

MONTGOMERY COUNTY

A community health plan is a tool that is utilized to encourage the development of community partnerships. These partnerships allow for an increase in quality and years of healthy life and the elimination of health disparities. The plan allows for collaboration of different entities for a common goal.

Montgomery County Health Department's vision is that of most health departments- Healthy People in Healthy Communities. Our mission is to promote physical and mental health and prevent disease. We are parts of a puzzle that work together for the big picture- healthy people.

Essential Public Health Services include:

- Monitor health status to identify community health problems.
- Diagnose and investigate health problems and health hazards in the community.
- Inform, educate and empower people about health issues.
- Mobilize community partnerships to identify and solve health problems.
- Develop policies and plans that support individual and community health efforts.
- Enforce laws and regulations that protect health and ensure safety.
- Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
- Assure a competent public health and personal health care workforce.
- Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
- Research for new insights and innovative solutions to health problems.

Statistics are available in a variety of different places. We have done our own statistics through review of medical records and birth and death certificates. We get information from our various programs, through the IDPH website, as well as other internet sources.

According to the Community Health Status report 2013, Montgomery County had a population of 29,620, with 43 people per square mile. Sixty-one (61.6) percent of the people are age 18-64, with 93.8% white, 3.3% black, 1.6% Hispanic, and .6% other. At that time, 10.7% were uninsured. We are not considered a health professional shortage area and the 2013 average life expectancy in Montgomery County is 79.9 for females and 74.9 for males, compared to the national average of 81.2 years for females and 76.5 for males.

Vulnerable populations may face unique health risks and barriers to care, requiring enhanced services and targeted strategies for outreach and case management. In Montgomery County, our most vulnerable populations include people who do not have a high school diploma, have major depression, or are unemployed.

National Air Quality Standards for carbon monoxide, nitrogen dioxide, ozone, and lead are met by the County.

Relative Health Status (2008) shows that Montgomery County had several unfavorable health issues, compared to the US rates. These include:

- Very low birth rate (< 1500g)
- Premature births (< 37 weeks)
- Births to women under 18 yrs. of age
- Colon cancer
- Lung cancer
- Motor vehicle injuries
- Stroke
- Suicide

In 2011 the leading causes of death by age include:

- Under age 1- complications of pregnancy/birth and birth defects
- Ages 1-14 - accidents, cancer
- Ages 15-24 - accidents, suicide ,cancer
- Ages 25-44 – accidents, cancer, heart disease, suicide
- Ages 45-64 - cancer, heart disease, accidents
- Ages 65+- heart disease , cancer

“Where we live matters to our health”. In reviewing information from the Illinois County Health Rankings 2010, we see that our health depends on many different factors, including quality of health care, individual behavior, what education is available and the jobs we do, as well as the environment. The Illinois County Health ranking is information developed by the Robert Wood Johnson Foundation and reflects the overall health of the counties. Montgomery County is ranked 82nd out of the 101 counties for health outcomes and 78th for health factors. Health outcomes represent how healthy a county is while health factors are what influences the health of the county.

Montgomery County is ranked 87th for mortality (representing length of life, based on potential years of life lost prior to age 76) and ranked 65th for morbidity (health-related quality of life and birth outcomes, including fair or poor health, poor physical days, poor mental days). Other health rankings for Montgomery County include: 35th for health behaviors (measures of smoking, diet and exercise, alcohol use, and risky sex behavior); 63rd for clinical care (access to care and quality of care); 90th for social and economic factors (education, employment, income, family and social support, and community safety); and 52nd for physical environment (environmental quality and the built environment).

Demographic and Socioeconomic Indicators

A. Census

1. According to the 2010 census, the total population of Montgomery County decreased from 2000 by 418 persons. In 2010, the population was listed as 30,104. Estimated population of Montgomery County on July 1, 2015, was 28,898. (www.census.gov)
2. There will be little change in the make-up of the population.

2010 census	2015 projected census
White 95.1%	White 95.5%
Black 3.2%	Black 3.0%
Other 1.7%	Other 1.5%
Men 52.3%	Men 51.7%
Women 47.7 %	Women 48.3%

3. According to projected population figures, in 2015, at least 19.0% will be over the age of 65, compared to census reports of 17.3% in 2010.

B. Economic:

1. Home ownership rate in 2010 - 2014 was 77.1%.
2. Average number of persons living in a home for 2010 - 2014 was 2.22, which is comparable to state figures.
3. Montgomery County is primarily rural. Population per square mile in 2010 was 42.8 people, while in 2015 estimated population per square mile was 43.
4. Unemployment jumped in 2013 to 11.1 % from 9.1% in 2008, in Montgomery County. Illinois rate of unemployment in 2013 was 9.2%. Montgomery County's rate was 8.7% in January 2015 compared to the Illinois rate of 6.9%.
5. According to the 2010 census, 17.0% of the population is below the poverty level compared to 13.4% in 2000.
6. In 2014, 12.4 % of the county population received food stamps compared to 8.8% in 2010.

C. General Health and Access to Care:

Montgomery County has two (2) hospitals, six (6) physician offices, and nine (9) pharmacies. Both hospitals are listed as critical access hospitals. Hillsboro Area Hospital has forty-one (41) physicians on staff. St. Francis Hospital in Litchfield has seventeen (17) physicians on staff. Some of the physicians are consultants with their primary offices in Springfield, Granite City/Alton area or Macoupin County. Presently none of the pharmacies have urgent care services.

1. In 2009 - 2013, 23.91% of the population was enrolled in Medicaid per U.S. Census Bureau American Community Survey.
2. According to BRFSS 2011:
 - a. 16.3% of Montgomery County residents have no health plan, compared to 11.9% in Illinois. This is an increase for Montgomery County residents from the 18.7% from the 2007 BRFSS.
 - b. 57.8 % of residents had a physical in the past year, compared to 69.2% for Illinois.
 - c. 14.2% of the people surveyed said their mental health was not good 8 – 30 days during the last year, compared to 14.8% in Illinois.

- d. 25.5% of Montgomery County residents surveyed have been told they have depressive disorder, compared to 16.7% in Illinois.
- e. 71.6% of the people surveyed consider themselves overweight or obese, compared to 63.7% in Illinois.
- f. 37.6% of Montgomery County residents surveyed received flu shots in the past year, compared to 38.5% for Illinois.
- g. 20.9% of the County residents surveyed smoke, compared to 16.7% in Illinois.

D. Mortality:

1. In reviewing local death certificate data for the past five (5) years, the leading cause of mortality in Montgomery County remains cardiovascular disease (27.0 %, including CVA, MI, CHF), with cancer being second (21.0%)
2. Accidents, including motor vehicle accidents (MVA) are the leading cause of potential years of life lost, followed by malignant neoplasm and diseases of the heart. This is similar to state statistics. (IPLAN 2004-2006) More timely statistics are not available for this feature.
3. Cancer deaths have caused 21.0% of the deaths in Montgomery County in the past five (5) years (local death certificates). Of these cancer deaths, 51.3% were males, and 48.7% female.
 - a. Lung cancer- 35.6%
 - b. Colorectal- 11.5%
 - c. Breast- 3.7%
 - d. Pancreatic- 3.1%
4. Mental Health Issues:
 - a. In the past five (5) years, there have been twenty-four (24) suicides in Montgomery County. (Montgomery County Death Certificate data)
 - b. Crisis calls have increased each year, but face-to-face staff involvement has decreased.
 - c. 12.2% of residents feel they are at risk of acute or binge drinking. (BRFSS 2011)

E. Maternal Child Health: (IPLAN 2004-2006 averages)

1. Montgomery County had a higher percent of women who smoked during pregnancy (24.4%) compared to state average (9.1%).
2. In Montgomery County, 3.7 % of the births were to mothers 18 years of age or less compared to 3.5% for Illinois. There was a gradual decrease in the number of teen births, from 4.8% in 2004 to 2.6% in 2006 for Montgomery County.
3. Eight (8%) percent of births in Montgomery County were considered low birth weight, compared to 8.5% for Illinois.

4. Using MCHD stats, we show that the percentage of mothers who received adequate prenatal care, according to Kessner Index, was 87.3% in Montgomery County, compared to Illinois average of 74%. Montgomery County had 90.1% of mothers begin prenatal care in the first trimester compared to the 82.6% state average. This is an increase of 1.5% for Montgomery County.
5. There were 871 infants born in Montgomery County from 2012-2014, with 3 infant deaths. (IDPH stats)

F. Chronic Disease:

1. Diagnosis of diabetes has increased from 7.3% (BRFSS 2007-09) to 10.5% (BRFSS 2011). The 2011 figure for the State of Illinois is 10.2%.
2. Behavioral risk factors for health issues in Montgomery County (BRFSS 2011):
 - a. 71.6 % county residents consider themselves overweight or obese, compared to 65.8% for all of Illinois.
 - b. 20.9% of those surveyed smoke presently, compared to 29.7% surveyed in 2007. State rate of smokers is 15.1%. In Montgomery County, 23.8% were former smokers, while 55.3% had never smoked. For Illinois, 24.4% were former smokers while 60.5% have never smoked.
 - c. 35.6% of residents surveyed have been told they have high blood pressure, in comparison with 30.8 % of Illinois residents (IPLAN 2011).
 - d. 36.1% of the residents surveyed have been told they have high cholesterol.

G. Infectious Disease Indicator:

1. Vaccine preventable disease cases are very low.
2. Hepatitis C case reports have been increasing each year. Most cases reported to us are chronic, not acute cases.

H. Environmental, Occupational, and Injury Control Indicators:

1. Montgomery County has twelve (12) zip codes listed in the pediatric lead poisoning high-risk areas. In the past year, we have had only 1 report of elevated lead in a child that needed investigation.
2. Montgomery County is listed as a “suspect” county for the deer/blacklegged tick.

I. Sentinel Events:

1. None noted in the current period reviewed.

J. Priority Selection:

After gathering and compiling the information from the Community Health Needs Assessment and the IPLAN Self-Assessment, the information was presented to the Board of Health. Our Board is composed of eight individuals that represent different public sectors within our community. The medical field, education, governmental, agricultural and retired populations are all represented here. After discussion, the members recommended focusing on cardiovascular disease, parenting, and mental health. These recommendations were then presented to the administrative staff of the Health Department at a monthly staff meeting. The supervisors of each health department division and the Administrator then voted to accept the priorities chosen by the Board of Health.

CARDIOVASCULAR DISEASE

Cardiovascular disease continues to be the leading causes of death in Montgomery County. In fact, as listed on the death certificates reviewed at the Montgomery County Clerk's Office, cardiovascular disease accounts for 27% of the deaths over the last four (4) years. (319/1180, Cardiovascular/Total Deaths). Comparatively, per the Illinois Department of Public Health, from 2008 – 2011, 100,345 deaths within Illinois can be attributed to cardiovascular disease out of 403,880. This is 24.9% of all deaths in the State.

In reviewing local death certificates from 2013 - 2014, we found that 54% of deaths related to cardiovascular disease were female. The average age at death for females dying of CVD was 83 years, while males passed away at the average age of 79. The youngest female to die of some type of heart disease was 54 while the youngest male was 43 years of age.

Some of the most important behavioral risk factors of heart disease and stroke are unhealthy diet, physical inactivity and tobacco use. Behavioral risk factors are responsible for about 80% of coronary heart disease and cerebrovascular disease.

The effects of unhealthy diet and physical inactivity may show up in individuals as raised blood pressure, raised blood glucose, raised blood lipids, or obesity. These are called 'intermediate risk factors'.

There are also a number of underlying determinants of CVDs, or, if you like, "the causes of the causes". These are a reflection of the major forces driving social, economic and cultural change – globalization, urbanization, and population ageing. Other determinants of CVDs are poverty and stress.

Many factors influence whether a person will develop heart disease and how fast it will progress. Certain factors are potentially controlled by the individual, such as smoking, diet and physical activity. Other factors are beyond a person's control such as genetic tendencies and stress.

Heart disease and diabetes share some health issues. Keeping their ABC's in check is one way people can help lower their risk for heart disease. MCHD will work with these ABC's to help residents lower that risk. These include A1C, blood pressure and cholesterol.

Montgomery County Health Department will be working with different work places to do their own BRFS. This information will help us in providing education, screening and other information.

OUTCOME, IMPACT, AND PROCESS OBJECTIVES

Healthy People 2020 Objective: HDS-2 HP2020-1 Reduce Coronary Heart disease deaths

- 1.0 By 2020, Reduce rate of coronary heart disease deaths to 255/1000 (Baseline 270/1000 death, Montgomery County Death certificate review 2011-2015)
 - 1.1 By 2019, decrease to 69% the number of persons who are classified as overweight or obese. (Baseline 71.6% BRFSS 2011)
 - a. Promote benefits of physical activities at local health fairs and the health department website.
 - b. Encourage local businesses to provide wellness programs to their employees.
 - c. Stress importance of physical activity to parents for their children.
 - 1.2 By 2019, increase the number of county residents that have had their cholesterol checked within at least the past two years to 74.5% (Baseline 72.2%- BRFSS 2011)
 - a. Promote health fairs for both local hospitals.
 - b. Provide opportunities for lipid screenings at the health department.
 - c. Increase educational material availability to business and on the health department website.

RESOURCES

Montgomery County Health Department - Works with job sites to offer screening programs, including blood pressure and lipid screenings. They also provide blood pressure clinics at senior centers and schools. They offer educational programs for the community.

Hillsboro Area Hospital (Hillsboro) - The hospital holds an annual Health Fair screening for the general public in May and shares statistics with Montgomery County Health Department (MCHD).

St. Francis Hospital (Litchfield) - Partners with St. John's Hospital to offer promote wellness and healthy living programs to the community. They offer community health fairs and disease screenings.

Montgomery County Cooperative Extension - This agency offers many educational programs, including nutrition and youth programs.

Local Schools - All schools in the county work with the Health Department to provide health education at various grade levels.

BARRIERS

The importance of screenings has not seemed to have been accepted by the public as well as we would hope. People do not put forth the effort to participate in preventative screenings unless they are encouraged to do so by a medical professional such as their physician. With that in mind, most individuals do not routinely go to their doctor unless they are feeling ill. So getting the public to understand the importance of receiving these screenings is very challenging.

The cost of the screenings can also be preventative to some.

FUNDING

The Health Department currently provides health fairs and presentations to the public and private businesses at no cost. The local hospitals provide screenings annually at a reduced cost and insurance coverages should be considered. Additional funding sources are needed. The Health Department currently utilizes local property tax money to pay for its activities.

PARENTING

In the past decade the Montgomery County Health Department, in cooperation with other agencies, has seen an increase of parents struggling with raising their children. The traditional functional family is no longer the norm. Many single parent family units or blended families exist causing stress, little support and most of all, many questions on how to raise or parent children.

Our agency has been reviewing a list of agencies' statistics since 2011 that reflect how the "parenting" issue has impacted our county.

One agency we work closely with is a part of the Regional Office of Education #3, Learning Express, a parenting 0-3parenting-prevention initiative support program. During fy2014-15, fifty-six (56) families were enrolled. The following statistics stand out on parents/families of children ages 0-3:

- 21% of the families had a child with a disability
- 17% of the families had a child with a chronic illness
- 30% of the families had a parent with a mental illness
- 37% of the families had a parent with no GED or high school diploma
- 26% of the families were homeless
- 21% of the families had a parent with a history of substance abuse
- 23% of the families had a parent that had been the victim of some form of child abuse or neglect

The Montgomery County Juvenile Probation Supervisor's caseload did not increase from 2010 to 2014. It went down from 78 in 2010 to 46 in 2014. This is potentially not a reliable picture as troubled juveniles can serve probation in the jurisdiction where the offence was committed. Therefore, Montgomery County juveniles may be serving probation in other counties.

The Circuit Clerk informed the Montgomery County Health Department that the total number of teen offenses tried in our county for the years 2011 – 2014 were as follows:

- Illegal Consumption: 259
- Possession of Cannabis <2.5 grams: 27
- Drug Paraphernalia: 46
- Possession of Controlled Substance: 5

These figures are reflective of the activities of the teens in our community as these offenses were committed in our county. This does not take into consideration where the juveniles reside.

Cornerstone Academy, located in Nokomis, Illinois, is a private school contracted by the State of Illinois to teach and manage students with behavioral disorders opened in 2011. Enrollment for that first year was sixty (60) students. At the end of the 2015 school year, the enrollment was up to ninety (90). The school has students from sixteen (16) different school districts. Since the enrollment has increased so much in four years, another school was opened in Stonington,

Illinois this fall. The Mentra Group is a private institution that has schools of this type all over the United States.

The Illinois State Board of Education shows that the percentage of high school students that graduate from the four (4) county school districts for 2012 are as follows:

Hillsboro 82%
Litchfield 83%
Nokomis 83%
Panhandle 94%

The percentage of students classified as “low income” in these same school districts are as follows:

Hillsboro 43%
Litchfield 47%
Nokomis 42.5%
Panhandle 42.8%

The Health Department was not able to obtain information from the Illinois Department of Public Health for STD’s because the collected information did not segregate between adults and teens.

Per the vital records from the State of Illinois for Montgomery County, there were no reported teen suicides for the years 2011 – 2014.

When talking with school administrators, daycare providers, parenting support agencies, educators and county officials, the number one need of the Maternal Child Health population is access to parental assistance, education and support for all children ages 0 to 18 years of age.

OUTCOME, IMPACT AND PROCESS OBJECTIVES

Healthy People 2020 Objective: AH-5.1 HP2020-1 Increase the proportion of students who graduate with a regular diploma 4 years after starting 9th grade.

- 2.0 By 2020, increase the average percentage of students graduating on time from the four county high schools to 88%. (Baseline 86% - Illinois State Board of Education)
- 2.1 By 2019, decrease the number of illegal consumption offenses brought into the court system. (65 annually per Montgomery County Circuit Clerk’s Office)
 - a. Promote dangers of alcohol consumption to the minors through school programs.
 - b. Provide parents information on social hosting and legal consequences.

RESOURCES

Illinois Department of Public Health – Division of Reportable Disease

Montgomery County:

Circuit Clerk
Juvenile Probation Office

Montgomery County Health Department:

Maternal Child Health
Mental Health
Public Health

Parenting Support Groups:

Hand-in-Hand, Nokomis School District
Learning Express, ROE3 Parent Educators

Regional Office of Education #3: Bond, Christian, Effingham, Fayette, Montgomery

Schools:

Cornerstone Academy, Nokomis, Illinois
Head Start – CEFS, Effingham, Illinois
Hillsboro School District, Hillsboro, Illinois
Litchfield School District, Litchfield, Illinois
Nokomis School District, Nokomis, Illinois
Panhandle School District, Raymond, Illinois

BARRIERS

One of the main barriers is the lack of actual school based classes available to individuals on parenting. The local school districts have a limited amount of funding and parenting information is not seen as a priority in any curriculum. It has been assumed in the past that individuals learned the parenting concept from their own families, as the family structure has changed throughout the years the focus has changed from the children to other interests.

Another barrier is the stigma of the male role in parenting. It still is not seen as the “cool” thing for the father of the child to play a major role in raising the children. This is especially true the younger the father is.

FUNDING

The Montgomery County Health Department currently provides WIC and FCM services through its Maternal Child Health Office. This department is currently in the planning process with a group of local physicians to provide parenting classes to first time parents within the county. There is no funding for this service currently. The Substance Abuse Prevention Program has a

coalition that is looking to possibly focus its attention on social hosting. This coalition is made up of all volunteers.

MENTAL HEALTH

According to the National Alliance on Mental Illness (NAMI), an estimated 18.5% of U.S. adults- about one in five- experience mental illness in a given year. Approximately 1 in 25 adults experiences a serious mental illness in a given year that substantially interferes with or limits one or more major life activities. In Montgomery County, this means approximately 1,200 residents could suffer from a serious mental illness sometime during the year. Mental illnesses are medical conditions that disrupt a person's thinking, feeling, mood, ability to relate to others and daily functioning. Mental illnesses are medical conditions that often result in a diminished capacity for coping with the ordinary demands of life. Many people suffer from more than one mental illness at any given time and 50.5% of the adults experiencing a substance use disorder have a co-occurring mental illness. Like many other common ailments, these problems are temporary or can be controlled with the proper treatment and/or medications.

At the Montgomery County Health Department, most clients seen by the mental health staff have the following diagnosis:

- Major depressive disorder
- Oppositional defiant disorder
- Bipolar disorder
- ADHD
- Schizophrenia

According to NAMI, 20% of state prisoners and 21% of local jail prisoners have a "recent history" of a mental condition. Also, mood disorders, including major depression and bipolar disorder, are the third most common cause for hospitalization in the United States for both youth and adults aged 18 – 44.

Per the American Foundation for Suicide Prevention, suicide is the 11th leading cause of death in overall in Illinois. It is the 2nd leading cause of death for ages 10-14 and 15-34, 4th leading cause for ages 35-44, and 9th leading cause for ages 45-54. Men die by suicide 4 times more often than women. In reviewing death certificates from July 1, 2011 through June 30, 2015, there were twenty-four (24) completed suicides. These completed suicides were twenty-two (22) males and two (2) females. The group with the highest rate of completed suicides was males between the ages of 25 and 65. While males are 4 times more likely than females to die by suicide, females attempt suicide 3 times as often as males.

The average face-to-face contacts needed has averaged around 29 for the years 2013-2016. The average caseload for the Health Department's Mental Health division in 2015 was 709 per month.

Stress is a factor in many health issues. In small doses, stress may be good for a person as the body can give the individual a burst of energy. Excessive stress or prolonged exposure to stress can take its toll. This can lead to a feeling of being overwhelmed,

unable to cope, or unexplained aches and pains. This could be the first signs of depression or anxiety. There are many other possible warning signs, increase in blood pressure, headaches, etc., that should not be ignored. It is important to work on all aspects of health with mental health near the top of the list.

Job related stress is large problem in Montgomery County. As the economy has declined over the years, the fear of losing one's job has added a great deal of stress to individuals, as well as their families. Montgomery County has also experienced the loss of a major employer that not only affected its employees but also local suppliers and the County offices. MCHD will work with the work places in the county to offer stress workshops as needed. The Mental Health staff is trained in stress management and will work with the other divisions of the Health Department to offer programs tailor-made for entities seeking our assistance.

OUTCOME, IMPACT AND PROCESS OBJECTIVES

Healthy People 2020 Objective MHMD-1 HP2020-1: Reduce suicide rate.

3.0 By 2020, reduce the number of suicides deaths to less than 19/1000 deaths.
(Baseline: 21/1000 deaths, MCHD Death Statistics 2011-2015)

- 3.1 By 2019, reduce percentage of people who report more than 8 days poor mental health per month to less than 12%. (Baseline 14.2%, BRFSS 2011)
 - a. Increase availability of depression screenings to resident through health fairs, working with both hospitals.
 - b. Offer screenings through workplace.
 - c. Provide public awareness education on signs and symptoms of mental health issues.
 - d. Increase ability of the general public to identify existing services and means of access, so as to lessen social, educational, and cultural barriers to services, including updated websites

RESOURCES

Montgomery County Health Department Division of Mental Health - This division of the Health Department offers outpatient services, case management services, crisis intervention, parent programs, domestic violence abuse counseling, DUI services, group/family counseling, substance abuse awareness programs and Psychosocial Rehab (PSR).

Montgomery County Health Department Services for the Elderly - This division of Montgomery County Health Department works with persons over the age of 60, offering services and referral so the senior can stay in the home rather than being placed in a

nursing home. They are available to provide services in all senior programs, including elder abuse.

Health Fairs – The Montgomery County Health Department cooperated with various work sites to provide health fairs to their employees. Montgomery County Health Department also works with the senior centers, providing informational pamphlets on all issues, including stress, depression and mental health issues.

Healthcare Providers Alliance of Illinois - HPAI is a six (6) county group which works together to provide various screening programs and information. Partners in this group include County Mental Health Centers and the Wells Center in Jacksonville. Pamphlets for stress, depression and violence prevention have been developed to use at health fairs and throughout the schools.

Physicians - Provides medical expertise for mental health issues.

CEFS - This agency has several programs to assist with problems related to social services, as well as emergency assistance, financial counseling and housing.

Area Agency on Aging for LincolnLand/Illinois Department of Aging - These agencies work to protect the rights and interests of vulnerable older persons. These agencies work with the Community Care Program, Elder Abuse, and Case Management programs.

Land of Lincoln Legal Assistance Foundation, Inc.- Provide free civil, legal services to qualifying individuals in certain types of cases

Suicide Outreach Support – Local support group for family and friends of suicide victims.

BARRIERS

A barrier is the stereotype of being labeled “mentally ill.” Many people are reluctant to seek help for problems with treatable conditions trying to avoid this label.

The cost of mental health due to the high demand and low supply means it is very expensive. Also the economic troubles of the State of Illinois have drastically decreased the number of available crisis facilities even for the most dire clients.

FUNDING

The Montgomery County Health Department is a provider of mental health services which receives funding through the Illinois Department of Human Services, Division of Mental Health. Limitations have been set as to the number of service hours an individual can be seen and the State provide financial assistance. The Health Department does utilize a sliding fee scale for those in need of financial assistance. A severe deficit in

funding is apparent in this program especially when considering the cost of a psychiatrist once a week. Currently MCHD continues to see all individuals regardless of their ability to pay.

IPLAN Self-Assessment – January 15, 2016

MCHD staff met to discuss the past five years and the future five years for the Montgomery County Health Department. They were divided into 4 groups. Discussion time allowed was 40 minutes. Then all were brought together again and main points discussed.

It was discussed that the public image of the Health Department has changed. We continue to be in the eye of the public, but we need to get more information out about all of the programs and services offered. It would be great to be able to offer some of the services lost due to funding cuts and the budget impasse. One noted programmatic deficiency is drug rehabilitation in our area.

The new PSR building has been a great addition. The building is being fully utilized by various departments. It would be nice to expand our PSR program to additional days but currently the need is not there.

We are doing great in cooperating with the schools. We still provide the Prevention Program in the schools and assist with immunizations as needed. It would be nice to have more mental health programs in the schools.

The compliance with the Smoke-Free Illinois Act is now linked to the Food Permit Ordinance.

If anyone sees any grants that we could apply for to help in the county, please let Hugh know.

It was noted that all buildings are ADA compliant and get inspected regularly by the Illinois Fire Marshall Office.

We need to work with the local law enforcement to see what can be done to address the heroin problem we have been seeing.

Also the unfortunate apparent increase in suicide, especially in youth, needs our attention.

Negative Issues:

Failed to be as proactive regarding energy-efficiency as we could be

Declined public image in the past

Loss of community-based services

The Litchfield building and parking lot not large enough at times

Water gets in the breezeway and a few offices when rainfall is extreme

Poor utilization of space in the garage

State of Illinois budget impasse

Parking lot at the Hillsboro office is in need of resurfacing.

The telephone system is old and seems to be shutting down more often

Better ventilation is needed in the waiting areas

Positive Issues:

Litchfield satellite office continues to be successful and a good asset
Flu clinics for school and community sites, improvement mass distribution clinics
Debt-free on all buildings
New PSR building allows for greater utilization
More publicity and awareness, improvement in MCHD image
Better working relationship with the local hospitals and law enforcement - crisis
Increased cross-training among MCHD staff
BCCP expanded to 28 counties
New computer system in Mental Health
Secure jobs and raises
Support groups have grown (Breast, Diabetes)
MCHD teamwork increased
Fiscally sound - addition PSR building and sale of School Street location
Improvement of in-house communications via improved technology
Technology advancement
IBCCP outreach
All billing is being handled by the Administration Department
Participation in the County's all-hazards mitigation plan.
Cell phones for all on-call assignments

Suggestions for next 5 years

Continue to keep up with advancing technology
Recover, maintain and add community-based services
Increase PSR attendance
Maintain professional image
Increase public education regarding available programs, through advertising
Transportation
Men's health program
Services for sexual abuse programs for kids and adults
Dental services for adults
More adult vaccine/education
Better training for staff - for those without licenses
Mental Health to perform PAS screenings for CCU
Expand IBCCP to additional counties in southern part of state
Preventing obesity programs
708 funding
Additional time for psychiatrist
Annual safety updates
Offer more PH services
Offer domestic violence group for women
Obtain emergency crisis beds for MH

MCHD employees- attended IPLAN meeting

Paula Beckman- Public Health
Lori Beeler, RN- Mental Health
Kimber Deming- Mental Health
Carolyn Dewerff, RN- WIC/MCH
Karyl Dressen, RN- Services for Elderly
Lorie Dwyer- Mental Health
Mickie Fellers- Administration
Veronica Green- Services for Elderly
Christy Guinn- Public Health
Gary Hale- CRC
Shelley Halleman- Administration
Mary Harrison- Mental Health
Kayla Hilt- Public Health
Christine Jarmen, RN- WIC/MCH
Mark King- Environmental
Patricia Kirk, RN- WIC/MCH
Susie Laurent- Services for Ederly
Frankie Malloy- Administration
Sandy Martincic- Administration
Amber Mifflin- Mental Health
Jessica Moxey- Services for Elderly
Pam Myers, RN- Public Health
Lori Partch- Services for Elderly
Jodi Perkins- Administration
Hugh Satterlee- Administration
Rebecca Schweizer- Public Health
Lynn Sellers- Services for Ederly
Cindy Simburger- Services for Elderly
Kendal Stewart- Mental Health
Randy Thompson- Mental Health
Julie Timmerman, RN- WIC/MCH
Deb Traylor- Mental Health
Stephanie Tyson- Administration
Michelle Wallace- Mental Health
Kelsey Wayman- Mental Health
Kelly Weigand- Services for Elderly
Lynette Weiss- Mental Health
Jill Wright- Mental Health
Jeanice Yancik- Services for Elderly

CANCER

The second leading cause of death in the United States is cancer. This is also true for Montgomery County, Illinois. The disease that strikes the most fear in the minds of people is not heart disease, infection, or high blood pressure. It is cancer.

In 2005, we reported that nineteen (19%) percent of the deaths for the five (5) years prior were due to cancer. For 2005-2009, Montgomery County had a total of 1,694 deaths of which 372 were due to cancer, or twenty-two (22%) percent.

Using information from Illinois Cancer Registry (ICR), Montgomery County had 932 cancer diagnoses from 2002-2006. This is a decrease of six (6) from 1997-2002. During 2002-2006, lung and bronchus were the highest diagnosed cases (145), with colon and rectum a close second (133). Other high-incidence types in Montgomery County include Breast, invasive (119), Prostate (116) and Bladder (48). Liver cancer and bladder cancer have been diagnosed more in men than women.

As in the past, lung cancer is the leading type of cancer diagnosis in our county. The number of people diagnosed with lung/bronchus cancer has dropped slightly over the past fourteen (14) years. According to ICR, from 1992-1996, there were one hundred sixty three (163) people diagnosed with lung/bronchus cancer, sixty-five (65%) male. From 2002-2006, there were one hundred forty five (145) people diagnosed, with sixty (60%) percent being male. The number of lung cancer deaths has dropped slightly in the past 5 years.

Colorectal is the second highest diagnosed type of cancer in Montgomery County. The Illinois Cancer Registry shows that approximately 14% of the cancer diagnosed in Montgomery County is colorectal. According to the latest BRFSS for Montgomery County, only 38.2% have done a home blood stool test and only 44.5% of those over the age of 50 have had a colonoscopy.

While the exact cause of colorectal cancer is not known, we need to educate the residents on ways to reduce their risk. This includes screenings, diet and exercise.

Women's cancers, including breast, cervical, uterine and ovarian account for 19% of the cancer diagnosed in Montgomery County. Prostate cancer in men accounts for 12% of the cancer. It is important to provide education on importance of screenings

OUTCOME, IMPACT, AND PROCESS OBJECTIVES 2010

Healthy People 2020 Objective C HP2020-1 reduce the overall cancer death rate

- 2.0 By 2015, reduce overall cancer death rate to less than 20% or 200/1,000 deaths: (Baseline 22% or 220/1,000 deaths - Montgomery County Death certificates 2004-2009)

The death certificate analysis for Montgomery County shows the overall cancer death rate at 17.9% or 179/1000 deaths for 2014-2015. This rate is down from 23.85% for 2013-2014.

- 2.1. By 2014, reduce percent of smokers to 26%. (Baseline 29.7% BRFSS 2007)
 - a. Promote Tobacco Quitline through media, ads.
 - b. Provide educational opportunities for smokers on how to quit smoking.
 - c. Work with schools to provide education to students to help them decide not to start smoking.

- 2.2 By 2014, Increase to 48% the number of people who have had colorectal screenings based on most recent guidelines. (Baseline 44.5% colon/sigmoidoscopy, 38.2% stool blood test- BRFSS 2007)
 - a. Provide education through health fairs, news releases.
 - b. Work with area hospitals to provide screening opportunities.
 - c. Work with SIU School of Medicine Colorectal project.

- 2.3 By 2014, Increase the proportion of women age 18 and older who receive a cervical cancer screening based on most recent guidelines to 74%. (Baseline 69.3% within last year- BRFSS 2007)
 - a. Provide education through health fairs, talks, new releases.
 - b. Work with physicians to refer to IBCCP.

- 2.4 By 2014, Increase proportion of women aged 40 years and older who have received a breast cancer screening/mammogram based on most recent guidelines. (65.1% within last year- BRFSS 2007)
 - a. Provide education through health fairs, talks, new releases.
 - b. Work with physicians to refer to IBCCP.

The 2011 BRFSS for Montgomery County did not include information for comparative purposes of items 2.1 – 2.4 listed above. The push for cancer awareness and the need for early detection continue to be messages that are very prevalent in Montgomery County.

COLLABORATION/ RESOURCES

American Cancer Society - This organization provides informational pamphlets and videos to the Health Department and any interested groups.

American Lung Association - This organization provides information, statistics and education videos to be shown at group meetings. Also, the Quitline is provided in collaboration with IDPH.

HPAI (HealthCare Providers of Illinois) - Group of medical service providers in a six (6) county area. These providers work together to provide health screenings and information over a vast area at a reduced rate. They work together to apply for funding for similar programs, such as the IBCCP.

Hospitals - Provide special screening programs at a reduced fee during specific times of the year to assist the uninsured. St. Francis Hospital provides free occult blood kits for colorectal screening.

IDPH Office of Women's Health - Provides information on women's health issues. Also some screenings are paid for women who fit the guidelines.

Physicians - Local physicians provide information to patients on a wide array of available screenings. They also educate patients about the warning signs of cancer and importance of any recommended follow-up.

U of I Extension- Provides educational programs.

BARRIERS

Screening cost is a barrier for many individuals. While some insurance companies have added screenings to their coverage of services, they still do not cover all procedures. Also Montgomery County has a large population that does not have insurance due to low income or lack of income.

Another barrier would be the inability for people to have adequate time to take the recommended screenings. For those working, taking the time away from work is sometimes not accepted by their employers if it is for a screening process. This is especially true when the individual is not symptomatic.

The lack of patient follow-through is also a barrier. After the initial screening is completed many people fail to follow-up with their physician as recommended. This can be attributed to a lack of education concerning the importance of this vital step in preventative screenings.

FUNDING

The Montgomery County Health Department currently receives funding for the Tobacco Program and the Illinois Breast and Cervical Cancer Program. These sources are very

beneficial however are not adequate to cover all people seeking services. We are able to supplement with Susan G. Komen when available for breast cancer. The Tobacco Program through the State of Illinois is very limited and does not appear to be extremely reliable for future awards. The colorectal issue currently has no funding. Education can be presented but educational materials are limited due to no funding.

CARDIOVASCULAR DISEASE

Key Facts from WHO:

- Cardiovascular diseases are the number one cause of death globally; more people die annually from CVDs than from any other causes.
- An estimated 17.1 million people died from CVDs in 2004, representing 29% of all deaths. Of these deaths, an estimated 7.2 million were due to coronary heart disease and 5.7 million were due to stroke
- It is predicted that by 2030, almost 23.6 million people will die from CVDs, mainly from heart disease and stroke annually.

Key Facts from Montgomery County:

- Cardiovascular Disease remains the leading cause of death in our county.
- In reviewing death certificates, we found other health issues listed as contributing factors. These include diabetes and smoking.
- In reviewing local death certificates from 2008/09, we found that 52% of deaths related to cardiovascular disease were female. The average age at death for females was 84 years, while males passed away at the average age of 77. The youngest female to die of some type of heart disease was 54 while the youngest male was 36 years of age.

The most important behavioral risk factors of heart disease and stroke are unhealthy diet, physical inactivity and tobacco use. Behavioral risk factors are responsible for about 80% of coronary heart disease and cerebrovascular disease.

The effects of unhealthy diet and physical inactivity may show up in individuals as raised blood pressure, raised blood glucose, raised blood lipids, or obesity. These are called 'intermediate risk factors'.

There are also a number of underlying determinants of CVDs, or, if you like, "the causes of the causes". These are a reflection of the major forces driving social, economic and cultural change – globalization, urbanization, and population ageing. Other determinants of CVDs are poverty and stress.

Many factors influence whether a person will develop heart disease and how fast it will progress. Certain health habits, including smoking, elevated cholesterol, elevated blood pressure, body weight and physical activity, are important.

Heart disease and diabetes share some health issues. Keeping their ABC's in check is one way people can help lower their risk for heart disease. MCHD will work with these ABC's to help residents lower that risk. These include A1C, blood pressure and cholesterol.

Montgomery County Health Department will be working with different work places to do their own BRFSS. This information will help us in providing education, screening and other information.

OUTCOME, IMPACT, AND PROCESS OBJECTIVES

Healthy People 2020 Objective: HDS HP2020-1 Reduce Coronary Heart disease deaths

- 1.0 By 2015, Reduce rate of coronary heart disease deaths to 320/1000 (Baseline 339/1000 death, Montgomery County Death certificate review 2004-2009)
 - 1.1 By 2014, increase to 62% the number of persons who have cholesterol checked within last year. (Baseline 58.4% BRFSS 2007)
 - a. Provide opportunities at the health department for lipid screenings.
 - b. Increase the number of opportunities for education - work with both hospitals and workplaces.
 - c. Increase educational media outlets, including newspaper, health department website.

As noted on the 2011 BRFSS, 59.6% of the County residents surveyed had their cholesterol checked within the last year. An additional 12.6% had it checked within the last 13 – 24 months. MCHD continues to offer lipid screenings at the office and assists with health fairs at local businesses. Both local hospitals continue to provide annual health fairs that include cholesterol screenings along with other blood work for very reasonable prices. Some businesses will cover this cost for their employees.

- 1.2 By 2014, decrease the number of persons who have been told they have elevated blood pressure. (Baseline 33.4%- BRFSS 2007)
 - a. Provide blood screening and follow-up at health department, work sites, business and health fairs.
 - b. Provide educational material at work site, business and health fairs.

Per the 2011 BRFSS, 35.6% of those surveyed have been told by a health professional that they have high blood pressure. MCHD continues to provide educational materials concerning the causes of elevated blood pressure. Clients for all MCHD programs are offered assistance the available resources.

- 1.3. By 2014, increase to at least 75% the proportion of people with high blood pressure whose blood pressure is under control. (Baseline 33.4% told had elevated B/P, BRFSS 2007)
 - a. Continue to provide opportunities for blood pressure screenings at senior centers, worksites and walk-in clinics.
 - b. Provide nutrition education for high risk groups at health fairs, screening programs and work with the Extension Office to offer nutrition classes

Per the 2011 BRFSS, 35.6% of those residents surveyed have been told that they have high blood pressure. Of those 84.2% were advised to take blood pressure medicine. As the information is not available as to the percentage of those advised that are actually compliant with taking their medication, a conservative estimate for compliance would be 75%. The Services for the Elderly program for MCHD continues to offer blood pressure clinics throughout the county.

- 1.4.1 By 2014, increase to 80%, the proportion of persons with diabetes who receive diabetes education at least annually. (Baseline 65%, Cornerstone IDCP FY 2009)
- a. Exhibit diabetes awareness materials at local health fairs.
 - b. Provide monthly support group and bi-monthly newsletter.
 - c. Promote programs through IDPH Diabetes Prevention and Control program.

The Cornerstone IDCP information is no longer available. The monthly diabetes support group continues at Montgomery County Health Department. St. Francis hospital has started a diabetes education program which is a six week course that is offered periodically. The University of Illinois Extension office also is offering nutrition education for individuals with diabetes.

- 1.4.2 By 2014, increase to 80% the number of diabetics who have their HA1C checked at least twice annually. (Baseline 72%, Cornerstone IDCP FY2009)
- a. Provide screening opportunities, in cooperation with local hospitals and physician offices.
 - b. Provide education through newsletters, health fairs and talks.

The Cornerstone IDCP information is no longer available. Both local hospitals offer HA1C's at their annual health fairs. At the 2016 HAH health fair, 20.4% of the participants had an HA1C completed.

RESOURCES

Montgomery County Health Department - Works with job sites to offer screening programs, including blood pressure and lipid screenings. They also provide blood pressure clinics at senior centers and schools. They offer educational programs for the community.

Hillsboro Area Hospital (Hillsboro) - The hospital holds an annual Health Fair screening for the general public in May and shares statistics with Montgomery County Health Department (MCHD).

St. Francis Hospital (Litchfield) - Partners with St. John's Hospital to offer promote wellness and healthy living programs to the community. They offer community health fairs and disease screenings.

Montgomery County Cooperative Extension - This agency offers many educational programs, including nutrition and youth programs.

Local Schools - All schools in the county work with the Health Department to provide health education at various grade levels.

Southern Illinois University- Edwardsville School of Nursing - Works with various job sites to offer screenings and health education as part of their Community Nursing Projects.

BARRIERS

A lack of awareness of the importance of preventive screenings is the main barrier. Many people feel that since they feel fine that everything is fine with their health. Some types of insurance will pay for screenings but people do not want to take the time to do the screening. Once the screening is done, they often do not follow-up with physician.

The inability to access these screenings with current schedules can also be a barrier for many people.

FUNDING

The Health Department currently provides health fairs and presentations to the public and private businesses at no cost. To continue with the program, a funding source could be utilized to obtain new educational tools including displays and pamphlets. The Agency currently supplements this program with local property tax money.

MENTAL HEALTH

According to the National Institute of Mental Health (NIMH), an estimated 26.2% of Americans, 18 years and older- about one in four adults- suffer from a diagnosable mental disorder in a given year. In Montgomery County, this means approximately 5,000 residents could suffer from some type of mental illness sometime during the year. Mental illnesses are medical conditions that disrupt a person's thinking, feeling, mood, ability to relate to others and daily functioning. Mental illnesses are medical conditions that often result in a diminished capacity for coping with the ordinary demands of life. Many people suffer from more than one mental illness at any given time. Like many other common ailments, these problems are temporary or can be controlled with the proper treatment and/or medications.

Mental disorders are the leading cause of disability in the United States for ages 15-44 yrs of age. According to WHO, major depressive illness will be the leading cause of disability for women and children. At the Montgomery County Health Department, most clients seen by the mental health staff have the following diagnosis:

- Major depressive disorder
- Intermittent explosive disorder
- Bipolar disorder
- ADHD
- Schizophrenia

According to CDC, females are three times more likely to report attempting suicide. Males are four times more likely to actually die from suicide attempts. In reviewing death certificates from July 1, 2004 through June 30, 2009, there were twenty completed suicides. These completed suicides were **exclusively** male, using a firearm as the method of choice. The group with the highest rate of completed suicides was males between the ages of 50 and 75. In the past review, the most likely times of the year for suicide were during August, October, and December. This time there is no pattern.

In 2007, Montgomery County Helpline calls totaled 792 with 122 face-to face contacts. In 2009, the number of calls increased to 915. Most of these crisis calls with face-to face contact, 52%, were with people between the ages of 21 and 50 years old. Hospitalization was needed for around 38% of these contacts. The average caseload for the Health Department's Mental Health division in 2007 was 766 per month. This has increased to 898 per month in FY 2009.

Stress is a factor in many health issues. In small doses, stress may be good for a person as the body can give the individual a burst of energy. Excessive stress or prolonged exposure to stress can take its toll. This can lead to a feeling of being overwhelmed, unable to cope, or unexplained aches and pains. This could be the first signs of depression or anxiety. There are many other possible warning signs, increase in blood pressure, headaches, etc., that should not be ignored. It is important to work on all aspects of health with mental health near the top of the list.

Job related stress is large problem in Montgomery County. As the economy has declined over the years, the fear of losing one's job has added a great deal of stress to individuals, as well as their families. MCHD will work with the work places in the county to offer stress workshops as needed. The Mental Health staff is trained in stress management and will work with the other divisions of the Health Department to offer programs tailor-made for entities seeking our assistance.

OUTCOME, IMPACT AND PROCESS OBJECTIVES

Healthy People 2020 Objective MHMD HP2020-1: Reduce suicide rate.

3.0 By 2015, reduce the number of suicides deaths to less than 8/1000 deaths.
(Baseline: 12/1000 deaths, MCHD Death Statistics 2004-2009)

The death statistics collected by MCHD from the death certificates for the County show that the number of suicide deaths per 1000 deaths was as follows: 2011-2012, 33/1000; 2012-2013, 6/1000; 2013-2014, 25/1000; and 2014-2015, 22/1000.

- 3.1 By 2014, reduce percent of people who report more than 8 days poor mental health days per month to more than 8%. (Baseline 10.1%, BRFSS 2007)
- a. Increase availability of depression screenings to resident through health fairs, working with both hospitals.
 - b. Offer screenings through workplace.
 - c. Provide public awareness education on signs and symptoms of mental health issues.
 - d. Increase ability of the general public to identify existing services and means of access, so as to lessen social, educational, and cultural barriers to services, including updated websites

According to the 2011 BRFSS, 14.2% of the residents surveyed report 8 or more days of poor mental health in a month. This could be attributed to more stress in the current world and people being more aware of what their "bad days" can be attributed to.

RESOURCES

Montgomery County Health Department Division of Mental Health - This division of the Health Department offers outpatient services, case management services, crisis intervention, parent programs, domestic violence abuse counseling, DUI services, group/family counseling, substance abuse awareness programs and Psychosocial Rehab (PSR).

Montgomery County Health Department Services for the Elderly - This division of Montgomery County Health Department works with persons over the age of 60, offering services and referral so the senior can stay in the home rather than being placed in a

nursing home. They are available to provide services in all senior programs, including elder abuse.

Health Fairs – The Montgomery County Health Department cooperated with various work sites to provide health fairs to their employees. Montgomery County Health Department also works with the senior centers, providing informational pamphlets on all issues, including stress, depression and mental health issues.

Healthcare Providers Alliance of Illinois - HPAI is a six (6) county group which works together to provide various screening programs and information. Partners in this group include County Mental Health Centers and the Wells Center in Jacksonville. Pamphlets for stress, depression and violence prevention have been developed to use at health fairs and throughout the schools.

Physicians - Provides medical expertise for mental health issues.

CEFS - This agency has several programs to assist with problems related to social services, as well as emergency assistance, financial counseling and housing.

Area Agency on Aging for LincolnLand/Illinois Department of Aging - These agencies work to protect the rights and interests of vulnerable older persons. These agencies work with the Community Care Program, Elder Abuse, and Case Management programs.

Land of Lincoln Legal Assistance Foundation, Inc.- Provide free civil, legal services to qualifying individuals in certain types of cases

BARRIERS

A barrier is the stereotype of being labeled “mentally ill.” Many people are reluctant to seek help for problems with treatable conditions trying to avoid this label.

Another barrier for those attempting to receive help is the lack of transportation available to get them to their appointments.

The economic situation for many Montgomery County residents does not always allow them the opportunity to obtain services and remain vested in their mental health needs.

FUNDING

The Montgomery County Health Department is a provider of mental health services which receives funding through the Illinois Department of Human Services, Division of Mental Health. This funding source has changed its reimbursement policies in the last years especially for FY2011. Limitations have been set as to the number of service hours an individual can be seen and the State provide financial assistance. The Health

Department does utilize a sliding fee scale for those in need of financial assistance. A severe deficit in funding is apparent in this program especially when considering the cost of a psychiatrist once a week.



MCHD MONTGOMERY COUNTY HEALTH DEPARTMENT

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Please accept this letter as proof that the Board of Health has seen the Organizational Self-Assessment Plan for the 2015 IPLAN. After review of this plan, we, the Montgomery County Board of Health, approve of the 2015 IPLAN choosing the focus areas of cardiovascular disease, parenting, and mental health.

Harold Jurgena

Harold Jurgena

President