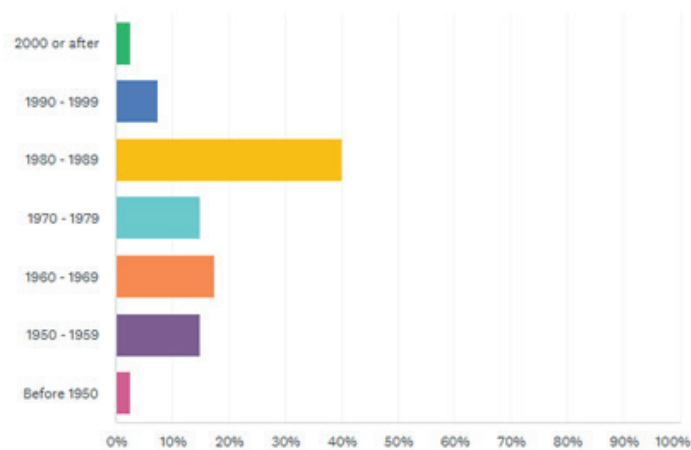
ANSWER CHOICES	RESPONSES
▼ Male	7.50% 3
▼ Female	92.50% 37
TOTAL	40

Q6

 Customize Save as ▼

What is your year of birth?

Answered: 40 Skipped: 0



Q7

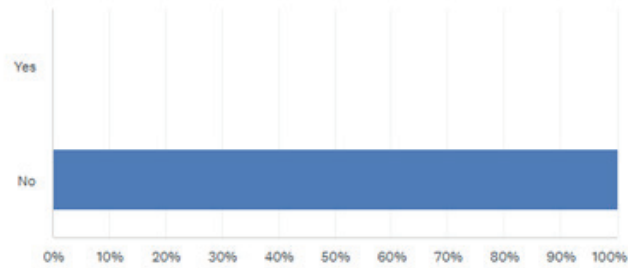


Customize

Save as ▼

Are you of Hispanic, Latino or Spanish origin?

Answered: 40 Skipped: 0



Q8

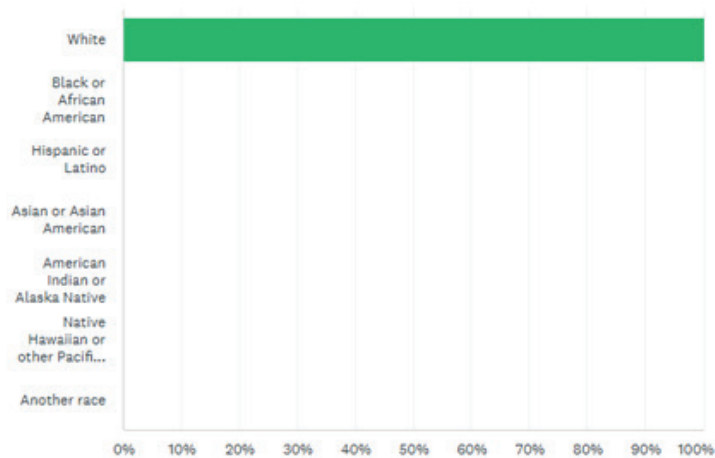


Customize

Save as ▼

What is your race?

Answered: 40 Skipped: 0



Q9

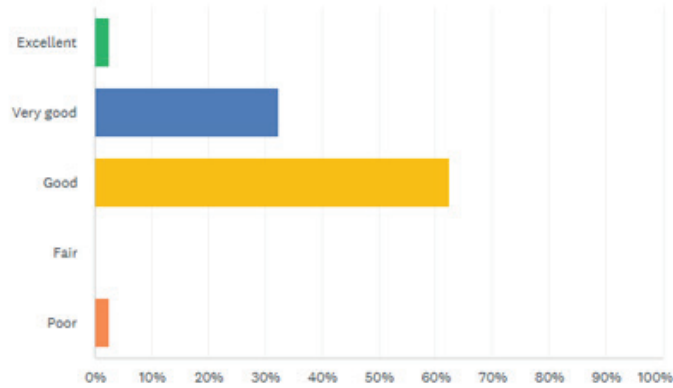


Customize

Save as ▼

Would you say your overall general health is

Answered: 40 Skipped: 0



ANSWER CHOICES	RESPONSES
Excellent	2.50% 1
Very good	32.50% 13
Good	62.50% 25
Fair	0.00% 0
Poor	2.50% 1
TOTAL	40

Q10



Customize

Save as ▼

Regarding your personal health, would you say that in general...

Answered: 40 Skipped: 0

	EXCELLENT	VERY GOOD	GOOD	FAIR	POOR	TOTAL	WEIGHTED AVERAGE
Your physical health is...	2.50% 1	22.50% 9	60.00% 24	12.50% 5	2.50% 1	40	2.90
Your mental health is...	7.50% 3	27.50% 11	42.50% 17	15.00% 6	7.50% 3	40	2.88
Your social well-being is...	10.00% 4	30.00% 12	45.00% 18	10.00% 4	5.00% 2	40	2.70

Q11



Customize

Save as ▼

Do you currently have any of the following types of healthcare coverage?
Please make a selection for EACH row.

Answered: 40 Skipped: 0

	YES	NO	DO NOT KNOW	TOTAL	WEIGHTED AVERAGE
Medicaid	5.41% 2	91.89% 34	2.70% 1	37	1.97
Medicare	18.92% 7	78.38% 29	2.70% 1	37	1.84
Private (employer based, self-insured)	86.84% 33	10.53% 4	2.63% 1	38	1.16
Public (Marketplace, Obamacare)	0.00% 0	97.14% 34	2.86% 1	35	2.03

Q13



Customize

Save as ▼

Do you have a person you think of as your personal doctor or healthcare provider?

Answered: 40 Skipped: 0

ANSWER CHOICES ▼	RESPONSES ▼	
▼ Yes	92.50%	37
▼ No	7.50%	3
▼ Do not know	0.00%	0
TOTAL		40

Q14



Customize

Save as ▼

Within the past 12 months, have you received any of the following health-related services? Select one answer for EACH row.)

Answered: 40 Skipped: 0

▼	YES ▼	NO ▼	DO NOT KNOW ▼	TOTAL ▼	WEIGHTED AVERAGE ▼
▼ Dental care	53.85% 21	46.15% 18	0.00% 0	39	1.46
▼ Mental health care	17.50% 7	82.50% 33	0.00% 0	40	1.82
▼ Drug or alcohol treatment	0.00% 0	100.00% 39	0.00% 0	39	2.00
▼ Tobacco/smoking cessation	0.00% 0	100.00% 39	0.00% 0	39	2.00
▼ Getting prescription medications	90.00% 36	10.00% 4	0.00% 0	40	1.10
▼ Getting immunizations, such as a flu shot or others	77.50% 31	22.50% 9	0.00% 0	40	1.23
▼ Care related to birth control	23.68% 9	76.32% 29	0.00% 0	38	1.76
▼ Prenatal or well-baby care	5.13% 2	94.87% 37	0.00% 0	39	1.95
▼ Women, Infants & Children (WIC) supported services	0.00% 0	100.00% 39	0.00% 0	39	2.00
▼ Food Stamps or SNAP	5.13% 2	94.87% 37	0.00% 0	39	1.95
▼ Chronic disease care, such as for diabetes or heart disease	28.21% 11	71.79% 28	0.00% 0	39	1.72
▼ Acute care, such as for an ear infection, cough, injury or fall	52.50% 21	47.50% 19	0.00% 0	40	1.48
▼ Annual routine physical examination	80.00% 32	20.00% 8	0.00% 0	40	1.20

Q15



Customize

Save as ▼

During the past 12 months, were there any times you needed prescription medicine but did not get it because you could not afford it?

Answered: 40 Skipped: 0

ANSWER CHOICES ▼	RESPONSES ▼
▼ Yes	20.00% 8
▼ No	80.00% 32
▼ Do not know	0.00% 0
TOTAL	40

Q16



Customize

Save as ▼

There are some things in life that make it easier for us to be healthy and other things that make it harder for us to be healthy. How would you rate the following in terms of if they impact your ability to be healthy?

Answered: 40 Skipped: 0

▼	MAKES IT EASIER FOR ME TO BE HEALTHY ▼	DOES NOT HAVE ANY INFLUENCE ON MY HEALTH ▼	MAKES IT MORE DIFFICULT FOR ME TO BE HEALTHY ▼	DOES NOT EXIST IN MY COMMUNITY ▼	TOTAL ▼	WEIGHTED AVERAGE ▼
▼ Access to health insurance coverage	80.00% 32	15.00% 6	5.00% 2	0.00% 0	40	1.25
▼ Availability of transportation	55.00% 22	37.50% 15	2.50% 1	5.00% 2	40	1.57
▼ Access to parks, trails or outdoor activities	75.00% 30	22.50% 9	0.00% 0	2.50% 1	40	1.30
▼ Access to community recreational centers	42.50% 17	40.00% 16	2.50% 1	15.00% 6	40	1.90
▼ Access to public libraries	35.00% 14	60.00% 24	2.50% 1	2.50% 1	40	1.73
▼ Access to churches or faith based organizations	45.00% 18	55.00% 22	0.00% 0	0.00% 0	40	1.55
▼ Access to providers (doctors, clinics, etc.) in my community	90.00% 36	5.00% 2	5.00% 2	0.00% 0	40	1.15
▼ Availability of fresh fruits and vegetables at stores near me, community gardens or markets	80.00% 32	10.00% 4	5.00% 2	5.00% 2	40	1.35
▼ Access to workplace or employee wellness	67.50% 27	27.50% 11	0.00% 0	5.00% 2	40	1.43
▼ Availability of family support services, such as those related to domestic or relationship violence or family social services	30.00% 12	57.50% 23	5.00% 2	7.50% 3	40	1.90



Please indicate whether you have engaged in any of the following behaviors in the past 12 months. Please select one answer for EACH row.

Answered: 40 Skipped: 0

	YES, WITHIN THE PAST 30 DAYS.	YES, WITHIN THE PAST 6 MONTHS.	YES, WITHIN THE PAST 12 MONTHS.	NO, NOT IN THE PAST 12 MONTHS.	DO NOT KNOW.	TOTAL
▼ I tried to lose weight.	43.59% 17	28.21% 11	10.26% 4	15.38% 6	2.56% 1	39
▼ I tried to maintain/keep a healthy weight.	37.50% 15	27.50% 11	27.50% 11	7.50% 3	0.00% 0	40
▼ I smoked or used tobacco products daily or on most days of the week.	7.50% 3	0.00% 0	7.50% 3	82.50% 33	2.50% 1	40
▼ I smoked vapor/e-cigarettes daily or most days of the week.	12.50% 5	0.00% 0	2.50% 1	82.50% 33	2.50% 1	40
▼ I was physically active daily or most days of the week.	35.00% 14	17.50% 7	17.50% 7	25.00% 10	5.00% 2	40
▼ I got an average of 7 or more hours of sleep most days of the week.	37.50% 15	25.00% 10	20.00% 8	17.50% 7	0.00% 0	40
▼ I ate home cooked meals daily or on most days of the week.	37.50% 15	17.50% 7	32.50% 13	12.50% 5	0.00% 0	40
▼ I ate fruits and vegetables with most of my meals daily or on most days of the week.	32.50% 13	17.50% 7	22.50% 9	25.00% 10	2.50% 1	40
▼ I consumed sugar sweetened drinks daily or on most days of the week. (ex. regular soda, Kool-Aid, etc.)	25.00% 10	10.00% 4	15.00% 6	50.00% 20	0.00% 0	40
▼ I drank at least 2 or more alcoholic drinks daily or on most days of the week. (Includes beer, wine or any liquor).	2.50% 1	2.50% 1	15.00% 6	75.00% 30	5.00% 2	40
▼ I sought medical services in an urgent care clinic.	12.50% 5	22.50% 9	10.00% 4	52.50% 21	2.50% 1	40
▼ I participated in cancer screening. (Include any cancer screening: mammogram, occult blood, etc.)	12.50% 5	5.00% 2	37.50% 15	40.00% 16	5.00% 2	40
▼ I was injured from a fall.	0.00% 0	0.00% 0	2.50% 1	90.00% 36	7.50% 3	40
▼ I met with social groups or friends in my community.	41.03% 16	23.08% 9	7.69% 3	25.64% 10	2.56% 1	39
▼ I engaged in unprotected sex. (Do not include your mate.)	2.50% 1	0.00% 0	0.00% 0	90.00% 36	7.50% 3	40
▼ I shared needles with another person for medication or drugs.	0.00% 0	0.00% 0	0.00% 0	92.50% 37	7.50% 3	40
▼ I had sexual activity with another person (not my mate) while under the influence of alcohol.	0.00% 0	0.00% 0	0.00% 0	92.50% 37	7.50% 3	40
▼ I received the flu shot.	15.00% 6	20.00% 8	47.50% 19	15.00% 6	2.50% 1	40
▼ I received vaccines other than a flu shot.	12.50% 5	10.00% 4	15.00% 6	57.50% 23	5.00% 2	40

Q18

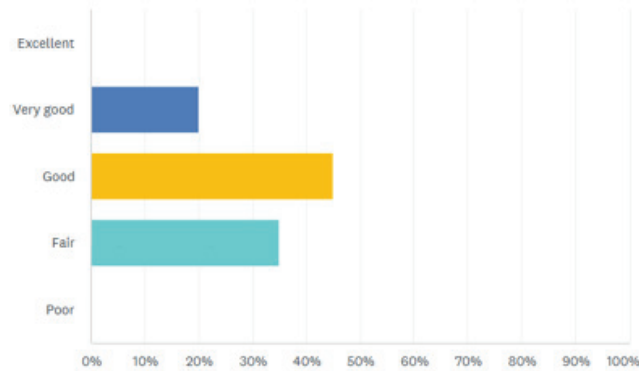


Customize

Save as ▼

In your opinion, how would you rate the overall health of your community?

Answered: 40 Skipped: 0



Q19



Customize

Save as ▼

What do you think are the FIVE most important health issues in your community?

Answered: 40 Skipped: 0

ANSWER CHOICES ▼	RESPONSES ▼	
▼ Basic needs: food, shelter, safety, transportation, access to medical care	52.50%	21
▼ Injuries: gun related, car accidents, 4-wheeler accidents, falls	17.50%	7
▼ Substance abuse: tobacco, alcohol, meth, heroin, prescription drugs	77.50%	31
▼ Child abuse/Safety: child abuse or neglect	7.50%	3
▼ Chronic diseases: diabetes, cancer, heart disease, stroke, high blood pressure, high cholesterol	85.00%	34
▼ Infectious diseases: HIV, chlamydia or other STDs, Hepatitis, food poisoning	2.50%	1
▼ Well-baby: prenatal care, after care for mother and newborns, teen pregnancy, unintended or unplanned pregnancy	17.50%	7
▼ Obesity: eating unhealthy foods, lack of healthy foods	77.50%	31
▼ Lack of exercise: physical inactivity, poor access to walking paths, sidewalks, parks, recreational activities	52.50%	21
▼ Mental/behavioral health: depression, stress, anxiety	72.50%	29
Total Respondents: 40		



When you think of how your county, city or town allocates resources (both staff and programming), how important is it to you that resources are spend on each item below?

Answered: 40 Skipped: 0

	VERY IMPORTANT	SOMEWHAT IMPORTANT	NOT VERY IMPORTANT	NOT AT ALL IMPORTANT	TOTAL
▼ Clean outdoor air	61.54% 24	30.77% 12	7.69% 3	0.00% 0	39
▼ Clean indoor air	62.50% 25	30.00% 12	7.50% 3	0.00% 0	40
▼ Clean recreational water	67.50% 27	27.50% 11	5.00% 2	0.00% 0	40
▼ Recycling programs	51.28% 20	38.46% 15	10.26% 4	0.00% 0	39
▼ Access to healthy or fresh foods	82.50% 33	17.50% 7	0.00% 0	0.00% 0	40
▼ Available and accessible mental health services	75.00% 30	22.50% 9	2.50% 1	0.00% 0	40
▼ Teen pregnancy interventions	55.00% 22	32.50% 13	12.50% 5	0.00% 0	40
▼ Domestic violence prevention	75.00% 30	17.50% 7	7.50% 3	0.00% 0	40
▼ Child abuse prevention	80.00% 32	15.00% 6	5.00% 2	0.00% 0	40
▼ Youth violence prevention	70.00% 28	20.00% 8	10.00% 4	0.00% 0	40
▼ Illegal prescription drug use prevention	70.00% 28	25.00% 10	2.50% 1	2.50% 1	40
▼ Tobacco use prevention	52.50% 21	32.50% 13	15.00% 6	0.00% 0	40
▼ Drug use or addiction services	74.36% 29	23.08% 9	2.56% 1	0.00% 0	39
▼ Meth and heroin use prevention programs	70.00% 28	25.00% 10	5.00% 2	0.00% 0	40
▼ Impaired driving prevention	75.00% 30	22.50% 9	2.50% 1	0.00% 0	40
▼ Access to healthcare	95.00% 38	2.50% 1	2.50% 1	0.00% 0	40
▼ Access to birth control	72.50% 29	20.00% 8	7.50% 3	0.00% 0	40
▼ Access to safe recreational opportunities	72.50% 29	25.00% 10	2.50% 1	0.00% 0	40
▼ Pest management	22.50% 9	65.00% 26	12.50% 5	0.00% 0	40
▼ Access to trails and walking paths	60.00% 24	35.00% 14	5.00% 2	0.00% 0	40
▼ Affordable housing	75.00% 30	25.00% 10	0.00% 0	0.00% 0	40
▼ Food availability	82.50% 33	17.50% 7	0.00% 0	0.00% 0	40
▼ Food safety	80.00% 32	17.50% 7	2.50% 1	0.00% 0	40
▼ Bike lanes or paths	37.50% 15	45.00% 18	17.50% 7	0.00% 0	40
▼ Services for aging	79.49% 31	17.95% 7	2.56% 1	0.00% 0	39
▼ Services for homeless	60.00% 24	25.00% 10	10.00% 4	5.00% 2	40
▼ Disaster/emergency preparedness or response	65.00% 26	30.00% 12	5.00% 2	0.00% 0	40
▼ Access to good internet services	62.50% 25	27.50% 11	7.50% 3	2.50% 1	40

Q21



Customize

Save as ▾

During the past 12 months, to what extent have you personally experienced the following. (Select one answer for EACH row.)

Answered: 40 Skipped: 0

	OFTEN ▾	SOMETIMES ▾	SELDOM ▾	NEVER ▾	TOTAL ▾
▼ I have been able to talk with a healthcare provider in the language that I am most comfortable with.	95.00% 38	2.50% 1	0.00% 0	2.50% 1	40
▼ I have felt discriminated against by healthcare providers because of my race, ethnicity or culture.	0.00% 0	2.50% 1	7.50% 3	90.00% 36	40
▼ Healthcare providers have communicated with me in a clear and respectful manner.	92.50% 37	2.50% 1	5.00% 2	0.00% 0	40
▼ I have felt discriminated against by a healthcare worker because of my age.	2.50% 1	2.50% 1	7.50% 3	87.50% 35	40

Q22



Customize

Save as ▾

Which of the following best describes your personal/family use of social services within the community in the past 12 months?

Answered: 40 Skipped: 0

	I DID NOT FEEL THE NEED FOR THIS TYPE OF SERVICE. ▾	I FELT I NEEDED HELP IN THIS AREA BUT DID NOT LOOK OR ASK FOR HELP. ▾	I TRIED TO FIND HELP IN THIS AREA, BUT DID NOT KNOW WHO/WHERE TO ASK OR COULD NOT FIND HELP. ▾	I SOUGHT AND RECEIVED THIS KIND OF SERVICE. ▾	TOTAL ▾	WEIGHTED AVERAGE ▾
▼ Food pantry	87.50% 35	7.50% 3	0.00% 0	5.00% 2	40	1.23
▼ Homeless shelter	100.00% 40	0.00% 0	0.00% 0	0.00% 0	40	1.00
▼ Free or emergency childcare help	97.50% 39	2.50% 1	0.00% 0	0.00% 0	40	1.02
▼ Domestic abuse services	100.00% 40	0.00% 0	0.00% 0	0.00% 0	40	1.00
▼ Employment services	97.50% 39	2.50% 1	0.00% 0	0.00% 0	40	1.02
▼ Prenatal programs or breast feeding support	97.37% 37	0.00% 0	0.00% 0	2.63% 1	38	1.08
▼ Mental/behavioral health programs	75.00% 30	7.50% 3	5.00% 2	12.50% 5	40	1.55
▼ Rural transit or city bus services	90.00% 36	7.50% 3	2.50% 1	0.00% 0	40	1.13
▼ Walk in clinic	47.50% 19	0.00% 0	0.00% 0	52.50% 21	40	2.58
▼ Financial help with bills (utility bills, etc.)	85.00% 34	5.00% 2	2.50% 1	7.50% 3	40	1.32
▼ Legal help	89.74% 35	5.13% 2	0.00% 0	5.13% 2	39	1.21
▼ STI/STD testing, treatment or prevention	100.00% 40	0.00% 0	0.00% 0	0.00% 0	40	1.00
▼ Help with my health insurance (regardless of how it is provided)	85.00% 34	2.50% 1	5.00% 2	7.50% 3	40	1.35
▼ Substance abuse services	100.00% 40	0.00% 0	0.00% 0	0.00% 0	40	1.00

Q23

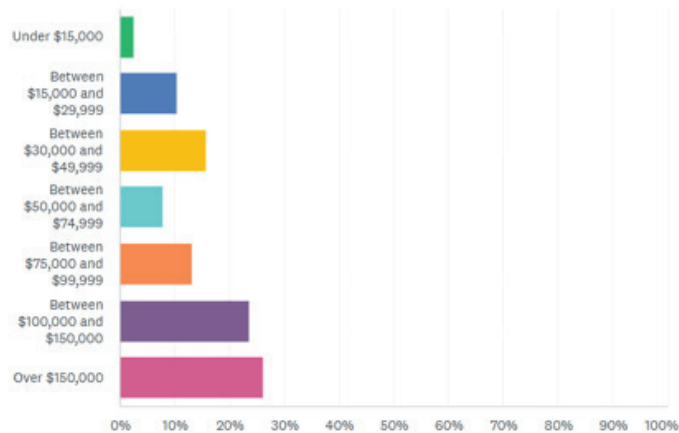


Customize

Save as ▼

Considering all sources of income, what would you estimate your total household income to be - before taxes in the most recent year?

Answered: 38 Skipped: 2



Q24



Customize

Save as ▼

Which of the following best describes your current employment status?

Answered: 40 Skipped: 0

ANSWER CHOICES ▼	RESPONSES ▼	
▼ Employed for wages - full time	80.00%	32
▼ Employed for wages - part time	7.50%	3
▼ Self employed	0.00%	0
▼ Out of work for 1 year or more	0.00%	0
▼ Out of work for less than 1 year	0.00%	0
▼ Homemaker	0.00%	0
▼ Student	0.00%	0
▼ Retired	15.00%	6
▼ Unable to work	2.50%	1
Total Respondents: 40		

Q25

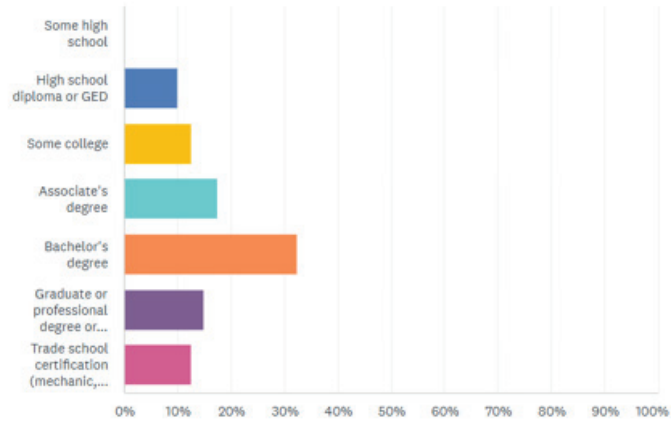


Customize

Save as ▼

Which best describes your highest level of education completed?

Answered: 40 Skipped: 0



Q26



Customize

Save as ▼

How frequently have you used websites to help you find medical information?

Answered: 40 Skipped: 0

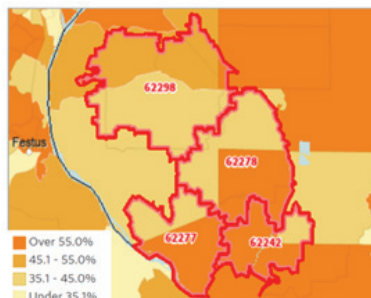
	OFTEN	SOMETIMES	SELDOM	NEVER	N/A - I DO NOT HAVE ACCESS TO WEBSITES VIA MY CELL PHONE OR ON A COMPUTER.	TOTAL	WEIGHTED AVERAGE
▼ Google, Bing, Yahoo	55.00% 22	40.00% 16	5.00% 2	0.00% 0	0.00% 0	40	1.50
▼ Facebook or other social media platforms	15.38% 6	20.51% 8	20.51% 8	43.59% 17	0.00% 0	39	2.92
▼ Medical sites (WebMD, Amercian Cancer Society, etc.)	45.00% 18	32.50% 13	10.00% 4	12.50% 5	0.00% 0	40	1.90
▼ Local hospital website	10.26% 4	17.95% 7	33.33% 13	38.46% 15	0.00% 0	39	3.00

EDUCATION ACCESS & QUALITY

GOAL: Increase educational opportunities and help children and adolescents do well in school.

- People with higher levels of education are more likely to live long, healthy lives
- Children from low-income families, children with disabilities, and children who suffer social discrimination are more likely to struggle with math and reading
 - They are less likely to graduate from high school or attend college.
- The stress of living in poverty, like poor nutrition, can affect children's brain development, making it harder for them to do well in school
- ACCESS TO PRE-K: This indicator reports the percentage of the population aged 3-4 enrolled in preschool

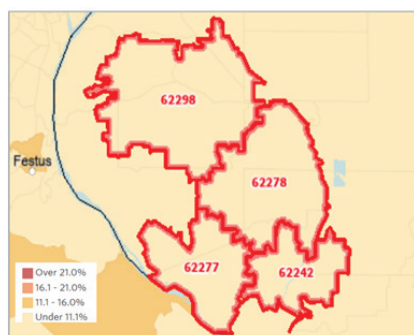
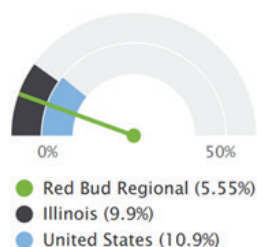
Report Area	Pop. Age 3-4 Enrolled In School
Red Bud	52.26%
Illinois	51.94%
United States	45.62%



- EDUCATIONAL ATTAINMENT: This indicator shows the distribution of the highest level of education achieved in the report area

Report Area	No High School Diploma	High School Only	Some College	Associate's Degree	Bachelor's Degree	Graduate Degree
Red Bud	5.55%	29.11%	24.71%	11.79%	18.79%	10.05%
Illinois	9.9%	25.3%	19.8%	8.3%	22.0%	14.7%
United States	10.9%	26.4%	19.7%	8.7%	20.9%	13.4%

- POPULATION WITH NO HIGH SCHOOL DIPLOMA:

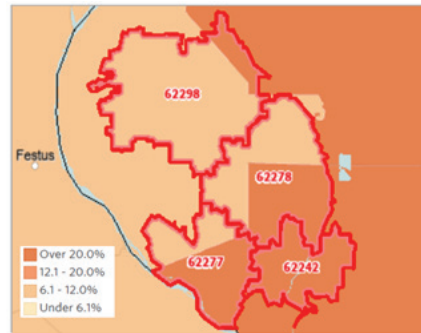


- HIGH SCHOOL DROPOUT RATES BY COUNTY

	Total Students	Graduates	Dropout	Dropout Rate
Randolph County	4001	309	15	4.63%
Illinois	145,470	138,463	7007	4.81%

- CHONIC ABSENCE RATES: This indicator reports chronic absenteeism rate: students who were absent 15 or more school days (in the most recent school year).

Report Area	Chronic Absence Rates
Red Bud	11.06%
Illinois	16.61%
United States	15.87%



- PROFICIENCY: This indicator shows 4th-grade performance on standardized math and language arts testing.

Report Area	Students Scoring "Not Proficient" or Worse in Math	Students Scoring "Not Proficient" or Worse in Language Arts
Red Bud	64.3%	49.5%
Illinois	81.9%	77.7%
United States	63.9%	60.1%

- P- HOUSEHOLDS WITH NO COMPUTER

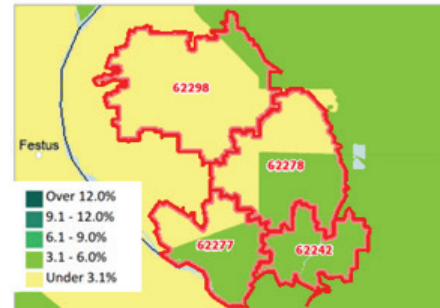
Report Area	% of Households with No Computer
Red Bud	8.71%
Illinois	6.47%
United States	6.05%

ECONOMIC STABILITY

GOAL: Help people earn steady incomes to meet their health needs.

- In the US, 1 in 10 people live in poverty.
- People with steady employment are less likely to live in poverty.
- People with disabilities, injuries, or medical conditions may be more limited in the work they can do.
- Underemployed people may not be able to afford the things they need to stay healthy.
- UNEMPLOYMENT: Average monthly unemployment rate, April 2023 to April 2024

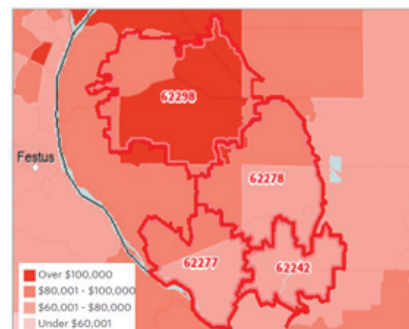
Report Area	Unemployment Rate
Red Bud	3.2%
Illinois	4.4%
United States	3.5%



- MEDIAN HOUSEHOLD INCOME: income based on the latest 5-year American Community Survey.

Report Area	Average Household Income
Red Bud	\$124,823
Illinois	\$130,956
United States	\$124,530

Median Household Income = \$104,510



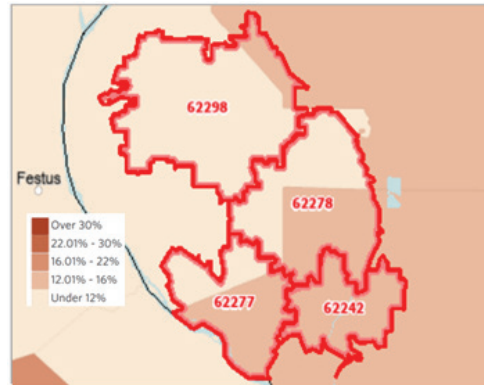
- HOUSEHOLDS BY HOUSEHOLD INCOME LEVELS, PERCENT

Report Area	Under \$25,000	\$25,000 - \$49,000	\$50,000 - \$99,000	\$100,000 - \$199,999	\$200,000+
Red Bud	13.47%	14.61%	30.36%	31.62%	9.94%
Illinois	15.46%	17.14%	28.29%	27.04%	12.07%
United States	15.71%	18.11%	28.88%	25.88%	11.41%

- **POVERTY: TOTAL POPULATION BELOW 100% OF THE FEDERAL POVERTY LEVEL.** FPL FOR 2023 IS \$30,000 FOR A FAMILY OF FOUR.

Report Area	Pop. In Poverty
Red Bud	10.02%
Illinois	11.90%
United States	12.60%

Randolph County 12.5%
St. Clair County 13.8%



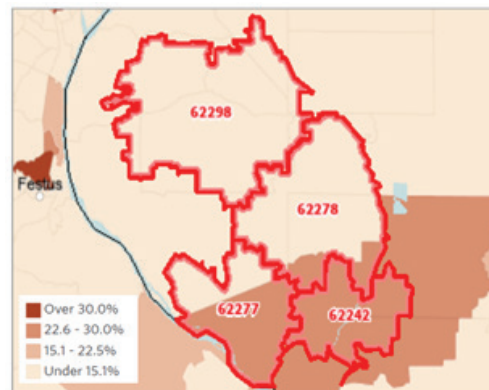
- **POVERTY: PERCENT OF POPULATION IN POVERTY BY RACE/ETHNICITY**

Report Area	Hispanic/ Latino	Non-Hispanic White	Black or African American	Multiple Races
Red Bud	3.33%	5.23%	62.96%	2.24%
Illinois	13.89%	8.70%	24.80%	13.0%
United States	17.24%	10.09%	21.46%	14.76%

- **CHILDREN BELOW 100% FEDERAL POVERTY LEVEL:** Children under age 18 living in households with income below the FPL. This is relevant because poverty creates barriers to accessing health services, healthy foods, and other necessities, contributing to poor health status.

Report Area	Pop. <18 Living in Poverty
Red Bud	7.48%
Illinois	15.64%
United States	16.66%

Randolph County 15.17%
St. Clair County 20.54%

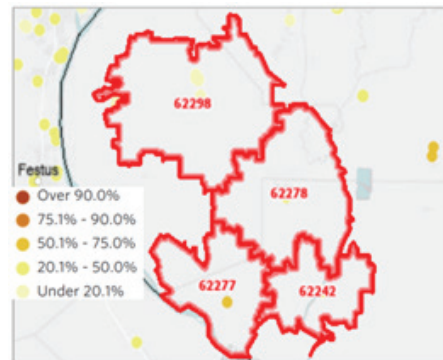


- **CHILDREN IN POVERTY BY RACE/ETHNICITY**

Report Area	Non-Hispanic White	Hispanic or Latino	Multiple Races
Red Bud	7.78%	6.73%	5.34%
Illinois	9.1%	14.59%	15.6%
United States	10.4%	14.50%	17.7%

- CHILDREN ELIGIBLE FOR FREE OR REDUCED LUNCH

Report Area	2019-2020
Red Bud	37.8%
Illinois	48.7%
United States	52.1%

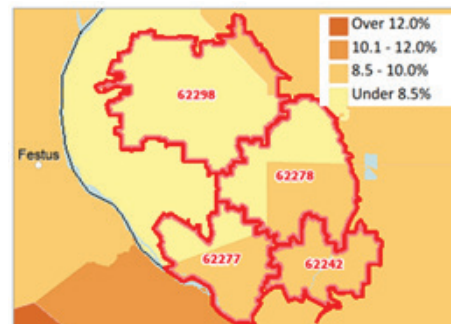


- SNAP BENEFITS: Households receiving Supplemental Nutritional Assistance Program benefits.

Report Area	% of Households Receiving SNAP
Red Bud	6.75%
Illinois	12.59%
United States	11.37%

- FOOD INSECURITY: the estimated percentage of the population that experienced food insecurity; the household level economic and social condition of limited or uncertain access to adequate food.

Report Area	Food Insecurity Rate
Red Bud	6.17%
Illinois	8.62%
United States	10.28%



- FOOD INSECURE CHILDREN: the estimated percentage of the population under age 18 that experienced food insecurity at some point during the reporting year.

Report Area	% of Food Insecure Children
Monroe County	0.8%
Randolph County	11.5%
St. Clair County	15.6%
Illinois	10.76%
United States	13.30%

- **SODA EXPENDITURES:** estimated expenditures for carbonated beverages as a percentage of total at home food expenditures.

Report Area	Soda as a % of Food-at-Home
Red Bud	4.33%
Illinois	4.13%
United States	4.02%

- **FRUIT & VEGETABLE EXPENDITURES:** estimated expenditure for fruits and vegetables purchased for in-home consumption, as a percentage of total food purchased for in-home consumption.

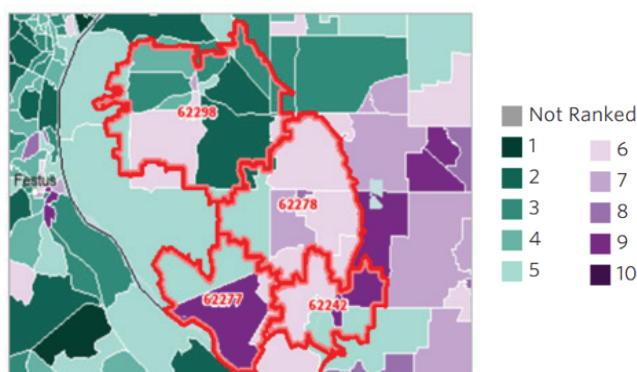
Report Area	Fruits/Vegetables as a % of Food-at-Home
Red Bud	12.01%
Illinois	12.52%
United States	12.68%

COMMUNITY & SOCIAL CONTEXT

GOAL: Increase social and community support

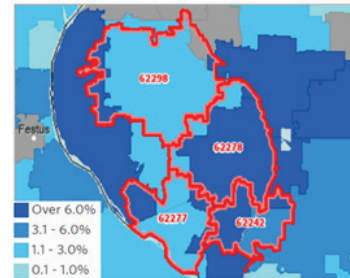
- People's relationships and interactions with family, friends, and community members can majorly impact their health and well-being
- Many people face challenges and dangers they cannot control
 - Unsafe neighborhoods
 - Discrimination
 - Poverty
 - A spouse or parent who is incarcerated
- **AREA DEPRIVATION INDEX:** This index ranks neighborhoods and communities relative to all neighborhoods across the nation and state. It is based on 17 measures related to four primary domains (Education, Income and employment, Housing, and Household Characteristics). The overall scores are measured on a scale of 1 to 100, where one is the lowest level of deprivation and 100 is the highest

Report Area	State Percentile	National Percentile
Red Bud	51	53
Illinois		51
United States		46



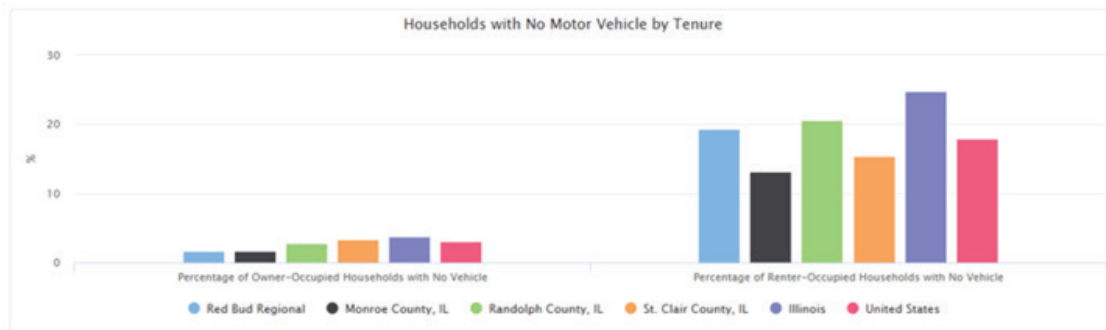
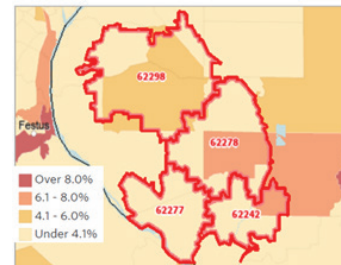
- *HOMELESS CHILDREN AND YOUTH: indicates the number of homeless youths attending public school in the 2019-2020 school year. Homelessness may be defined as sharing the household of other people, living in motels/campgrounds, in shelters or may be unsheltered.*

Report Area	Homeless Students
Red Bud	3.71%
Illinois	2.16%
United States	2.77%



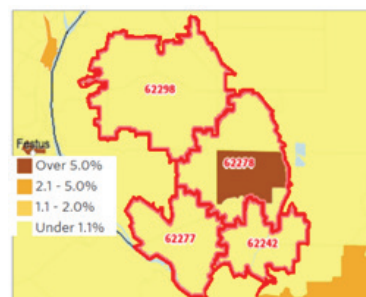
- *HOUSEHOLDS WITH NO MOTOR VEHICLE*

Report Area	Households with no Motor Vehicle
Red Bud	4.70%
Illinois	10.81%
United States	8.33%



- *TEEN BIRTH RATES: this reports the seven-year average number of births per 1000 female population ages 15 – 19*

Report Area	Teen Birth/1000 females
Red Bud	8.52
Illinois	7.12
United States	9.63



- *STI – Sexually Transmitted Infection Rate per 100,000 population.*

Report Area	Chlamydia	Gonorrhea	HIV
Red Bud	187.75	57.97	0.92
Illinois	566.91	240.3	11.1
United States	495.5	214.0	12.70
St. Clair County	774.74	402.7	13.60

- *LATE OR NO PRENATAL CARE: the percentage of women who did not obtain prenatal care until the 7th month or later.*

Report Area	Late or No Prenatal Care
Red Bud	6.89%
Illinois	5.68%
United States	6.12%

- *JUVENILE ARREST RATES: rate of delinquency cases per 1000 juveniles.*

Report Area	Juvenile Cases/ 1000
Red Bud	7.86
Illinois	5.0
United States	13.88

- *VIOLENT CRIME - TOTAL: includes homicide, rape, robbery, and aggravated assault per 100,000 population over a three-year period of reporting.*

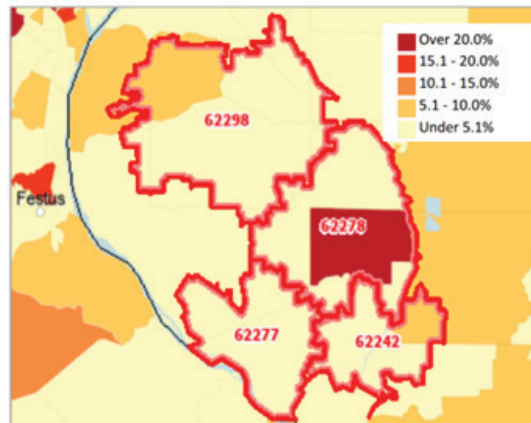
Report Area	Violent Crime Rate/ 100,000
Red Bud	100.40
Illinois	420.90
United States	416.00

- *CRIME BY TYPE:*

	Property Crimes	Assault	Rape	Robbery
Red Bud	610.4	67.20	17.10	11.70
Illinois	2022.6	242.50	40.20	130.00
United States	2466.1	261.20	38.60	110.90

- *YOUNG PEOPLE NOT IN SCHOOL AND NOT WORKING: the percentage of youth aged 16-19 not currently enrolled in school or employed.*

Report Area	Pop. Age 16-19 Not in School and Not Employed
Red Bud	4.39%
Illinois	6.32%
United States	6.85%

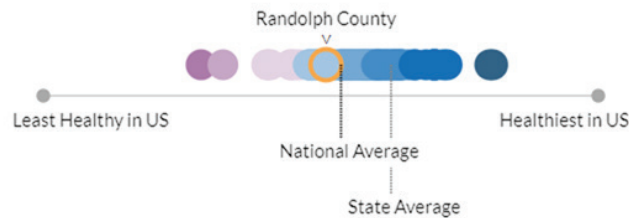


HEALTHCARE ACCESS & QUALITY

GOAL: Increase access to comprehensive, high-quality health care services.

Many people in the United States do not get the healthcare services they need for a variety of reasons.

- 1 in 10 people nationwide do not have health insurance
- Without health insurance, people are less likely to have a primary care provider
- They may not be able to afford the health care services and medications they need
- They are less likely to get needed screenings (like cancer screenings) done
- COUNTY HEALTH OUTCOMES: Health Outcomes tell us how long people live on average within a community, and how much physical and mental health people experience in a community while they are alive. Jefferson County is faring worse than the average county in Illinois for Health Outcomes, and better than the average county in the nation.



- *INSURED POPULATION AND PROVIDER TYPE: Health insurance coverage is considered a key driver of health status. Public health insurance is defined as any government sponsored program*

Report Area	% with Private Health Insurance	% with Public Health Insurance
Red Bud	83.45%	32.31%
Illinois	75.61%	36.21%
United States	74.32%	38.83%

- *POPULATION WITH INSURANCE BY PROVIDER TYPE*
 - Percentages may exceed 100% due to individuals having multiple coverage types.

Report Area	Employer or Union Provided	Direct Purchase	TRICARE or Military	Medicare	Medicaid	VA Health Care
Red Bud	71.73%	14.93%	1.42%	21.48%	11.92%	2.49%
Illinois	63.96%	13.67%	1.54%	25.47%	24.92%	1.76%
United States	60.55%	14.84%	2.97%	19.63%	22.23%	2.44%

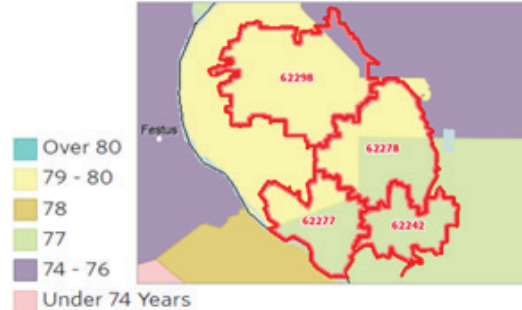
- *UNINSURED POPULATION: the lack of health insurance is a key driver of health status.*

Report Area	White Non-Hispanic	Black or African American	Multiple Races
Red Bud	2.23%	10.19%	1.60%
Illinois	4.37%	8.14%	10.47%
United States	5.97%	9.95%	11.99%

- *UNINSURED POPULATION BY RACE/ETHNICITY*

Report Area	White Non-Hispanic	Black or African American	Multiple Races
Red Bud	2.23%	10.19%	1.60%
Illinois	4.37%	8.14%	10.47%
United States	5.97%	9.95%	11.99%

- *MORTALITY - LIFE EXPECTANCY: reports the average life expectancy at birth. Life expectancy in the service area is 76.1 years, and in Illinois and the United States, 78.6 years.*



- *MORTALITY - BY CONDITION: this reports the crude rate of persons killed per 100,000 population.*

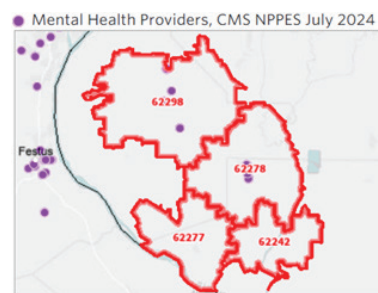
Report Area	MVA Deaths/ Alcohol Involved	MVA Deaths	Suicide	Drug Overdose	Opioid Overdose
Red Bud	0	28.0	11.3	15.8	11.1
Illinois	2.1	8.9	10.9	22.3	18.2
United States	2.6	11.5	13.8	22.4	16.0
Randolph County	4.6				
St. Clair County				32.8	25.7

- *ACCESS TO PRIMARY CARE: the number of primary care providers per 100,000 population.*

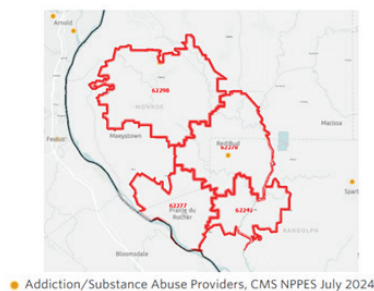
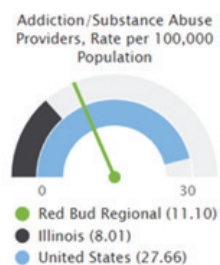
Report Area	Access to Primary Care Physicians	Access to Primary Care Advanced Practice	Access to Primary Care FQHCs
Red Bud	40.94	59.67	20.77
Illinois	81.15	56.05	3.14
United States	76.38	69.35	3.10

- *ACCESS TO MENTAL HEALTH: reports the number of mental health providers/100,000 population.*

Report Area	Access to Mental Health Providers
Red Bud	159.5
Illinois	314
United States	313.7

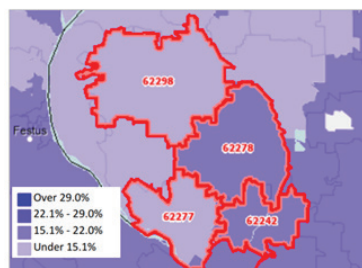


- *ACCESS TO ADDICTION AND SUBSTANCE ABUSE PROVIDERS: the number of providers who specialize in addiction or substance abuse treatments, rehabilitation, addiction medicine, or providing methadone.*



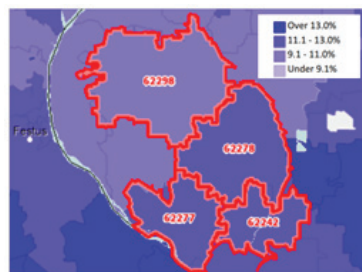
- *POOR OR FAIR HEALTH: the percentage of adults over age 18 who self-report their general health status as "fair" or "poor."*

Report Area	Poor or Fair General Health
Red Bud	13.5%
Illinois	15.43%
United States	16.10%



- **POOR PHYSICAL HEALTH:** The percentage of adults 18 years or older who report 14 or more days during the past 30 days during which their physical health was not good.

Report Area	% Reporting >14/30 Days Health Was Not Good
Red Bud	10.8%
Illinois	10.8%
United States	10.9%

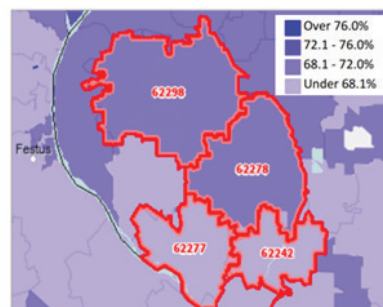


- **CLINICAL CARE AND PREVENTION: CANCER SCREENING, MAMMOGRAM**

Report Area	% Medicare Beneficiaries with Recent Mammogram	% Females Aged 50-74 with Recent Mammogram
Red Bud	37%	75.0%
Illinois	35%	75.1%
United States	33%	78.2%

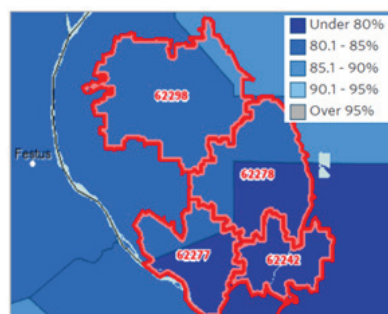
- **CLINICAL CARE AND PREVENTION: CANCER SCREENING – SIGMOIDOSCOPY OR COLONOSCOPY:** the percentage of population aged 50-75 who reported having had 1) fecal occult blood tests (FOBT) within the past two years, 2) sigmoidoscopy within the past five years and FOBT within the past three years, or 3) colonoscopy within the past 10 years.

Report Area	Cancer Screening - GI
Red Bud	68.80%
Illinois	69.1%
United States	72.4%

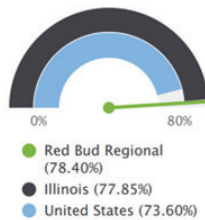


- **CLINICAL CARE AND PREVENTION: DIABETES MANAGEMENT – HEMOGLOBIN A1C (hA1c) TEST:** the percentage of diabetic Medicare beneficiaries who have had a hA1c test administered by a healthcare provider within the past year.

Report Area	Annual hA1C Completed
Red Bud	89.10%
Illinois	88.48%
United States	87.53%



- **PREVENTION: RECENT PRIMARY CARE VISIT; ADULTS:** the percentage of adults >18 years with one or more visits to a doctor for routine checkup within the past year.

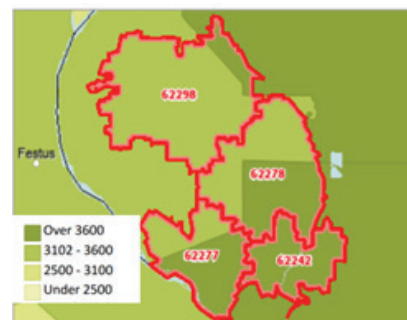


- **PREVENTION: CORE PREVENTATIVE SERVICES FOR MEN & WOMEN:** the percentage of males aged 65 or older who report they are up to date on preventative services including: influenza vaccine within the past year, a pneumococcal vaccine ever, a fecal occult blood test within the past year, a sigmoidoscopy within the past 5 years and FOBT within the past 3 years, or a colonoscopy within the past 10 years. Females include a mammogram within the past two years.

Report Area	Males Core Preventative Complete	Female Core Preventative Complete
Red Bud	45.70%	40.10%
Illinois	42.15%	38.18%
United States	43.70%	37.90%

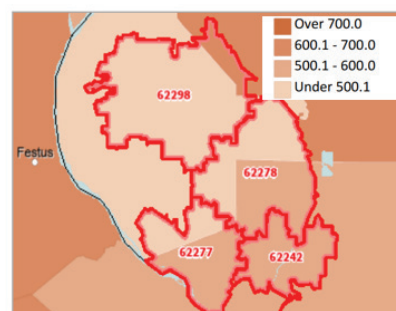
- **HOSPITALIZATION: PREVENTABLE CONDITIONS:** this indicator reports the preventable hospitalization rate among Medicare beneficiaries for the latest reporting period. This includes admission for diabetes with short-term complications, diabetes with long-term complications, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, bacterial pneumonia, or urinary tract infections. Rates are presented per 100,000 beneficiaries.

Report Area	Preventable Hospitalizations
Red Bud	3395
Illinois	3283
United States	2752



- **HOSPITALIZATION: EMERGENCY ROOM VISITS:** this reports the rate of ER visits among Medicare beneficiaries aged 65 or older. The rate is calculated per 1000 beneficiaries.

Report Area	ER Visits
Red Bud	661.4
Illinois	553.0
United States	535.0



- **HOSPITALIZATIONS – INPATIENT STAYS:** This indicator reports the number and rate of hospital stays among Medicare beneficiaries, including the percentage of total beneficiaries with an IP stay and total IP stays rate/1000 beneficiaries.

Report Area	% of Beneficiaries with IP Stay	IP Stays/100,000 Beneficiaries
Red Bud	9.5%	271.9
Illinois	15.6%	248.0
United States	14.4%	223.0

- **HOSPITALIZATION BY CHRONIC CONDITIONS:** Medicare beneficiaries with IP stays rate/1000 beneficiaries. (2018-2020)

Location	IP Stays	Heart Disease	Stroke
Red Bud	271.9	12.86	9.06
Illinois	248.0	11.6	8.8
United States	223.0	10.4	8.0

- **PREVENTION: ANNUAL WELLNESS EXAM (MEDICARE) COMPLETED**

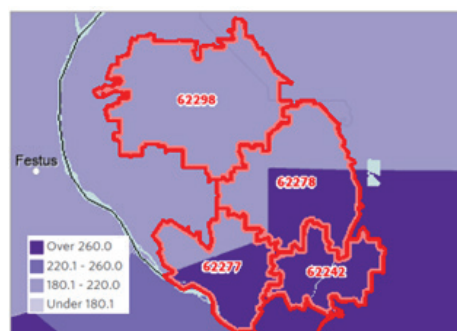
Report Area	AWE Complete
Red Bud	42%
Illinois	37%
United States	36%

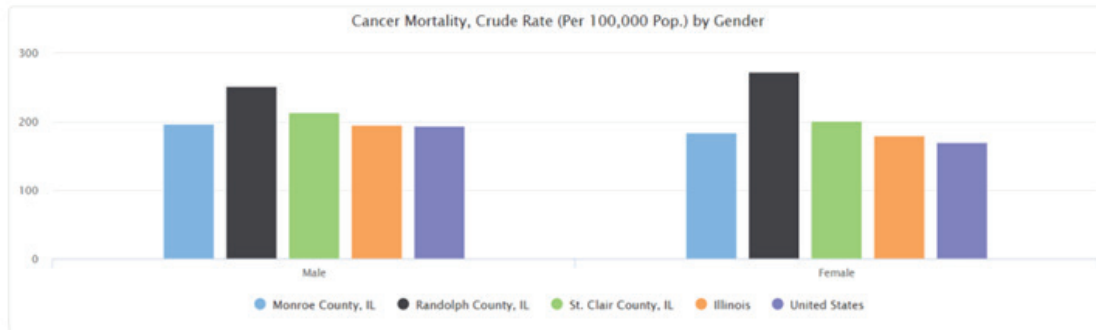
- **CANCER INCIDENCE – ALL TYPES:** age adjusted incident rates; cases/100,000 population of cancer all sites by type.

Report Area	All Sites – Total	Breast	Cervical	Colon-Rectum	Lung	Prostate
Red Bud	2189.7	664.7	12.1	178.1	334.4	485.1
Illinois	459.7	132.6	7.4	39.8	59.3	115.1
United States	442.3	127.0	7.5	36.5	54.0	110.5

- **MORTALITY – CANCER:** this calculates the five-year (2016-2020) average of death due to malignant neoplasm/100,000 population.

Report Area	Death Due to Cancer/100,000 Pop.
Red Bud	211.3
Illinois	187.9
United States	182.7
Randolph County	256.1



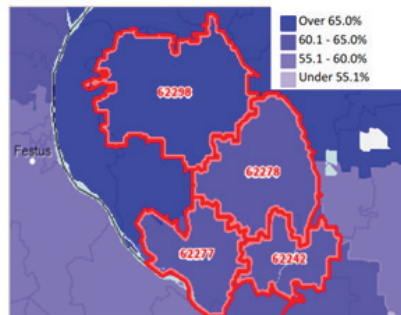


- *DEATHS BY CONDITION: per 100,000 population.*

Location	Cerebrovascular Disease	Heart Disease
Randolph County	79.8	272.7
Illinois	52.6	212.9

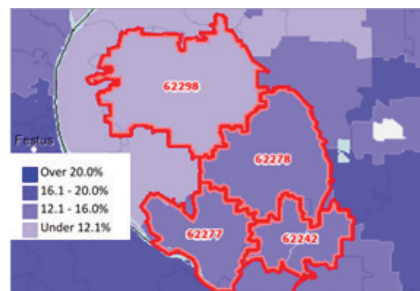
- *CLINICAL CARE AND PREVENTION: DENTAL CARE UTILIZATION: the percentage of adults age >18 who report having been to the dentist or dental clinic the previous year.*

Report Area	Dental Care
Red Bud	68.7%
Illinois	64.8%
United States	64.8%

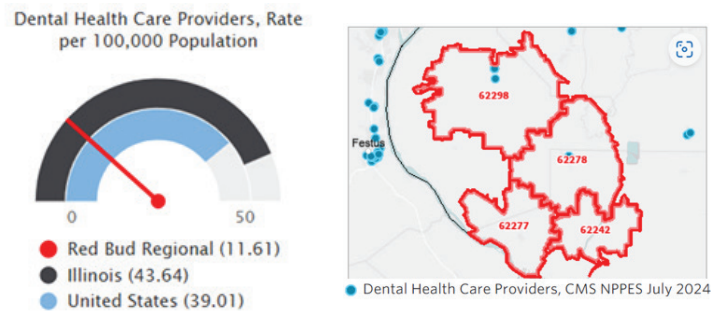


- *POOR DENTAL HEALTH - TOOTH LOSS: the percentage of adults > age 18 who have lost all their natural teeth due to tooth decay or gum disease.*

Report Area	Tooth Loss Due to Disease
Red Bud	12.3%
Illinois	10.1%
United States	13.4%



- *ACCESS TO CARE -DENTAL HEALTH PROVIDERS: the number of dental health providers with a CMS NPI number, rate/100,000 population.*



- *POOR MENTAL HEALTH DAYS: the average number of self-reported mentally unhealthy days in the past 30 days among adults.*

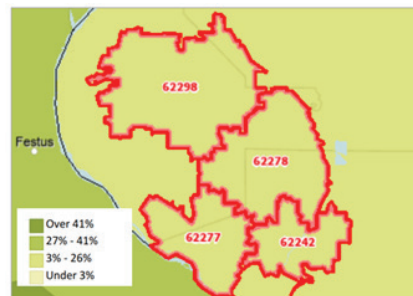
Report Area	Poor Mental Health Days/Month
Red Bud	4.3
Illinois	3.2
United States	4.4

- *MENTAL HEALTH AND SUBSTANCE USE CONDITIONS: reports the rate of diagnoses for mental health and substance abuse conditions among Medicare beneficiaries.*

Report Area	Beneficiaries with Mental Health and Substance Use Conditions
Red Bud	34%
Illinois	33%
United States	32%

- *OPIOID USE DISORDERS: the rate of emergency department utilization for opioid use and opioid use disorders among the Medicare population/100,000 beneficiaries.*

Report Area	Opioid Use Disorder ER Utilization Rate
Red Bud	23
Illinois	32
United States	41



- *OPIOID DRUG CLAIMS: including Medicare Part D drug claims – for both original and refilled prescriptions – as a percentage of total drug claims.*

Report Area	Opioid Drug Claims as a Percentage of Total Drug Claims
Red Bud	2.2%
Illinois	3.7%
United States	4.1%

- *HEALTHY BEHAVIORS: BINGE DRINKING/HEAVY ALCOHOL CONSUMPTION: The percentage of adults who self-report excessive drinking in the last 30 days defined as one binge drinking episode involving five or more drinks for men and four or more for women or heavy drinking involving more than two drinks per day for men or one per day for women. Binge drinking is defined as having five or more drinks for men and four or more drinks for women on at least one occasion in the past 30 days.*

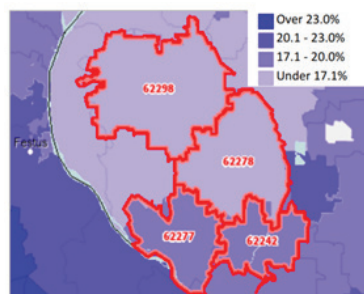
Report Area	Binge Drinking	Heavy Alcohol Consumption
Red Bud	17.20%	17.07%
Illinois	16.10%	17.54%
United States	15.50%	18.11%

- *HEALTHY BEHAVIORS: PHYSICAL INACTIVITY: adults aged 20 or older that self-report no active leisure activities based on the question “During the past month, other than your regular job, did you participate in any physical activities or exercise such as running, calisthenics, golf, gardening or walking for exercise?”*

Report Area	No Leisure Time Physical Activity
Red Bud	16.0%
Illinois	20.8%
United States	22.0%

- *HEALTHY BEHAVIORS: TOBACCO USAGE, CURRENT SMOKERS: the percentage of adults aged 18 or older who report having smoked at least 100 cigarettes in their lifetime and currently smoke every day or some days.*

Report Area	Current Smokers
Red Bud	20%
Illinois	13%
United States	15%



- *TOBACCO USAGE, BABIES BOORN TO MOTHERS WHO SMOKE DURING PREGNANCY: the number of live births among mothers who smoked during pregnancy. Rate per 100 live births.*

Report Area	Rate
Randolph County	16.3
Illinois	4.8

NEIGHBORHOOD & BUILD ENVIRONMENT

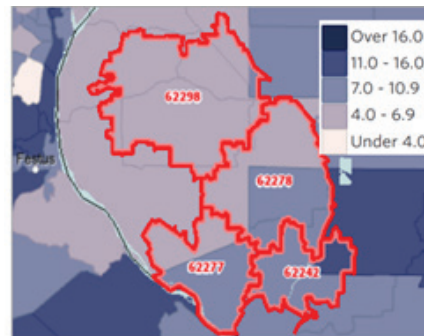
GOAL: Create neighborhoods and environments that promote health and safety.

- Your zip code is one of the most significant determinants of health.
- Some communities suffer from high rates of violence, unsafe air or water, unsafe buildings, and other health risks.
 - Many of these communities also have low access to healthy foods.
- Additionally, people can be exposed to health hazards at their work.
- Providing people with easy access to exercise and recreation opportunities can improve their overall health.
- HOUSING PLUS TRANSPORTATION AFFORDABILITY INDEX: This index measures housing affordability by including transportation costs at a home's location better to reflect the actual cost of household location choices. 15% of household income is considered an attainable goal for transportation and 30% for housing affordability.

Report Area	Housing + Transportation Costs % of Income	Housing Costs % of Income	Transportation Costs % of Income
Red Bud	51%	27%	24%
Illinois	45%	26%	19%
United States	48%	26%	21%

- *AIR AND WATER QUALITY: AIR TOXINS CANCER RISK: reports the estimated lifetime inhalation cancer risk from the analyzed carcinogens in ambient outdoor air. The value of the indicator is persons per million lifetimes. Areas with higher air toxics cancer risk levels (i.e., more harmful to human health) are placed higher in the percentile (national ranking).*

Report Area	Air Toxics Cancer Risk	Percentile
Red Bud	30.0	83
Illinois	28.5	70
United States	28.8	69



- *AIR AND WATER QUALITY: Air Toxics Respiratory Hazards Index: reports the respiratory Hazards Index (HI) from analyzed carcinogens in ambient air.*

Report Area	Air Toxics HI	Percentile
Red Bud	0.4	77
Illinois	0.4	68
United States	0.4	64

- **BROADBAND ACCESS:** reports the percentage of the population with access to high-speed internet. This data represents wireline and fixed/terrestrial wireless internet providers.

Report Area	Access to High-Speed Internet	Households with No or Slow Internet	Households with No Computer
Red Bud	91.09%	13.36%	8.71%
Illinois	95.51%	13.08%	6.47%
United States	93.82%	13.00%	6.05%

- **RECREATION AND FITNESS FACILITY ACCESS:** this indicator reports establishments primarily engaged in operating fitness and recreational facilities featuring exercise or other physical activities.

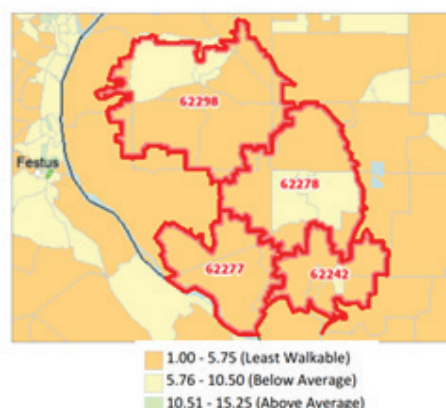
Report Area	Number of Fitness Facilities	Fitness Facilities/ 100,000 pop.
Red Bud	6	24.55
Illinois	1548	12.08
United States	39,592	11.94

- **PARK ACCESS:** the percentage of the population living within ½ mile of a park.

Report Area	% Within Half Mile of a Park
Red Bud	8.25%
Illinois	54.75%
United States	38.01%

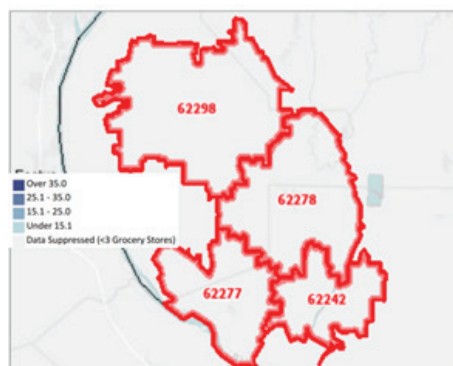
- **WALKABILITY ACCESS:** a nationwide index score developed by EPS that ranks the relative walkability using selected variables on density and diversity of land uses. The Walkability Index ranges from 1-20, where a higher score indicates a more walkable community.

Report Area	Walkability Index
Red Bud	6
Illinois	11
United States	10



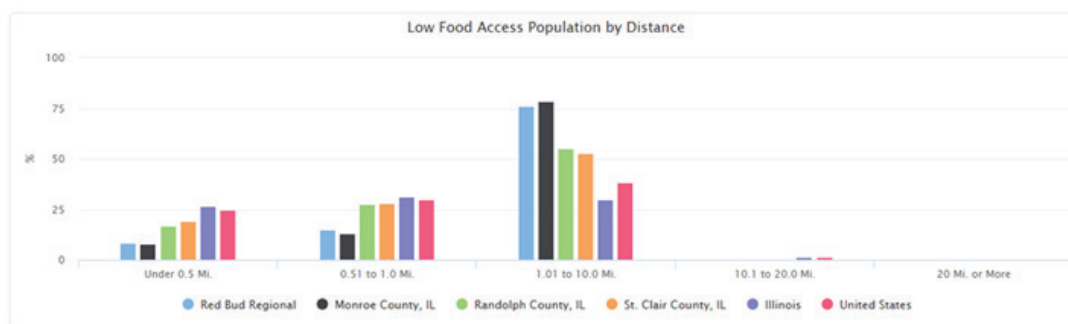
- **FOOD ENVIRONMENT—GROCERY STORES:** Access to healthy foods supports healthy dietary habits. Grocery stores—defined as supermarkets or smaller stores primarily retailing a general line of foods such as canned and frozen foods, fresh fruits and vegetables, and fresh and prepared meats, fish, and poultry—are significant suppliers of these foods.

Report Area	Establishments Rate/100,000 Pop.
Red Bud	16.47
Illinois	19.47
United States	23.38

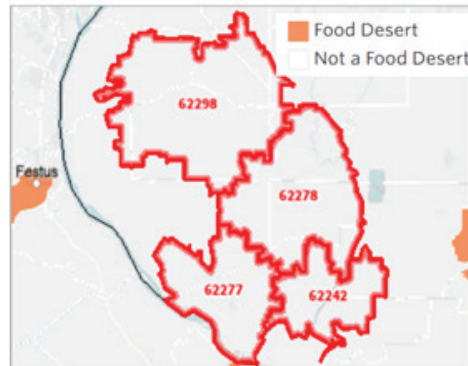


- **FOOD ENVIRONMENT—LOW FOOD ACCESS:** This indicator reports the percentage of the population with low food access, defined as living more than one mile (urban) or ten miles (rural) from the nearest supermarket or grocery store.

Report Area	Low Food Access	Low Income/Low Food Access
Red Bud	22.18%	18.37%
Illinois	20.19%	16.57%
United States	22.22%	19.41%



- *FOOD ENVIRONMENT: FOOD DESERT: The USDA Food Access Research Atlas defines a food desert as any neighborhood that lacks healthy food resources due to income levels, distance to supermarkets or vehicle access. There are no defined food deserts in this community.*



- *FOOD ENVIRONMENT—SNAP-AUTHORIZED FOOD STORES: a rate per 10,000 population. This includes grocery stores, specialty stores, and convenience stores that are SNAP retailers.*

Report Area	Establishment Rate/ 100,000 Pop.
Red Bud	8.33
Illinois	7.38
United States	7.47

