

Gibson Area Hospital and Health Services

2024 Community Health Needs Assessment



Gibson Area Hospital
& Health Services

GIBSON GETS IT

Gibson Area Hospital and Health Services

2024 Community Health Needs Assessment

Introduction 3

Mission, Vision and Values
Executive Summary

Background 10

2021 CHNA results
Definition of the Community/Service Area Key Facts
Process Methods and Accountability
Implementation Strategies

1. Improve the community's mental health by improving access and helping educate the community. 23

Supporting Data
Priorities and Strategies

2. Improve knowledge of the signs and symptoms of cancer and ways to minimize cancer risks through healthy lifestyle choices. 26

Supporting Data
Priorities and Strategies

3. Promote and coordinate hospital, clinic, and community resources to minimize unnecessary redundancy and ensure that resources reach people when needed. 29

Supporting Data
Priorities and Strategies

Secondary Data is documented in a separate document entitled "Gibson Area Hospital and Health Services 2024 Secondary Data."

Introduction

The original Gibson Area Hospital, opened in 1952, had fourteen rooms and a capacity for 28-30 patients. Many updates and changes have been made since then.

Still, one thing that has not changed is Gibson Area Hospital and Health Services (GAHHS)'s commitment to providing **exceptional healthcare to the residents of central Illinois.**

GAHHS, a pillar of the community, stands as one of the largest Critical Access Hospitals in the nation, with thirty-five clinics offering primary, specialty, and dental care.

Their service line expansion through 2023, including orthopedics, urology, neurology, addiction medicine, podiatry, hematology/oncology, pulmonology, rheumatology, interventional radiology, cardiology, psychiatry, dentistry, and ENT (Ear Nose and Throat), is a testament to their commitment to the health of our community.

In 2023, GAHHS was honored to receive approximately 1.7 million dollars in grant funding, a recognition of our continual organizational growth, provision of state-of-the-art services, and support for the communities we serve. GAHHS has been nationally recognized for excellence in patient care by DNV-GL, Healthgrades, Center for Medicare and Medicaid Services, and Women's Choice.

GAHHS has also been recognized as a Five-Star Hospital for patient experience.



Copyright ©2024 by the Illinois Critical Access Hospital Network (ICAHN). All rights reserved. The contents of this publication may not be copied, reproduced, replaced, distributed, published, displayed, modified, or transferred in any form or by any means except with the prior permission of ICAHN. Copyright infringement is a violation of federal law subject to criminal and civil penalties.



Vision

TO BE THE MODEL OF EXCELLENCE IN COMMUNITY-BASED HEALTHCARE.

Mission

TO PROVIDE PERSONALIZED, PROFESSIONAL HEALTHCARE SERVICES TO THE RESIDENTS OF THE COMMUNITIES WE SERVE.



2024-2026 Strategic Goals

1

Quality & Patient Satisfaction

Deliver outstanding patient care that exceeds national benchmarks for quality, patient satisfaction, and customer experience.

2

Financial Stewardship

Assure that facilities, technology, and financial resources are available for our ongoing success.

3

Growth

Deliver outstanding patient care that exceeds national benchmarks for quality, patient satisfaction, and customer experience.

4

Physician, Advanced Practice Providers, and Staff Development

To provide our physicians, advanced practice providers, and staff the tools and support they need to be successful.

5

Strategic Community Partnership

Strengthen our role as a health care leader in our region.



Executive Summary

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

This assessment process results in a CHNA report, which assists the hospital in planning, implementing, and evaluating hospital strategies and community benefit activities. The Community Health Needs Assessment was developed and conducted, in partnership with representatives from the community, 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 to share resources, educate, promote operational efficiencies, and improve healthcare services for member critical access and rural hospitals and their communities.

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

This Community Health Needs Assessment will guide planning and implementing healthcare initiatives that will allow the hospital and its partners to serve best the emerging health needs of Gibson City and the surrounding areas of central Illinois. The chief executive officer coordinated the CHNA process.

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

The focus groups' findings were presented along with secondary data analyzed by the consultant to a focused group for identifying and prioritizing the community's significant health needs.



Executive Summary (continued)

IDENTIFICATION AND PRIORITIZATION > ADDRESSING THE NEED

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

1. Improve the community's mental health by improving access and helping educate the community.
2. Improve knowledge of the signs and symptoms of cancer and ways to minimize cancer risks through healthy lifestyle choices.
3. Promote and coordinate community resources to minimize unnecessary redundancy and ensure that resources reach people when they are needed.

During a facilitated discussion, the assessment process's results were then presented to senior staff at Gibson Area Hospital to develop a plan to address the identified and prioritized needs.

ADDRESSING THE NEED > CREATING THE PLAN

The group addressed the needs with the following strategies:

- Continuing the efforts to recruit and retain mental health professionals.
- Investigate ways to both educate people and help to break the stigma of mental health.
- Investigate the potential of a mentoring program for local schools.
- Educate the community on the prevalence of cancer in the area.
- Develop and promote cancer screening events in the community.
- Start or support existing support groups for various cancers.
- Cross-promote events via hospital, school, and city websites to ensure everyone in the community is knowledgeable about events taking place in the Gibson City market area.
- Develop or expand upon existing community collaborative/roundtable events 2-3 times yearly.

Background

Gibson Area Hospital – CHNA 2021

The Community Health Needs Process is conducted every three years. In response to issues identified and prioritized and the implementation strategy developed to address them, Gibson Area has taken the following steps since the 2021 CHNA.

Priority #1 – Address substance use disorder in the Gibson Area Hospital and Health Services’ service area by increasing prevention efforts.

- GAHHS continues active involvement in the substance use prevention coalitions in Ford, Iroquois, and Livingston counties.
- Increased access to the Smart Recovery Program.
- Grew access to X waiver providers.
- Improved the ED processes for persons presenting with substance abuse disorders.
- Extensive substance abuse training was provided for the EMS service.



Priority #2 – Improve access to mental health counseling for youth to address anxiety, depression, and other behavioral health needs.

- GAHHS obtained the services of a rural psychiatrist with a fellowship in pediatric psychiatry. This was successful due to a long-term recruitment relationship with a medical student.
- Continued to support the four Advanced Practice Providers seeking certification in psychiatric/mental health.

Priority #3 – Better information and marketing of local healthcare services

- Continued delivering information to the community via electronic resource information, telephone, and print media.
- Used market analysis data to determine the best methods to provide information to the community.
- Cooperated with 211 to provide current and accurate information.

Priority #4 – Continue to improve transportation to and from medical appointments and care in general.

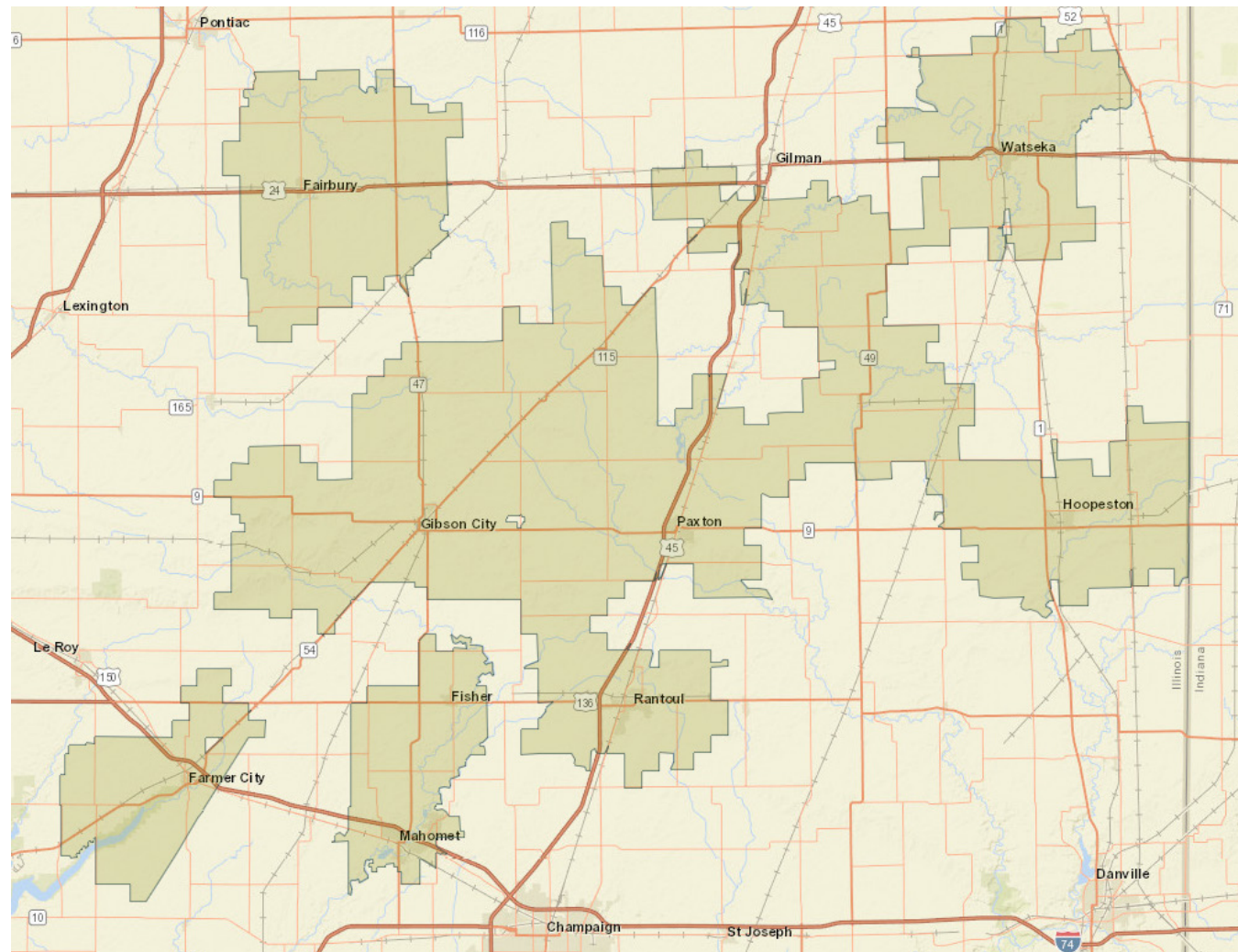
- Pursued funding for the purchase of a medical van to be used for vaccination clinics and eventually for general medical use.
- Continued to support the public transportation system available in the community.
- Supported the MediVan demand. In 2023, 8,622 rides were provided, and 257,285 miles were driven. GAHHS received a grant of \$112,000 from Illinois ARISE to directly help fund the MediVan service.



Gibson Area Hospital Service Area

For this CHNA, Gibson Area Hospital has defined its primary service area and population as the general population within the geographic area of Gibson City, Illinois, as defined below. The hospital's patient population includes all who receive care without regard to insurance coverage or eligibility for assistance.

Sixty-eight thousand one hundred eighty-one people live in the 985.7 square mile report area defined for this assessment according to the U.S. Census Bureau American Community Survey 2010-20 10-year estimates. The population density for this area, estimated at 70 persons per square mile, is less than the national average population density of 94 persons per square mile.

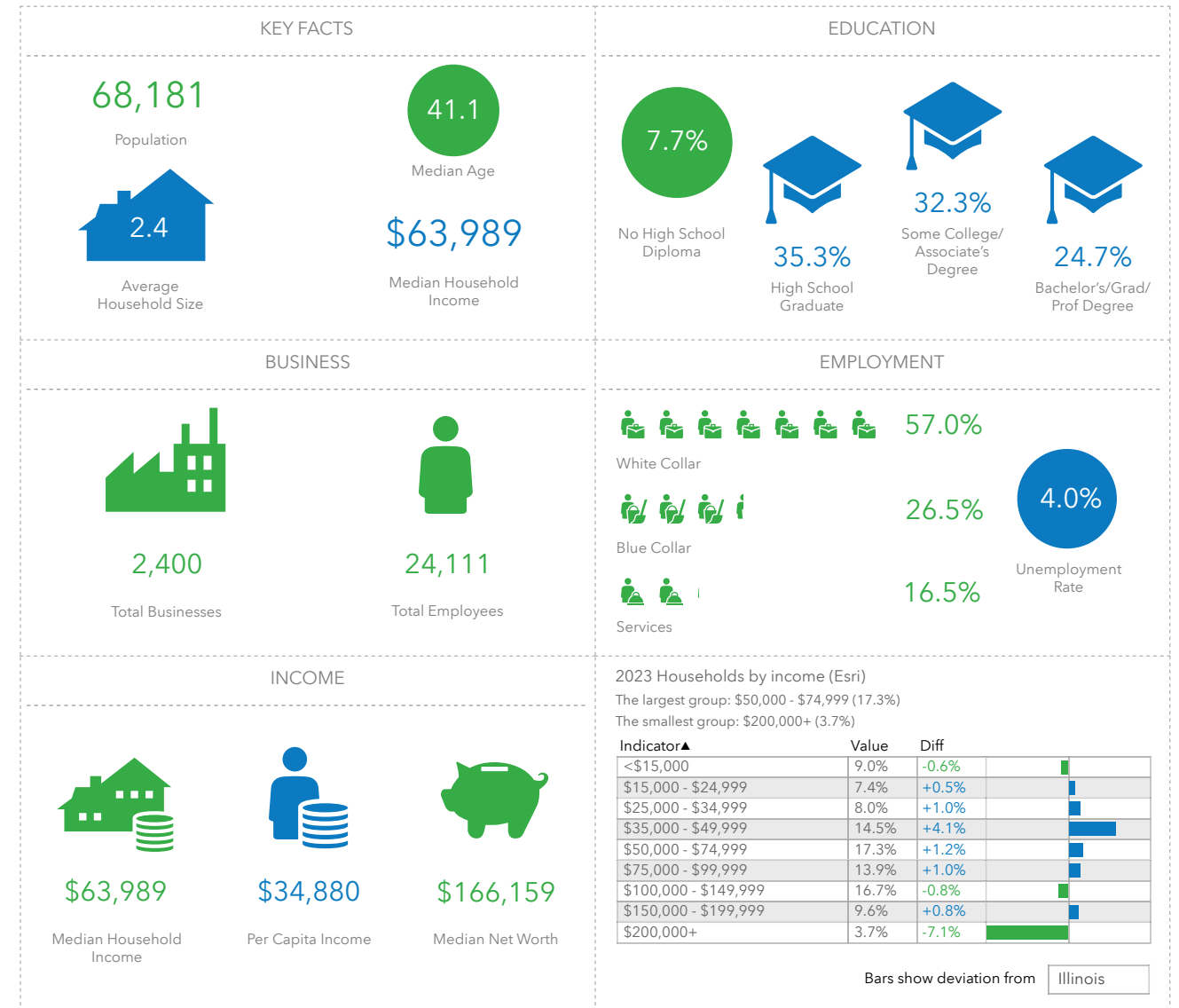


The service area, defined by zip code data, includes the following rural communities:

Gibson City, Paxton, Forrest, Fairbury, Hoopston, Sibley, Mahomet, Fisher, Cissna Park, Watseka, Loda, Roberts, Onarga, Melvin, Rantoul, Farmer City, and Saybrook

Key Facts

Gibson City
Geography: ZIP Code



Source: This infographic contains data provided by Esri (2023, 2028), Esri-Data Axle (2023). © 2024 Esri

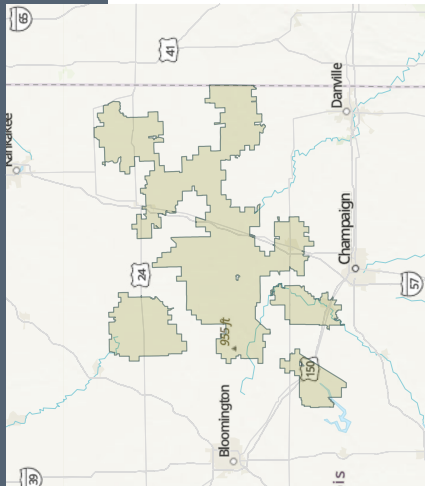
The average household size of the area, at 2.4, is lower than in Illinois and the U.S. The median age is 41.1 years, higher than in Illinois and the U.S. The largest education segment is high school graduates, followed by those with some college. 7.7% of the population has no high school diploma or GED, and 35.3% of the community's population has only a high school degree. Unemployment at the time of writing was 4.6%, lower than the Illinois and United States unemployment rate averages.


As in much of rural Illinois, the median household income in the service area, \$63,989, is lower than the statewide average but higher than the national average.

Social Determinants of Health (SDoH)

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

The CDC describes social determinants of health as conditions in the places where people live, learn, work, and play that affect a wide range of health and quality of life risks and outcomes.





Geography: ZIP Code

AT RISK POPULATION PROFILE

Gibson City

	68,181	27,719	2.43	41.1	\$63,989	\$150,864	73	145	40
	Population	Households	Avg Size Household	Median Age	Median Household Income	Median Home Value	Wealth Index	Housing Affordability	Diversity Index
Households With Disability	7,440								
Population 65+	13,603								
Households Without Vehicle	1,367								

AT RISK POPULATION

 Households With Disability: 7,440
 Population 65+: 13,603
 Households Without Vehicle: 1,367

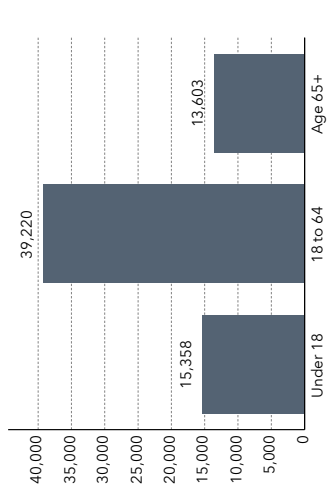
POVERTY AND LANGUAGE

 Households Below the Poverty Level: 12%
 Households Below the Poverty Level: 3,266
 Pop 65+ Speak Spanish & No English: 28

POPULATION AND BUSINESSES

 Daytime Population: 60,974
 Total Businesses: 2,400
 Total Employees: 24,111

POPULATION BY AGE



Age Group	Population
Under 18	15,358
18 to 64	39,220
Age 65+	13,603

	Age 5-17	18-64	Age 65+	Total
Language Spoken (ACS)				
English Only	11,704	36,650	11,209	59,563
Spanish	990	1,880	221	3,091
Spanish & English Well	922	1,430	186	2,538
Spanish & English Not Well	68	317	8	393
Spanish & No English	0	134	28	162
Indo-European				
Indo-European & English Well	14	503	84	601
Indo-European & English Not Well	14	471	62	547
Indo-European & No English	0	10	23	33
Indo-European & No English	0	22	0	22
Asian-Pacific Island				
Asian-Pacific Island & English Well	18	257	42	317
Asian-Pacific Island & English Not Well	18	177	42	237
Asian-Pacific Island & No English	0	80	0	80
Asian-Pacific Island & No English	0	0	0	0
Other Language				
Other Language & English Well	0	47	0	47
Other Language & English Not Well	0	47	0	47
Other Language & No English	0	0	0	0

Source: This infographic contains data provided by Esri (2023, 2028), ACS (2017-2021), Esri-Data Axle (2023). © 2024 Esri

Five Key Areas of SDoH

Healthy People 2030 uses a place-based framework that outlines five critical areas of SDoH:

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

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

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

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

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

Process

ESTABLISHING THE CHNA INFRASTRUCTURE AND PARTNERSHIPS

Description of Data Sources – Quantitative/Secondary Data

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

SOURCE	DESCRIPTION
Behavioral Risk Factor Surveillance System	The largest, continuously conducted telephone health survey in the world. It enables the Center for Disease Control and Prevention (CDC), state health departments, and other health agencies to monitor modifiable risk factors for chronic diseases and other leading causes of death
SparkMap	An online mapping and reporting platform powered by the Center for Applied Research and Engagement Systems (CARES) at the University of Missouri.
U.S. Census	National census data is collected by the US Census Bureau every 10 years.
Centers for Disease Control	Through the CDC's National Vital Statistics System, states collect and disseminate vital statistics as part of the US's oldest and most successful intergovernmental public health data sharing system.
County Health Rankings	Each year, the overall health of each county in all 50 states is assessed and ranked using the latest publicly available data through a collaboration of the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute.
American Communities Survey	A product of the U.S. Census Bureau which helps local officials, community leaders, and businesses understand the changes taking place in their communities. It is the premier source for detailed population and housing information about our nation.
Illinois Department of Employment Security	The state's employment agency that collects and analyzes employment information.

Secondary data is initially collected through the SparkMap and ESRI systems and then reviewed.

Questions raised by the data reported from those sources are compared with other federal, state, and local data sources to resolve or reconcile potential issues with reported data.

Secondary data and detailed primary data for the Gibson City Area Hospital CHNA is available in a separate document entitled [2024 Gibson Area Hospital Secondary Data](#).

SOURCE	DESCRIPTION
National Cancer Institute	Coordinates the National Cancer Program, which conducts and supports research, training, health information dissemination, and other programs with respect to the cause, diagnosis, prevention, and treatment of cancer, rehabilitation from cancer, and the continuing care of cancer patients, and the families of cancer patients
Illinois Department of Public Health	IDPH is the state agency responsible for preventing and controlling disease and injury, regulating medical practitioners, and promoting sanitation.
Health Resources and Services Administration	The US Department of Health and Human Services develops health professional shortage criteria for the nation and uses that data to determine the location of Health Professional Shortage Areas and Medically Underserved Areas and Populations.
Local IPLANS	The Illinois Project for Local Assessment of Needs (IPLAN) is a community health assessment and planning process conducted every five years by local health jurisdictions in Illinois.
ESRI (Environmental Systems Research Institute)	An international supplier of Geographic Information System (GIS) software, web GIS and geodatabase management applications. ESRI allows for specialized inquiries at the zip code, or other defined, level.
Illinois State Board of Education	The Illinois State Board of Education administers public education in the state of Illinois. Each year, it releases school "report cards" which analyze the makeup, needs, and performance of local schools.
United States Department of Agriculture	USDA, among its many functions, collects and analyzes information related to nutrition and local production and food availability.

Primary Data

A community-based focus group was held at Gibson Area Hospital and Health Services in May 2024. This group represented the broad interests of the GAHHS service area and included representation from various service locations. A smaller group of community members also met in May to prioritize the findings from the larger community group. A group of GAHHS leaders met to confirm the selected priorities.

The following were attendees to the focused groups.

Large Focus Group:

Bryan Luke – Cissna Park business owner
Frankie Ward – Ford County ROSC
Trent Eshleman – Watseka U9 Schools
Dan Boyce – former business owner in Gibson City
Tara Chandler – PBL CUSC
Susie Tongate – City of Gibson
Adam Rosendahl – Gibson City PD
Paula Crane – Prairie Central CUSD #8
Justin Kean – GCMS CUST#5
BettyKay Benningfield – Ford County Health Dept
Chad Johnson – Ford County Sheriff
Bill Kirby - GAH

Hospital Exec Team:

Kara McAdam
Dan Kleist
Joe Higgins
Josh Johnson
Julie Bowen
Ty Royal
Stephanie Johnson
JoAnn Jay
Jessica Delost
Kat Streenz
Bill Kirby

Small Focus/Prioritization Group

David Andriano – Watseka U9 Schools
BettyKay Benningfield - Ford County Health Dept
Dan Boyce – former business owner in Gibson City
Susie Tongate – City of Gibson City
Bill Kirby - GAH

Anecdotal data collected from the focused groups revealed the following:

The Top Strengths:

- The reputation and services offered at GAHHS
- Partnerships in the community
- Community strengths include small-town appeal, caring for each other, etc.

The Top Opportunities that Need to be Addressed:

- Mental health access, prevention, and treatment
- Concerns with services/pricing/partnerships needed with GAHHS
- Food access – including restaurants
- Transportation concerns
- Concern about the number of pediatric cancer cases

The Top Aspirations:

- Overall improvements made in the community:
 - » Adequate housing is available
 - » Food is easily accessed in all communities
 - » Adequate skilled workers are available to fill open positions
 - » New businesses are opened to encourage people to visit the area
- Mental health and addiction services needs are fully met.
 - » There are high-quality providers with access to patients in need.
 - » Mental health services are available in the school systems.
- The needs of youth are fully met.
 - » Young people will stay in the community and be able to find meaningful employment.
 - » There are activities to engage young people to live healthy lives, both physical and emotional.
 - » There is a mentoring program in schools that assists young people in developing relationships with others.

Description of the Community Health Needs Identified

After their review and discussion, the identification and prioritization group advanced the following needs as being the significant community health needs facing the Gibson Area Hospital service area:

1. Improve the community's mental health by improving access and helping educate the community.
2. Improve knowledge of the signs and symptoms of cancer and ways to minimize cancer risks through healthy lifestyle choices.
3. Promote and coordinate hospital, clinic, and community resources to minimize unnecessary redundancy and ensure that resources reach people when needed.



Resources Available to Meet Priority Health Needs



DOCUMENTING AND COMMUNICATING RESULTS

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

No written comments were received concerning the hospital facility's most recently conducted CHNA or the adopted Implementation Strategy. A method for retaining written public comments and responses exists, but none were received.

Implementation Strategy: The Planning Process

The Implementation Strategy was developed through a facilitated meeting involving key administrative staff at Gibson Area Hospital in June 2024. The group reviewed the needs assessment process completed to that point and considered the prioritized significant needs and supporting documents. They discussed steps taken to address the previous Community Health Needs Assessment. They are also regarded as internal and external resources available to address the current prioritized needs.

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

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

Implementation Strategy

The group addressed the needs with the following strategies:

1. *Improve the community's mental health by improving access and helping educate the community.*

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED

- GAHHS will continue recruiting and retaining mental health professionals, including physicians, advanced practitioners, and counselors.
- Investigate implementing a healthy living prevention program in the school systems in the community. Create ways to educate people about mental health needs and treatment to help break the stigma of mental health concerns.
- Develop a mentoring program in community schools that would pair older and younger students with adult mentors.

DATA THAT SUPPORTS THIS PRIORITY

- Poor mental health days in the GAHHS market is an average of 5 days in 30 that people would describe their mental health as "not good." This is greater than the 3.2 in Illinois and the 4.4 in the United States.
- Access to addiction and substance abuse providers is slightly lower in the service area compared to the state and significantly under the national average.
- Even though drug overdose data for the overall service area is within the state and national norms, Iroquois, Livingston, and Vermilion County data is significantly elevated compared to the state and nation. Likewise, opioid mortality data for the service area seems to be within the state and national norm. In contrast, the Iroquois, Livingston, and Vermilion County data are much higher than those of the state or nation.
- Deaths of despair report the average rate of death due to intentional self-harm (suicide), alcohol-related disease, and drug overdose. Overall, this rate per 100,000 people in the service area is not dissimilar to that of the state or nation. However, the rate in Livingston County is 58.9, in DeWitt County is 59.9, and in Vermilion County 60.6, which are all significantly higher than the state of Illinois average at 42.3 and Illinois at 47.0.
- Medicare drug claims for opioid drugs in the overall service area is 3.3% as compared to Illinois at 3.7% and the nation at 4.4%. However, selected counties within the service area fall out of that normal range: Iroquois and McLean counties are both at 4.8%.

DATA THAT SUPPORTS THIS PRIORITY (CONTIUNUED)

- Onsite participants indicated that there were still issues with access to providers in mental health and substance abuse, with significant waits in some cases. Participants have acknowledged progress in this area since the last CHNA.
- Educators who attended the community meetings indicated they are still seeing significant issues with students' mental health and increasing needs post-COVID.
- Participants also indicated there is a significant stigma attached to seeking mental health or substance abuse treatment. According to the American Psychiatric Association's website: "Stigma often comes from lack of understanding or fear. Inaccurate or misleading media representations of mental illness contribute to both of those factors. A review of studies on stigma shows that while the public may accept the medical or genetic nature of a mental health disorder and the need for treatment, many people still have a negative view of those with mental illness.

Researchers identify distinct types of stigmas:

Public stigma involves the negative or discriminatory attitudes that others may have about mental illness.

Self-stigma refers to the negative attitudes, including internalized shame, that people with mental illness may have about their condition.

Structural stigma is more systemic, involving policies of government and private organizations that intentionally or unintentionally limit opportunities for people with mental illness. Examples include lower funding for mental illness research or fewer mental health services relative to other health care.

Stigma not only directly affects individuals with mental illness but also the loved ones who support them, often including their family members. The stigma around mental illness is especially an issue in some diverse racial and ethnic communities, and it can be a significant barrier to people from those cultures accessing mental health services.



ANTICIPATED IMPACTS OF THESE ACTIONS

- Improved knowledge of personal mental health and ways to handle problems/concerns healthily. Education and understanding can help in breaking the stigma attached to seeking help.
- Improved access to mental health professionals.
- Community members could access mental health services/providers when needed.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT TO ADDRESS THE HEALTH NEED

- Chief Executive Officer
- Primary care medical staff
- Mental health and substance abuse providers
- Mental health counselors in RHCs
- Educational services
- Human resources
- Marketing resources

PLANNED COLLABORATION BETWEEN THE HOSPITAL AND OTHER FACILITIES OR ORGANIZATIONS:

- Mental health services in the community
- Local schools and counselors

2. Improve knowledge of the signs and symptoms of cancer and ways to minimize cancer risks through healthy lifestyle choices.

DATA THAT SUPPORTS THIS PRIORITY

- Cancer incidents for many cancer types and the incidence of all-cause cancers in over the state and national standard.

Report Area	All Sites – Total	Breast	Cervical	Colon-Rectum	Lung	Prostate
GAH	1410.2	404.1	5.0	112.5	172.5	374.5
Illinois	459.7	132.6	7.4	39.8	59.3	115.1
United States	442.3	127.0	7.5	36.5	54.0	110.5

- The overall age-adjusted death rate due to cancer/100,000 population is not significantly different when accessing the GAHHS service area. However, the increased mortality rates in DeWitt, Ford, Iroquois, Livingston, and Vermilion Counties are significant.
- Clinical screening completion for GI cancers is lower (66.6%) than the state (69.1%) and national (72.4%) standards.
- Onsite community participants noted a perceived increase in the incidences of childhood cancers. According to the Illinois State Cancer Registry data, there is minimal data specific for the GAHHS service areas (county-level data) due to small numbers and HIPAA concerns. Lori Koch, Illinois State Cancer Registry Director, states there have been 24 cases of pediatric cancers (ages 0-19, both sexes and all ethnicities) in Ford County in the past 20 years.

In a study published in September 2023 entitled, Childhood and Adolescent Cancer Statistics, Illinois 1991 – 2020, the following was noted: In Ford County, Illinois, the most common types of pediatric cancers include:

- 1. Leukemia:** Leukemia is a cancer of the blood and bone marrow. It affects white blood cell production and can lead to symptoms like fatigue, bruising, and infections. The two main types of leukemia in children are acute lymphoblastic leukemia (ALL) and acute myeloid leukemia (AML).
- 2. Brain and Central Nervous System Tumors:** These tumors can occur in various brain and spinal cord parts. Symptoms may include headaches, vision changes, and difficulty with balance or coordination.
- 3. Neuroblastoma:** Neuroblastoma is a cancer that develops from nerve cells. It often occurs in young children and can affect various body parts, such as the abdomen, chest, or neck.
- 4. Wilms Tumor:** Wilms tumor is a kidney cancer that primarily affects children. It usually presents as a painless abdominal mass.

5. Retinoblastoma: Retinoblastoma is a rare eye cancer that develops in the retina. It can cause vision problems and may be detected through changes in the appearance of the eye.

6. Lymphomas: Lymphomas are cancers that affect the lymphatic system. Hodgkin lymphoma and non-Hodgkin lymphoma can occur in children.

It also stated the following about Pediatric Cancer Incidence in Illinois (1991-2020):

- The pediatric cancer incidence rate in Illinois has increased over time.
- In 1991, the incidence rate was 144.3 cases per 1 million children.
- By 2019, it had risen to 199.4 cases per 1 million children. This represents an average annual percent change (AAPC) of 1.2% per year during this period.
- A study examined pediatric cancer incidence and proximity to nuclear facilities in Illinois. It compared age-adjusted cancer rates for children aged 0 to 14 years in nuclear facility counties (NFCGs) and nuclear facility ZIP code groups (NFZGs) with those in matched non-nuclear areas. Unfortunately, Ford County-specific data was not included in this study.
 - » *This could have significance due to the location of the Clinton Nuclear Power Plant – approximately 20 miles from Gibson City.*

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED

- Develop and deliver community education, including the prevalence of cancer, available screenings and treatment services in GAHHS, and ways to prevent or lessen the chances of cancer through a healthy lifestyle.
- Increase the number and types of cancer screenings offered by GAHHS.
- Develop or continue cancer support groups as needed by the community and patients seeking treatment.
- Continue supporting the clinics of visiting oncologists from Carle and Mid Illinois Hematology & Oncology and Dr. Chaudhry in the GAH Oncology Clinic/Infusion Center.

ANTICIPATED IMPACTS OF THESE ACTIONS

- Awareness of the prevalence of cancer in the GAHHS service area will improve.
- Community members can participate in free or low-cost cancer screenings.
- Early detection of potential cancers will help to improve mortality.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT TO ADDRESS THE HEALTH NEED

- Chief Executive Officer
- Specialty clinic practice manager
- Primary care medical staff
- Elite gym teams

PLANNED COLLABORATION BETWEEN THE HOSPITAL AND OTHER FACILITIES OR ORGANIZATIONS:

- Carle Health
- Mid Illinois Hematology & Oncology
- Mayo Clinic
- Northwestern Medicine



3. Promote and coordinate hospital, clinic, and community resources to minimize unnecessary redundancy and ensure that resources reach people when needed.

DATA THAT SUPPORTS THIS PRIORITY

- In the onsite sessions, there was much discussion about the need for agencies, schools, and entities to share information about events, screenings, needs, etc.
- Several agencies reported programs that others in the group were unfamiliar with, such as a new STI clinic at the Health Department and their focus on Senior Services. Paxton has a transition program for student graduates with IEPs to assist with education, training, and job placement until age 21; Iroquois County has extensive child/family programming, including Birth to Five and Success by Six. They are also attempting to obtain a mobile van for home visits with children.
- It was discussed that a community collaborative/roundtable may exist, but participants were not sure when it met or if it was still operating. The consensus was that this needed to be reinvigorated as it had fallen off post-Covid.



ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED

- Add events from the hospital and clinic to the school newsletter and website. Share events with other partners via their websites and social media (city, other healthcare partners, etc.)
- Determine the existence of the community collaborative/roundtable and help to reinvigorate participation and sharing. Plan to meet 2-3 times per year.
- Use the GAHHS social media and internal web to promote community partners' health-related events.

ANTICIPATED IMPACTS OF THESE ACTIONS

- Improved collaboration and knowledge between community partners.
- More community members will be aware of events that could improve their health.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT TO ADDRESS THE HEALTH NEED

- GAHHS senior leadership
- Marketing team

PLANNED COLLABORATION BETWEEN THE HOSPITAL AND OTHER FACILITIES OR ORGANIZATIONS:

- Schools
- City governments
- Healthcare partners in the community

NOTES:

1. Statistics may vary slightly depending on the resource.





Gibson Area Hospital
& Health Services
GIBSON GETS IT

Community Health Needs Assessment | 2024

Gibson Area Hospital & Health Services | 1120 N Melvin St. | Gibson City, IL 60936 | (217) 784-4251