



# Carle Eureka Hospital

2025 Community Health Needs Assessment



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## Executive Summary

Carle Eureka Hospital participated in the Tri-County Community Health Needs Assessment (CHNA), a collaborative undertaking spearheaded by the Partnership for a Healthy Community (PFHC). The PFHC is a multi-sector community partnership working to improve population health in Woodford, Peoria and Tazewell Counties. An ad hoc committee within the PFHC facilitated the Tri-County PFHC CHNA. This collaborative team included members from Carle Eureka Hospital, Carle Health Methodist Hospital, Carle Health Pekin Hospital, Carle Health Proctor Hospital, Bradley University, Heart of Illinois United Way, Heartland Health Services, OSF Saint Francis Medical Center, Peoria City/County Health Department, Tazewell County Health Department and Woodford County Health Department. The goal of the PFHC ad hoc CHNA collaborative was to highlight the health needs of residents in the Tri-County region and effectively utilize resources and establish partnerships from the three counties to improve the health of the communities. The community health director for Carle BroMenn Medical Center and Carle Eureka Hospital serves on the PFHC board and is a member of the PFHC ad hoc CHNA collaborative team. Carle Eureka used the Tri-County CHNA to prepare its 2025 CHNA report with a focus on Woodford County.

For the 2025 CHNA, Carle Eureka participated in the priority setting process with the PFHC. The PFHC utilized the MAPP 2.0 (Mobilizing for Action through Planning and Partnerships) framework to guide its community health needs assessment and prioritization process. The PFHC Board led the process of identifying issue statements through a series of structured sessions. These sessions involved reviewing raw data and summarizing key health issues affecting the Tri-County region. The Hanlon Method for Prioritizing Health Problems was used to guide this process. The PFHC narrowed the comprehensive list to a final set of 10 issue statements. See Appendices 8 and 9 in the 2025 PFHC CHNA for a detailed description of the prioritization process [Partnership for a Healthy Community - 1/1/2026-12/31/2028](#).

Following the identification of 10 issue statements, seven key entities facilitated a series of meetings for key internal and external stakeholders to review, provide feedback and score and rate the 10 issue statements using the Hanlon Method. The following table describes the voting entities and meeting dates for this voting process.

Name of Entity	Date of meeting(s)
Carle Health	June 12, 2025
Community Conversations Group	May 22, 2025
OSF HealthCare	June 2, 2025
Partnership for a Healthy Community Board/action teams	June 12, 2025
Peoria City/County Health Department	May 20, June 2 and June 5, 2025
Tazewell County Health Department	June 3 and June 11, 2025
Woodford County Health Department	May 20 and June 3, 2025

Following the meetings above, the PFHC collaborative team identified and prioritized the most important health-related issues in the Tri-County region. They considered health needs based on: (1) magnitude of the issue (i.e., what percentage of the population was impacted by the issue); (2) severity of the issue in terms of its relationship with morbidities and mortalities; and (3) potential impact through collaboration. Using a modified version of the Hanlon Method, three significant health needs were identified and determined to have equal priority: 1) food insecurity among youth, 2) access to mental health, 3) suicidal thoughts and behaviors.

Following this selection, the CHNA team from Carle Eureka combined the two PFHC mental health-related priorities (access to mental health and suicidal thoughts and behaviors) and selected mental health as a priority for the 2025 Carle Eureka CHNA. Additionally, the Carle Eureka team reviewed all ten of the Tri-County issue statements, analyzed



additional data for Woodford County (included in this report) and took into consideration available resources to determine how the hospital can make the most impact.

In looking at the three priorities, and 10 issue statements for prioritization by the Tri-County PFHC, Carle Eureka determined that access to care would be its second health priority. This broader priority encompasses issue statements six through ten; 6) access to behavioral health resources among youth and those with low-income 7) early and adequate prenatal care 8) emergency department use for medical care that is non-emergent 9) engagement with primary care providers for routine visits and 10) navigating healthcare system and resources specifically among individuals who are AA/Black, males, rural residents, and/or individuals 65+ years old. For a list of the ten issue statements see Appendix 9 in the 2025 PFHC CHNA at [Partnership for a Healthy Community - 1/1/2026-12/31/2028](#). Access to care is a critical issue in rural counties and the hospital continually strives to improve the availability of health services to Woodford County residents.

Although Carle Eureka will focus a majority of its community health efforts on mental health and access to care, it will also support the PFHC's efforts related to food insecurity among youth. As mentioned above, a Carle Health leader is a member of the PFHC Board that supports the three Tri-County health priorities.

For the 2026-2028 implementation plan, Carle Eureka looks to expand/supplement its current efforts to increase access to mental health services in Woodford County through a partnership with Trillium Place and to continue offering Mental Health First Aid classes for the community. The hospital also intends to increase access to primary care and specialty services in Woodford County and will continue its generous financial assistance policy.

## **Description of Carle Health and Carle Eureka Hospital**

Carle Eureka Hospital is a 25-bed facility that has served and cared for the people of Woodford County and the surrounding area since 1901. Carle Eureka is the only hospital in Woodford County and is a critical access hospital as certified by the Centers for Medicare and Medicaid Services. By functioning in this capacity, Carle Eureka plays a vital role in serving the health needs of a primarily rural area. Carle Eureka is a part of Carle Health, an integrated system of healthcare services based in Urbana, Illinois, which includes eight hospitals, multi-specialty physician group practices with more than 1,500 doctors and advanced practice providers, Carle Illinois College of Medicine, Methodist College, Stephens Family Clinical Research Institute, and other associated healthcare businesses – all working together to get patients the care they need at the right time and at every point in their healthcare journey.

## **Summary of the 2022 Community Health Needs Assessment and 2023 – 2025 Program Implementation**

### **Community Definition**

For the purpose of this assessment, “community” was defined as Woodford County, Illinois. Carle Eureka is the only hospital in Woodford County, which is located in rural central Illinois. Although the hospital participated in the 2022 Tri-County Collaborative, led by the Partnership for a Healthy Community for Woodford, Peoria and Tazewell Counties, for the purpose of the 2022 Carle Eureka Community Health Needs Assessment, the community was defined as Woodford County. The following towns are in Woodford County: Bay View Gardens, Benson, Congerville, El Paso, Eureka, Germantown Hills, Goodfield, Kappa, Lowpoint, Metamora, Minonk, Panola, Roanoke, Secor, Spring Bay and Washburn.

## Overview of Collaboration

For the 2022 community health needs assessment, Carle Eureka collaborated with numerous stakeholders including the Partnership for a Healthy Community (PFHC) and CHNA Collaborative Team. The 2022 PFHC CHNA was a collaborative undertaking spearheaded by the PFHC, a multi-sector community partnership working to improve population health. An ad hoc committee within the PFHC formed a CHNA collaborative team to facilitate the CHNA. Members of the collaborative team included Carle Eureka, OSF Saint Francis Medical Center (OSF), UnityPoint Health – Central IL, including Methodist Medical Center of Illinois, Pekin Memorial Hospital and Proctor Hospital (part of Carle Health as of April 1, 2023), Peoria City/County Health Department, Tazewell County Health Department, Woodford County Health Department, Hopedale Medical Complex, Heart of Illinois United Way, Heartland Health Services and Bradley University.

The PFHC ad hoc CHNA collaborative team was created to guide the CHNA process. Members of the ad hoc collaborative team consisted of individuals with special knowledge of and expertise in the health of the community. Team members were carefully selected to ensure representation of the broad interests of the community. The team met in the third and fourth quarters of 2021 and in the first quarter of 2022. Additionally, a data team met monthly to focus on CHNA data. The CHNA collaborative team conducted the 2022 Tri-County CHNA to highlight the health needs and well-being of residents in the Tri-County region. The community health director for Carle BroMenn and Carle Eureka served on the PFHC board, the ad hoc CHNA collaborative team and the data team.

Although Carle Eureka collaborated with the PFHC for a Tri-County CHNA, for the purpose of its 2022 CHNA, the hospital defined its community as Woodford County. Like other members of the PFHC, Carle Eureka used the 2022 Tri-County Community Health Needs Assessment to prepare and adopt its 2022 CHNA Report in compliance with Internal Revenue Code Section §501(r) and the final regulations published on December 31, 2014, to implement §501(r). These requirements are imposed on §501(c) (3) tax-exempt hospitals. Illinois law requires certified local health departments to conduct a CHNA and to complete a community health plan. Peoria City/County Health Department, Tazewell County Health Department and Woodford County Health Department also used the CHNA to prepare a report to satisfy the requirements imposed on health departments under 77 Ill. Adm. Code 600 to prepare an IPLAN.

## Summary of Assessment Process

Carle Eureka participated in the priority setting process of the PFHC ad hoc CHNA collaborative team. The PFHC ad hoc CHNA collaborative team, in conjunction with numerous community stakeholders, considered health needs with respect to: (1) **magnitude** of the issues, based on the percentage of the population impacted by the issue); (2) **seriousness** of the issues, based on seriousness of outcomes, economic impact, urgency, and future trends and forecasts; (3) **effectiveness considerations**, based on potential impact through collaboration, community support and measurement of impact.

## Needs Identified

Using a modified version of the Hanlon Method, the PFHC ad hoc CHNA collaborative team and community stakeholders identified four significant health needs and considered them equal priorities:

- **Healthy Eating/Active Living:** *defined as active living, healthy eating and access to food and food insecurity.*
- **Mental Health:** *defined as depression, anxiety and suicide.*
- **Obesity:** *defined as overweight and obesity.*

## Health Needs Selected

### Mental Health

From the three significant health needs selected by the PFHC ad hoc CHNA collaborative team, Carle Eureka's CHNA team selected mental health as a significant health need for Woodford County for several reasons. First, Woodford County residents that participated in the 2021 Tri-County Community Health Survey perceived mental health as the most important health issue in the community and 13 percent of Woodford County survey respondents reported that they did not have access to counseling in the last year when they needed it.

Secondly, the age-adjusted death rate due to suicide in Woodford County was in the worst 50th – 75th percentile range compared to other counties in the United States and does not meet the Healthy People 2030 target.

Third, Carle Eureka's CHNA team selected mental health as a significant health need because some of the high Health Equity Needs ZIP codes—specifically Eureka ZIP code 61530, Washburn ZIP code 61570, Minonk ZIP code 61760 and Lowpoint ZIP code 61545—had higher values than the county value and in comparison to other ZIP codes in Illinois for some of the age-adjusted emergency room and hospitalization rates: mental health, pediatric mental health and/or suicide and self-inflicted injury.

Finally, the team selected mental health to maintain continuity in what has already been accomplished. Mental health was a health priority or significant health need for the 2013, 2016 and 2019 Carle Eureka CHNAs and significant strides towards increasing community members' knowledge of mental health issues and decreasing stigma related to mental health have been made.

It was clear from community input and current data that continued efforts are needed to reduce the stigma associated with mental health and give further momentum to the efforts of improving mental health for county residents.

### Access to Care

Carle Eureka's CHNA team selected access to care as its second significant health need. The Carle Eureka CHNA team analyzed additional data for Woodford County and took into consideration available resources and the health needs, as brought forth by the PFHC ad hoc CHNA team, where the hospital could make the most impact. Carle Eureka's CHNA team selected access to care, one of the six PFHC health needs presented to community stakeholders at the prioritization meeting. As a critical access hospital with limited resources, the CHNA team felt that it could make the greatest impact on improving the health of the community by selecting access to care as the second health need alongside mental health. Access to care is a critical issue in rural counties and the hospital continually strives to improve the availability of health services to Woodford County residents.

According to the 2021 Tri-County Community Health Survey, Woodford County residents perceived access to care as the second most important health issue that impacts well-being. Eleven percent of Woodford County respondents reported that they were unable to access care in the past year when they needed it. In regard to screenings, the percentage of women aged 50 – 74 in Woodford County who have had a mammogram in the last two years does not meet the Healthy People 2030 target and Benson ZIP code 61516 and Minonk ZIP code 61760 are in the worst 25th percentile range (red indicator) compared to other ZIP codes in Illinois. The lowest percentages for cervical cancer screenings for ages 21 – 64 years in Woodford County occur in Washburn ZIP code 61570 and Lowpoint ZIP code 61545 which is in the worst 50th – 75th percentile range (yellow indicator) compared to other ZIP codes in Illinois. The percentage of individuals in Woodford County aged 50 - 75 who have had either a fecal occult blood test in the past year, a sigmoidoscopy in the

past five years AND a fecal occult blood test in the past three years, or a colonoscopy exam in the past ten years is in the best 0 – 50th percentile range (green indicator) but does not meet the Healthy People 2030. Better access could improve all of these statistics.

## Health Needs Not Selected

Although the hospital focused a majority of its community health efforts on mental health and access to care, it continued to support the PFHC's efforts with obesity and healthy eating/active living when possible.

### Healthy Eating/Active Living

The hospital CHNA team did not select healthy eating/active (HEAL) living as a significant health need given the hospital's limited resources and its ability to have a greater impact on mental health and access to care for Woodford County residents. The hospital will, however, continue to support the efforts of the PFHC healthy eating/active priority action team for the Tri-County region. A member of the Carle Eureka leadership team serves on the Partnership for a Healthy Community Board and continues to seek ways in which the hospital can support and collaborate with the HEAL team.

### Obesity

The hospital CHNA team did not select obesity as a significant health need given its limited resources as a critical access hospital and its ability to have a greater impact on access to care and mental health for Woodford County residents. The hospital will, however, continue to support the efforts of the PFHC obesity priority action team for the Tri-County region. A member of the Carle Eureka leadership team serves on the Partnership for a Healthy Community Board and continues to seek ways in which the hospital can support and collaborate with the obesity team.

## Summary of 2023 – 2025 Implemented Programs and Key Accomplishments

A summary of accomplishments for 2023 and/or 2024 from the Carle Eureka Hospital Community Health Implementation Strategy Plan are listed below. At the time of this report, the interventions for the 2025 implementation strategy plan are in progress and are therefore not included in this report.

**Highlights for steps that were taken from January 1, 2023 to December 31, 2024, as a part of the 2023-2025 Carle Eureka Community Health Implementation Plan to address mental health include the following:**

- In 2024, the Carle Eureka Mental Health First Aid (MHFA) instructor and social worker gave a presentation to 18 women for the local Providing Educational Opportunities for Women (PEO) Chapter. The presentation was about MHFA and what it can offer.
- In 2023 and 2024, 61 Woodford County residents accessed counseling and psychiatric services provided by Trillium Place, an affiliate of Carle Health, onsite at Carle Eureka. A total of 394 service hours were provided.
- The community health director for Carle BroMenn and Carle Eureka served on the Partnership for a Healthy Community (PFHC) Board and Mental Health Action Team in 2023 and 2024.
- In 2023 and 2024, the Carle Eureka MHFA instructor served as the lead for the Partnership for a Healthy Community (PFHC) Tri-County MHFA Cadre/Collaborative and assisted other counties in teaching numerous MHFA courses in their communities.
- In 2023 and 2024, the Carle Eureka MHFA instructor and social worker served on the PFHC Tri-County mental health action team.



- In 2023 and 2024, the PFHC Tri-County MHFA Cadre, led by Carle Eureka, held 65 MHFA trainings, 30 adult MHFA trainings, 25 youth MHFA trainings, and 10 population-specific (firefighter/EMS, higher education and rural) trainings, for 981 community members.
- In 2023 and 2024, the Carle Eureka MHFA instructor taught 23 of the PFHC Tri-County MHFA classes for approximately 441 community members.
- In 2023 and 2024, the PFHC Tri-County MHFA Cadre added six new members and began offering a newsletter for instructors in 2023 containing updates from the MHFA National Council and cadre specific information.
- On February 9, 2023, the Carle Eureka MHFA instructor held a virtual presentation for the Blue Star Mom's Group regarding the military MHFA class and how the full class would benefit them as a family member as well as their soldier. There were approximately 60 moms in attendance throughout the state of Illinois.
- In 2023, the Carle Eureka MHFA instructor became certified to teach public safety/corrections and rural MHFA along with adapting present curriculum notes to those specialized communities.

The 2023-2025 Carle Eureka Community Health Implementation Strategy Plan was posted in March 2023. Interventions for mental health outlined in the plan can be viewed at <https://carle.org/chna>.

**Highlights of steps taken from January 1, 2023 – December 31, 2024 as a part of the 2023-2025 Carle Eureka Community Health Implementation Strategy Plan to address access to care are as follows:**

- In 2024, Carle Eureka added a new CT scanner. The new CT scanner provides high-quality imaging to children and adults in and around Eureka with shorter exam times and lower levels of radiation.
- In 2023, seven providers and one primary care physician were added to the medical staff at Carle Eureka. In 2024, Carle Eureka added the following 17 new providers to the medical staff: 12 telemedicine radiologists, three hospital medicine physicians, one Interventional radiologist and one podiatrist.
- In 2024, Carle Health launched YoMingo. YoMingo is a new app offered as an educational resource for new and expecting mothers. It has important information and answers to great everyday questions as well as the following:
  - Information on topics like prenatal care, pregnancy, labor and childbirth, breastfeeding, newborn care, and parenting.
  - Interactive maternity tools such as contraction timer, personal journal, feeding log and immunization log.
  - Classes, videos and animations on multiple topics.
  - Personalized content available in English, Spanish and 12 other languages.
- As one of the eight hospitals in the Carle Health system, Carle Eureka contributed to the following system efforts in 2023 and 2024.
  - In 2024, Carle Health delivered 15 weeks of anti-racism education to nurse leaders. The education was supported by a \$20,000 grant from the American Nurses Association.
  - In 2024, Carle Health delivered 65 live DEI education sessions to Carle Health teams on topics like cultural humility, LGBTQ+ inclusive education, racism in healthcare and bias time out.
    - Over 2,800 nurses completed education on caring for diverse hair types and textures.
  - In 2024, Carle Eureka was designated as a “high performer” on the 2024 Healthcare Equality Index, which is a nationwide designation of hospitals and healthcare facilities for LGBTQ+-inclusive healthcare practices.
  - In October 2023, Carle Health submitted an application for the Healthcare Equality Index (HEI). As a part of this the application process, leaders at each Carle Health hospital completed a three-hour executive briefing session on LGBTQ+ inclusive healthcare. In 2023, 99.5% of Carle BroMenn and Carle Eureka staff completed health equity training.
  - In 2023 and 2024, 203 Carle BroMenn/Carle Eureka leaders participated in inclusive leadership trainings accumulating 871 hours of education.
  - In 2023, there were two key electronic medical record (EMR) enhancements to better capture accurate and inclusive REAL (race, ethnicity, language) and SOGI (sexual orientation and gender identity) data from patients.

- In 2023, Carle Health removed the race-based eGFR equation from clinical testing.
- In October 2023, Carle Health began screening for the social determinants of health (SDOH) in the inpatient setting.
- In 2023 and 2024, Carle Health employees participated in 36 multi-cultural DEI forums for a total of 1,430 learning hours.
- In 2023, Carle Health hosted 17 Health Equity Grand Round sessions with a total of 2,873 participants. Sessions were available to community members for continuing education credits.
- In 2023 and 2024, Carle Health continued with the interventions below to increase access to care.
  - Offered a charity care program and communicated the availability of that program.
  - Participated in population health initiatives that actively managed the health of insurance members.
  - Supported students in healthcare fields; student nurses, APN's and/or Graduate Medical Education programs to grow number of future providers.
  - Promoted prescription affordability as a 340B provider.
  - Offered on-line scheduling, eCheck-in, communication with clinic staff and access to results through Carle MyChart (MyCarle).

The 2023 - 2025 Carle Eureka Community Health Implementation Strategy Plan was posted in March 2023. Interventions for access to care are outlined in the plan can be viewed at <https://carle.org/chna>.

## **Input from the Community**

Feedback from community members was available through a mechanism provided for the 2022 Carle Eureka Hospital Community Health Needs Assessment (CHNA) and the 2023 – 2025 Carle Eureka Hospital Community Health Implementation Strategy Plan (CHIP). A mechanism was put in place for the public to comment or provide input for the CHNA and/or CHIP. The CHNA Report and CHIP was posted on the website of the hospital. To encourage written feedback, the 2022 Eureka CHNA and the 2023 – 2025 Eureka CHIP included a section titled “Vehicle for Community Feedback,” which provided instructions for how individuals from the community could provide comments to the 2022 CHNA and/or the 2023 – 2025 CHIP. Although the hospital did not receive any feedback from the community, it will continue to encourage input by providing various feedback mechanisms for the 2025 CHNA and 2026 – 2028 CHIP.

## **Lessons Learned**

A lesson learned by the organizations that collaborated for the 2022 CHNA cycle, was that even greater collaboration of resources would increase the level of implementation of interventions in all three counties. The different sizes of the counties proved to be challenging for implementation in the smaller counties.

## **2025 Community Health Needs Assessment**

### **Community Health Needs Assessment Report Approval**

Carle Eureka Hospital is utilizing this CHNA Report to meet their 2025 Community Health Needs Assessment requirements under 501(r) added to the Internal Revenue Code by the Patient Protection and Affordable Care Act. This report was approved by the Carle Health Central Region Board on December 16, 2025.

### **Community Definition**

For the purpose of this assessment, “community” is defined as Woodford County, Illinois. Carle Eureka is the only hospital in Woodford County, which is located in rural central Illinois. Although the hospital participated in the 2025 Tri-

County Collaborative, led by the Partnership for a Healthy Community for Woodford, Peoria and Tazewell Counties, for the purpose of the 2025 Carle Eureka Hospital Community Health Needs Assessment, the community is defined as Woodford County. The following towns are in Woodford County: Bay View Gardens, Benson, Congerville, El Paso, Eureka, Germantown Hills, Goodfield, Kappa, Lowpoint, Metamora, Minonk, Panola, Roanoke, Secor, Spring Bay and Washburn.

## **Population**

Woodford County consists of a total population of 38,405 (Conduent Healthy Communities Institute, Claritas, 2025). Metamora and Germantown Hills – ZIP code 61548, has the largest population in the county with 12,33 residents. The population in Woodford County decreased by 0.16 percent from 2020 to 2025 (Conduent Healthy Communities Institute, Claritas, 2025).

## **Social Determinants of Health: Health Equity Index**

The Health Equity Index is a Conduent Healthy Communities Institute (HCI) tool that measures socioeconomic need, which is correlated with poor health outcomes. The index is part of the Conduent's [SocioNeeds Index® Suite](#), which provides analytics around social determinants of health to advance equitable outcomes for a range of topics. Conduent HCI's Health Equity Index considers validated indicators related to income, employment, education and household environment to identify areas at highest risk for experiencing health inequities. The indicators are weighted to maximize the correlation of the index with premature death rates and preventable hospitalization rates. All ZIP codes, counties and county equivalents in the United States are given an index value from 0 (low need) to 100 (high need). To help identify the areas of highest need within a defined geographic area, the selected ZIP codes are ranked from 1 (low need) to 5 (high need) based on their index value. These values are sorted from low to high and divided into five ranks using natural breaks. These ranks are used to color the map and chart for the Health Equity Index, with darker coloring associated with higher relative need (Exhibit 2 below).

Woodford County has several communities that have a greater risk of experiencing health inequities or have a higher relative need compared to other communities in the county. The high Health Equity Needs ZIP codes for Woodford County are illustrated in Exhibit 1. Woodford County has one ZIP code with a ranking of five, two ZIP codes with a ranking of four and two ZIP codes with a ranking of three which represent the areas with the highest relative need in Woodford County.

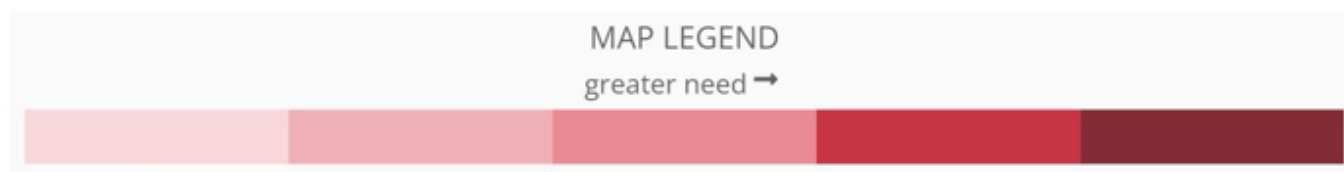
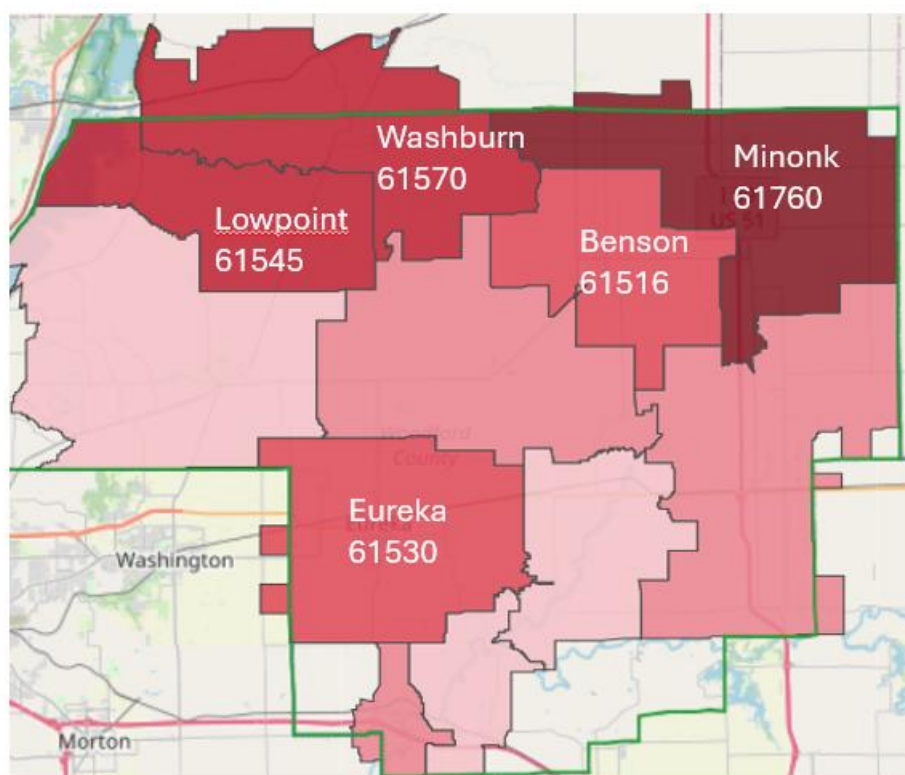
**Exhibit 1: High Health Equity Needs ZIP Codes in Woodford County, 2025**

City/Town	ZIP Code	Health Equity Ranking	Population
Minonk	61760	5	2,323
Washburn	61570	4	1,681
Lowpoint	61545	4	632
Benson	61516	3	663
Eureka	61530	3	6,629

Source: Conduent Healthy Communities Institute, Claritas, 2025.

Woodford County has three ZIP codes with a Healthy Equity ranking of one (low socioeconomic need): Congerville (61729), Metamora and Germantown Hills (61548) and Secor (61771). The Health Equity Index for Woodford County is illustrated in Exhibit 2. Additionally, see Appendix 1 for county rankings and the national indexes for all ZIP codes in Woodford County.

**Exhibit 2: Woodford County Health Equity Index, 2025**



Source: Conduent Healthy Communities Institute, 2025.

Throughout this report, available disparities will be highlighted for the ZIP codes with Health Equity Index ranking of three, four or five.

## Demographics

### Age and Gender

The median age in Woodford County is 41.4 years, which is higher than the median age for Illinois of 40 years. The median age for males is 40.3 years and 42.5 years for females (Conduent Healthy Communities Institute, Claritas, 2025).

### Race and Ethnicity

The population by race for Woodford County is 92.03 percent White, 0.91 percent Black or African American, 0.84 percent Asian, 0.68 percent American Indian and Alaska Native and 0.45 percent Native Hawaiian or Pacific Islander



(Conduent Healthy Communities Institute, Claritas, 2025). See Exhibit 3 for an illustration of this data in comparison to Illinois.

**Exhibit 3: Population by Race, Woodford County vs. Illinois 2025**

Population by Race	County: Woodford		State: Illinois	
	Persons	% of Population	Persons	% of Population
White	35,343	92.03%	7,427,283	59.50%
Black/African American	351	0.91%	1,750,846	14.03%
American Indian/Alaskan Native	68	0.18%	100,635	0.81%
Asian	262	0.68%	780,762	6.26%
Native Hawaiian/Pacific Islander	17	0.04%	4,722	0.04%
Some Other Race	236	0.61%	1,192,517	9.55%
2+ Races	2,128	5.54%	1,225,122	9.82%

Source: Conduent Healthy Communities Institute, Claritas, 2025.

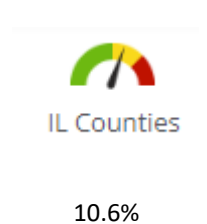
The population by ethnicity for Woodford County is 2.32 percent Hispanic/Latino and 97.68 percent Non-Hispanic/Latino (Conduent Healthy Communities, Claritas, 2025).

### Household/Family

The average household size in Woodford County is 2.55 persons with 14,715 residents living as a part of a household (Conduent Healthy Communities, Claritas, 2025). The percentage of children living in single parent households in Woodford County is 10.6 percent. This is in the best 0 - 50th percentile range (green indicator) in comparison to other counties in Illinois (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2019 - 2023). The value is trending favorably in a statistically significant direction (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2005 - 2023). See Exhibit 4 below for an illustration of this information.

**Exhibit 4: Single Parent Households, Woodford County, 2005 - 2023**

Woodford County



Trend

Source: Conduent Healthy Communities Institute, American Community Survey 5-Year, 2005-2023.

The percentage of seniors (age 65 years and older) who are living alone in Woodford County is 24.3 percent. This is in the best 0 - 50th percentile (green indicator) compared to other counties in Illinois (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2019 - 2023). The percentage is trending unfavorably but not in a statistically significant direction (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2005 - 2023).

## Economics

### Median Household Income

The median household income in Woodford County is \$91,052, which is higher than the Illinois median household income of \$80,648 (Conduent Healthy Communities Institute, Claritas, 2025).

### Living below the Poverty Level

The percentage of people living below the poverty level in Woodford County is 7.6 percent which is in the best 0 – 50th percentile (green indicator) compared to other counties in Illinois, is lower than the Illinois value of 11.7 percent and meets the Healthy People 2030 target of 8.0 percent. The highest values occur in individuals aged 18 – 24 years (14.4 percent) which is 89 percent higher than the percentage for the county (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2019 - 2023). The percentage is trending favorably but not in a statistically significant direction (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2005 - 2023).

### Children Living below the Poverty Level

The percentage of children living below the poverty level in Woodford County is 7.7 percent. This is in the best 0 – 50th percentile (green indicator) compared to other counties in Illinois and is lower than the Illinois value of 15.4 percent (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2019 - 2023). The percentage is trending favorably in a statistically significant direction (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2005 - 2023).

### Persons with Disabilities Living below the Poverty Level

The percentage of adults, aged 20 to 64, with any disability who are living below the poverty level in Woodford County is 23.3 percent. This is in the best 0 – 50th percentile (green indicator) compared to other counties in Illinois and is lower than the Illinois value of 24.5 percent (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2019 - 2023). The percentage, however, is trending unfavorably albeit not in a statistically significant direction (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2005 - 2023).

### People 65 Years and Older Living below the Poverty Level

The percentage of people 65 years and older living below the poverty level is 7.2 percent. This is in the best 0 – 50th percentile (green indicator) compared to other counties in Illinois and lower than the Illinois value of 9.8 percent (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2019 - 2023). The percentage, however, is trending unfavorably in a statistically significant direction (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2005 - 2023). See Exhibit 5 below.

## Exhibit 5: 65 Years and Older Living Below the Poverty Level, Woodford County, 2005 - 2023

Woodford County



7.2%



Source: Conduent Healthy Communities Institute, American Community Survey 5-Year, 2005-2023.

### Employment

The percentage of the civilian labor force over the age of 16 that is unemployed in Woodford County is 2.9 percent. This is in the best 0 – 50th percentile range (green indicator) compared to other counties in Illinois and is lower than the Illinois value of 4.4 percent (Conduent Healthy Communities Institute, U.S. Bureau of Labor Statistics, May 2025). The three most common industries of employment are manufacturing at 15.8 percent, healthcare at 14.6 percent and educational services at 11.2 percent (Conduent Healthy Communities Institute, Claritas, 2025).

### Education

#### Educational Level

Ninety-five percent of the population over the age of 25 in Woodford County possess a high school diploma or higher and 36.1 percent have a bachelor's degree or higher. Both values are in the best 0 – 50th percentile range (green indicator) compared to other counties in Illinois (Conduent Healthy Communities Institute, American Community Survey 5-Year, 2019 – 2023). Eureka College, a small liberal arts college, is located in Woodford County.

#### High School Graduation Rates

The percentage of students in Woodford County that graduate high school within four years of their first enrollment in ninth grade is 90.4 percent. This is in the best 0 - 50th percentile range (green indicator) when compared to other counties in Illinois and is higher than the Illinois value of 87.3 percent (Conduent Healthy Communities Institute, County Health Rankings, 2020 - 2021). It does not, however, meet the Healthy People 2030 target of 90.7 percent.

#### Student-to-Teacher Ratio

This student-to teacher ratio indicates the average number of public-school students per teacher in the region. It does not measure class size. According to the National Center for Education Statistics, larger schools tend to have higher student-teacher ratios. There are 13.3 students per teacher in Woodford County. This is in the worst 50th - 75th percentile range (yellow indicator) compared to other counties in Illinois County (Conduent Healthy Communities Institute, National Center for Education Statistics, 2023-2024). The value is trending favorably, however, in a statistically significant direction (Conduent Healthy Communities Institute, National Center for Education Statistics, 2009-2024).

### Healthcare Resources in the Defined Community

The healthcare resources in Woodford County are listed below.

<u>Name of Facility</u>	<u>Type of Facility</u>
Carle Eureka Hospital	Critical Access Hospital
Woodford County Health Department	Health Clinic
Heartline and Heart House	Community Organization

See Appendix 2 for community health care resources in the Tri-County region.

## Key Findings: Community Definition

- Woodford County is a predominately White community.
- The student to teacher ratio in Woodford County is in the worst 50<sup>th</sup> - 75<sup>th</sup> percentile range (yellow indicator) compared to other counties in Illinois.
- The median household income for Woodford County is higher than the Illinois median household income.

## Collaboration

### The Partnership for a Healthy Community and CHNA Collaborative Team

Carle Eureka Hospital participated in the Tri-County Community Health Needs Assessment (CHNA), a collaborative undertaking spearheaded by the Partnership for a Healthy Community (PFHC). The PFHC is a multi-sector community partnership working to improve population health in Woodford, Peoria and Tazewell County. An ad hoc committee within the PFHC facilitated the Tri-County PFHC CHNA. This collaborative team included members from: Carle Eureka Hospital, Carle Health Methodist Hospital, Carle Health Pekin Hospital, Carle Health Proctor Hospital, Bradley University, Heart of Illinois United Way, Heartland Health Services, OSF Saint Francis Medical Center, Peoria City/County Health Department, Tazewell County Health Department and Woodford County Health Department. The goal of the PFHC ad hoc CHNA collaborative was to highlight the health needs of residents in the Tri-County region and effectively utilize resources and establish partnerships from the three counties to improve the health of the communities. The community health director for Carle BroMenn Medical Center and Carle Eureka serves on the PFHC board and is a member of the PFHC ad hoc CHNA collaborative team. See Appendix 3 for the biographies of the CHNA ad hoc collaborative team members.

The PFHC ad hoc CHNA collaborative team was created to guide the CHNA process. Members of the ad hoc collaborative team consisted of individuals with special knowledge of and expertise in the health of the community. Team members were carefully selected to ensure representation of the broad interests of the community. The team met in the first and second quarter of 2025. Carle Eureka used the Tri-County CHNA to prepare its 2025 CHNA report with a focus on Woodford County. The PFHC CHNA report can be found at [Partnership for a Healthy Community - 1/1/2026-12/31/2028](#).

Although Carle Eureka served on the PFHC ad hoc CHNA collaborative team for the Tri-County region, for the purposes of this CHNA, the hospital defines its community as Woodford County. Carle Eureka used the 2025 Community Health Needs Assessment for the Tri-County region to prepare and adopt this CHNA Report in compliance with Internal Revenue Code Section §501(r) and the final regulations published on December 31, 2014, to implement §501(r). These requirements are imposed on §501(c) (3) tax-exempt hospitals.

## Methodology

Carle Eureka Hospital's 2025 CHNA was conducted using the mixed methodological approach utilized by the Partnership for a Healthy Community (PFHC). Following the MAPP 2.0 Framework (Mobilizing for Action through Planning and Partnerships), the main primary data sources included the Community Partner Assessment (CPA), Community Context Assessment (CCA), and Community Status Assessment (CSA). Developed by the National Association of County and City Health Officials (NACCHO), MAPP 2.0 is a community-driven strategic planning process designed to improve public health and strengthen local health response to health issues in a community. Each of these three data sources is described in more detail below to provide context for how they inform the CHNA findings.

**CPA:** The goal of the CPA was to explain the organizations involved with PFHC, focusing on each organization's internal strategies and the resources available to address community health issues. This survey specifically explored the organizations' community work, the populations they serve, the focus of their organizations and the strategies they employ. One representative from each organization in the partnership (n=18) completed a survey used to describe the capacity of each organization and alignment of health issues in the Tri-County region. Carle Eureka was one of the 18 organizations that completed the CPA.

**CCA:** The purpose of the CCA was to identify the health issues and burdens among residents in Peoria, Tazewell, and Woodford counties using qualitative methodology. These data were collected through a series of interviews and focus groups. Data collected were systematically analyzed to identify recurring themes and patterns, providing a deeper understanding of the community's health context. The CSA was developed and refined by the PFHC to gather insights from residents in Peoria, Tazewell, and Woodford counties.

**CSA:** The CSA was developed and refined by the PFHC to gather insights from residents in Peoria, Tazewell and Woodford County. The community health survey/CSA was administered in third quarter of 2024. See Appendix 4 to view the survey. The Tri-County Community Health Survey results (CSA) and information about the survey instrument design can be found in the 2025 PFHC CHNA at [Partnership for a Healthy Community - 1/1/2026-12/31/2028](#). This report will include survey results specific to Woodford County. Woodford County results indicated that 736 residents responded to the survey with 78 being from the at-risk population.

The PFHC ad hoc CHNA collaborative team also examined data from a variety of secondary sources which can also be found in the link to the PFHC CHNA report for the Tri-County region listed above.

In addition to the primary and secondary data examined by the PFHC ad hoc CHNA collaborative team, this report includes additional secondary data focusing on Woodford County for 1) access to care 2) healthy eating and food insecurity and 3) mental health. These broader health priorities encompass the more specific PFCH significant needs identified during the PFHC prioritization process; 1) food insecurity among youth 2) access to mental health and 3) suicidal thoughts and behaviors.

The additional secondary data specific to Woodford County that is included in this report was acquired via Conduent Healthy Communities Institute, a centralized data platform purchased by Carle Health to help drive community health improvement efforts. Conduent Healthy Communities Institute operates as a repository for publicly available secondary data; hospital emergency room visits and hospitalization rates. The platform includes dashboards, Geographic Information System (GIS) maps, disaggregation at the ZIP code level, disparities information and effective practices for over 100 health-related issues. This data platform is available to the public on Carle Health's website; <https://carle.org/chna>. Conduent Healthy Communities Institute also supplies a colorful gauge to depict comparisons between Woodford County and other counties in Illinois. See Exhibit 6 below.



## Exhibit 6: Conduent Healthy Communities Institute Gauges, 2025



<b>Green (Good):</b>	When a high value is good, community value is equal to or higher than the 50th percentile (median), or, when a low value is good, community value is equal to or lower than the 50th percentile.
<b>Yellow (Fair):</b>	When a high value is good, community value is between the 50th and 25th percentile, or when a low value is good, the community value is between the 50th and 75th percentiles.
<b>Red (Poor):</b>	When a high value is good, the community value is less than the 25th percentile, or when a low value is good, the community value is greater than the 75th percentile.

Source: Conduent Healthy Communities Institute, 2025.

Throughout this report, indicators may be referred to as being in the green, yellow or red zone, in reference to the above value ratings from Conduent Healthy Communities Institute.

See Appendix 5 for a detailed explanation of additional icons and gauges used throughout this report. A comprehensive list of secondary data sources can be found in Appendix 6.

## Woodford County Data

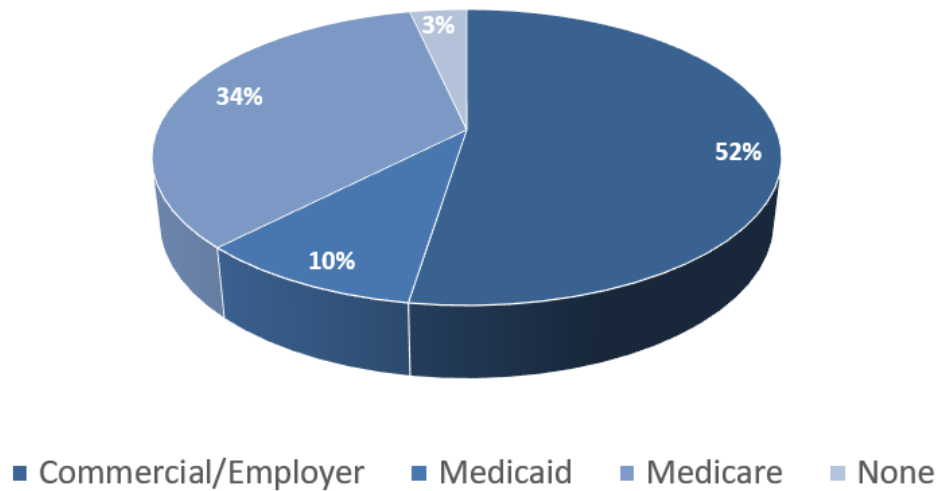
### Access to Care

#### Healthcare Coverage

The percentage of adults aged 18-64 in Woodford County that do not have any kind of health insurance coverage is 7.2 percent. This is in the best 0 – 50th percentile range (green indicator) compared to other counties in Illinois (Conduent Healthy Communities Institute, CDC – Places, 2022).

According to the 2024 Tri-County Community Health Survey, 52 percent of Woodford County survey respondents reported having private insurance, followed by 10 percent having Medicaid and 34 percent having Medicare. Three percent of survey respondents reported not having insurance. See Exhibit 7 below.

**Exhibit 7: Type of Health Insurance, Woodford County 2024**



Source: Tri-County Community Health Survey, 2024.

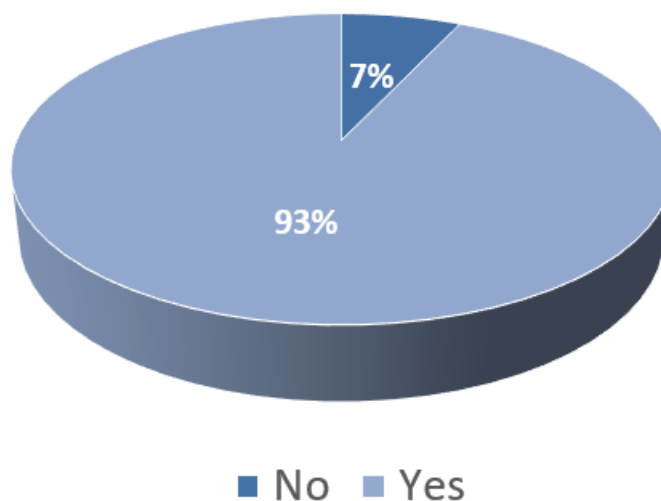
Comparison to 2021 Tri-County Community Health Survey

There was a 10 percent decrease in the percentage of Woodford County survey respondents who reported having private insurance from 62 percent in 2021 to 52 percent in 2024. There was a three percent increase in the percentage of Woodford County survey respondents who reported having Medicaid (seven percent in 2021 and ten percent in 2024) and an eight percent increase of Woodford County survey respondents who reported having Medicare (26 percent in 2021 and 34 percent in 2024).

**Personal Physician**

Ninety-three percent of Woodford County respondents from the 2024 Tri-County Community Health Survey reported that they have a personal physician while seven percent stated that they do not. See Exhibit 8 below.

### Exhibit 8: Personal Physician for Woodford County Survey Respondents, 2024



Source: Tri-County Community Health Survey, 2024.

#### Comparison to 2021 Tri-County Community Health Survey

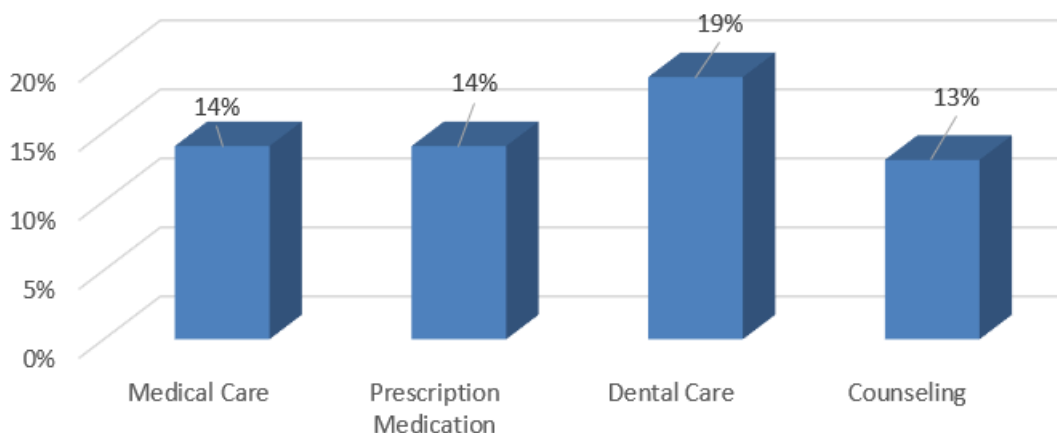
There was a three percent increase from 2021 to 2024 in the percentage of Woodford County survey respondents reporting that they have a personal physician.

#### Access to Health Services

##### Unable to Receive Care

Exhibit 9 below shows the percentage of Woodford County respondents from the 2024 Tri-County Community Health Survey who reported they were not able to receive medical care, prescription medication, dental care and/or counseling in the past year when needed. Respondents reported the following results respectively; 14 percent, 14 percent, 19 percent and 13 percent.

**Exhibit 9: Woodford County Survey Respondents Not Able to Access Care, 2024**



Source: Tri-County Community Health Survey, 2024.

#### Comparison to 2021 Tri-County Community Health Survey

From 2021 to 2024 there were the following changes regarding the inability to access care by Woodford County survey respondents:

- Medical care: three percent increase.
- Prescription medication: three percent increase.
- Dental care: six percent increase.
- Counseling: no change.

The top three reasons for not being able to access the following types of care are listed below:

- Medical care: 1) too long to wait (33 percent), 2) could not afford co-pay (32 percent) and 3) transportation (13 percent).
- Prescription medication: 1) could not afford co-pay (71 percent), 2) no insurance (17 percent) and 3) pharmacy refused insurance (15 percent).
- Dental care: 1) could not afford co-pay (49 percent), 2) no insurance (26 percent) and 3) dentist refused insurance (18 percent).
- Counseling: 1) could not afford co-pay (48 percent), 2) wait too long (34 percent) and 3) could not find (31 percent).

#### **Primary Care Provider Rate**

The primary care provider rate for Woodford County is 45 providers per 100,000 population. Primary care providers include practicing physicians specializing in general practice medicine, family medicine, internal medicine and pediatrics. This is in the best 0 – 50<sup>th</sup> percentile range (green indicator) compared to other counties in Illinois but is lower than the Illinois value of 79 providers per 100,000 population (Conduent Healthy Communities Institute, County Health Rankings, 2021). The rate is trending unfavorably in a statistically significant direction (Conduent Healthy Communities Institute, County Health Rankings, 2010 - 2021). See Exhibit 10 below.

### Exhibit 10: Primary Care Provider Rate, Woodford County, 2010 – 2021



Source: Conduent Healthy Communities Institute, County Health Rankings, 2010 – 2021.

### Mental Health Provider Rate

The mental health provider rate in Woodford County is 44 providers per 100,000 population. Mental health providers include psychiatrists, psychologists, licensed clinical social workers, counselors and advanced practice nurses specializing in mental health care. This is in the worst 25<sup>th</sup> percentile range (red indicator) compared to other counties in Illinois and is lower than the Illinois value of 337 providers per 100,000 population (Conduent Healthy Communities Institute, County Health Rankings, 2024). The rate is trending favorably, however, in a statistically significant direction (Conduent Healthy Communities Institute, County Health Rankings, 2016 – 2024). See Exhibit 11 below.

### Exhibit 11: Mental Health Provider Rate, Woodford County, 2016 – 2024



Source: Conduent Healthy Communities Institute, County Health Rankings, 2016 – 2024.

### Prevention

#### Routine Checkup

The percentage of adults in Woodford County that report having visited a doctor for a routine checkup within the past year is 75.8 percent. This is in the worst 25<sup>th</sup> percentile (red indicator) compared to other counties in Illinois and is lower than the US value of 76.1 percent (Conduent Health Communities Institute, CDC – Places, 2022). See Exhibit 12 below.



## Exhibit 12: Routine Checkup for Adults, Woodford County, 2022



Source: Conduent Healthy Communities Institute, CDC – Places, 2022

### Mammogram

Sixty-nine percent of Woodford County respondents (women only) from the 2024 Tri-County Community Health Survey indicated they have had a mammography/breast exam within the last five years. This is a decrease of six percent from the 2021 survey results of 75 percent.

The percentage of women aged 50 – 74 in Woodford County who have had a mammogram in the last two years is 75.9 percent. This is in the best 0 – 50<sup>th</sup> percentile range (green indicator) compared to other counties in Illinois but does not meet the Healthy People 2030 target of 80.3 percent. Lowpoint ZIP code 61545 and Minonk ZIP code 61760 are in the worst 50 – 75<sup>th</sup> percentile range (yellow indicator) compared to other ZIP codes in Illinois with 71.3 and 72.7 percent, respectively, of women aged 50 – 74 years who have had a mammogram in the past two years (Conduent Healthy Communities Institute, CDC – Places, 2022). See Exhibit 13 below.

### Exhibit 13: Mammograms in Past Two Years (Ages 50 – 74 years) – Woodford County, 2022

Woodford County



75.9%

Lowpoint – 61545



HP 2030 Target  
(80.3%)



70.2%

Minonk – 61760



70.6%

Source: Conduent Healthy Communities Institute, CDC – Places, 2022.

### Disparities

The lowest percentages for mammogram screenings for ages 54 – 74 years occur in:

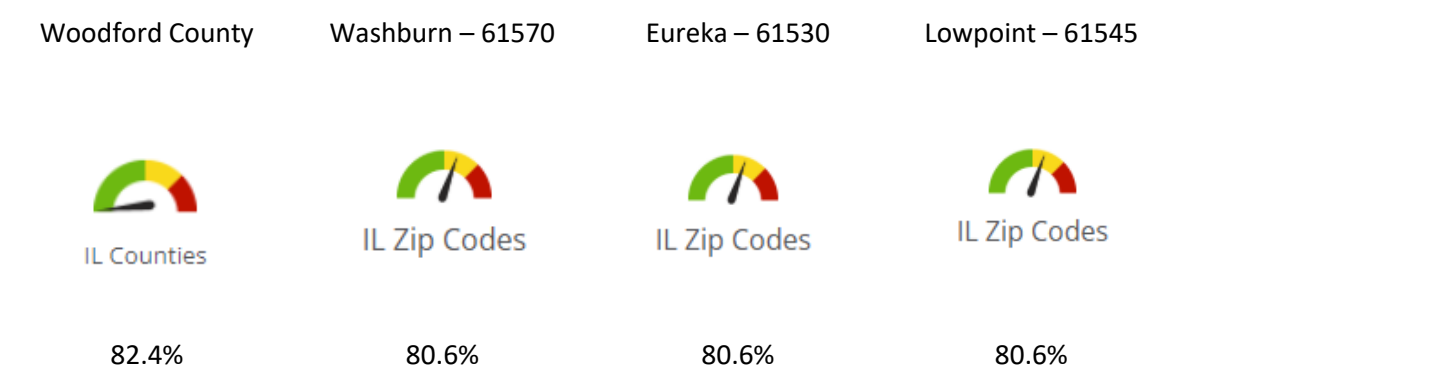
- Lowpoint - ZIP code 61545 (70.2 percent).
- Minonk – ZIP code 61760 (70.6 percent).

Cervical Exam/Screening

Fifty-seven percent of Woodford County respondents (women only) from the 2024 Tri-County Community Health Survey indicated they have had a cervical exam/pap smear within the last five years. This is 16 percent lower than the percentage from the 2021 survey (73 percent).

According to Conduent Healthy Communities Institute, CDC – Places, the percentage of women aged 21 – 65 years in Woodford County who have had a cervical cancer screening test is 82.4 percent. This is a Pap test every three years for women 21 - 29 years; and a Pap test every three years, or an HPV test and Pap test every five years for women 30 - 65 years. This is in the best 0 – 50<sup>th</sup> percentile range (green indicator) compared to other counties in Illinois. Washburn ZIP code 61570 (80.6 percent), Eureka ZIP code 61530 (80.6 percent) and Lowpoint ZIP code 61545 (80.6 percent) all have percentages of women who have had a cervical cancer screening that is in the worst 50<sup>th</sup> – 75<sup>th</sup> percentile range (yellow indicator) compared to other ZIP codes in Illinois (Conduent Healthy Communities Institute, CDC – Places, 2020). See Exhibit 14 below.

Exhibit 14: Cervical Cancer Screening (Ages 21 – 65 years) – Woodford County, 2020



Source: Conduent Healthy Communities Institute, CDC – Places, 2020.

Disparities

The lowest percentages for cervical cancer screenings for ages 21 – 64 years occur in:

- Washburn ZIP code 61570 (80.6 percent).
- Eureka ZIP code 61530 (80.6 percent).
- Lowpoint ZIP code 61545 (80.6 percent).

Colon Cancer Screening

Sixty-four percent of Woodford County respondents (over the age of 50) from the 2024 Tri-County Community Health Survey indicated that they have had a colon cancer screening within the last five years. This is nine percent lower than the percentage from the 2021 survey (73 percent).

The percentage of adults in Woodford County who met the U.S. Preventive Services Task Force (USPSTF) recommendation of screening for colorectal cancer through FIT, sigmoidoscopy, colonoscopy, FIT-DNA, and CT colonography is 64.4 percent. This is in the best 0 – 50<sup>th</sup> percentile range (green indicator (Conduent Healthy Communities Institute, CDC – Places, 2022).

Prostate Exam

Fifty-one percent of Woodford County respondents (men only) from the 2024 Tri-County Community Health Survey indicated they have had a prostate exam within the last five years. This is lower than the result from the 2021 survey of 55 percent.

## **Key Findings: Access to Care**

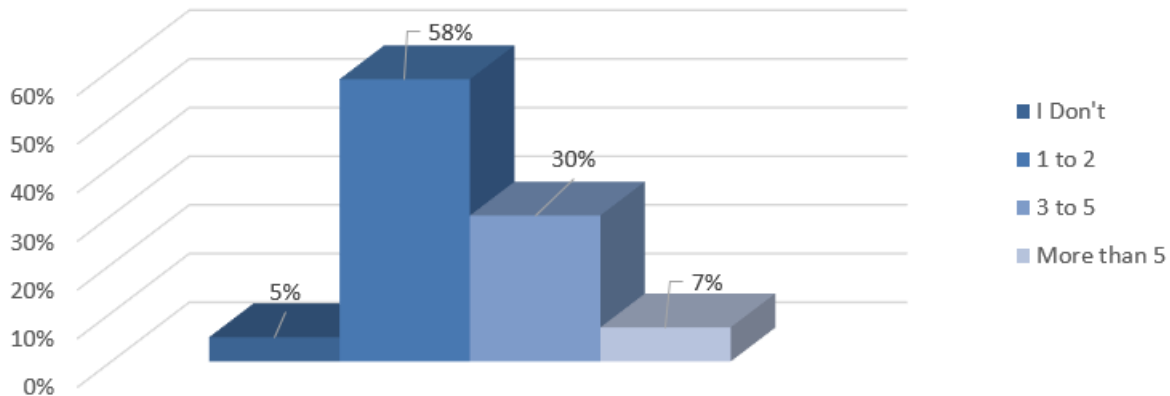
- The percentage of adults in Woodford County that report having visited a doctor for a routine checkup within the past year is in the worst 25<sup>th</sup> percentile (red indicator) compared to other counties in Illinois.
- There was a three percent increase from 2021 to 2024 in the percentage of Woodford County survey respondents reporting that they have a personal physician.
- The primary care provider rate in Woodford County is trending unfavorably in a statistically significant direction.
- The mental health provider rate in Woodford County is in the worst 25<sup>th</sup> percentile range (red indicator) compared to other counties in Illinois.
- The following were changes between the 2021 and the 2024 Tri-County Community Health Survey from Woodford County survey respondents regarding their inability to access the following types of care:
  - Medical care: three percent increase.
  - Prescription medication: three percent increase.
  - Dental care: six percent increase.
- The percentage of women aged 50 – 74 in Woodford County who have had a mammogram in the last two years does not meet the Healthy People 2030 target.
- Lowpoint ZIP code 61545 and Minonk ZIP code 61760 are in the worst 50 – 75<sup>th</sup> percentile range (red indicator) compared to other ZIP codes in Illinois for women aged 50 – 74 years who have had a mammogram in the past two years.
- Washburn ZIP code 61570, Eureka ZIP code 61530 and Lowpoint ZIP code 61545 all have percentages of women who have had a cervical cancer screening that is in the worst 50<sup>th</sup> – 75<sup>th</sup> percentile range (yellow indicator) compared to other ZIP codes in Illinois.
- The Tri-County Survey results show a nine percent decrease in the percentage of Woodford County respondents (over the age of 50) who indicated that they have had a colon cancer screening within the last five years, from 2021 to 2024.

## **Healthy Eating and Food Insecurity**

### **Healthy Eating**

Results from the 2024 Tri-County Community Health Survey showed that 63 percent of Woodford County respondents eat two or less servings of fruits and vegetables per day. For survey respondents that reported zero consumption of fruits and vegetables, not being able to afford them was listed as the top reason. See Exhibit 15 below.

**Exhibit 15: Woodford County Survey Respondents Fruit and Vegetable Consumption, 2024**



Source: Tri-County Community Health Survey, 2024.

#### Comparison to 2021 Tri-County Community Health Survey

From 2021 to 2024 there was a four percent decrease in the percentage of Woodford County survey respondents who reported they eat three to five servings of fruits and vegetables per day and a three percent decrease in respondents who eat more than five servings of fruits and vegetables per day.

#### **Food Insecurity**

The U.S. Department of Agriculture defines food insecurity as limited or uncertain availability of nutritionally adequate foods or uncertain ability to acquire these foods in socially acceptable ways. The percentage of the population that experienced food insecurity in Woodford County at some point in 2023 was 10.3 percent. This rate is in the best 0 - 50<sup>th</sup> percentile range (green indicator) compared to other counties in Illinois percent and is lower than the Illinois value of 13.1 percent (Conduent Healthy Communities Institute, Feeding America, 2023). The rate, however, is trending unfavorably but not in a statistically significant direction (Conduent Healthy Communities Institute, Feeding America, 2018 – 2023).

The percentage of children (under 18 years of age) living in households that experienced food insecurity at some point in 2023 was 9.5 percent. This rate is in the best 0 - 50<sup>th</sup> percentile range (green indicator) compared to other counties in Illinois and is lower than the Illinois value of 15.5 percent (Conduent Healthy Communities Institute, Feeding America, 2023). The rate is trending favorably, but not in a statistically significant direction (Conduent Healthy Communities Institute, Feeding America, 2018 - 2023).

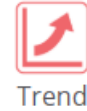
The percentage of food insecure children in households with incomes above 185% of the federal poverty level who are likely not income-eligible for federal nutrition assistance in Woodford County is 42 percent. This is in the worst 25<sup>th</sup> percentile range (red indicator) in comparison to other counties in Illinois and is higher than the Illinois value of 32 percent (Conduent Healthy Communities Institute, Feeding America, 2023). The value is trending unfavorably, but not in a statistically significant direction (Conduent Healthy Communities Institute, Feeding America, 2018 – 2023). See Exhibit 16 below.

## Exhibit 16: Food Insecure Children Likely Ineligible for Assistance, 2018 - 2023

Woodford County



42%



Source: Conduent Healthy Communities Institute, Feeding America, 2018 – 2023.

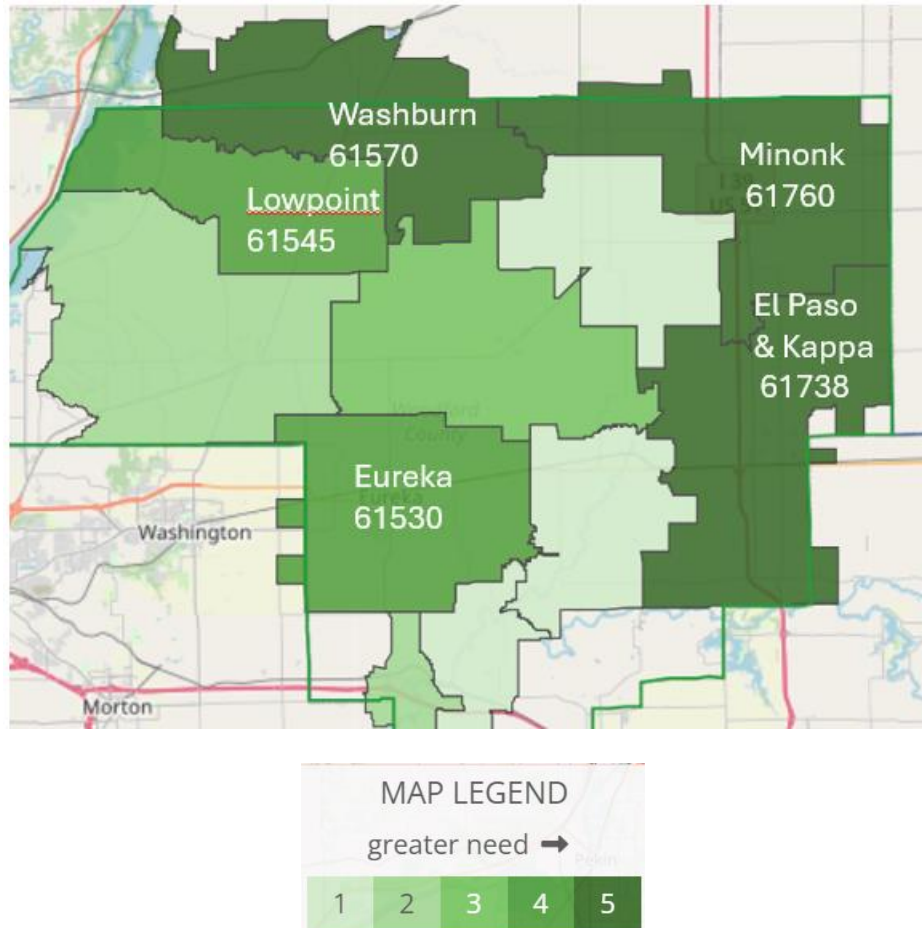
According to the 2024 Tri-County Community Health Survey, eight percent of Woodford County respondents reported that they go hungry one or two days a week. This is an increase of five percent compared to the 2021 survey. In 2024, one percent reported going hungry three to five days per week versus zero percent for the 2021 survey.

### Food Insecurity Index

Conduent Healthy Communities Institute's Food Insecurity Index considers validated indicators related to education, financial stability, household environment, and personal transport expenditures to identify areas at highest risk for experiencing food insecurity. The national index value (from 0 to 100) is calculated for each ZIP code and county in the U.S. Communities with the highest index values are estimated to have the highest food insecurity. Ranks and colors help to identify the relative level of need within a community or service area. The national index value for each location is compared to all other similar locations within the community area to assign a relative rank (from 1 to 5) locally. These ranks are used to color the map and chart for the Food Insecurity Index, with darker coloring associated with higher relative need (Conduent Healthy Communities Institute, 2024). See Exhibit 17 below for the Food Insecurity Index for Woodford County.



**Exhibit 17: Food Insecurity Index – Woodford County, Conduent Health Communities Institute, 2025**



Source: Conduent Healthy Communities Institute, 2025.

Woodford County has three ZIP codes with a food insecurity index of 5 (greater need): Minonk ZIP code 61760, Washburn ZIP code 61570 and El Paso and Kappa ZIP code 61738. Two ZIP codes have an index of four: Lowpoint ZIP code 61545 and Eureka ZIP code 61530.

### **Key Findings: Healthy Eating and Food Insecurity**

- The 2024 Tri-County Community Health Survey data showed over half of Woodford County residents report low consumption (zero to two servings per day) of fruits and vegetables.
- Woodford County is in the worst 25<sup>th</sup> percentile range (red indicator) for the percentage of food insecure children in households with incomes above 185% of the federal poverty level who are likely not income-eligible for federal nutrition assistance.
- The percentage of the population that experienced food insecurity in Woodford County at some point in 2023 is in the best 0 - 50<sup>th</sup> percentile range (green indicator) compared to other counties in Illinois.
- Woodford County has three ZIP codes with a food insecurity index of 5 (greater need): Minonk ZIP code 61760, Washburn ZIP code 61570 and El Paso and Kappa ZIP code 61738.

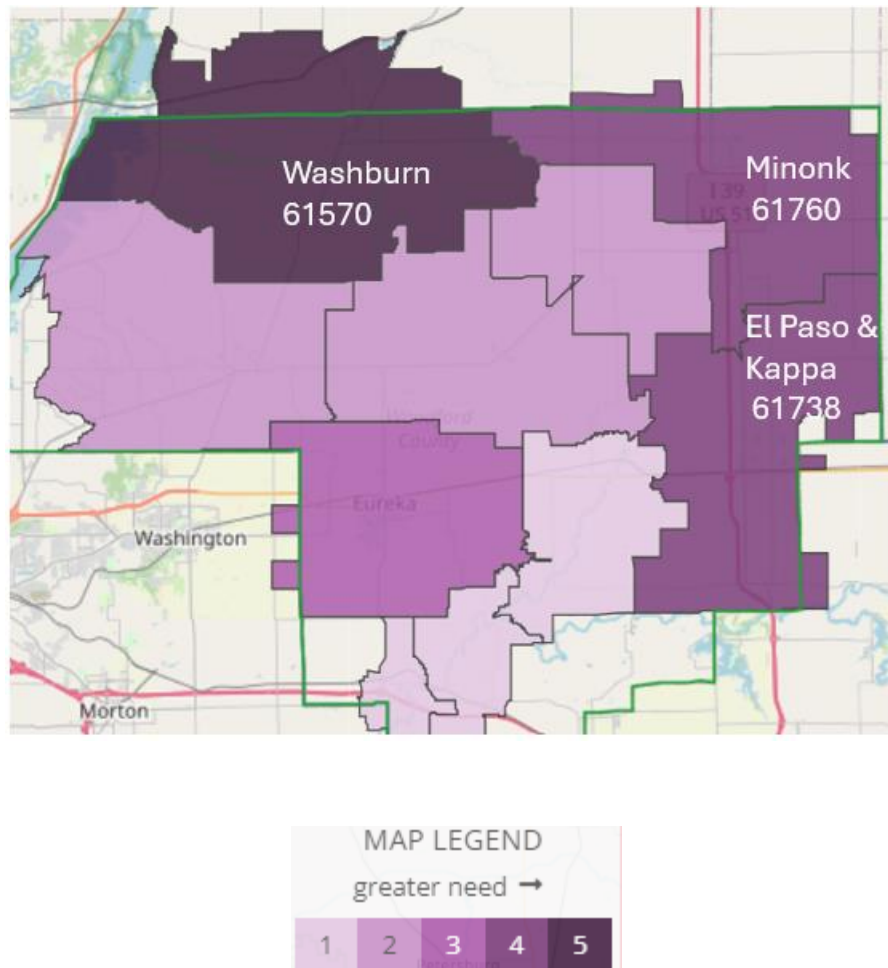
## Mental Health

Mental illnesses are one of the leading causes of disability in the United States. In any given year, approximately 13 million American adults have a seriously debilitating mental illness. Unstable mental health can lead to suicide. An individual's mental health is affected by a combination of factors, including biology (genes/brain chemistry), life experiences (trauma/abuse) and family history regarding mental health problems (Conduent Healthy Communities Institute, 2025).

### Mental Health Index

Mental health is known to be strongly correlated with financial stability, access to healthcare services and social environment. The Mental Health Index considers validated indicators related to access to care, physical health status, transportation, employment, and household environment to identify areas at highest risk for experiencing poor mental health. All ZIP codes, census tracts, and counties in the United States are given an index value from 0 (low need) to 100 (high need). Communities with the highest values are estimated to have the highest socioeconomic and health needs correlated with self-reported poor mental health. Ranks and colors help to identify the relative level of need within a community or service area. The national index value for each location is compared to all other similar locations within the community area to assign a relative rank (from 1 to 5) locally. These ranks are used to color the map and chart for the Mental Health Index, with darker coloring associated with higher relative need (Conduent Healthy Communities Institute, 2025). See Exhibit 18 below for Woodford County's Mental Health Index.

**Exhibit 18: Mental Health Index – Woodford County, 2025**



Source: Conduent Healthy Communities Institute, 2025.

Woodford County has one ZIP code with a mental health index of 5; Washburn ZIP code 61570 and two ZIP codes with an index of 4; Minonk ZIP code 61760 and El Paso and Kappa ZIP code 61738.

### Age-Adjusted Emergency Room Rates

#### Mental Health (Adults)

The age-adjusted emergency room rate due to mental health is 67.1 emergency room visits per 10,000 population ages 18 years and older for Woodford County. This rate is in the best 0 - 50<sup>th</sup> percentile range (green indicator) compared to other counties in Illinois and lower than the Illinois value (71.8 emergency room visits per 10,000 population ages 18+ years) (Conduent Healthy Communities Institute, Illinois Hospital Association, 2022- 2024). The rate is trending favorably in a statistically significant direction (Conduent Healthy Communities Institute, Illinois Hospital Association, 2016 – 2024). The rate for Eureka ZIP code 61530 is in the worst 50 – 75<sup>th</sup> percentile range compared to other ZIP codes in Illinois and is trending unfavorably, albeit not in a statistically significant direction.

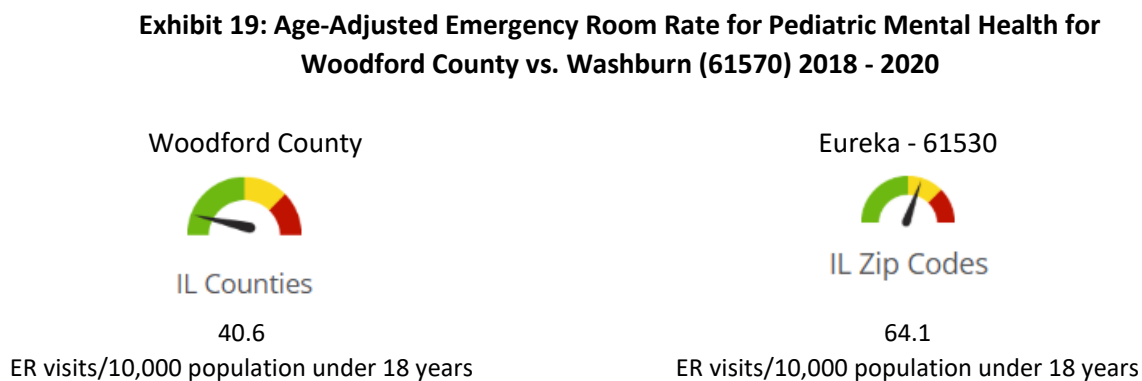
## Disparities

The highest emergency room rates occur in:

- Individuals 25 - 34 years (104.9 emergency room visits per 10,000 population 18+ years) which is 56 percent higher than the overall value for Woodford County.
- Individuals 35 – 44 years (78.7 emergency room visits per 10,000 population 18+ years).
- Blacks or African Americans (138.8 emergency room visits per 10,000 population 18+ years) which is 107 percent higher than the overall value for Woodford County.
- Residents of Eureka ZIP code 61530 (74 emergency room visits per 10,000 population 18+ years).

## Pediatric Mental Health

The rate for age-adjusted emergency room visits due to pediatric mental health (ages 18 years and under) for Woodford County is 40.6 emergency room visits per 10,000 population. This is in the best 0 – 50<sup>th</sup> percentile range (green indicator) compared to other counties in Illinois and is lower than the Illinois value of 49.7 emergency room visits ages 18 years (Conduent Healthy Communities Institute, Illinois Hospital Association, 2022 – 2024). The rate for Eureka ZIP code 61530 (64.1 emergency room visits per 10,000 population 18 years and under) is in the worst 50<sup>th</sup> – 75<sup>th</sup> percentile range (yellow indicator) compared to other ZIP codes in Illinois (Conduent Healthy Communities Institute, Illinois Hospital Association, 2016 – 2024). See Exhibit 19 below.



Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2016 – 2024.

## Disparities

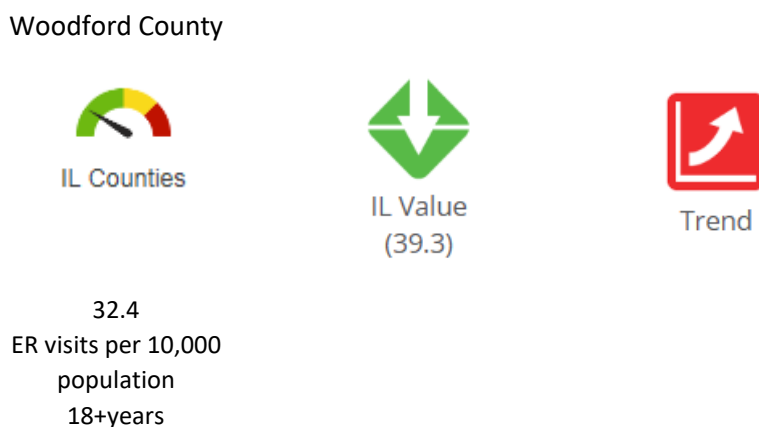
The highest emergency room rates occur in:

- Individuals 10 - 17 years (77.5 emergency room visits per 10,000 population <18 years) which is 91 percent higher than the overall rate for Woodford County.
- Residents of Eureka ZIP code 61530 (64.1 emergency room visits per 10,000 population <18 years).

## Suicide and Intentional Self-inflicted Injury (Adults)

The rate for age-adjusted emergency room visits for adults due to suicide and intentional self-inflicted injury in Woodford County is 32.4 emergency room visits per 10,000 population ages 18 years and older. This is in the best 0 - 50<sup>th</sup> percentile range (green indicator) compared to other counties in Illinois and is lower than the Illinois value of 39.3 emergency room visits per 10,000 population 18+ years (Conduent Healthy Communities Institute, Illinois Hospital Association, 2022 -2024). The rate, however, is trending unfavorably in a statistically significant direction (Conduent Healthy Communities Institute, Illinois Hospital Association, 2016 -2024). See Exhibit 20 below.

### Exhibit 20: Age-Adjusted Emergency Room Rate Due to Suicide and Intentional Self-Inflicted Injury for Population 18+ Years for Woodford County 2016 - 2024



Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2016 - 2024

## Disparities

The highest emergency room visit rates due to suicide and intentional self-inflicted injury occur in:

- Individuals 18 – 24 years (69.0 emergency room visits per 10,000 population 18+ years or more than two times the county rate).
- Individuals 25 – 34 years (59.0 emergency room visits per 10,000 population 18+ years).

## Adolescent Suicide and Intentional Self-inflicted Injury

The rate for age-adjusted emergency room visits due to adolescent suicide and intentional self-inflicted injury in Woodford County is 82.0 emergency room visits per 10,000 population, 10 - 17 years of age. This is in the best 0 – 50<sup>th</sup> percentile range (green indicator) compared to other counties in Illinois and is lower than the Illinois value of 97.8 emergency room visits per 10,000 population 10 – 17 years of age (Conduent Healthy Communities Institute, Illinois Hospital Association, 2022 - 2024). The rate, however, is trending unfavorably in a statistically significant direction (Conduent Healthy Communities Institute, Illinois Hospital Association, 2016 -2024). See Exhibit 21 below.

## Exhibit 21: Age-Adjusted Emergency Room Rate Due to Adolescent Suicide and Intentional Self-Inflicted Injury for Population 10 – 17 Years for Woodford County vs. Illinois, 2016-2024



Source: Conduent Healthy Communities Institute, Illinois Hospital Association, 2016 – 2024

### Disparities

There are no significant disparities.

## Percent of Medicare Beneficiaries Receiving Treatment for Depression

The percent of Medicare beneficiaries receiving treatment for depression in Woodford County is 13 percent. This is in the best 0 - 50<sup>th</sup> percentile range (green indicator) in comparison to other counties in Illinois and is lower than the Illinois value of 15 percent (Conduent Healthy Communities Institute, Center for Medicare and Medicaid Services, 2023).

### Self-Assessment of Mental Health

According to the 2024 Tri-County Community Health Survey, 24 percent of survey respondents for Woodford County reported their mental health as good, 65 percent reported it as average and 11 percent reported it as poor. Additionally, 27 percent of survey respondents for Woodford County reported that they felt depressed one to two days in the last 30 days, while eight percent reported feeling depressed three to five days and seven percent reported feeling depressed more than five days in the past month. When asked about anxiety and stress, 26 percent of Woodford County survey respondents reported that they felt anxious or stressed three or more days in the last 30 days (Tri-County Community Health Survey, 2024).

The percentage of adults in Woodford County who reported that they have been diagnosed with depression is 22.1 percent. This is in the worst 50 – 75<sup>th</sup> percentile range (yellow indicator) compared to other counties in Illinois. The percentage for Washburn ZIP code 61570 (22.9 percent) is in the worst 25<sup>th</sup> percentile range compared to other ZIP codes in Illinois. Several additional ZIP codes in Woodford County have rates in the worst 50 – 75<sup>th</sup> percentile range (yellow indicator) compared to other ZIP codes in Illinois; Benson ZIP code 61516 (21.6 percent), Eureka ZIP code 61530 (21.7 percent) and Minonk ZIP code 61760 (22.1 percent) (Conduent Healthy Communities Institute, CDC – Places, 2022).

### Access to Counseling

Thirteen percent of Woodford County survey respondents reported that they were unable to access counseling services. The top three reasons reported for not being able to access counseling were 1) could not afford co-pay, 2) wait too long and 3) could not find (Tri-County Community Health Survey, 2024).

## County Health Rankings

### Poor Mental Health

The number of days Woodford County residents reported that their mental health was not good in the past 30 days is five days. This is in the best 0 - 50<sup>th</sup> percentile range (green indicator) in comparison to other counties in Illinois but is higher than the Illinois value (4.5 days) (Conduent Healthy Communities Institute, County Health Rankings, 2022). The rate is trending unfavorably, but not in a statistically significant direction (Conduent Healthy Communities Institute, County Health Rankings, 2018 – 2022).

### Key Findings: Mental Health

- The age-adjusted emergency room rate due to mental health is highest for individuals 25 - 44 years, for Blacks or African Americans and for Eureka ZIP code 61530.
- The age-adjusted emergency room rate due to pediatric mental health is higher in Eureka ZIP code 61530 compared to other ZIP codes in Illinois.
- The age-adjusted emergency room rates due to suicide and self-inflicted injury for both adults and adolescents in Woodford County are trending unfavorably in a statistically significant direction.

## Prioritization of Health-Related Issues

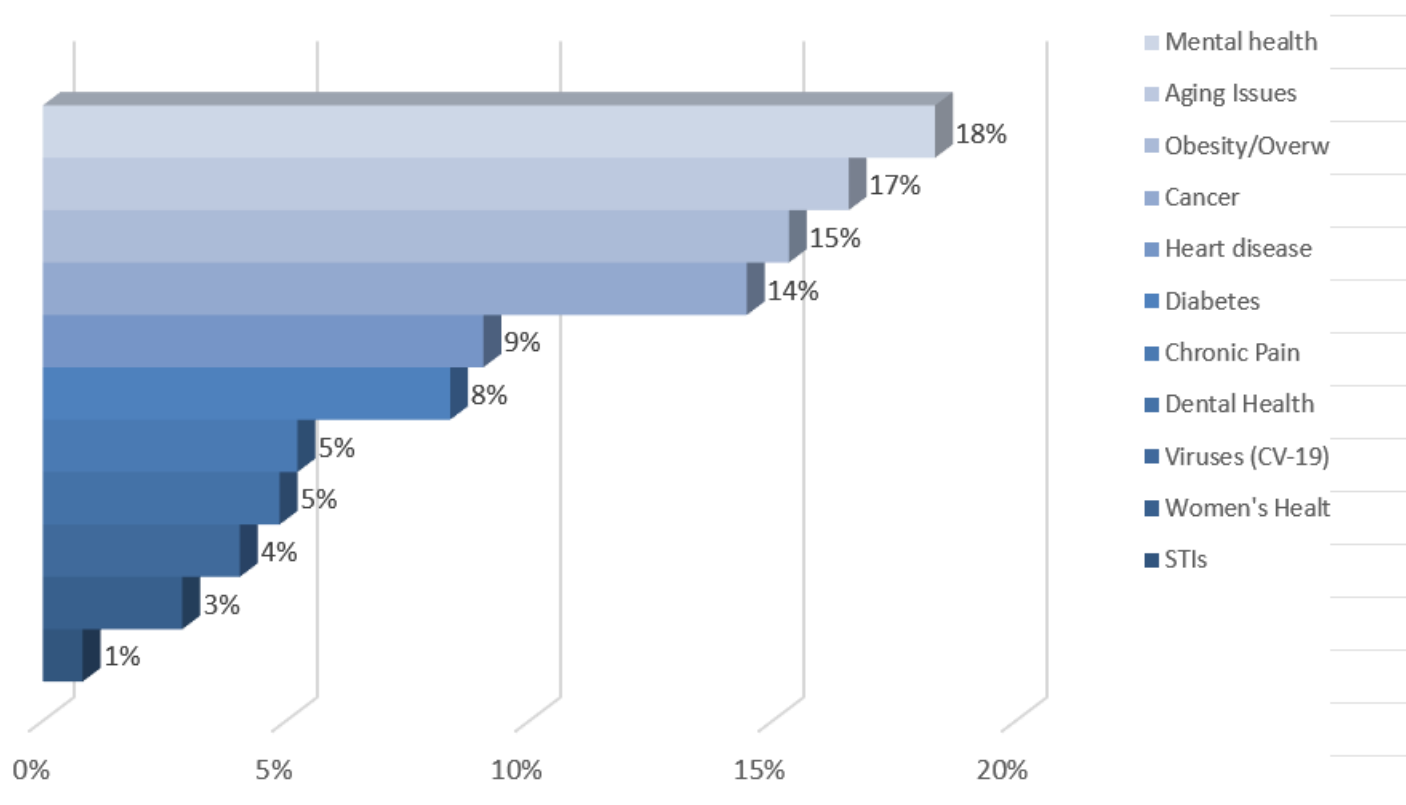
### Community Health Survey: Perceptions of Health Issues

#### Perception of Health Issues and Issues Impacting Well-being

In the 2024 Tri-County Community Health Survey, respondents were asked to rate the three most important health issues in their community. Specifically, for Woodford County, mental health was rated as the most important health issue by 18 percent of Woodford County respondents. Aging was the second most important health issue according to Woodford County respondents. See Exhibit 22 as follows.



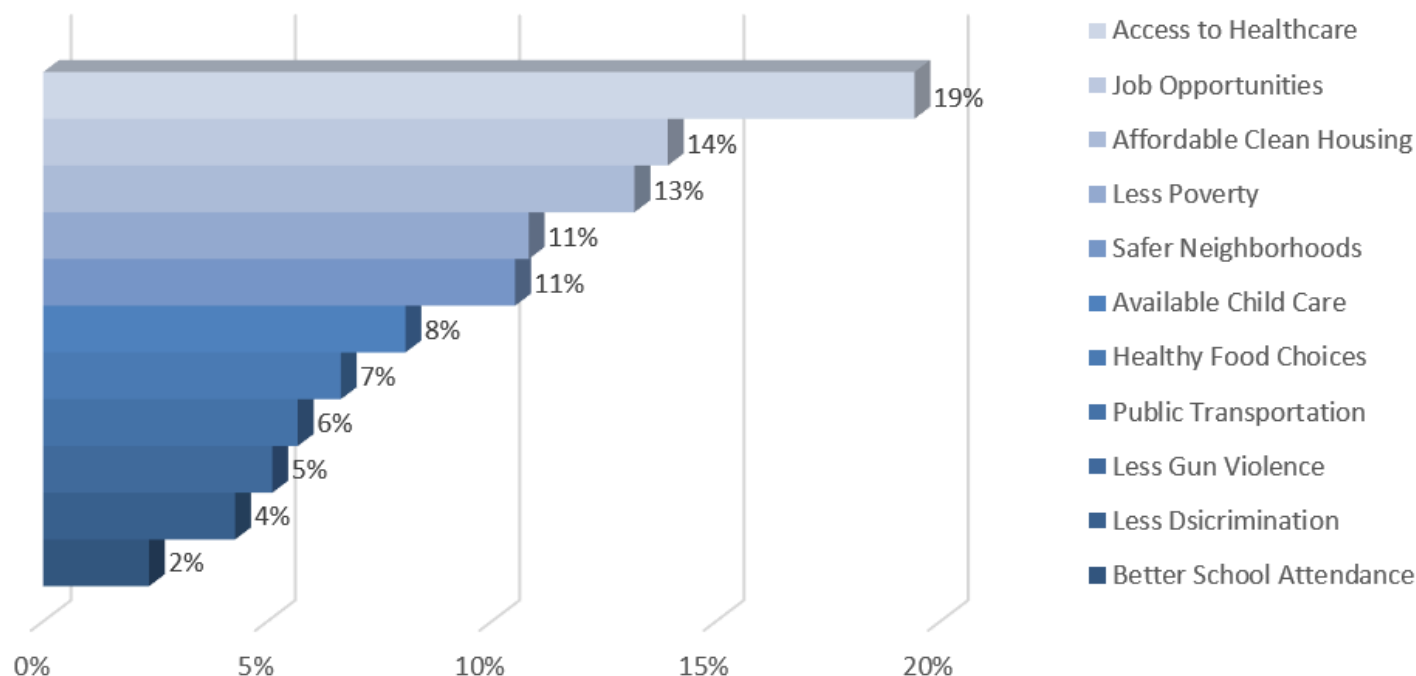
**Exhibit 22: Perception of Health Issues, Woodford County, 2024**



Source: Tri-County Community Health Survey, 2024

When survey respondents were asked to rate the top three issues that impact well-being, Woodford County respondents rated access to healthcare (19 percent), job opportunities (14 percent) and affordable clean housing (13 percent) as the top three issues. See Exhibit 23 below.

**Exhibit 23: Perception of Issues Impacting Health, Woodford County 2024**



Source: Tri-County Community Health Survey, 2024.

## Priority Setting Process

For the 2025 CHNA, Carle Eureka participated in the priority setting process with the Partnership for a Healthy Community (PFHC). The PFHC utilized the MAPP 2.0 (Mobilizing for Action through Planning and Partnerships) framework to guide its community health needs assessment and prioritization process. The PFHC Board led the process of identifying issue statements through a series of structured sessions. These sessions involved reviewing raw data and summarizing key health issues affecting the Tri-County region. The Hanlon Method for Prioritizing Health Problems was used to guide this process. The PFHC narrowed the comprehensive list to a final set of ten issue statements. See Appendices 8 and 9 in the 2025 PFHC CHNA for a detailed description of the prioritization process at [Partnership for a Healthy Community - 1/1/2026-12/31/2028](#).

Following the identification of 10 issue statements, seven key entities facilitated a series of meetings for key internal and external stakeholders to review, provide feedback and score and rate the 10 issue statements using the Hanlon Method. The following table describes the voting entities and meeting dates for this voting process.

Name of Entity	Date of meeting(s)
Carle Health	June 12, 2025
Community Conversations Group	May 22, 2025
OSF HealthCare	June 2, 2025
Partnership for a Healthy Community Board/action teams	June 12, 2025
Peoria City/County Health Department	May 20, June 2 and June 5, 2025
Tazewell County Health Department	June 3 and June 11, 2025
Woodford County Health Department	May 20 and June 3, 2025

Following the above meetings, the PFHC ad hoc collaborative team identified and prioritized the most important health-related issues in the Tri-County region. They considered health needs based on: (1) magnitude of the issue (i.e., what percentage of the population was impacted by the issue); (2) severity of the issue in terms of its relationship with morbidities and mortalities; and (3) potential impact through collaboration. Using a modified version of the Hanlon Method, three significant health needs were identified and determined to have equal priority:

- **Food Insecurity Among Youth.**
- **Access to Mental Health Care.**
- **Suicidal Thoughts and Behaviors.**

After the three significant health priorities were selected for the PFHC Tri-County region, Carle Eureka's CHNA team met to select the health priorities for the hospital's 2025 CHNA. For the purposes of the 2025 CHNA, Carle Eureka defines its community as Woodford County.

## Health Needs Selected

### Mental Health

From the three significant health needs selected by the PFHC ad hoc CHNA collaborative team, Carle Eureka's CHNA team selected **mental health** as a significant health need for Woodford County for reasons outlined below.

- The broader mental health priority encompasses two of the PFHC prioritized health needs - access to mental health and suicidal thoughts and behaviors.
- Woodford County residents that participated in the 2024 Tri-County Community Health Survey perceived mental health as the most important health issue in the community and 13 percent of Woodford County survey respondents reported that they did not have access to counseling in the last year when they needed it.
- As reported in the 2025 Partnership for a Healthy Community CHNA, the number of suicides in Woodford County indicates a higher incidence compared to the state of Illinois incidence rate between 2017 and 2021.
- The age-adjusted emergency room rates due to suicide and self-inflicted injury for both adults and adolescents in Woodford County are trending unfavorably in a statistically significant direction.
- The percentage of adults in Woodford County who reported they have been diagnosed with depression is in the worst 50 – 75<sup>th</sup> percentile range (yellow indicator) compared to other counties in Illinois and in the worst 25<sup>th</sup> percentile range (red indicator) for Washburn ZIP code 61570 in comparison to other ZIP codes in Illinois. Several additional ZIP codes in Woodford County have rates in in the worst 50 – 75<sup>th</sup> percentile range (yellow indicator) compared to other ZIP codes in Illinois; Benson ZIP code 61516, Eureka ZIP code 61530 and Minonk ZIP code 61760.
- Eureka ZIP code 61530 had higher values in comparison to other ZIP codes in Illinois for the age-adjusted emergency room rate due to mental health and pediatric mental health.

Additionally, selecting mental health maintains continuity in what has already been accomplished. Mental health was a health priority or significant health need for the 2013, 2016, 2019 and 2022 Carle Eureka CHNAs and significant strides towards increasing community members' knowledge of mental health issues and decreasing stigma related to mental health have been made.

It is clear from community input and current data that continued efforts are needed to reduce the stigma associated with mental health and give further momentum to the efforts of improving mental health for county residents.

## Access to Care

Carle Eureka's CHNA team selected **access to care** as its second significant health need. The Carle Eureka CHNA team analyzed additional data for Woodford County and took into consideration available resources and the health priorities and issue statements, as brought forth by the PFHC ad hoc CHNA team, and where the hospital could make the most impact. In looking at the three priorities and 10 issue statements from the Tri-County PFHC, Carle Eureka determined that the access to care would be its second health priority. This broader priority encompasses issue statements six through ten; 6) access to behavioral health resources among youth and those with low income 7) early and adequate prenatal care 8) emergency department use for medical care that is non-emergent 9) engagement with primary care providers for routine visits 10) navigating healthcare system and resources, specifically among the AA/Black population, males, rural residents, and individuals 65+ years old. For a list of the 10 issue statements, see Appendix 9 in the 2025 PFHC CHNA at [Partnership for a Healthy Community - 1/1/2026-12/31/2028](#).

As a critical access hospital with limited resources, the CHNA team felt that it could make the greatest impact on improving the health of the community by selecting access to care as the second health need alongside mental health. Access to care is a critical issue in rural counties and the hospital continually strives to improve the availability of health services to Woodford County residents.

The following data for Woodford County also supports the decision to select access to care as the second health priority.

- According to the 2024 Tri-County Community Health Survey, respondents perceived access to healthcare as the most important health that impacts well-being. In an additional analysis for rural versus urban respondents, access to care was also the top factor. A majority of the respondents (96%) considered rural residents live in Woodford County.
- Fourteen percent of Woodford County survey respondents reported that they were unable to access care in the past year when they needed it.
- The percentage of adults that report having visited a doctor for a routine checkup within the past year is in the worst 25<sup>th</sup> percentile range (red indicator) compared to other counties in Illinois.
- The percentage of women aged 50 – 74 in Woodford County who have had a mammogram in the last two years does not meet the Healthy People 2030 target and Lowpoint ZIP code 61545 and Minonk ZIP code 61760 are in the worst 50 – 75<sup>th</sup> percentile range (yellow indicator) compared to other ZIP codes in Illinois.
- The lowest percentages for cervical cancer screenings for ages 21 – 64 years in Woodford County occur in Washburn ZIP code 61570, Eureka ZIP code 61530 and Lowpoint ZIP code 61545.
- From the 2021 and 2024 Tri-County Community Health Survey results, there was a nine percent decrease in the percentage of Woodford County respondents (over the age of 50) who indicated that they have had a colon cancer screening within the last five years.
- The primary care provider rate in Woodford County is trending unfavorably in a statistically significant direction.
- The mental health provider rate in Woodford County is in the worst 25<sup>th</sup> percentile range (red indicator) compared to other counties in Illinois.
- As reported in the 2025 PFHC CHNA, Woodford County reported higher rates of lung and breast cancer compared to the state of Illinois rates.

Better access to care could improve all of these statistics.

## Health Need Not Selected

Although Carle Eureka will focus a majority of its community health efforts on mental health and access to care, it will also support the PFHC's efforts related to food insecurity among youth. As mentioned above, a Carle Health leader is a member of the PFHC Board that supports the three Tri-County health priorities.

### Food Insecurity Among Youth

The hospital CHNA team did not select food insecurity among youth as a significant health need given the hospital's limited resources and its ability to have a greater impact on mental health and access to care for Woodford County residents. The hospital will, however, continue to support the efforts of the PFHC related to food insecurity among youth for the Tri-County region. A member of the Carle Eureka leadership team serves on the Partnership for a Healthy Community Board and will continue to seek ways in which the hospital can support and collaborate around food insecurity for youth.

## Approval of Community Health Needs Assessment

Carle Eureka Hospital is utilizing this report to meet the hospital's 2025 Community Health Needs Assessment requirement in compliance with Internal Revenue Code Section §501(r) and the final regulations published on December 31, 2014, to implement §501(r). These requirements are imposed on §501(c) (3) tax-exempt hospitals. This report was approved by the Carle Health Central Region Board on December 16, 2025.

## Overview of 2026 - 2028 Implementation Plan Goals and Community Resources

Carle Eureka Hospital is a vital part of Woodford County, serving the critical health needs of individuals, families and the community with a holistic philosophy of care. The hospital's dedication to expanding its partnerships within the Tri-County region has resulted in engaging a network of community organizations to implement and enhance community health programs. See Appendix 2 for a description of Tri-County community resources and Appendix 7 for a resource matrix for the 10 issue statements presented to community stakeholders for prioritization for the 2025 PFHC CHNA for the Tri-County region.

### Access to Care

#### Goal

Ensure rural access to care to improve the health and well-being of Woodford County residents by 2029.

#### Community Resources

Carle Eureka is the only hospital in Woodford County and is a critical access hospital as certified by the Centers for Medicare and Medicaid Services. By functioning in this capacity, Carle Eureka plays a vital role in serving the health needs of a primarily rural area. Community residents benefit from having access to care close to home as provided by a dedicated group of primary care and specialty physicians. Carle Eureka holds many clinics to increase access to care by specialists. The clinics held include podiatry, cardiology, oncology, general surgery, neurosurgery, urology, pulmonology, gastroenterology, orthopedics, pain management, mental health and dermatology. Carle Eureka also has three rural

health clinics in El Paso, Eureka and Roanoke. The rural health clinics increase access to care for Woodford County residents.

For the 2026 – 2028 Carle Eureka Implementation Strategy, the hospital will continue to look for ways to increase access to care such as adding primary care and specialty clinics and/or surgical procedures that are typically unavailable at a small, rural hospital. The hospital also has a walk-in care clinic, so residents do not need to go outside of the county for care that is appropriate for an urgent care setting.

Additionally, as a tax-exempt organization, Carle Eureka provides care to patients regardless of their ability to pay for that care or source of payment. The hospital recognizes that some patients need help paying their bills. The Financial Assistance Program at Carle Health is very generous and provides discounts or free care to those who need it.

Carle Health supports a wide range of programs and services to increase community capacity, healthcare work force expansion and social services that provide complementary healthcare-related services. Carle Eureka has, and will continue to, pursue these initiatives to improve access to care:

1. Offer a charity care program and communicate the availability of that program.
2. Recruit more providers into the Carle Health system, thereby expanding access/capacity.
3. Support students in healthcare fields.
4. Promote prescription affordability as a 340B provider.
5. Enhance access-related initiatives that will improve patients' ability to interface more efficiently for needed services – Patient Contact Center, Scheduling Center, prescription refill request process, virtual visits and more.
6. Offer online scheduling, eCheck-in, communication with clinic staff and access to results through Carle MyChart.

## **Mental Health**

### **Goal**

To improve mental health, including anxiety and depression, and reduce suicide by 2029.

### **Community Resources**

A Carle Eureka staff member will serve on the Partnership for a Healthy Community Suicidal Thoughts and Behaviors and Access to Behavioral Health priority action teams for the 2026 - 2028 implementation period. The community health director will continue serving on the Partnership for a Healthy Community board for the Tri-County region and look for ways the hospital can support mental health in the Tri-County region, with a focus on Woodford County.

To improve mental health in Woodford County, the hospital will continue its collaboration with Trillium Place to allow Woodford County residents to receive mental health services locally instead of travelling outside of the county for care. In June 2016, the counseling appointments previously held at the Woodford County Health Department by UnityPlace, moved to Carle Eureka Hospital. The move to the hospital improved access to mental health services because it allowed residents to schedule appointments later in the evening. Telepsychiatry will continue to be offered at Carle Eureka for inpatients to improve access to mental health services.

Carle Eureka plans to continue offering Mental Health First Aid (MHFA), an evidence-based mental health program to the community. MHFA is a nationally recognized adult public education program that teaches individuals how to identify, understand and respond to the signs of mental illness and substance abuse disorders. Participants learn about

the signs and symptoms of acute mental health crises and chronic mental health problems like anxiety and depression. Certified instructors teach participants to become Mental Health First Aiders. In April 2016, Carle Eureka sent an employee to become a certified Mental Health First Aid trainer. The hospital will collaborate with the Tri-County Health Departments and community partners to offer this program. The Carle Eureka MHFA instructor also leads the PFHC Tri-County MHFA Cadre/Collaborative and assists other counties in teaching MHFA courses in their communities.

## **Equity and the Social Determinants of Health**

The mission of Carle Health is to be a trusted partner in all healthcare decisions. That mission and the diversity, equity and inclusion actions that support it ensure a focus on being a healthcare system where all people can find the best possible care and service. The Carle Health Diversity, Equity, and Inclusion Steering Committee provides advisory support to the Board of Trustees and Executive Leadership Team to instill a culture of inclusivity by establishing a clear strategy for improving the cultural awareness of the organization and those Carle Eureka serves. Additionally, the system-level Health Equity Clinical Guidance committee is responsible for guiding the organizational strategy and implementation of work to address health disparities in the communities Carle Health serves. Carle Eureka staff, providers and leaders have participated in system-level training opportunities focusing on addressing unconscious bias, the impact of social determinants of health, and building more inclusive and culturally humble healthcare. The Carle Health DEI Steering Committee and Health Equity Clinical Guidance Committee will continue to support Carle Eureka and the rest of the Carle Health system in advising on ways the organization can build a workforce that represents and reflects the communities we service, , offer training that addresses cultural humility and implicit bias, and forge partnerships and investments that address social needs such as food, housing, and community safety.

## **Vehicle for Community Feedback**

Carle Eureka welcomes your feedback regarding the Community Health Needs Assessment (CHNA) Report. If you would like to comment on this report, please send an email to the link below. Your question will be responded to within thirty days.

**[CarleHealthPublicRelations@carle.com](mailto:CarleHealthPublicRelations@carle.com)**

A paper copy of this report may be requested by contacting the public relations department for Carle Eureka. In addition, an electronic copy of this CHNA Report is available on Carle Health's website; [www.carle.org/chna](http://www.carle.org/chna).

## **Sharing Results**

In addition to the opportunity to provide feedback through the means described above, Carle Eureka's CHNA Report presentations will be provided to community groups and organizations upon request.



## Appendices

**Appendix 1:** Woodford County Health Equity Rank and National Index 2025

**Appendix 2:** Description of Community Resources

**Appendix 3:** Members of the Partnership for a Healthy Community (PFCH) ad hoc CHNA Collaborative Team

**Appendix 4:** 2024 Tri-County County Community Health Survey

**Appendix 5:** Conduent Healthy Communities Institute Icon and Gauge Legend

**Appendix 6:** Data Sources - 2025 Carle Eureka Hospital Community Health Needs Assessment

**Appendix 7:** 2025 Tri-County Resource Matrix

## Appendix 1: Woodford County Health Equity Rank and National Index 2025

Woodford County			
ZIP Code	Index	Rank	Population
Minonk - 61760	69.8	5	2,323
Washburn - 61570	61.3	4	1,781
Lowpoint - 61545	59.6	4	632
Benson - 61516	51.6	3	633
Eureka - 61530	48.6	3	6,629
El Paso - 61738	27.2	2	4,139
Roanoke - 61561	21.2	2	2,594
Goodfield - 61742	16.8	2	1,239
Metamora and Germantown Hills - 61548	10	1	12,333
Secor - 61771	7.3	1	951
Congerville - 61729	6.6	1	1,180

## **Appendix 2: Description of Community Resources**

### **Health Departments**

#### **Peoria City/County Health Department**

The goal of the Peoria City/County Health Department is to protect and promote health and prevent disease, illness and injury. Public health interventions range from preventing diseases to promoting healthy lifestyles and from providing sanitary conditions to ensuring safe food and water.

#### **Tazewell County Health Department**

The Tazewell County Health Department promotes and protects the public's health and wellbeing through programs targeting the following concerns: dental, emergency planning, environmental, health promotion, MCH/WIC, nursing and concerns for the 21<sup>st</sup> century.

#### **Woodford County Health Department**

The Woodford County Health Department sponsors programs in the following areas: maternal and child health, infectious diseases, environmental health, health education and emergency preparedness.

### **Educational Institutions**

#### **University of Illinois College of Medicine Peoria**

The University of Illinois College of Medicine Peoria (UICOMP) is one of three campuses that make up the nation's largest public medical school. The Peoria campus is known among students for its small class sizes, rigorous curriculum and faculty mentorship. Residents and fellows know UICOMP for its large referral base and exceptional facilities. Physicians come to the Peoria campus seeking the ideal combination of teaching and clinical practice in a research-based university setting.

### **Hospitals/Clinics**

#### **Carle Eureka Hospital**

Carle Eureka Hospital has served and cared for the people of central Illinois since 1901. A 25-bed, Critical Access hospital located in Eureka, Illinois, the hospital has set new standards for what a rural hospital can achieve. With many awards for quality and patient satisfaction, skilled staff provide emergency care, inpatient and outpatient surgeries, rehabilitation, advanced radiology and more.

#### **Carle Health Pekin Hospital**

Carle Health Pekin Hospital, an 85-bed facility in Pekin, Illinois, is part of Carle Health, a vertically integrated system with a bold but simple mission: to be the trusted partner in all healthcare decisions for everyone who depends on it. The hospital and its campus are home to an emergency department, physical rehabilitation services, state-of-the-art radiology imaging, the Women's Diagnostic Center and surgery services. Carle Health Pekin holds a Magnet® designation, the nation's highest nursing honor.

### **Carle Health Methodist Hospital**

Carle Health Methodist Hospital, a 310-bed facility in Peoria, IL, is part of Carle Health, a vertically integrated system with a bold but simple mission: to be the trusted partner in all healthcare decisions for everyone who depends on it. It is the regional leader in behavioral health services through its Trillium Place affiliate and is a Level II Trauma Center. Carle Health Methodist holds a Magnet® designation, the nation's highest nursing honor.

### **Carle Health Proctor Hospital**

Carle Health Proctor Hospital, a 205-bed facility in Peoria, Illinois, is part of Carle Health, a vertically integrated system with a bold but simple mission: to be the trusted partner in all healthcare decisions for everyone who depends on it. It offers the only behavioral health facility in the region designed for older adults and has the state-of-the-art Outpatient Dialysis Center and Burklund Cardiopulmonary Rehabilitation Center. Carle Health Proctor holds a Magnet® designation, the nation's highest nursing honor.

### **OSF Healthcare Saint Francis Medical Center**

OSF HealthCare Saint Francis Medical Center, with 642 beds, is the fifth-largest medical center in Illinois. A major teaching affiliate of the University of Illinois College of Medicine at Peoria, it is the area's only Level I Trauma Center, the highest level designated in trauma care. It serves as the resource hospital for emergency medical services for north central Illinois. It is home to OSF Children's Hospital of Illinois and the OSF Illinois Neurological Institute. OSF Saint Francis Medical Center and Children's Hospital have been designated Magnet Status for excellence in nursing care since 2004.

### **Community Agencies**

#### **Heart of Illinois United Way**

The Heart of Illinois United Way brings together people from business, labor, government, health and human services to address community's needs. Money raised through the Heart of Illinois United Way campaign stays in community funding programs and services in Marshall, Peoria, Putnam, Stark, Tazewell and Woodford Counties.

## **Appendix 3: Members of the Partnership for a Healthy Community (PFHC) ad hoc CHNA Collaborative Team**

Members of the **Collaborative Team** consisted of individuals with special knowledge of and expertise in the healthcare of the community. Individuals, affiliations, titles and expertise are as follows:

### **Amy Fox**

Amy Fox is the Administrator of Tazewell County Health Department and has worked in public health for over 35 years in the areas of community health improvement planning, health promotion, substance abuse prevention, coalition development and emergency preparedness. Amy is active with several state level initiatives including Public Health Transformation and advisory committees for Emergency Preparedness, the Illinois Plan for Local Assessment of Need and a new committee member of the Illinois State Association of Counties (ISACo) Public Health Policy Committee.

### **Sally Gambacorta**

Sally Gambacorta is the Community Health Director at Carle BroMenn Medical Center and Carle Eureka Hospital. Both hospitals are in central Illinois. She has worked for Carle BroMenn Medical Center for 30 years in Community Health. Sally holds a Bachelor of Science degree in Business Administration from Augustana College, a Master of Science degree in Industrial/Organizational Science from Illinois State University and a Master of Arts degree in Leisure Studies with a concentration in Corporate Fitness and Health Promotion from the University of Iowa. In her community health role, Ms. Gambacorta is responsible for the community health needs assessment and community benefits at both hospitals. She has extensive experience collaborating with community partners to improve the health of the community. Ms. Gambacorta is a member of the McLean County Community Health Council Executive Steering Committee and facilitates the McLean County Behavioral Health Priority Action Team. She is also a member of the McLean County Mental Health First Aid Collaborative and serves on the board for the Partnership for a Healthy Community for Woodford, Tazewell and Peoria Counties.

### **Megan Hanley**

Megan Hanley, MPH, CIC has been the epidemiologist at Tazewell County Health Department since July 2022. She is passionate about using public health data and evidence-based strategies to drive positive change, improve quality of life and reduce the morbidity and mortality of disease. In March 2025, Megan obtained her national Certification in Infection Control (CIC) to better serve congregate settings during infectious disease outbreaks. In her spare time, Megan can be found serving her community on the Village of Tremont's Rescue Squad; she has been an Emergency Medical Technician for nine years. She holds a Master of Public Health degree from Liberty University and a Bachelor of Science degree in Molecular and Cellular Biology from Cedarville University.

### **Chris Setti**

Chris Setti is the CEO of the Greater Peoria Economic Development Council, a public-private organization that helps drive economic success in a five-county region of central Illinois. Chris joined the EDC in 2018 after a 12-year career with the City of Peoria where he served in a variety of roles including Director of Economic Development and Assistant City Manager. Prior to his work with the city, Chris spent 10 years working in social services in Chicago, Denver and Peoria. Chris has a bachelor's degree in political science from the University of Notre Dame and a master's degree in public administration from the University of Colorado-Denver. Chris grew up in Southern California but has called Peoria his home since 2003.

## **Andrea Parker**

Andrea Parker, RN, MS, Executive Director for the Hult Center for Healthy Living – Carle Health. Andrea Parker has 40 years of experience as a registered nurse with a background in pediatric nursing, medical surgical nursing, community health and public health.

Andrea received her nursing degree from Methodist School of Nursing, later completing her Bachelor's degree from Bradley University and her master's in science from the University of Illinois at Chicago. Andrea jumpstarted her nursing career as a pediatric nurse with Methodist Medical Center and had the opportunity to work within home health and family practice, which prepared her for community-based nursing roles such as overseeing Carle Health's Methodist Medical Center's School Health program. Prior to taking the helm at Hult Center for Healthy Living, she served as Regional Health Officer for the Illinois Department of Public Health and before that held the position of Public Health Administrator with the Peoria City/County Health Department overseeing multiple counties. Parker is a recognized health leader in the community serving on a variety of community agency boards. To list a few, she served as president for the Rotary Club of Peoria, President of the Crittenton Centers Board, Human Service Board member, now Trillium Place and was a member of the UICOMP Dean's Community Council for many years. Andrea has an extensive list of awards and achievements. Among her most recent accomplishments are being inducted into Bradley University's Centurion Society, receiving the "25 Women in Leadership" and the "Women of Influence" awards. Other professional recognitions include the Bradley University Mildred Pflederer Memorial Alumni Award for contributions to public health nursing; the Illinois Department of Public Health's Exceptional Achievement Award, induction into the Peoria African American Hall of Fame Museum, and "Those Who Excel" award from IL State Board of Education as well as recognized as a 40 Leader Under 40. Parker holds an adjunct faculty position with Carle Health's Methodist College teaching both undergraduate and graduate nursing. She has also held adjunct faculty positions with Bradley University College of Health Science and the University of IL College of Nursing. She has published articles and has been featured in multiple local journals for a variety of health topics. Journals such as Peoria Medicine- the Official Journal of the Peoria Medical Society, Healthy Cells Magazine, IBI and the Peoria Women.

## **Sara Kelly**

Sara Kelly, PhD, MPH is a psychiatric epidemiologist and public health expert with extensive experience conducting research using national databases including public health surveillance, electronic medical records, clinical trials and population-based surveys. She currently serves as a Research Assistant Professor at the University of Illinois College of Medicine in Peoria, where she leads collaborative research efforts focused on pediatric health and well-being. She also holds faculty appointments at the Institute for Research on Addictions and AI.Health4All at UIC. Dr. Kelly has a robust background in epidemiology, having completed her postdoctoral fellowship and PhD at West Virginia University, and her MPH at East Tennessee State University. Her research spans various domains, including substance use, mental health, and health disparities. Dr. Kelly has contributed significantly to the field through numerous peer-reviewed publications and presentations at national conferences. She is also dedicated to community service, volunteering with organizations such as the JOLT Foundation and serving as a grant reviewer for the Heart of Illinois United Way. Her commitment to public health and her contributions to research make her an asset to the academic and healthcare communities. She currently leads the data team for the Partnership for a Healthy Community.

## **Jennifer Zammuto**

Jennifer Zammuto brings corporate processes and customer focus to her work today in leading the Heart of Illinois United Way, a unique, data-driven, collaborative nonprofit organization.

Fluent in French, Jennifer studied at Northern Illinois University and Universite d'Avignon and worked in Europe during her early career. While at Caterpillar, she earned an Executive MBA from Bradley University. An active community member, she served on almost every committee at the Heart of Illinois United Way before accepting the leadership role as president in 2018. Previously, she was a member of Downtown Rotary, CEO Council and the Center for Prevention of Abuse Board. Currently, Jennifer serves on the Greater Peoria EDC Governing Board, Nominating Committee and serves as secretary of the LISC Central Illinois Board, Choose Greater Peoria, Regional Workforce Alliance, the Tri County Partnership for a Healthy Community, Al Hooks Black Leadership Initiative and Bradley University's Turner School for Entrepreneurship and Innovation Advisory Council, serves as a judge for their Social Impact Challenge and the Big Idea competition and more.

### **Leslie L. McKnight**

Dr. Leslie L. McKnight is the Director of Community Health Policy and Planning at the Peoria City/County Health Department. She is responsible for the development and implementation of the Partnership for a Healthy Community Health Improvement Plan and health promotion and equity interventions throughout the Tri-County region. Dr. McKnight has over 20 years of experience in public policy and community development for local government agencies and has managed millions of dollars in grassroots and public-private partnership programs and activities related to housing, community, health, and economic development in Central IL. She holds a PhD in organization development from Benedictine University, Springfield IL and a Master of Science degree in Human Services Administration from Spertus College in Chicago, IL. She is published in many academic and leadership journals and is an adjunct professor in the Master of Business Administration (MBA) program at Bradley University and Master of Public Health (MPH) program at University of Illinois Springfield.

### **Amy Dewald**

Amy is the Community Health Education Specialist for the Woodford County Health Department. Prior to joining the Health Department, she was an Associate Professor of Biology at Eureka College and held adjunct teaching positions at Illinois Central College and Heartland Community College. The courses she has taught are biology, microbiology, cell biology, immunology and anatomy and physiology. She brings a strong science background and knowledge of the etiology of infectious disease to her current role as Community Health Education Specialist. She strives to provide fact-based education, outreach and promotion of health-related topics to the community.

### **Rebecca Crumrine**

As an Illinois Supplemental Nutrition Assistance Program Educator in Peoria, Tazewell, Fulton and Mason Counties, Rebecca enjoys getting to make the healthier choice an easier choice for families. To accomplish her work, Rebecca collaborates with community partners to affect changes at organizational, community and policy levels. She serves as a leader in the local community by driving forward impactful multi-sector collaborative work and working to center community voice more into the process. Rebecca received her bachelor's degree from Bradley University in 2014, a master's degree from Illinois State University in 2016, and is currently working on a combined master's degree in public health and public administration from University of Illinois Springfield.

### **Phil Baer**

Phil Baer, MBA, RRT, FACHE is vice president, Outpatient and Ancillary Services at OSF HealthCare Saint Francis Medical Center. Phil is accountable to plan, direct, evaluate and improve the operations of outpatient and ancillary services for OSF Saint Francis, including community outreach, ambulatory programs, behavioral health, wellness, diagnostic imaging, and laboratory functions. Phil will collaborate with hospital leadership, department management, medical staff, and



governing bodies to establish quality and service standards and foster cooperative working relationships. He started his healthcare career as a Registered Respiratory Therapist and has gone on to hold multiple leadership positions at SFMC. Early in his career, Phil transitioned into the Performance Improvement department, holding roles as a Black Belt and later a Managing Master Black Belt. Phil has served at the director level for the past 10 years, first as Director of Outpatient Diagnostic services, Director of Community Outreach, and his most recent position as Director of Medical Imaging. Phil is active with the Illinois Chapter of the American College of Healthcare Executives, serving on its board of directors, chairing its communication committee, and is a board certified fellow (FACHE). Phil also currently serves as Board Co-Chair for the Partnership for a Healthy Community (PFHC) and is on the Board of Directors for the OSF SFMC College of Nursing.

### **Monica Hendrickson**

Monica Hendrickson has been the Public Health Administrator for the Peoria City/County Health Department since July 2017. She initially began working at Peoria City/County Health Department in 2009 as the Emergency Preparedness Planner until she left in 2010 to be the Director of Health Protection at Knox County Health Department. She returned to Peoria in 2013 as the agency's epidemiologist until she transitioned into her new role. Monica received her MPH in 2008 from the University of Michigan School of Public Health and her BS in 2005 from the University of Illinois Urbana-Champaign. In addition to having served on the Heart of Illinois United Way as a grant reviewer and Solution Council member, Monica is on the Board of Directors, as well as a member of the Chair of the Trillium Place Board, a member of the Phoenix Community Development Services Board, a member of the State of Illinois Health Facilities and Services Review Board, and president for the Illinois Public Health Association. She is currently on the Partnership for a Healthy Community Board, the tri-county community health improvement initiative that aligns healthcare, health departments and other agencies towards improving outcomes.

### **Kate Green**

Kate Green is the Executive Director of Home for All. Kate is focused on leveraging resources across the region to meet the ultimate goal of ending homelessness. Her approach to the work is informed by her experience in public administration and innovation. From strategic partnerships to capacity building, Kate works to enrich the network of organizations and individuals that touch the lives of those experiencing homelessness.

### **Tricia Larson**

Tricia is the Director of Outpatient Behavioral Health Outpatient for Trillium Place, an affiliate of Carle Health. She earned her Master of Arts in Human Development Counseling from the University of Illinois at Springfield and is a Licensed Clinical Professional Counselor. Tricia has been dedicated to the field of behavioral health for the past 19 years and has served in both clinical and leadership roles. Tricia has also served on numerous committees and boards. She is dedicated to assisting individuals in achieving overall wellness through quality behavioral healthcare.

### **Sarah Donohue**

Sarah Donohue received a BA in Neuroscience from Smith College and a PhD in Neurobiology from Duke University. She did her postdoctoral training in Magdeburg, Germany, where she studied addiction and attention. In 2023, she received a Master's in Public Health from Kent State University. She is the Director of Research Services, the Associate Director of Population Health and Community Engagement at the Center 4 Health Research and a Research Assistant Professor in Psychiatry and Behavioral Medicine at the University of Illinois College of Medicine Peoria.

**Amanda Sutphen**

Amanda Sutphen is the Director of Community Outreach for OSF Healthcare Saint Francis Medical Center. In this position, Amanda is responsible for leading the coordination of services and activities that impact Community Outreach and Benefits, to include Community Gardens, Faith Community Nursing, Community Clinic, School Nursing, Dental Clinic and Community Health Needs Assessment as well as Community Initiatives. Amanda develops and shares the vision and strategic direction for community outreach while collaborating and driving the implementation of the strategy. Amanda received a Bachelor of Science in Health from the University of Iowa and holds a master's degree in Community Health from Western Illinois University.

Appendix 4: 2024 Community Health Needs Assessment Survey

INSTRUCTIONS

We want to know how you view our community, and other factors that may impact your health. We are inviting you to participate in a research study about community health needs. Your opinions are important! This survey will take about 12 minutes to complete. All of your individual responses are anonymous and confidential. We will use the survey results to better understand and address health needs in our community.

COMMUNITY PERCEPTIONS

1. What would you say are the three (3) biggest **HEALTH ISSUES** in our community?

- |   |  |
|---|--|
| <input type="checkbox"/> Aging issues, such as Alzheimer’s disease, hearing loss, memory loss, arthritis, falls | <input type="checkbox"/> heart disease/heart attack                        |
| <input type="checkbox"/> Cancer   | <input type="checkbox"/> Mental health issues, such as depression, anxiety |
| <input type="checkbox"/> Chronic pain   | <input type="checkbox"/> Obesity/overweight                                |
| <input type="checkbox"/> Dental health (including tooth pain)   | <input type="checkbox"/> Sexually transmitted infections                   |
| <input type="checkbox"/> Diabetes   | <input type="checkbox"/> Viruses, such as COVID-19 or flu                  |
|   | <input type="checkbox"/> Women’s health, such as pregnancy, menopause      |

2. What would you say are the three (3) most **UNHEALTHY BEHAVIORS** in our community?

- |  |   |
|--|---|
| <input type="checkbox"/> Angry behavior/violence | <input type="checkbox"/> Lack of exercise             |
| <input type="checkbox"/> Alcohol abuse           | <input type="checkbox"/> Poor eating habits           |
| <input type="checkbox"/> Child abuse             | <input type="checkbox"/> Risky sexual behavior        |
| <input type="checkbox"/> Domestic violence       | <input type="checkbox"/> Self harm/suicide            |
| <input type="checkbox"/> Drug use                | <input type="checkbox"/> Smoking/vaping (tobacco use) |

3. What would you say are the three (3) most important factors that would improve your **WELL-BEING?**

- |   |  |
|---|--|
| <input type="checkbox"/> Access to health services  | <input type="checkbox"/> Less gun violence               |
| <input type="checkbox"/> Affordable healthy housing | <input type="checkbox"/> Job opportunities               |
| <input type="checkbox"/> Availability of child care | <input type="checkbox"/> Less poverty                    |
| <input type="checkbox"/> Better school attendance   | <input type="checkbox"/> Less race/ethnic discrimination |
| <input type="checkbox"/> Good public transportation | <input type="checkbox"/> Safer neighborhoods/schools     |

ACCESS TO CARE

The following questions ask about your own health and health choices. Remember, this survey will not be linked to you in any way.

## Medical Care

1. When you get sick, where do you go most often? (Please choose only one answer).

- |   |  |
|---|--|
| <input type="checkbox"/> Clinic/Doctor's office | <input type="checkbox"/> Emergency Department      |
| <input type="checkbox"/> Urgent Care Center     | <input type="checkbox"/> I don't seek medical care |

If you don't seek medical care, why not?

- |   |  |                               |  |                                      |
|---|--|-------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Fear of Discrimination | <input type="checkbox"/> Lack of trust | <input type="checkbox"/> Cost | <input type="checkbox"/> I have experienced bias | <input type="checkbox"/> Do not need |
|---|--|-------------------------------|--|--------------------------------------|

2. In the last YEAR, was there a time when you needed medical care but were not able to get it?

- |   |  |
|---|--|
| <input type="checkbox"/> Yes (please answer #3) | <input type="checkbox"/> No (please go to #4: Prescription Medicine) |
|---|--|

3. If you were not able to get medical care, why not? (Please choose all that apply).

- |  |   |
|--|---|
| <input type="checkbox"/> Didn't have health insurance. | <input type="checkbox"/> Too long to wait for appointment.      |
| <input type="checkbox"/> Cannot afford                 | <input type="checkbox"/> Didn't have a way to get to the doctor |
| <input type="checkbox"/> Fear of discrimination        | <input type="checkbox"/> Lack of trust                          |

## Prescription Medicine

4. In the last YEAR, was there a time when you needed prescription medicine but were not able to get it?

- |   |  |
|---|--|
| <input type="checkbox"/> Yes (please answer #5) | <input type="checkbox"/> No (please go to #6: Dental Care) |
|---|--|

5. If you were not able to get prescription medicine, why not? (Please choose all that apply).

- |   |  |
|---|--|
| <input type="checkbox"/> Didn't have health insurance | <input type="checkbox"/> Pharmacy refused to take my insurance or Medicaid |
| <input type="checkbox"/> Cannot afford                | <input type="checkbox"/> Didn't have a way to get to the pharmacy          |
| <input type="checkbox"/> Fear of discrimination       | <input type="checkbox"/> Lack of trust                                     |

## Dental Care

6. In the last YEAR, was there a time when you needed dental care but were not able to get it?

- |   |   |
|---|---|
| <input type="checkbox"/> Yes (please answer #7) | <input type="checkbox"/> No (please go to #8: Mental-Health Counseling) |
|---|---|

7. If you were not able to get dental care, why not? (Please choose all that apply).

- |   |  |
|---|--|
| <input type="checkbox"/> Didn't have dental insurance | <input type="checkbox"/> The dentist refused my insurance/Medicaid |
|---|--|

- ☐ Cannot afford
- ☐ Fear of discrimination
- ☐ Not sure where to find available dentist

- ☐ Didn't have a way to get to the dentist
- ☐ Lack of trust

## Mental-Health Counseling

8. In the last YEAR, was there a time when you needed mental-health counseling but could not get it?

- ☐ Yes (please answer #9)
- ☐ No (please go to next section – HEALTHY BEHAVIORS)

9. If you were not able to get mental-health counseling, why not? (Please choose all that apply).

- ☐ Didn't have insurance
- ☐ Cannot afford
- ☐ Didn't have a way to get to a counselor
- ☐ Fear of discrimination
- ☐ Long wait time.
- ☐ The counselor refused to take insurance/Medicaid
- ☐ Embarrassment
- ☐ Cannot find counselor
- ☐ Lack of trust

## HEALTHY BEHAVIORS

The following questions ask about your own health and health choices. Remember, this survey will not be linked to you in any way.

### Exercise

1. In a typical WEEK how many times do you participate in exercise, (such as jogging, walking, weight-lifting, fitness classes) that lasts for at least 30 minutes?

- ☐ None (please answer #2)
- ☐ 1 – 2 times
- ☐ 3 - 5 times
- ☐ More than 5 times

2. If you answered "none" to the question about exercise, why didn't you exercise in the past week? (Please choose all that apply).

- ☐ Don't have any time to exercise
- ☐ Can't afford the fees to exercise
- ☐ Don't have access to an exercise facility
- ☐ Safety issues
- ☐ Don't like to exercise
- ☐ Don't have child care while I exercise
- ☐ Too tired

### Healthy Eating

3. On a typical DAY, how many servings/separate portions of fruits and/or vegetables did you have? An example would be a banana (but not banana flavored pudding).

☐ None (please answer #4)    ☐ 1 - 2 servings    ☐ 3 - 4 servings    ☐ 5 servings or more

4. If you answered "none" to the questions about fruits and vegetables, why didn't you eat fruits/vegetables? (Please choose all that apply).

☐ Don't have transportation to get fruits/vegetables    ☐ Don't like fruits/vegetables  
☐ It is not important to me    ☐ Can't afford fruits/vegetables  
☐ Don't know how to prepare fruits/vegetables    ☐ Don't have a refrigerator/stove  
☐ Don't know where to buy fruits/vegetables

5. Please check the box next to any health conditions that you have. (Please choose all that apply).

If you don't have any health conditions, please check the first box and go to question #6: Smoking.

☐ I do not have any health conditions    ☐ Diabetes    ☐ Depression/anxiety  
☐ Allergy    ☐ Heart problems    ☐ Stroke  
☐ Asthma/COPD    ☐ Overweight  
☐ Cancer    ☐ Memory problems

## Smoking

6. On a typical DAY, how many cigarettes do you smoke?

☐ None    ☐ 1 - 4    ☐ 5 - 8    ☐ 9 - 12    ☐ More than 12

## Vaping

7. On a typical DAY, how many times do you use electronic vaping?

☐ None    ☐ 1 - 4    ☐ 5 - 8    ☐ 9 - 12    ☐ More than 12

## GENERAL HEALTH

8. Where do you get most of your health information and how would you like to get health information in the future? (For example, do you get health information from your doctor, from the Internet, etc.). \_\_\_\_\_

---

9. Do you have a personal physician/doctor?    ☐ Yes    ☐ No

10. How many days a week do you or your family members go hungry?

☐ None      ☐ 1–2 days      ☐ 3-5 days      ☐ More than 5 days

11. In the last 30 DAYS, how many days have you felt depressed, down, hopeless?

☐ None      ☐ 1–2 days      ☐ 3 – 5 days      ☐ More than 5 days

12. In the last 30 DAYS, how often has your stress and/or anxiety stopped you from your normal daily activities?

☐ None      ☐ 1–2 days      ☐ 3 - 5 days      ☐ More than 5 days

13. In the last YEAR have you talked with anyone about your mental health?

☐ No      ☐ Doctor/nurse      ☐ Counselor      ☐ Family/friend

14. How often do you use prescription pain medications not prescribed to you or use differently than how the doctor instructed on a typical DAY?

☐ None      ☐ 1–2 times      ☐ 3-5 times      ☐ More than 5 times

15. How many alcoholic drinks do you have on a typical DAY?

☐ None      ☐ 1–2 drinks      ☐ 3-5 drinks      ☐ More than 5 drinks

16. How often do you use marijuana on a typical DAY?

☐ None      ☐ 1–2 times      ☐ 3-5 times      ☐ More than 5 times

17. How often do you use substances such as inhalants, ecstasy, cocaine, meth or heroin on a typical DAY?

☐ None      ☐ 1–2 times      ☐ 3-5 times      ☐ More than 5 times

18. Do you feel safe in your home?

☐ Yes

☐ No

19. Do you feel safe in your neighborhood?

☐ Yes

☐ No



20. In the past 5 years, have you had a:

Breast cancer screening/mammogram	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Prostate exam	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Colon cancer screening	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Cervical cancer screening/pap smear	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable

## Overall Health Ratings

21. My overall physical health is: ☐ Below average ☐ Average ☐ Above average

22. My overall mental health is: ☐ Below average ☐ Average ☐ Above average

## INTERNET

1. Do you have Internet at home? For example, can you watch YouTube at home?

☐ Yes (please go to next section – BACKGROUND INFORMATION) ☐ No (please answer #2)

2. If don't have Internet, why not? ☐ Cost ☐ No available Internet provider ☐ I don't know how  
☐ Data limits ☐ Poor Internet service ☐ No phone or computer

## BACKGROUND INFORMATION

1. What county do you live in?

☐ McLean ☐ Other

2. What is your Zip Code? \_\_\_\_\_

3. What type of health insurance do you have? (Please choose all that apply).

☐ Medicare ☐ Medicaid/State insurance ☐ Commercial/Employer  
☐ Don't have (Please answer #4)

4. If you answered “don’t have” to the question about health insurance, why **don’t** you have insurance?

(Please choose all that apply).

- ☐ Can’t afford health insurance ☐ Don’t need health insurance  
☐ Don’t know how to get health insurance

5. What is your gender? ☐ Male ☐ Female ☐ Non-binary ☐ Transgender ☐ Prefer not to answer

6. What is your sexual orientation? ☐ Heterosexual ☐ Lesbian ☐ Gay ☐ Bisexual  
☐ Queer ☐ Prefer not to answer

7. What is your age? ☐ Under 20 ☐ 21-35 ☐ 36-50 ☐ 51-65 ☐ Over 65

8. What is your racial or ethnic identification? (Please choose only one answer).

- ☐ White/Caucasian ☐ Black/African American ☐ Hispanic/LatinX  
☐ Pacific Islander ☐ Native American ☐ Asian/South Asian  
☐ Multiracial

9. What is your highest level of education? (Please choose only one answer).

- ☐ Grade/Junior high school ☐ Some high school ☐ High school degree (or GED)  
☐ Some college (no degree) ☐ Associate’s degree ☐ Certificate/technical degree  
☐ Bachelor’s degree ☐ Graduate degree

10. What was your household/total income last year, before taxes? (Please choose only one answer).

- ☐ Less than \$20,000 ☐ \$20,001 to \$40,000 ☐ \$40,001 to \$60,000  
☐ \$60,001 to \$80,000 ☐ \$80,001 to \$100,000 ☐ More than \$100,000

11. What is your housing status?

- ☐ Do not have ☐ Have housing, but worried about losing it ☐ Have housing, **NOT** worried about losing it

12. How many people live with you? \_\_\_\_\_

13. Prior to the age of 18, which of the following did you experience (check all that apply):

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Emotional abuse            | <input type="checkbox"/> Physical abuse              | <input type="checkbox"/> Sexual abuse                   |
| <input type="checkbox"/> Substance use in household | <input type="checkbox"/> Mental illness in household | <input type="checkbox"/> Parental separation or divorce |
| <input type="checkbox"/> Emotional neglect          | <input type="checkbox"/> Physical neglect            | <input type="checkbox"/> Incarcerated household member  |
| <input type="checkbox"/> Mother treated violently   |  |   |

Is there anything else you'd like to share about your own health goals or health issues in our community?

---

**Thank you very much for sharing your views with us!**

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## Appendix 5: Conduent Healthy Communities Institute ICON and Gauge Legend

### Compare to Distribution (Dial Gauge)

The compare to distribution gauge measures how your community is doing compared to other communities in your state, the U.S. or region. The needle in the **green** means that the selected location is in the best 50% of similar locations, **yellow** represents the 50th to 25th percentile and **red** represents the worst quartile.



### Compare to Target (Circle Gauge)

The Circle represents a comparison to a **target value**.

A green circle with a check means that the selected value has met or is better than the target value. A red circle with an "x" means that the selected value has not met the target value.



## Compare to the Prior Value (Triangle Gauge)

The **triangle** represents a comparison to the **immediate prior value**. If the triangle is pointing up, the value is higher than the previous value, if the triangle points down the value is decreasing and if there is an equal sign there is no change in the value. If the triangle is green it means the change is good, if the triangle is red it means the change is bad.



## Trend over Time (Square Gauge)

The **square** represents a comparison to a **trend over time**. The trend looks at how the indicator is doing over multiple time periods. We analyze up to 10 previous measurement periods (and at least 4) to determine if the value is going up significantly, not significantly, staying the same, decreasing significantly or decreasing not significantly. A solid color gauge means that the change is significant and an outlined gauge means there is a change but it is not significant. A red gauge represents a poor trend and a green gauge represents a positive trend. The blue gauge with an arrow means that going up or down is neither positive or negative and an equal sign means there is no change.

To learn more about how we calculate this rate, please visit the [Mann-Kendall Test for Trend Overview](#).



## Appendix 6: 2025 Community Health Needs Assessment Data Sources

Conduent Healthy Communities Institute. 2025 The following data sources were accessed through Conduent Healthy Communities Institute: <https://carle.org/about-us/community-report-card>.

American Community Survey, 5 – Year, 2005 – 2023.

CDC – Places, 2022.

Center for Medicare and Medicaid Services, 2023.

Claritas, 2025

County Health Rankings, 2010 - 2024.

Feeding America, 2018 – 2023.

Illinois Hospital Association, 2016 – 2024.

National Center for Education Statistics, 2009-2024.

U.S. Bureau of Labor Statistics, May, 2025.

Partnership for a Healthy Community 2025 Community Health Needs Assessment [Partnership for a Healthy Community - 1/1/2026-12/31/2028](#).

Tri-County Community Health Survey, 2024.

## Appendix 7: Partnership for a Healthy Community 2025 CHNA Resource Matrix

	Health Departments			Education	Health Care Organizations					Community Organizations
Issue Statements	Peoria County	Tazewell County	Woodford County	UICOMP	Carle Eureka Hospital	OSF Saint Francis Medical Center	Carle Health Pekin Hospital	Carle Health Methodist Hospital	Carle Health Proctor Hospital	Heart of Illinois United Way
The high cost of nutritious food limits consumption and contributes to food insecurity among low-income populations	S3, T3	S3, T3	S2, T2	S2, T2	S1, T1	S3, T3	S2, T2	S2, T2	S2, T2	S3, T1
Increased availability of nutritious foods through strengthening & aligning of resources & services across the Tri-County food system	S3, T3	S3, T3	S3, T3	S2, T2	S2, T1	S3, T3	S2, T2	S2, T2	S2, T2	S3, T1
During school closures, youth experience significant food insecurity, with over 2 million meals missed, highlighting the critical role of school-based nutrition programs	S3, T3	S3, T3	S3, T3	S1, T2	S1, T1	S3, T3	S2, T2	S2, T2	S2, T2	S3, T1
Improve knowledge to navigate the behavioral health system	S3 T3	S2, T2	S2, T3	S3, T2	S2, T2	S3, T3	S3, T3	S3, T3	S3, T3	S3, T1
Decrease suicidal thoughts/behaviors and self-harm related admissions for adolescents and young adults	S3, T3	S2, T2	S2, T3	S3, T1	S3, T3	S3, T3	S3, T3	S3, T3	S3, T3	S3, T1

\*Note: S - indicates strategic focus, T- indicates tactical focus

(1) = low; (2) = moderate; (3) = high, in terms of degree to which the need is being addressed

	Health Departments			Education	Health Care Organizations					Community Organizations
Issue Statements	Peoria County	Tazewell County	Woodford County	UICOMP	Carle Eureka Hospital	OSF Saint Francis Medical Center	Carle Health Pekin Hospital	Carle Health Methodist Hospital	Carle Health Proctor Hospital	Heart of Illinois United Way
Increase access to behavioral health care for youth and those with low income	S3, T3	S2, T2	S2, T2	S3, T2	S2, T2	S3, T3	S3, T3	S3, T3	S3, T3	S3, T1
Increase the proportion of pregnant women who receive early and adequate prenatal care	S2, T2	S2, T2	S2, T2	S3, T3	S1, T1	S3, T3	S3, T3	S3, T3	S3, T3	S3, T1
Reduce emergency department as choice of medical care for non-emergent issues	S2, T2	S2, T2	S2, T1	S1, T1	S3, T3	S3, T3	S3, T2	S3, T2	S3, T2	S3, T1
Increase the proportion of people that routinely engage with primary care provider/services	S2, T2	S2, T2	S2, T1	S1, T1	S3, T3	S3, T3	S3, T3	S3, T3	S3, T3	S3, T1
Navigation of healthcare system and resources specifically among; AA/Black, Males, Rural Residents, and Individuals 65+ years old	S2, T2	S2, T2	S2, T2	S2, T3	S3, T3	S3, T3	S3, T2	S3, T2	S3, T2	S3, T1