



Hopedale Hospital

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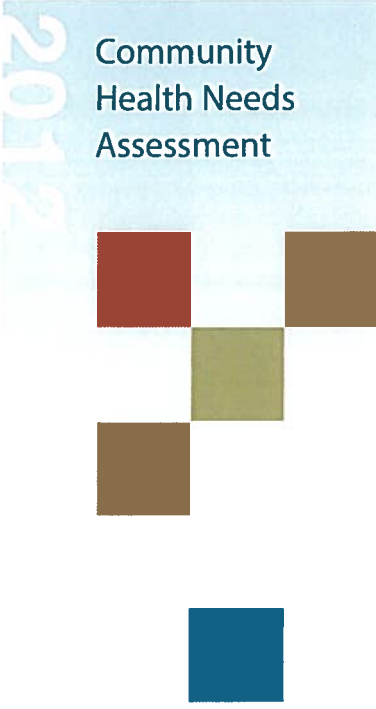

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Community Health Needs Assessment

PROCESS

Purpose

Hopedale Hospital believes optimum health and wellness can only be provided when followed by highly skilled physicians and support staff who truly know their patients. The mission of the hospital is to assure top quality care is the standard, not the exception. In the past, Hopedale Hospital has employed many different methods to assess local health needs within these communities and has adjusted its services to meet those identified needs. Recent changes to federal laws governing not-for-profit hospitals now require Hopedale Hospital to conduct a local community health needs assessment, following specific guidelines, every three years and to report completion of those assessments as part of their corporate tax filings with the Internal Revenue Service.

Hopedale Hospital operates under the premise that top quality care is the standard, not the exception.

Assessing community health needs through a review of available health data and discussions with area health care partners, community leaders and representatives of the many groups served by the hospital gives Hopedale Hospital and its health care partners the opportunity to identify and address the area's most pressing health care needs.

Scope of Assessment

Hopedale Hospital elected to conduct a community health needs assessment in the years 2011 and 2012. The Hopedale Hospital community health needs assessment was developed and conducted by a consultant provided through the Illinois Critical Access Hospital Network (ICAHN).

ICAHN is a not-for-profit 501(c)(3) corporation, established in 2003 for the purposes of sharing resources, education, promoting operational efficiencies and improving health care services for member critical access hospitals and their rural communities. ICAHN, with 51 member hospitals, is an independent network governed by a nine-member board of directors with standing and project development committees facilitating the overall activities of the network. ICAHN continually strives to strengthen the capacity and viability of its members and rural health providers. Hopedale Hospital is a member of the Illinois Critical Access Hospital Network.

The community health needs assessment will serve as a guide for planning and implementation of health care initiatives that will allow the hospital and its partners to best serve the emerging health needs of the Hopedale community.



Community Health Needs Assessment

Methodology and Gap Analysis

The Hopedale Hospital community health needs assessment was conducted through a consulting arrangement with the Illinois Critical Access Hospital Network. Terry Madsen, an ICAHN consultant, attorney and former educator and community development specialist, met with hospital executive staff to define the community, scope of the project and special needs and concerns. An internal working group, potential local sources for secondary data and key external contacts were identified and a project timeline was established.

Possible avenues for gathering primary data were reviewed and it was determined to proceed with three focus groups – comprised of area health care professionals and partners, community officials and community leaders and groups.

Information gaps may exist in the service area because of the absence of population concentrations in Hopedale and the Hopedale Hospital primary service area that could represent target groups of concern in other locations. This assessment has addressed those gaps by including input from community members that are charged professionally with advancing the health and education of the community and all of its members, including school officials dealing daily with youth and families.

As with many rural areas, secondary data is often a year or more out-of-date, which highlights the importance of historic trends in that data in the service area.

Secondary data from state and federal sources, which is cited in this report, was reviewed by the consultant and compared to the primary data gathered. Identified needs were prioritized through this process and presented to hospital administration for review.



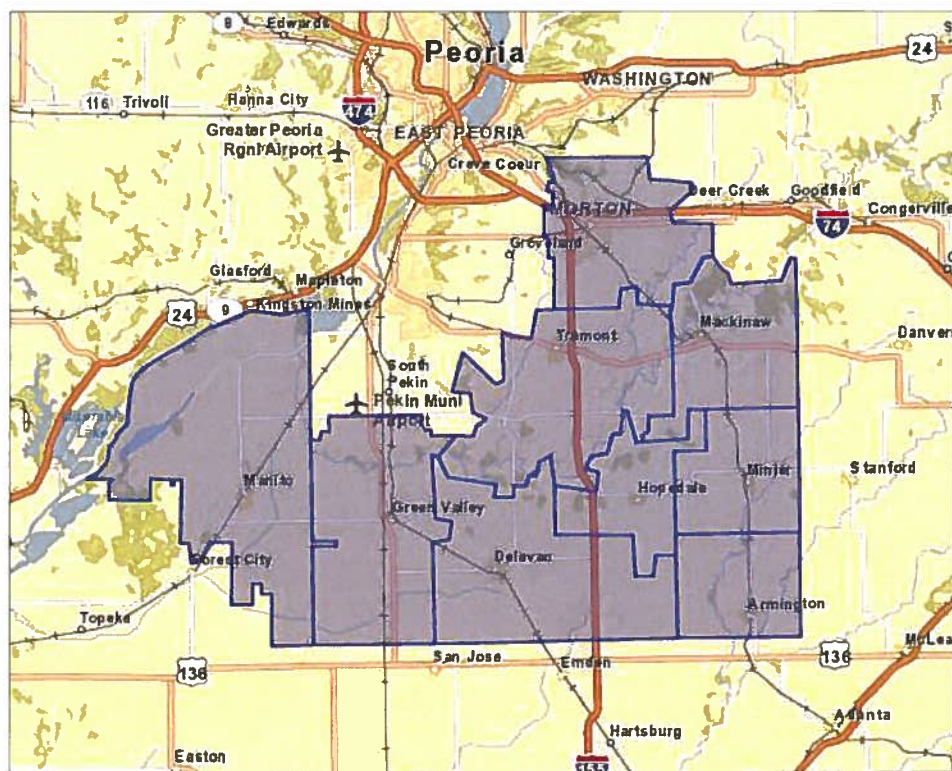
COMMUNITY

Geographic Assessment Area Defined

The Hopedale Hospital community was identified through a facilitated meeting with senior staff as a geographic area determined to be the current primary hospital catchment area, which includes all or portions of the zip code service areas surrounding Hopedale, Delavan, Minier, Manito, Mackinaw, Armington, Tremont, Green Valley and Morton. This geographic area definition of community is well-suited to Hopedale Hospital, a designated critical access hospital providing basic, primary care through inpatient care, ancillary services, clinics and specialty clinics to residents of a rural area.

The Hopedale Hospital service community is located primarily in Tazewell County and lies, in part, in both the Peoria and Bloomington metropolitan statistical areas. Major medical centers in Peoria and Springfield receive patients from the Hopedale Hospital service area.

Illustration 1. Hopedale Hospital Service Area



Hopedale Hospital provides basic, primary care through inpatient care, ancillary services, clinics and specialty clinics to residents of a rural area.

Community Health Needs Assessment

Demographic Profile

The racial makeup of the Hopedale Hospital service area is typical of other rural Illinois communities. As outlined in Table 1, no significant changes in the racial profile are projected over the next five years.

Table 1. Population by Race – Hopedale Hospital Service Area

| RACE and ETHNICITY | 2011 | | 2016 | |
|----------------------------|--------|---------|--------|---------|
| | Number | Percent | Number | Percent |
| White | 38,488 | 97.1% | 39,509 | 96.8% |
| Black | 250 | 0.6% | 272 | 0.7% |
| American Indian | 75 | 0.2% | 83 | 0.2% |
| Asian | 301 | 0.8% | 333 | 0.8% |
| Pacific Islander | 9 | 0.0% | 13 | 0.0% |
| Other | 156 | 0.4% | 191 | 0.5% |
| Two or More Races | 348 | 0.9% | 426 | 1.0% |
| Hispanic Origin (any race) | 562 | 1.4% | 734 | 1.8% |

(ESRI – 2012)

The broad demographic profile of the Hopedale Hospital service area was determined from data reported by the U.S. Census Bureau and the Environmental Systems Research Institute, Inc. (ESRI). The following table profiles current and future trends in the demographic environment surrounding the Hopedale Hospital service area.

Table 2. Demographic Trends – Hopedale Hospital Service Area

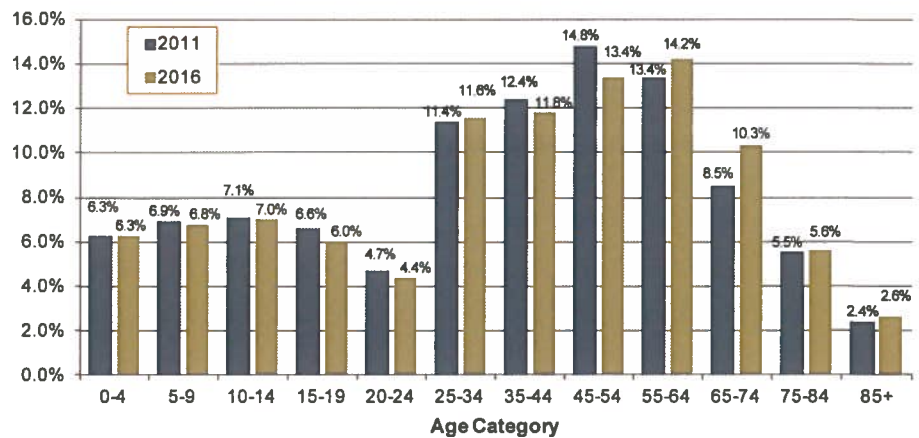
| SUMMARY | 2010 | 2011 | 2016 |
|-------------------------------|--------|--------|--------|
| Population | 32,197 | 32,238 | 32,224 |
| Households | 12,973 | 12,996 | 13,079 |
| Families | 8,822 | 8,830 | 8,804 |
| Average Household Size | 2.43 | 2.43 | 2.41 |
| Owner Occupied Housing Units | 9,896 | 9,803 | 9,881 |
| Renter Occupied Housing Units | 3,076 | 3,193 | 3,198 |
| Median Age | 41.6 | 41.8 | 42.8 |
| TRENDS: 2011-2016 Annual Rate | AREA | STATE | U.S. |
| Population | -0.01% | 0.00% | 0.67% |
| Households | 0.13% | 0.00% | 0.71% |
| Families | -0.06% | 0.00% | 0.57% |
| Owner Households | 0.16% | 0.00% | 0.91% |
| Median Household Income | 3.58% | 0.00% | 2.75% |

(ESRI – 2012)

The overall population of the Hopedale Hospital service area is trending toward a modest increase with expected increases in most related demographic categories. The median age is projected to continue to increase by approximately 2.4 percent over the next five years to 42.8 years of age. Median household income is projected to increase at a rate beyond the national trend.

Community Health Needs Assessment

Table 3. Population by Age – Hopedale Hospital Service Area



(ESRI – 2012)

Economic Profile

Median household income for 2011 was \$62,423 in the Hopedale Hospital service area, compared with \$54,442 for all U.S. households. Median household income is projected to be \$72,026 in five years. Median household income in the service area was \$51,697 in 2000 and \$35,038 in 1990. The median household income in Illinois was \$50,761 for 2011. Median household income is the amount where one-half of the households in the area have a higher income and one-half of the households have a lower income. (ESRI, 2012)

Table 4. Households by Income – Hopedale Hospital Service Area

| HOUSEHOLDS BY INCOME | 2011 | |
|----------------------|--------|---------|
| | Number | Percent |
| <\$15K | 1,067 | 7.2% |
| \$15K-\$24K | 1,470 | 9.9% |
| \$25K-\$34K | 1,517 | 10.2% |
| \$35K-\$49K | 2,021 | 13.7% |
| \$50K-\$74K | 3,162 | 21.4% |
| \$75K-\$99K | 2,373 | 16.0% |
| \$100K-\$149K | 2,099 | 14.2% |
| \$150K-\$199K | 614 | 4.1% |
| \$200K+ | 486 | 3.3% |

(ESRI – 2012)

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According to the Illinois Department of Employment Security local employment dynamics data, 1,780 new jobs were created in Tazewell County during the first quarter of 2011. The average number of jobs created over Q1/2011 and the prior three quarters was 2,888. That is the most recent data reported for the county. The average net job flow (jobs created – jobs lost) for the same period was 664 jobs created, but for the first quarter of 2011 only, it was -8. (IDES, May 2012)

The unemployment rate for Tazewell County was 7.6 percent for March 2012, compared to 9.0 percent for March 2011. In March 2012, the unemployment rate for Illinois was 9.0 percent and the U.S. was 8.4 percent. (IDES, May, 2012)

Table 5. Collected Sales Tax Trends – Hopedale Hospital Service Area

| | Hopedale | Delavan | Morton |
|---------|-----------------|----------------|---------------|
| FY 2011 | \$63,949 | \$117,957 | \$3,363,451 |
| FY 2010 | \$62,768 | \$100,294 | \$3,037,832 |
| FY 2009 | \$74,625 | \$103,732 | \$3,027,451 |

(ESRI – 2012)

As seen in Table 6, the percent of post high school attainment in the Hopedale Hospital service area is higher than that for the United States overall in the categories of associate's degrees and bachelor's degrees but lower for graduate or professional degrees.

Table 6. Educational Attainment for Persons over Age 25 – Hopedale Svc Area

| |
|--|
| In 2011, the educational attainment of the population aged 25 years or older in the area was distributed as follows: |
| 7.9 percent had not earned a high school diploma (14.8% in the U.S.) |
| 31.1 percent were high school graduates only (29.6% in the U.S.) |
| 9.6 percent had completed an Associate's degree (7.7% in the U.S.) |
| 20.3 percent had a Bachelor's degree (17.7 % in the U.S.) |
| 8.3 percent earned a Master's/Professional/Doctorate degree (10.4% in U.S.) |

(This table does not include data for 'college hours earned but without a degree'.)

(ESRI-2012)

Low-income students are pupils age 3 to 17, inclusive, from families receiving public aid, living in institutions for neglected or delinquent children, being supported in foster homes with public funds or eligible to receive free or reduced-price lunches. The percentage of low-income students is the count of low-income students, divided by the total fall enrollment, multiplied by 100. At Deer Creek–Mackinaw CUSD 701, the percentage of low-income students rose from 10% in 2000 to 23.3% in 2011. During

Community Health Needs Assessment

the same period, Delavan CUSD 703 rose from 13.2% to 32.6%, Morton CUSD 709 rose from 5.1% to 11.6% and Tremont CUSD 702 rose from 2.7% to 9.8%.

The Hopedale Hospital service area is experiencing recovering employment numbers and sales tax revenue, numbers of children eligible for free or reduced lunch which are increasing but remain low overall when compared to many rural districts, and is projected to be enjoying modest projected income and housing value increases over the next five years. The service area is in a better economic position than many rural communities in Illinois today.

Table 7. Employment by Industry – Hopedale Hospital Service Area

| CATEGORY | EMPLOYED | % OF WORKING POPULATION |
|--|---------------|----------------------------|
| Manufacturing | 3,465 | 17.9% |
| Health care and social assistance | 2,704 | 14.0% |
| Retail trade | 1,772 | 9.2% |
| Construction | 1,659 | 8.6% |
| Educational services | 1,405 | 7.3% |
| Finance and insurance | 1,405 | 7.3% |
| Other services, except public administration | 1,132 | 5.9% |
| Accommodation and food services | 996 | 5.2% |
| Wholesale trade | 790 | 4.1% |
| Professional, scientific and technical services | 778 | 4.0% |
| Transportation and warehousing | 764 | 4.0% |
| Agriculture, forestry, fishing and hunting | 507 | 2.6% |
| Public administration | 469 | 2.4% |
| Administrative and support and waste management services | 469 | 2.4% |
| Arts, entertainment and recreation | 324 | 1.7% |
| Information | 209 | 1.1% |
| Utilities | 198 | 1.0% |
| Real estate, rental and leasing | 193 | 1.0% |
| Mining, quarrying, and oil/gas extraction | 74 | 0.4% |
| Management of companies and enterprises | 22 | 0.1% |
| TOTALS: | 19,335 | 100.0% |

(ESRI – 2012)

The Hopedale Hospital service area enjoys diverse employment opportunities overall. The second largest employment group is health care and social assistance. Hopedale Hospital and its supporting services and partners are included in this group. The Hopedale Medical Complex and Hopedale Hospital play an important role in the economic vitality of the area as well as its health.

Despite the urban nature of the northern portion of Tazewell County, the service area's social and economic picture is influenced by the fact that just over 79 percent of the land area in Tazewell County consists of farms, according to 2007 data from the USDA. Thirty-four percent of local farm operators work off-farm. (*Atlas of Rural and Small Town America, 2011*).



2012 Community Health Needs Assessment

The Hopedale Hospital catchment area is marked by small communities relying primarily on small businesses and industries, agriculture and service providers for its local employment but also looks to nearby larger communities for jobs.

The demographic and economic profile of the Hopedale Hospital service area is more positive than many rural Midwest communities. In the near term, the profile is expected to remain substantially similar, while improving slightly, in all categories reviewed for this assessment. This knowledge provides context for planning for the specific health needs identified in the following sections of this assessment.

Community Health Needs Assessment

INPUT

Health Profiles from Existing Studies and other Secondary Data

The County Health Rankings rank the health of nearly every county in the nation and show that much of what affects health occurs outside the doctor's office. The County Health Rankings confirm the critical role that factors such as education, jobs, income, and environment play in how healthy people are and how long they live.

Published by the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation, the Rankings help counties understand what influences how healthy residents are and how long they will live. The Rankings look at a variety of measures that affect health such as the rate of people dying before age 75, high school graduation rates, access to healthier foods, air pollution levels, income, and smoking, obesity and teen birth rates. The Rankings, based on the latest data publicly available for each county, are unique in their ability to measure the overall health of each county in all 50 states on the multiple factors that influence health.

(County Health Rankings and Roadmaps, 2012)

Tazewell County is ranked 34th out of the 102 Illinois counties in the Rankings released in April 2012. The following observations from the rankings are of interest to the health needs assessments of the Hopedale Hospital service area.

Table 8. Health Ranking Observations – Tazewell County

| Observation | Tazewell Co. | Illinois |
|--|--------------|----------|
| Adults reporting poor or fair health | 13% | 16% |
| Adults reporting no leisure time physical activity | 28% | 25% |
| Adult obesity | 27% | 27% |
| Children under 18 living in poverty | 14% | 19% |

(County Health Rankings and Roadmaps – 2012)

The County Health Rankings also report a teen birth rate for Tazewell County of 37 births (per 1,000 females ages 13-19) compared to the statewide rate of 40 births and the national benchmark of 22 births. The Rankings show a motor vehicle crash death rate of 12 (per 100,000 population) in Tazewell County, compared a rate of 11 deaths statewide.

The Illinois Behavioral Risk Factor Surveillance System provides health data trends through the Illinois Department of Public Health in cooperation with the Center for Disease Control and Prevention, Office of Surveillance, Epidemiology and Laboratory Services.

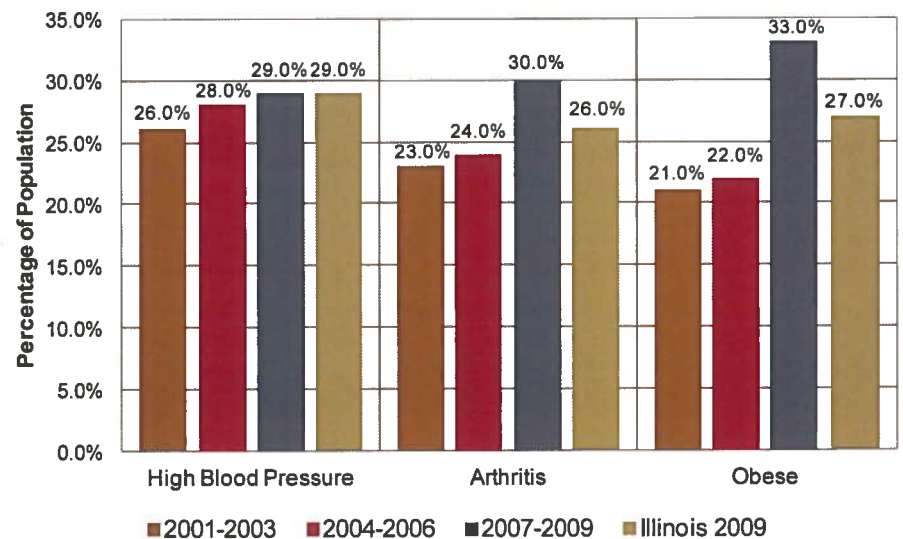
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Secondary data reports and other resources were reviewed for this assessment in order to provide points of comparison for the primary facts and anecdotes offered through the primary information collection process. Secondary sources included:

- Kaiser State Health Facts – The Kaiser Family Foundation
- Illinois County Health Rankings – Robert Wood's Foundation
- State Cancer Profiles – The National Cancer Institute
- Community Health Status Indicators – U.S. Department of Health and Human Services
- Illinois Behavioral Risk Factor Surveillance System (IBRFSS), which provides health data trends through the Illinois Department of Public Health in cooperation with the Center for Disease Control and Prevention, Office of Surveillance, Epidemiology and Laboratory Services, and the Tazewell County IPLAN. *(Illinois Project for Local Assessment of Needs – Illinois Department of Public Health)*
- County Health Rankings

The following table reflects longitudinal information from the IBRFSS that indicate areas of likely health care needs.

Table 9. Health Risk Factors – Tazewell County



(IBRFSS – 2012)

Since 2003, reports of diagnosis of high blood pressure have risen slowly to match the state level, and obesity and reports of diagnosis of arthritis have risen to significantly exceed state levels.

Community Health Needs Assessment

The Illinois Department of Health releases countywide mortality tables from time to time. The most recent available table for Tazewell County, showing the causes of death within the county is set out in the following table:

Table 10. Mortality by Disease Type, 2008 – Tazewell County

| <u>Disease Type</u> | <u># of Deaths</u> |
|--|--------------------|
| Diseases of the heart | 284 |
| Malignant neoplasms | 308 |
| Cerebro-vascular diseases (stroke) | 74 |
| Lower respiratory diseases | 82 |
| Accidents | 57 |
| Alzheimer's disease | 74 |
| Diabetes mellitus | 33 |
| Influenza and pneumonia | 44 |
| Nephritis, nephrotic syndrome, and nephrosis | 34 |
| Septicemia | 21 |
| Intentional self harm (Suicide) | 13 |
| Chronic liver disease, cirrhosis | 9 |
| All other causes | 320 |
| TOTAL DEATHS | 1,353 |

(Illinois Behavioral Risk Factor Surveillance System - 2011)

The mortality numbers shown are much as one would expect with diseases of the heart, cancer and lower respiratory diseases as leading factors. The State Cancer Profiles compiled by the National Cancer Institute list Tazewell County at Level 8 for all cancers, which means the cancer rate overall is similar to the U.S. rate and is falling over the recent past.

Synthesized Secondary Data

The demographics for Hopedale Hospital's service area reflect overall favorable income when compared to other rural areas and Illinois overall.

Tazewell County reports a higher percent of population diagnosed with arthritis and obesity than state averages and a rising percent of residents who have been diagnosed with high blood pressure. Diseases of the heart and cancer are the two leading causes of death by a wide margin. Although cancer, in all forms, is a leading cause of death, the cancer rate has been reported to be falling over recent years. Teen pregnancy is high compared to the national benchmark but remains below the statewide rate.

Summary

The secondary data draw attention to several common issues or rural demographics and economies of the day and draw emphasis to health issues related to the elderly and risky behavior with regard to obesity and related issues.



2012 Community Health Needs Assessment

Primary Source Information

Focus Group #1 – Health Care Professionals/Partners

A focus group comprised of health professionals and partners met on November 29, 2011. The group included a doctor, a hospice service provider, a representative of the local health department and a representative of an ambulance service.

The group first discussed many positive recent developments in the Hopedale service area. The following changes and improvements were identified:

- Sports and wellness programs
 - injury prevention for athletes
 - sports medicine program in five high schools
- Adult counseling outpatient
 - Renewed Hope Program assists seniors facing depression, substance abuse, and sense of loss (grief counseling)
- 24-hour emergency room with reasonable wait time
- Partnerships with OSF and others
- Range of local medical services
- Vascular surgeries at hospital are well known in the region
- Wellness center – 1,200 members
- Education programs
- Fiber optic communications at the hospital allows high tech applications

The group then discussed a wide variety of health needs in several general categories including:

- Mental health
 - psychiatrist (currently there is a contract psychiatrist who sees seniors only one day per week)
 - one full time counselor, one RN, one CNA
- Substance abuse involving methamphetamines, synthetics, prescription drugs
- A gap in services may exist for the working poor, underinsured/uninsured in areas of mental health and wellness education
- Ombudsman services – service information clearinghouse
- Public guardian services
- Daycare services
- Access to healthy food due to absence of local grocery stores
- Housing conditions
- Education for ambulance, cost of EMT training, lack of tax-supported services
- Transportation to appointments
 - “We Care”, a private non-profit service for Tazewell and Woodford, goes into Peoria – the service is good but not as flexible as needed
 - using ambulances for non-emergency
- Continuing to grow senior care, inroads are being made
- Specialists
 - female-focused (OB-GYN and primary care), urology, orthopedic surgeon



2012 Community Health Needs Assessment

Focus Group #2 – Community Leaders and Groups

A focus group comprised of community leaders and elected officials met on November 29, 2011. The group included representatives of local financial institutions, legal services, a community improvement group and individual community leaders.

The second focus group session opened with the identification of several positive events that took place within the Hopedale service area during the past five years. The following developments were cited:

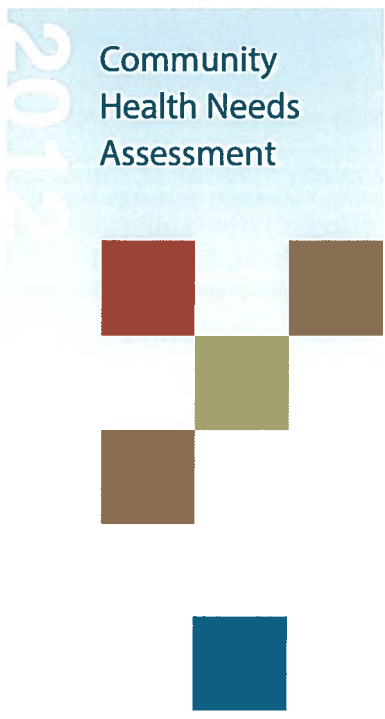

- The Hopedale Hospital
 - growth from treatment to education and prevention care
 - Renewed Hope program
- Diabetes management program
- Weight loss clinics
- Technology for tests
- Wellness Center, with growing awareness and use of Wellness Center and HMC
- Emergency care
- Convenience of the HMC Complex of services

Through a facilitated identification process, the group next developed a list of observed or perceived weaknesses, both current and threatened for the future, in delivery of health care in the CMH service area.

- Planning for local health care sustainability
- Recruiting and retaining specialists
 - Orthopedic
 - Pediatrician
- Dentist and dental care
 - currently available locally only 1-3 days a week
- Recruit and retain primary care physicians
- Alzheimer's/dementia care
- Keeping up with equipment
- Facilities need updating and HMC (the modern face)
- Aging population and related health issues
- Obesity
- Arthritis
- Breast cancer

Focus Group #3 – Community Officials and Employers

A focus group comprised of community leaders and elected officials met on November 30, 2011. The group included the county board chairman, school officials, religious leaders, a mayor, police chiefs and township supervisors.



2012 Community Health Needs Assessment

The third focus group session opened with the identification of several positive events that took place within the Hopedale service area during the past five years. The following developments were cited:

- Pre-K to 8th-grade school in close proximity to health complex provides opportunities for child health education and needs
- Wellness center
- Community investment / buy-in for HMC
- Wellness center and related therapy
- Independent and assisted living
- New doctors' office
- Jobs at HMC help area economies
- Emergency room, good convenient emergency care
- Renewed Hope
- Satellites
- HMC support to the community
 - donations
 - meals
 - no cost access for school programs at wellness center
- Health care drives community development and new residents

Through a facilitated identification process, the group next developed a list of observed or perceived weaknesses, both current and threatened for the future, in delivery of health care in the Hopedale Hospital service area.

- Post-diagnosis substance care for alcohol
- Access to cafeteria beyond lunch time
- Information about H.H. services
- Mental Health
 - services limited beyond emergency stabilization
 - Methodist is only resource
 - lack of local follow-up (referral to primary care)
- Specialists
- Alzheimer's care
- Colon and prostate cancer
- Cardiovascular
- Methamphetamines' use among 30-40 year olds
- Heroin use in the 20-35 age group
 - three deaths in five years from heroin in the service area
- Prescription drugs
 - pharm parties (get-togethers where prescription drugs are exchanged and randomly ingested in order to become intoxicated)
- Synthetics
- Teen fatalities due to auto accidents seem high in the service area
- Police coverage
 - 12-15 minutes for emergency response to hospital
- Increased teen birth rate is perceived
 - daycare is needed
 - extended families play increasingly significant roles with children

PRIORITIZATION

Reconciliation of Primary Source Information with Secondary Data

The facilitated primary information gathering process resulted in the discovery of issues subsequently prioritized during discussion by participants and repetition among groups to a list of concerns largely common to the overarching categories of delivery of mental health services, prevention of substance abuse, issues falling under wellness education and services for all ages and planning for maintaining for local availability of medical specialists. The areas chosen were consistent with the needs identified from the secondary information collected, which included evidence of risky behavior with obesity and diagnosis of increasing levels of high blood pressure.

Countywide secondary data for Tazewell County for 2007 from the National Cancer Institute suggests cancer levels are falling in the service area, although mortality tables indicate it is the second most common cause of death. The primary information gathering process resulted in discussion of concerns over colon, prostate and breast cancer. Teen birth rate was identified in one group and is confirmed as higher than the national benchmark by the secondary data.

Summary of Findings and Recommendations

The items set forth below are those which found consistent identification and, ultimately, prioritization in the primary information gathering process and which are supported by the secondary information related to demographics and health status.

1. Improved Availability of Mental Health Services

Availability of emergency care and short-term and long term follow-up for persons with a wide range of mental health issues is a repeated concern. This is a need occurring at many levels in the community, at Hopedale Hospital and outside the control or influence of either.

2. Prevention and Treatment of Substance Abuse

This is also an area that requires the cooperation of health care providers and the community to address. This issue is intertwined with the need for improved mental health services.

3. Wellness education and services for all ages

This was identified as a need for improved information within the community about the services available at Hopedale Hospital and for better availability of information on wellness education and care opportunities for the community in general and for underinsured and uninsured populations.



Community Health Needs Assessment

4. Planning for continued local availability of medical specialists

While there was general satisfaction expressed with currently availability of local and regional physicians and specialists, there was discussion of the need for succession planning for the medical community.

5. Access to Healthy Foods

There are communities in the service area that do not have local access to grocery stores or full service restaurants.

RESOURCE INVENTORY

Hopedale Medical Complex

The Hopedale Medical Complex occupies a campus which includes the Hopedale Hospital, Hopedale Nursing Home, Hopedale Commons, triplex residential units for the elderly and a Wellness Center.

In addition, the Medical Arts Physicians' building offers physicians, dentist, podiatrist, cardiologist, neurologist, orthopedist, urologist and a pharmacy. Satellite doctors' offices are now open in Mackinaw, Manito, Delavan and Atlanta.

Hopedale Hospital

Hopedale Hospital is a critical access hospital offering virtually the same amenities as larger urban hospitals. We have a total of 25 beds that are interchangeable between our acute care and swing bed services. The Hopedale Hospital provides extensive services, including:

- 24-hour emergency room
- Intensive Care Unit
- General and advanced vascular surgery
- Orthopedic surgery
- Plastic/reconstructive surgery
- Open MRI
- CT scanner (state-of-the-art unit capable of doing full body/heart scans and virtual colonoscopy)

Hopedale Hospital maintains four satellite offices in Atlanta, Delavan, Manito and Mackinaw.

Emergency Room

Hopedale Hospital's Emergency Department served nearly 2,600 patients in 2011. It is a Level III Trauma Center providing resources for emergency resuscitation, surgery and intensive care of most trauma patients. There are physicians, nurses, respiratory and laboratory staff available 24 hours a day, 365 days a year to provide emergency services. Hopedale Hospital also has transfer agreements with Level I and Level II trauma centers that provide back-up resources for severe injuries or illnesses.

For critically injured or ill patients, Hopedale Hospital also has a transfer agreement with Peoria and Springfield hospitals. The air or ground units are staffed by a team of specially trained flight paramedics, flight nurses, Emergency Medicine Resident Physicians, EMS Pilots and Communication Specialists who are ready to respond to medical needs during transport.

Hopedale Hospital's emergency room reports a short wait time to be seen by an RN and physician. On average, a patient waits 12 minutes in the waiting room.



Hospital Outpatient Services

Laboratory

Hopedale Hospital has a CLIA certified laboratory serving in-house and outside patients and clients.

Pharmacy

Located inside the Medical Arts Building, the pharmacy is open six days a week and offers:

- Free delivery to Atlanta, Delavan, Hopedale, Mackinaw, Minier and Tremont
- Prescription service to the Commons and Nursing Home on the HMC campus
- Inter-office delivery of prescriptions to satellite offices – these deliveries are made twice a day
- In-stock and by special order, a large selection of Juzo Compression Therapy garments
- Medicare billing for diabetic testing supplies
- The pharmacy accepts most insurance plans, including: PCS, PAID (Express Scripts), Blue Cross Blue Shield (most plans), Caterpillar, SavRX, IL Medicaid, Senior Care, Circuit Breaker and many more

Open MRI

Hopedale Hospital offers open magnetic resonance imaging.

CT Heart Scan

The Heart Scan, formally called Coronary Artery Calcium Scoring, is a quick and painless way to detect build-up in coronary arteries. Multiple images of coronary arteries are captured by a high-speed CT scanner. Physicians are able to compute a cardiac “score” by seeing the amount of calcification in the walls of the arteries. This procedure can be scheduled without a doctor referral.

Mammography

Current guidelines recommend mammography every year for women, beginning at age 40.

Midwest Vascular Institute

Hopedale Hospital was one of the first hospitals in the United States to establish an arteriography suite in the operating room. This allows a combination of stenting and open surgical procedures to be done at the same time. Medical conditions treated by vascular surgeons include:

- Carotid occlusive disease, stroke, ‘TIA’
- Aortic aneurysm
- Non-healing leg ulcers
- Pain in the legs with walking (claudication)
- Severe hypertension due to narrowing of the kidney arteries
- Circulation disorders of the hands
- Blood clots in the veins of the legs and arms



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- Varicose veins
- Leg swelling of unknown cause
- Procedures performed include:
- Carotid endarterectomy – removal of plaque from the neck artery to prevent stroke
- Aortic aneurysm repair – endovascular and open surgical repair
- Angioplasty and stenting of the arteries throughout the body
- Bypass of occluded arteries and veins
- Vein stripping and vein injection therapy
- Dialysis shunt placement
- Vena cava filter placement
- Medical treatment of clotting disorders (deep vein thrombosis) with clot lysis where appropriate

Rehabilitation Services and Sports Medicine

The Hopedale rehabilitation and sports medicine department services range from orthopedic to treatment of wounds, and pain syndromes are available. The programs accept referrals from all physicians.

Rehabilitation services include:

- physical, occupational, speech, aquatic and massage therapy
- pain management
- medical acupuncture
- cardiac rehabilitation

Treatment is also provided for low-back pain, orthopedic rehabilitation, neck pain, osteoarthritis, sports injuries, myofascial pain and EMG.

PROeX Sports Medicine

PROeX Sports Medicine, a division of Hopedale Rehabilitation and Sports Medicine, provides services to athletes, coaches, parents and schools.

PROeX Sports Medicine Programs and Services

- Free injury evaluation clinic
- Outreach athletic training services
- Corrective human movement assessment for injury prevention
- Video analysis of human performance
- ImPACT concussion management program
- Student athlete of the month
- Diagnostic testing

The sports medicine clinic offers:

- Free injury evaluation
- Athlete rehabilitation – If the athlete requires long-term rehabilitation, a physician's referral must need to be obtained.
- Orthopedic braces and sleeves ordered and sold at a discount



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- Development program for athletes 8-11 years of age
 - o Offers an opportunity to learn about body awareness
 - o Build strength through body weight resistance
 - o Develop good cognitive input habits
 - o Instruction about injury prevention
 - o Program is four-week sessions – three days a week from June to July
 - o Performance development for athletes 12-14 years of age
 - o Get physically ready for high school athletics
 - o Program is eight weeks – offered Monday, Tuesday, Thursday and Friday in June and July
- Performance Plus for athletes 14+ years of age
 - o High performance, intense training for the serious athlete
 - o Program is 10 weeks on Monday-Friday from June-August
 - o Personal performance training
- PROeX “Tough Team”
 - o Program consists of six 30-minute personal training sessions
 - o Members-only performance training e-newsletter
 - o Custom design training days at a special price per session
 - o Great for college athletes who need help with their off-season programs
 - o Available twelve months of the year

Student Athlete of the Month

Every month during the school year, the Rehabilitation and Sports Medicine department staff awards the student Athlete of the Month. The athlete is selected from nominations provided by coaches at Dee Mack, Olympia, Tremont, Hartem and Delavan High Schools. Nominees must be juniors or seniors and must have maintained a 3.5 GPA. A \$500 scholarship is awarded to one student athlete chosen from this group annually.

Renewed Hope

Renewed Hope is an outpatient counseling center designed exclusively for seniors, staffed by a board certified psychiatrist and a licensed counselor, who are trained in the treatment of the following:

- Depression
- Sleep/appetite changes
- Isolation/loneliness
- Feelings of hopelessness/helplessness
- Anxiety/nervousness
- Low self-esteem

Clients residing within 20 miles of Hopedale can arrange to use the transport van which offers free door-to-door service. Medicare and most insurance companies cover outpatient counseling. Clients do not need a doctor's order to participate.



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General Surgery

The surgical facilities of Hopedale Hospital allow surgeons to perform at the level of many large metropolitan hospitals and surgi-centers. The fulltime staff of board certified skilled surgeons is fully trained in general and vascular medicine.

Orthopedic Surgery and Services

HMC offers orthopedic services from knee reconstruction to shoulder mobility problems.

Respiratory Care

The Respiratory Therapy Department at Hopedale Hospital is staffed by experienced respiratory therapists 24 hours a day, 7 days a week. Services include:

- Respiratory care, therapeutic treatments and diagnostic procedures
- Providing temporary relief of chronic asthma or emphysema
- Emergency care to victims of heart attack, stroke, drowning or shock
- Providing consumer education on equipment usage, strengthening exercises, and respiratory system clearing procedures

Nutrition Services

A registered dietitian helps:

- Start a solid foundation for good health and wellness
- Improve food choices and habits
- Maintain current weight or aid in losing excess weight
- Select foods to control allergies or preference, such as vegetarian food choices
- Assist in reducing complications from conditions, such as heart and kidney disease and diabetes

Swing Bed Program



The Swing Bed Program is a short-stay program designed to serve individuals who are in a transition phase of illness or recovery and no longer require acute care services.

In order for Medicare to pay for the Swing Bed Program, specific qualifying medical criteria must be met. Following a hospital stay of at least three days, an individual must require either skilled nursing or skilled therapy services.

Under the Medicare skilled nursing facility (nursing home) benefit, swing beds are covered up to twenty days in full and up to one hundred days with a co-payment, as long as Medicare criteria are met. Medicare supplements will usually pay the deductible as long as Medicare continues coverage. Other medical insurance may cover the Swing Bed Program or a patient may pay with private funds.

The following criteria are considered as "qualifying medical criteria" under Medicare benefits:

- Daily physical, occupational and/or speech therapy
- Intravenous (IV) or nutritional therapy



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- Specialized care for complex wounds that are not healing well
- Pain Management
- End-of-life care

Hopedale Hospital has a case manager on-site to help patients and their families address social, emotional and/or financial concerns related to hospitalization, rehabilitation and/or long term care. Hopedale Hospital's case manager is also available to discuss and provide patients and their families with care options upon discharge.

Hopedale Wellness Center

The 34,000 square foot wellness facility offers an indoor walking track, basketball court, a multitude of class exercise opportunities, three pools and extensive weight lifting and cardiovascular equipment. The facility offers highly skilled exercise specialists and a registered dietitian on staff. Membership includes access to:

- A 25-yard lap pool, therapy pool, spa and customized aquatics program
- Use of cardiovascular training equipment, including treadmills, recumbent steppers, elliptical trainers, and upright and recumbent bikes
- Use of strength training equipment, including free weights
- Indoor walking/running track
- Gymnasium with two basketball and volleyball courts
- Group exercise classes
- Free fitness assessment and equipment orientation with a degreed exercise specialist.
- Complete handicap-accessible facility
- Locker and towel service
- Supervised fitness area
- Access to Kidz Klub – a supervised play area for children ages 6 weeks to 12 years while you exercise
- Exercise specialist available for one-on-one or group workout sessions (additional fee for this service)
- Large conference room with multimedia equipment and kitchen facility

Hopedale Nursing Home

Residents of the Hopedale Nursing Home receive a full range of around-the-clock care and access to Hopedale Hospital. On the campus of Hopedale Hospital, Hopedale Nursing Home offers services that are not often found for nursing home care.

The Hopedale Nursing Home has private and semi-private rooms and provides homemade meals and desserts to residents. There are entertainment, supervised activities, and outings for residents. Services include:

- A staff physician available at all times
- Access to all services provided by Hopedale Hospital, including a personal



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- physician and 24-hour emergency care at Hopedale Hospital
- A choice of private and semi-private rooms
- Available on-site pharmacy
- Nearby 34,000 square foot Wellness Center with rehabilitation services
- Forty personalized services supported by the Hopedale Nursing Home, access to the Hopedale Hospital's Midwest Vascular Institute, professional medical care and emergency services right next door, excellent physicians and a beautiful 34,000 square foot Wellness Center for rehabilitation and exercise are just a few of the reasons why so many people enjoy living at Hopedale Commons.

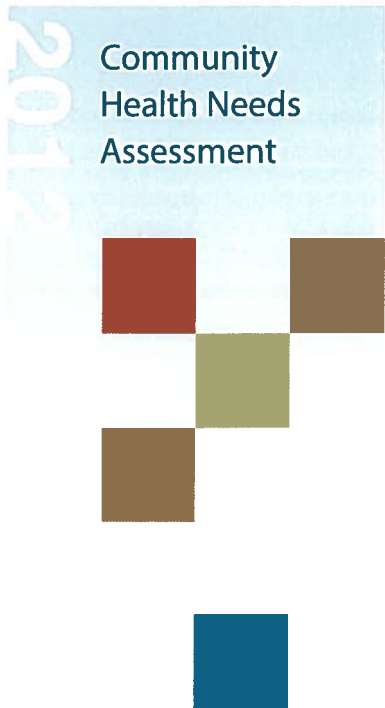

Assisted Living – Commons West

In addition to all the amenities already mentioned, residents of Hopedale Commons West licensed assisted living enjoy private, spacious apartments, three healthy meals served daily, bathing and dressing assistance, medication reminders and personal transportation services to appointments within the complex.

Activities are planned three times per day. In addition, an exercise program is offered six days a week, and residents can join their friends for frequent bus trips or at the on-site beauty shop. Hopedale Commons West was added in 1994.

Independent Living – Commons East

Independent living residents of Commons East enjoy eight personalized services: three healthy meals served seven days a week, utilities, cable, transportation to appointments on campus, weekly housekeeping and personal laundry, weekly bed linen changes, and other daily activities, including Sunday church services. Hopedale Commons East was added in 1998.



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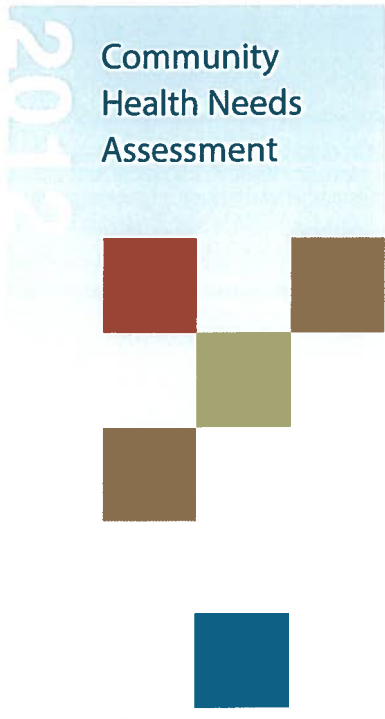

Area Health Services Review

Ambulance Services

The area is served by several small community-based ambulance services as well as services from Peoria and Springfield.

Nursing Homes

In addition to the facilities in the Hopedale Hospital, several nursing and extended care facilities ring the service area in the communities of Morton, Lincoln, Pekin, Bloomington and Peoria.



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REMARKS

The Hopedale Hospital community health needs assessment was started in winter 2011 and continued through spring of 2012. The process followed recently issued interim IRS guidelines allowing for a more confident focus of effort and resources.

ICAHN is grateful to Hopedale Hospital staff for their participation in the development of this project which will benefit many of their ICAHN partners in the years to come.

ICAHN and Hopedale Hospital are also most grateful to the health care professionals, community leaders and citizens who offered their thoughtful input for the assessment.

This report was submitted to the administration of Hopedale Hospital in May 2012, subject to further revision reflecting data updates or changes in local circumstances prior to widespread publication.

APPENDIX

Focus Group and Interview Participants

Jeremy Knepp

Morton Community Bank

Norm Birkey

Farmer, Community Leader

Debbie Birkey

Hopedale Community Banking Center
Hopedale Betterment Association

W. Thad Kuhfuss

Attorney At Law

Tom Hieser

Retired Insurance Underwriter

Sheri Bluhm

Delavan Rescue

Ellen Pratt MD

Springfield Clinic LLP

Amy Tippey

Tazewell County Health Department

Dawn Strupe

Hospices Compasses

Pastor Frank Pieper

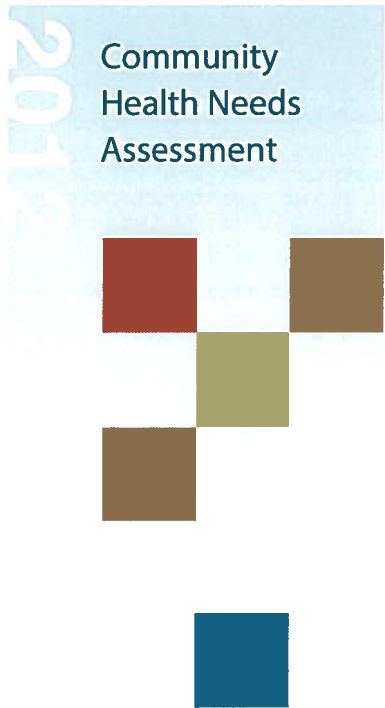

Emden

Pastor Kurt Litwiller

Boynton Mennonite Church
Hopedale

Joshua Horning

Principal
Christian Life Academy



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David Zimmerman
Board Chairman
Tazewell County

Pastor Bruce Bolin Ghitalla
Hopedale Methodist Church and Green Valley Methodist Church

Don Cremeens
Hopedale Lions Club

Wayne Cremeens
Retired Community Leader

Craig Friend
Mayor
Village of Mackinaw

Keith Haning
Supervisor
Boynton Township

Jesse Slager
Supervisor
Hopedale Township



2012 Community Health Needs Assessment

COLLABORATORS

The Hopedale Hospital Community Health Needs Assessment was developed and conducted by a consultant provided through the Illinois Critical Access Hospital Network (ICAHN).

ICAHN is a not-for-profit 501(c)(3) corporation, established in 2003 for the purposes of sharing resources, education, promoting operational efficiencies and improving health care services for member critical access hospitals and their rural communities. ICAHN, with 51 member hospitals, is an independent network governed by a nine-member board of directors with standing and project development committees facilitating the overall activities of the network. ICAHN continually strives to strengthen the capacity and viability of its members and rural health providers. Hopedale Hospital is a member of the Illinois Critical Access Hospital Network.

Terry Madsen, M.A., J.D., former University of Illinois Extension educator and community development specialist, was the lead collaborator for this project. Mr. Madsen is a member of the City Council and Commissioner for Public Health and Safety for the City of Princeton, Illinois, which owns a critical access hospital. He has participated in specialized training in community needs assessment, community organization, diversity, ethics, community and youth development and project evaluation.

Through ICAHN, Mr. Madsen has direct access to data services and specialized production equipment as well as educational, management and marketing support from in-house staff and consultants.

Curt Zimmerman, Director of Business Services and Development at ICAHN, provides technical support, design/layout direction, proofreading and editorial support for the community health needs assessments' projects provided through ICAHN and Mr. Madsen.



NOTES