



SOUTHERN ILLINOIS
HEALTHCARE

Community Health Needs Assessment

2015 Report &
Implementation Plan

Executive Summary



MEMORIAL HOSPITAL OF CARBONDALE



Memorial Hospital of Carbondale

- 140-bed tertiary care hospital
- Southern Illinois' largest and most spacious birthing center with Level II Plus Special Care Nursery
- Only dedicated pediatric unit in the region
- The core hospital for SIH's comprehensive, regional heart program, Prairie Heart Institute
- High level surgical capabilities including daVinci technology
- Affiliated with SIU School of Medicine through its Family Practice Residency Program
- Neuroscience program including neurosurgery and the region's only Primary Stroke Center
- Accredited by the Commission on Cancer for comprehensive cancer treatment

Herrin Hospital

- 114-bed acute inpatient and outpatient hospital
- Newly expanded Emergency Department includes the region's first accredited Chest Pain Center
- Nationally acclaimed acute rehabilitation offered through an alliance with the Rehabilitation Institute of Chicago
- Area's only bariatric surgical program for weight loss



ST. JOSEPH MEMORIAL HOSPITAL

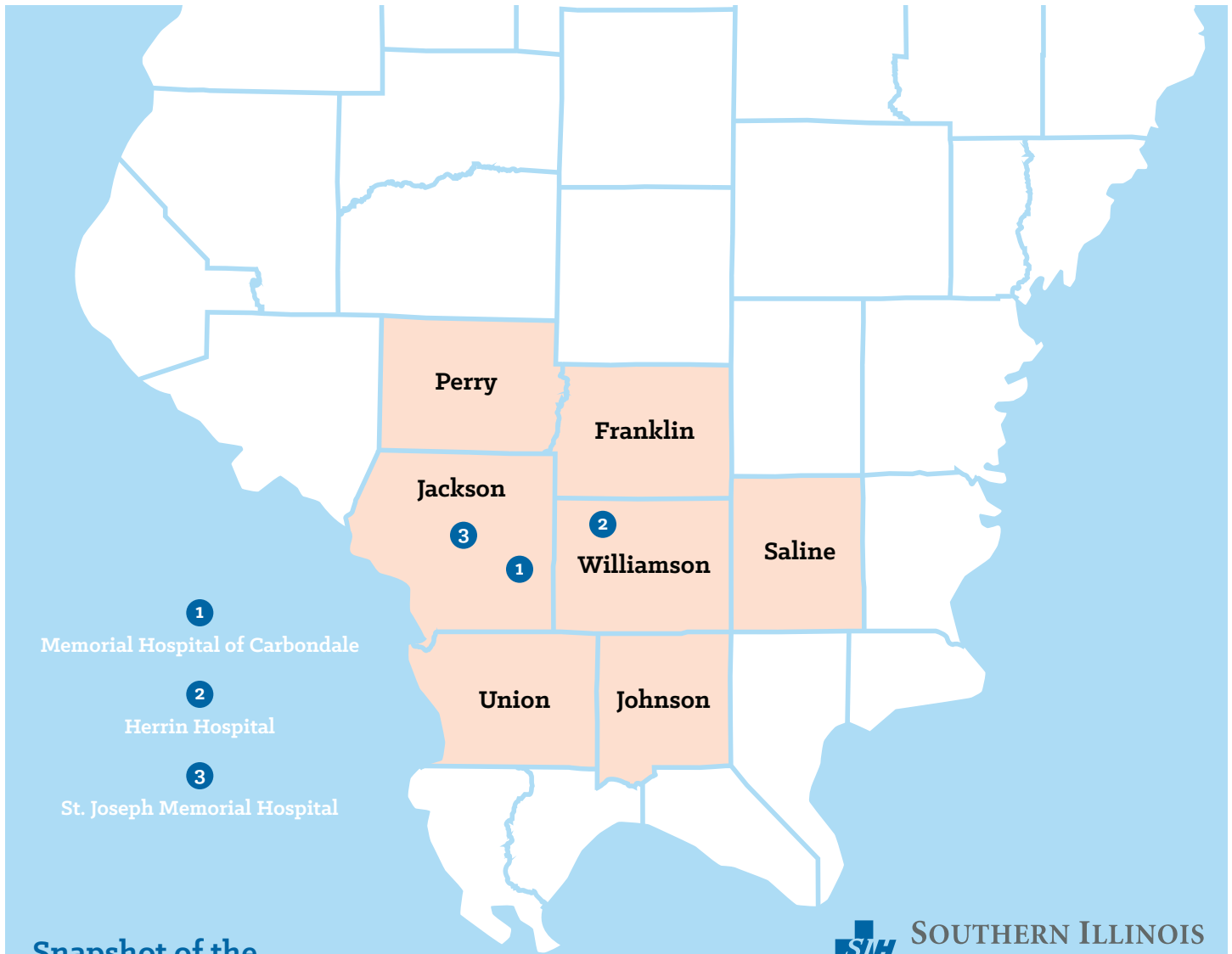


St. Joseph Memorial Hospital

- 25-bed critical access hospital serving the community as an inpatient facility for primary care
- Regional Sleep Disorders Center accredited by the American Academy of Sleep Medicine
- Area's only coordinated infusion therapy program
- Comprehensive wound care center with hyperbaric therapy
- Home to an outpatient geriatric counseling program
- Area leader for outpatient endoscopic procedures
- Busy Emergency Department that is part of the Prairie STAT Heart Network

Southern Illinois Healthcare: Dedicated to Improving the Health and Well-Being of All of the People in the Communities We Serve

Southern Illinois Healthcare's first community health needs assessment, required after the passage of the Affordable Care Act, was conducted in 2012. However, since the 1990's the Community Benefits Department has been collaborating with community partners and the local health departments to complete county-wide community health needs assessments and to assist in the work to address varying health issues. As a result of these long standing partnerships and community assessments, progress has been made in improving access to care for vulnerable populations through initiatives focused on mental and dental health, non-emergency transportation and more. Partners have been catalysts for policy, system and environmental changes in the community, workplaces, and schools to prevent cardiovascular disease. Cancer prevention initiatives and efforts to address the social determinants of health have also been successfully implemented.



Snapshot of the SIH Service Area

While each of the seven counties in the SIH service area is unique, they share similar challenges. SIH Hospitals provide comprehensive healthcare to residents within in its seven county service area. Greater than 92% of SIH inpatient visits and 95% of outpatient visits came from residents of these seven counties.

Issues some residents in the area face are associated with high rates of poverty, low education attainment, and other social and economical determinants of health.



	Population	HS Graduation Rate	Students Eligible for Free Lunch Program	Live Below Poverty	Median Income
Franklin Co.	39,411	87.1%	58.3%	19.1%	\$36,273
Jackson Co.	59,677	89.7%	56.5%	30.4%	\$33,479
Johnson Co.	12,601	83.4%	48.9%	14.1%	\$40,760
Perry Co.	21,672	84.5%	44.7%	18.4%	\$42,078
Saline Co.	24,612	84.9%	58.8%	18.4%	\$37,800
Union Co.	17,447	83.9%	55.7%	19.5%	\$41,848
Williamson Co.	66,008	88.9%	52.1%	15.6%	\$43,125



2015 Community Health Needs Assessment

The Community Health Needs Assessment (CHNA) was conducted as part of Southern Illinois Healthcare’s Community Benefits’ planning process.

The goals were to:

- Identify the most important health issues in the seven county SIH service area, particularly for vulnerable and under-represented populations
- Ensure that programs and services closely match the priorities and needs of the community
- Strategically address those needs to improve the health of all of those served by SIH facilities

In addition, the Patient Protection and Affordable Care Act of 2010 added section 501(r)(3) to the Internal Revenue Code, which requires section 501(c)(3) hospitals to perform a Community Health Needs Assessment (CHNA) every three years in order to maintain tax exempt status.

How the CHNA was Conducted

Public health data from various sources was reviewed. The leading causes of death in the service area are diseases of the heart and malignant neoplasms. The SIH service area has high incidence rates of overweight/obesity, diabetes, and cardiovascular disease. **Improvements are needed in areas such as preventative screenings, healthy eating and physical activity.** Tobacco use is higher than state and national comparisons. Higher rates of colorectal and lung cancer are present in six out of the seven counties as compared to the state. Unemployment, poverty, food insecurity, access to care issues, and financial barriers adversely affect the health of those in the region. Lastly, mental health issues/disorders are also of concern as the age-adjusted suicide death rates are higher than the state and the nation. Access to care for mental health services remains an important issue.

A survey of 834 community members and community partners was conducted, as well as meetings with 34 healthcare providers to gain input regarding overall health issues to be addressed. An analysis of existing community plans/goals was created to assist in selection of priority issues.

Utilizing the data collected, existing plans/goals, input from the community members, community partners and healthcare providers, the Advisory Team held a facilitated discussion and prioritization process. The importance of addressing the social determinants of health, access to care and behavioral risk factors was noted.

The SIH priority health issues selected include cancer, cardiovascular disease and its contributing risk factors of diabetes and obesity, and mental health.

Three implementation teams were formed by experts in these priority areas. After examining the Healthy People 2020 objectives and reviewing research based intervention strategies, the three implementation teams developed goals, objectives, and implementation strategies.



healthypeople.gov



countyhealthrankings.org



healthycommunitiesinstitute.com



communitycommons.org



2015 Community Health Needs Assessment Process

Nearly 900 people provided input into the CHNA process through the following methods:

1

Data Collection and Data Profile Created

- Demographics
- County Health Rankings
- Healthy People 2020 Leading Health Indicators

2

Analysis of Existing Community Plans/Goals

Including but not limited to:

- Quality Health Partners
- Patient Center Medical Homes
- Federally Qualified Health Centers
- Joint Commission Core Measures
- Physician Quality Reporting System
- Healthy Southern Illinois Delta Network
- Local Health Departments

3

Community Member/Community Partner Survey

830 respondents from throughout the seven county service area

4

Meetings With Healthcare Providers

34 people participated including 23 physicians and 11 key leaders within the SIH System

5

SIH Community Health Needs Assessment Advisory Team

A 34 member team made up of community leaders and SIH staff reviewed the data, provided input and shared their perceptions of overall impact, magnitude of the problem, severity, and ability and interest of the community to address the issues.

Implementation Plan

SIH (Herrin Hospital, Memorial Hospital of Carbondale, St. Joseph Memorial Hospital) and Community Partners

The staff of the Southern Illinois Healthcare Community Benefits Department will spearhead the plan and collaborate with community partners, the Healthy Southern Illinois Delta Network, Healthy Communities Coalition members, and SIH staff to implement the strategies and monitor progress between 2016-2019.



Cancer

- ▲ Increase the number of adults who received recommended screenings for colorectal and breast cancer.
- ▲ Increase tobacco cessation
- ▼ Reduce nonsmokers' exposure to secondhand smoke
- ▼ Reduce use of tobacco products



Cardiovascular Disease and its Contributing Risk Factors of Diabetes and Obesity

- ▼ Decrease overweight/obesity
- ▲ Increase daily vegetable intake
- ▲ Increase physical activity
- ▲ Increase diabetes education among persons with diagnosed diabetes
- ▼ Reduce nonsmokers exposure to secondhand smoke
- ▼ Decrease use of tobacco/nicotine



Mental Health

- ▲ Increase depression screening among adults and youth ages 12 & older
- ▲ Increase the number of primary care facilities that provide mental health treatment onsite or by referral
- ▲ Increase the number of children and adults with mental health problems/disorders who receive treatment



Cancer

with a focus on breast, colorectal and lung cancer

GOAL: Reduce the death rates for female breast cancer, colorectal cancer and lung cancer in Franklin, Jackson, Johnson, Perry, Saline, Union and Williamson Counties.**

The Local Problem

Cancer is the second leading cause of death in the SIH seven county service area

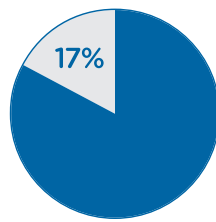
Cancers of Most Concern in the SIH Seven County Area

Breast Cancer

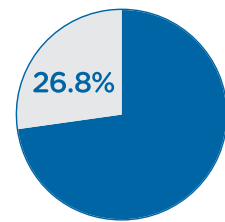
Colorectal Cancer

Lung Cancer

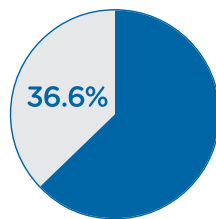
% of Deaths Due to Cancer



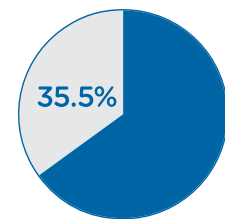
% of Adult Smokers



% of Women Ages 40 & Older Who Had Not Received a Mammogram Within the Last Year



% of Adults Ages 50 & Older Who Had Not Had a Sigmoidoscopy or Colonoscopy Exam



Data Sources

1. IDPH, Causes of Death by Resident County, 2012
2. NIH, National Cancer Institute, State Cancer Profile, Age-Adjusted Incidents by Cancer Site 2007-2011
3. Illinois County Behavioral Risk Factor Surveys, Fifth Round; 2010-2011; Illinois Department of Public Health

SIH Community Health Objectives



By 2019, create a 5% change in the following:

- Increase the proportion of adults who receive a colorectal cancer screening based on the most recent guidelines.**
- Increase the proportion of women who receive a breast cancer screening based on the most recent guidelines.**
- Increase tobacco cessation counseling in healthcare and office-based ambulatory care settings.**
- Reduce the proportion of nonsmokers exposed to secondhand smoke.**
- Reduce use of tobacco products by adolescents in the past month.**

Strategies

- Provide education and screening reminders through media, patient reminder systems, patient portal, faith communities, worksites, Faith Community Nurses, Congregational Health Connectors, and community events.
- Utilize a patient reminder system and direct marketing to targeted individuals to encourage recommended cancer screenings.
- Promote the Illinois Tobacco Quitline throughout the community, with worksites, and through promotion to targeted individuals and healthcare providers.
- Implement an evidence based tobacco prevention curriculum with 5th and 6th grade students.
- Advocate for policies to reduce exposure to secondhand smoke in outdoor public spaces.
- Increase colorectal cancer screening through strengthened protocols for colonoscopy screening and follow-up.
- Provide education and supportive resources for healthcare providers on lung, breast and colorectal cancer screening.
- Increase the number of individuals receiving one-on-one counseling regarding the importance of cancer screenings and tobacco cessation.
- Educate & inform healthcare providers and the community regarding lung cancer screening guidelines and encourage screening for those that qualify.
- Continue promotion of Medical Legal Partnerships and Med Trans to reduce barriers to care.

Potential Partners

American Cancer Society

Elementary and Middle Schools

Faith Communities

Faith Community Nurses

Federally Qualified Health Centers

Healthy Southern Illinois Delta Network and the Healthy Communities Coalitions

Illinois CATCH on to Health Consortium

Land of Lincoln Legal Assistance Foundation, Inc.

Local Health Departments

Med Trans

Poshard Foundation

Quality Health Partners/Physician Hospital Organization

Regional Office of Education

SIH Cancer Institute

SIH Hospitals

Herrin Hospital

Memorial Hospital of Carbondale

St. Joseph Memorial Hospital

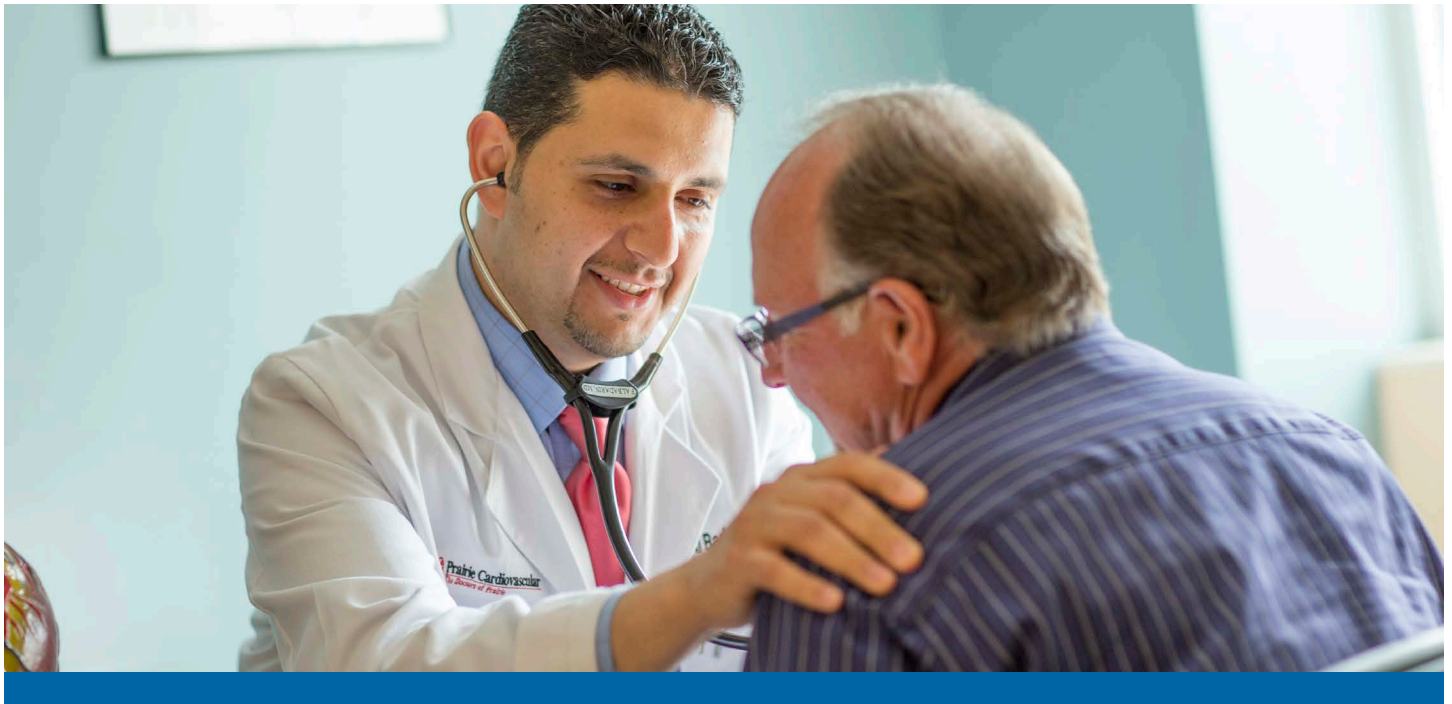
SIH Medical Group

Southern Illinois University (SIU)

SIU School of Medicine

SIU School of Medicine Center for Rural Health and Social Service Development

Spiritual Homebound Visitors



Cardiovascular Disease

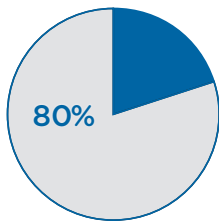
and its contributing risk factors of diabetes and obesity

GOAL: Increase cardiovascular health among children and adults in Franklin, Jackson, Johnson, Perry, Saline, Union and Williamson counties.**

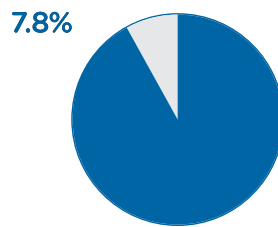
The Local Problem

67.6% of Adults are Overweight or Obese

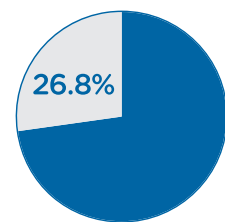
% of Population Not Meeting Recommended Daily Fruit and Vegetable Intake



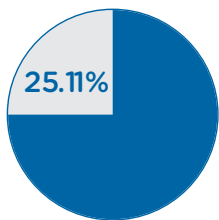
% of Adults Living With Diabetes



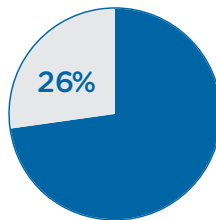
% of Adult Smokers



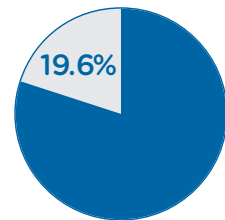
% Living in Areas Designated as Food Deserts



% of Medicare Patients Ages 65 & Older Are Being Treated for Diabetes



% of Adults Who Reported Not Participating in Any Physical Activity in the Last 30 Days



Data Sources

1. IDPH, Causes of Death by Resident County, 2012
2. Illinois County Behavioral Risk Factor Surveys, Fifth Round; 2010-2011; Illinois Department of Public Health.
3. Centers for Medicare and Medicaid Services, www.cms.gov
4. Illinois County Behavioral Risk Factor Surveys, 2007-2009, Illinois Behavioral Risk Factor Surveillance Survey (mean daily intake related to fruits and vegetables).
5. Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2012. Retrieved from Community Commons.

SIH Community Health Objectives

By 2019, create a 5% change in the following:

- Increase the proportion of persons with diagnosed diabetes who receive diabetes education. **
- Decrease the percent of youth and adults who are considered overweight and obese. **
- Increase the mean daily intake of total vegetables among youth and adults **
- Increase the percentage of youth and adults who meet federal physical activity guidelines (Youth: 1 hour per day 5+ days a week/ Adults: 30 minutes a day 5+ days a week).**
- Reduce the proportion of nonsmokers exposed to secondhand smoke.**
- Decrease the percentage of youth and adults using tobacco/nicotine.



Strategies

- Provide education and screening reminders through media, patient reminder systems, patient portal, faith communities, worksites, Faith Community Nurses, Congregational Health Connectors, and community events.
- Provide community based education throughout southern Illinois focused on diabetes, obesity prevention, and affordable, healthy meal preparation.
- Conduct community screenings to identify those living with high blood pressure and diabetes.
- Advocate for policy, system and environmental changes related to nutrition, physical activity, and tobacco in schools, worksites, churches, and the community.
- Expand implementation of Coordinated School Health and CATCH (Coordinated Approach To Child Health) programs in pre-k, elementary schools, and middle schools. Provide training to ensure implementation and sustainability.
- Increase awareness of the importance of physical activity, promotion of local physical activity opportunities and advocate to improve the built environment.
- Promote the utilization of decision prompts at elevators in healthcare facilities, businesses, etc., promoting the use of the stairs.
- Increase access to healthy foods through farmers markets, corner stores, and improved vending.
- Coordinate and assist in the implementation of Chronic Disease Self-Management/Diabetes Self-Management classes throughout southern Illinois for adults with diabetes and other chronic diseases.
- Facilitate community education related to e-cigarettes, as new research becomes available.
- Provide information to healthcare providers in order to increase knowledge and use of existing community resources including the Illinois Tobacco Quitline, 5210 childhood obesity toolkit, Diabetes Today Resource Guide, etc.
- Explore options to increase universal evidence based screening, brief intervention and referrals for obesity, diabetes, nutrition, tobacco, and physical activity in primary care offices.
- Encourage healthcare providers to provide prescriptions for healthy eating and physical activity to patients.
- Increase access to nutrition education in healthcare provider offices.
- Explore the development and implementation of an integrated, comprehensive care coordination program for diabetes prevention and control through the creation of a single point of entry and referral for those patients who are recently diagnosed with diabetes.
- Begin to develop transition services for high risk patients being discharged from acute care into the community.
- Explore development of a Mobile Integrated Health program that allows EMS providers to provide assistance and outreach to those with chronic diseases.
- Continue promotion of Medical Legal Partnership and Med Trans to reduce barriers to care.

Potential Partners

- Diabetes Today Resource Teams
- Elementary and Middle Schools
- Faith Communities
- Faith Community Nurses
- Federally Qualified Health Centers
- Healthy Southern Illinois Delta Network and the Healthy Communities Coalitions
- Illinois CATCH on to Health Consortium
- John A. Logan College
- Local Health Departments
- Park Districts
- Quality Health Partners/Physician Hospital Organization
- Regional Office of Education
- SIH Congregational Health Connectors
- SIH Hospitals**
 - Herrin Hospital
 - Memorial Hospital of Carbondale
 - St. Joseph Memorial Hospital
- SIH Medical Group
- Southern Illinois University (SIU)
- SIU School of Medicine
- SIU School of Medicine Center for Rural Health and Social Service Development
- Spiritual Homebound Visitors
- University of Illinois Extension
- Various health and social service agencies including but not limited to:**
 - American Heart Association
 - Etc.



Mental Health

GOAL: Reduce the rate of suicide in Franklin, Jackson, Johnson, Perry, Saline, Union and Williamson counties.**

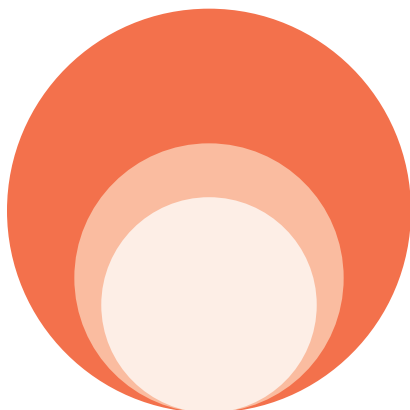
The Local Problem

Mental health was identified as one of the top three issues

26% - 34%

The % of 8th Grade Students Who Felt Sad or Hopeless Almost Everyday for Two Weeks or More in a Row So That They Stopped Doing Their Usual Activities in the Past 12 Months

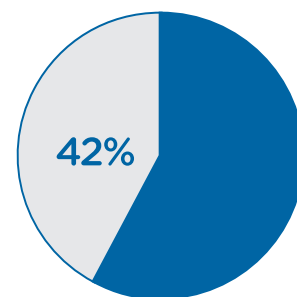
Suicide Age-Adjusted Death Rate Per 100,000



SIH Seven County Area
15.02 suicides per 100k

Healthy People 2020 Goal
10.20 suicides per 100k

State of Illinois
9.05 suicides per 100k



Nearly 42%

of Adults in the Seven County Area Reported That Their Mental Health Was Not Good on at Least One Day in the Last Month

Data Sources

1. Illinois County Behavioral Risk Factor Surveys, Fifth Round; 2010-2011; Illinois Department of Public Health
2. CDC, National Vital Statistics System, CDC Wonder, Centers for Disease Control and Prevention, Wide-Ranging On-Line Data for Epidemiologic Research, 2007-2011.
3. Midas+ data, SIH hospitals, Fiscal Year 2016.

SIH Community Health Objectives

By 2019, create a 5% change in the following:

- Increase the proportion of primary care physician offices where youth 12 years & older as well as adults are screened for depression**
- Increase the proportion of primary care facilities that provide mental health treatment onsite or by referral**
- Increase the proportion of children and adults with mental health problems/disorders who receive treatment**



Potential Partners

- Elementary and Middle Schools
- Faith Communities
- Faith Community Nurses
- Federally Qualified Health Centers
- Healthy Southern Illinois Delta Network and the Healthy Communities Coalitions
- Illinois CATCH on to Health Consortium
- John A. Logan College
- Local Health Departments
- Poshard Foundation
- Quality Health Partners/Physician Hospital Organization
- Regional Office of Education

SIH Hospitals

- Herrin Hospital
- Memorial Hospital of Carbondale
- St. Joseph Memorial Hospital

SIH Medical Group

Southern Illinois University (SIU)

- Psychology Social Work Rehabilitation Psychology Clinic Center
- SIU School of Medicine
- SIU School of Medicine Center for Rural Health and Social Service Development

Spiritual Homebound Visitors

Various health and social service agencies including but not limited to:

- CHOATE
- Centerstone
- Gateway
- Veteran's Administration

Strategies

- Increase education among community members and partners regarding the mental and behavioral health resources by targeting school staff, faith communities, Faith Community Nurses, Spiritual Homebound Visitors, and Healthy Communities Coalitions.
- Increase education among healthcare providers regarding mental and behavioral health resources available in the community by targeting healthcare providers, nursing students, physician assistant students, residents, SIH nurse residency program participants, SIH and SIH Medical Group staff.
- Provide information to new physicians and raise awareness of the closest medical providers relative to the mental health resources available in the community.
- Promote mental health resources available in the community through education and printed materials.
- Implement a media campaign to reduce stigma, increase awareness, and encourage treatment for mental and behavioral health issues.
- Implement Adult and Youth Mental Health First Aid training in the communities.
- Implement Signs of Suicide (SOS) Curriculum in partnership with middle and high schools.
- Advocate for adequate and appropriate mental health services and sustained funding to meet ongoing community needs.
- Develop and implement a plan for meeting the mental health needs of SIH and SIH Medical Group's patients through the optimization of existing community resources.
- Collaborate to develop an effective referral system and processes between emergency departments/primary care providers and mental health providers for treating people with mental health issues in a timely manner.
- Explore the development and implementation of a standard screening tool and a standard operating procedure by primary care providers to increase depression screenings and mental health referrals.
- Coordinate training for healthcare providers on locally available mental health resources.
- Utilize telemedicine to engage patients in mental health treatment services.
- Continue promotion of Medical Legal Partnership and Med Trans to reduce barriers to care.
- Align efforts with the "Community Behavioral Health Association" to address the prescription drug and opioid epidemic in southern Illinois.



Acknowledgments

CHNA Advisory Team

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Thank you to these individuals for their time, insight and participation in the Community Health Needs Assessment process.

CHNA Implementation Plan Teams

Cancer

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Cardiovascular Disease (diabetes and obesity)

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Woody Thorne *Vice President, Community Affairs*
Southern Illinois Healthcare

Additional Implementation Plan Reviewers

SIH CHNA Advisory Team

SIH Community Benefits Advisory Committee

SIH Medical Group Physician Leadership Council

SIH Senior Leadership



SOUTHERN ILLINOIS HEALTHCARE

Mission

We are dedicated to improving the health and well-being of all of the people in the communities we serve.

Values

RESPECT

Recognizing and valuing the dignity and uniqueness of each person

INTEGRITY

Adhering to strong moral and ethical principles in all we do

COMPASSION

Responding to the feelings and needs of each person with kindness, concern and empathy

COLLABORATION

Communicating and working with others for the benefit of all

STEWARDSHIP

Responsibly using, preserving and enhancing our human and material resources as a not for profit community controlled organization

ACCOUNTABILITY

Holding ourselves and those around us responsible for living the values and achieving the vision of southern Illinois healthcare

QUALITY

Striving for excellence in all we do