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# 2020 Community Health Needs Assessment

*Mercyhealth Hospital and  
Medical Center–Harvard*

## **Our Mission:**

*Exceptional health care services  
with a passion for making lives better.*



**Mercyhealth**<sup>®</sup>

A passion for  
making lives better.

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## Introduction

Mercyhealth Hospital and Medical Center – Harvard (MHH) conducted a Community Health Needs Assessment (CHNA) designed to identify health and quality of life issues in McHenry County, Illinois. This approach identifies issues where there are opportunities for improvement in the health care delivery system that could improve patient care, preventive service utilization and the overall health and quality of life in the community.

Results from this study can be used for strategic decision-making purposes as they relate to the health needs of the community and to ensure that programs and services closely match the priorities and needs of the Harvard community.

In addition, this report has been prepared in compliance with IRS Notice 2011-52 relating to community health needs assessment (CHNA) required by Internal Revenue Code Section 501-r-(3). It includes the following components:

- **About Mercyhealth:** A summary of our parent organization, an introduction to MHH, and a description of the community served by MHH
- **Methodology:** A description of the process and methods used
- **Community Analysis:** A compilation of data from external sources on a wide variety of community health issues and trends
- **Household Survey:** A random survey of residents of the Harvard community; a link to the survey was also distributed by several organizations in McHenry County
- **Key Informant Interviews:** Selected community leaders in business, government, health care, nonprofit, and other community sectors were interviewed as to their views on the health of the community and how it can be improved
- **Prioritization of Health-Related Issues:** A prioritized description of the health needs identified and the reason for prioritization

## Mercyhealth Hospital and Medical Center – Harvard (MHH)

Mercyhealth Hospital and Medical Center (MHH) in Harvard, Illinois, offers a comprehensive array of acute inpatient services as well as outpatient services. As part of an integrated delivery system, the parent company, Mercyhealth, has worked in conjunction with this hospital to create services to support the hospital and its patients, including a large ambulatory network consisting of primary care, specialty care, and urgent care services. We provide exceptional, coordinated health care that spans four core service divisions: hospital-based services, clinic-based services, post-acute care and retail services, and a wholly owned insurance company. These four core service divisions make up our comprehensive, vertically integrated delivery system, and integrated delivery is what makes Mercyhealth unique in serving the full range of health care needs for our patients.

### Community Definition

For the purposes of this report we define the MHH community as Harvard, Illinois, where MHH is located. When data from Harvard, IL is not available, we approximate the MHH community by considering McHenry County, Illinois, where a majority (79%) of the patients served by MHH in 2019 resides.

### Activities Since Previous CHNA

An evaluation of the 2017-2020 Implementation Plan and activities taken toward the goals identified in MHH's 2017-2020 CHNA is available in Appendix B.

### MHH at a Glance

Hospital Admissions	651
Care Center Admissions	134
Outpatient Visits	12,879
ER Visits	6,013
Acute Beds	18
Care Center Beds	45
Employees	200
Medical Staff	67

Source: 2018 Annual Hospital Questionnaire

## Methodology

Starting in 2019, MHH conducted a CHNA by gathering health-related information specific to McHenry County.

Primary data sources for this CHNA included a survey of McHenry County residents and key informant interviews. Other primary data sources for this CHNA were community coalitions organized by the McHenry County Department of Public Health, including the Substance Abuse Coalition and the Data Sharing Workgroup. These groups reflect some of the key health priorities of the McHenry County Department of Public Health. Representatives from MHH participated in these groups during this analysis and input from these groups provided important information about resources available to address health issues in McHenry County. For example, the Substance Abuse Coalition was established in 2001 and Mercyhealth participated in the McHenry County's Opioid Surveillance and Response Grant which allowed for information sharing used to develop a prioritized response to the current opioid crisis in the community.

As secondary data sources, MHH analyzed demographic, socioeconomic and health-related data from a variety of publicly available sources, including the Illinois Department of Public Health, the United States (U.S.) Census Bureau, and the Center for Disease Control and Prevention's County Health Rankings.

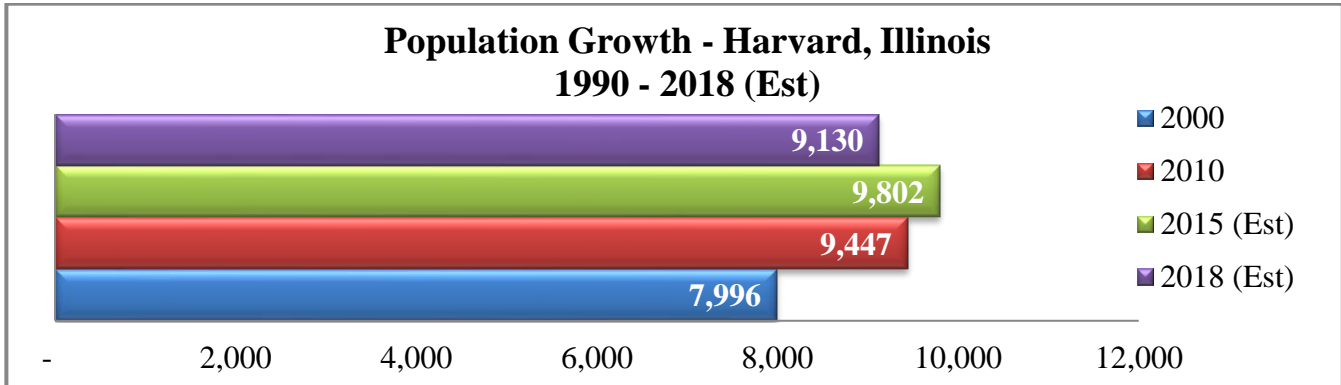
Needs identified were reviewed and prioritized by MHH based on level of importance to the community as well as the hospital's ability to impact those needs.

MHH welcomes feedback on our CHNA. Comments can be shared on our website at [www.mercyhealthsystem.org/contact-us/](http://www.mercyhealthsystem.org/contact-us/). MHH received no comments regarding our previous CHNA.

## Demographics

### Overall Population

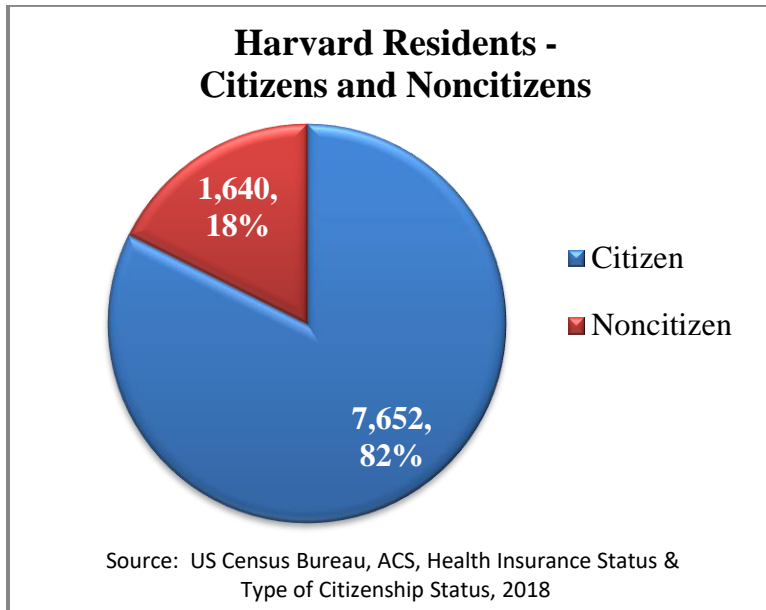
According to the U.S. Census Bureau, the population in Harvard increased from 2000 to 2015 by 1,134 people or 14%. However, the population of Harvard declined by 6.9% between 2015 and 2018. The total population of McHenry County remained consistent during this period.



Source: U.S. Census Bureau, American Community Survey, 2000 and 2010, American Fact Finder, 2015 and 2018 Estimates

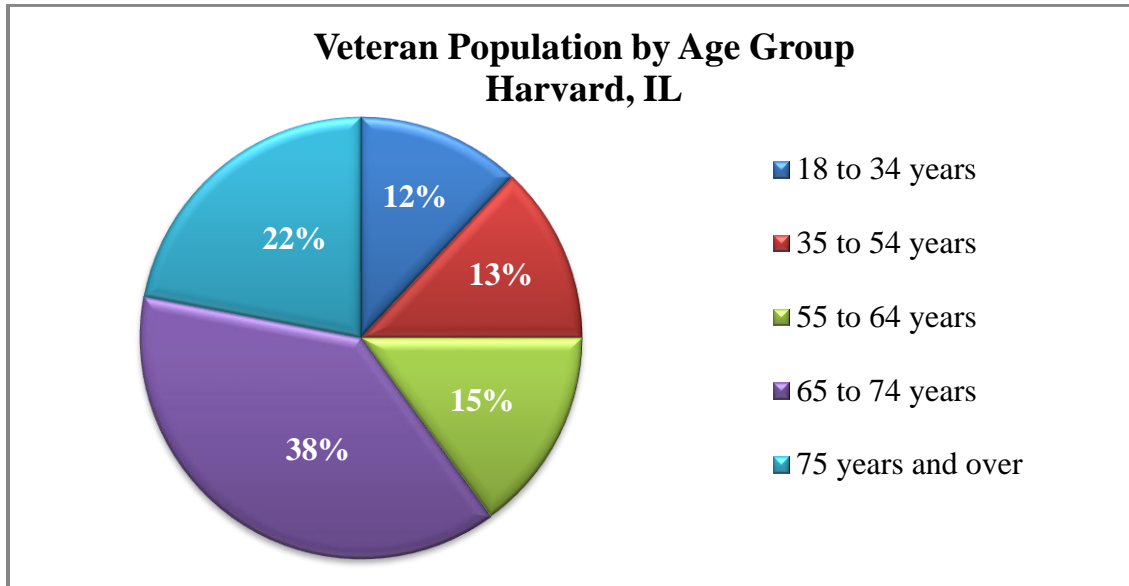
### Citizenship of Harvard Population

82% of Harvard's residents are U.S. citizens, and 18% are not.



## Veteran Population

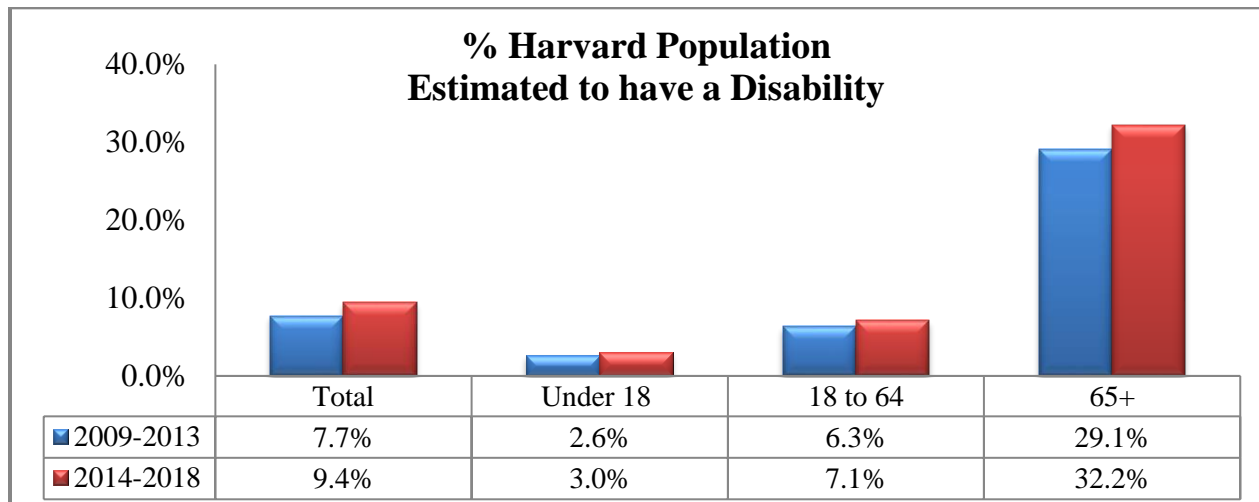
Veterans in McHenry County make up 6.7% of the population age 18 and older. This is higher than the state rate of 6.2% but below the national rate of 7.7%. Approximately three-fourths are over the age of 55 and nearly three-fifths are over the age of 65.



Source: U.S. Census Bureau, 2017 American Community Survey (ACS), 1-Year Estimates

## Population With Any Disability

According to Healthy People 2020, individuals with disabilities represent 18.7% of the U.S. population (about 56.7 million people). The U.S. Census Bureau estimates that the percent of the population with any disability in Harvard grew from 7.7% between 2009 and 2013 to 9.4% between 2014 and 2018.

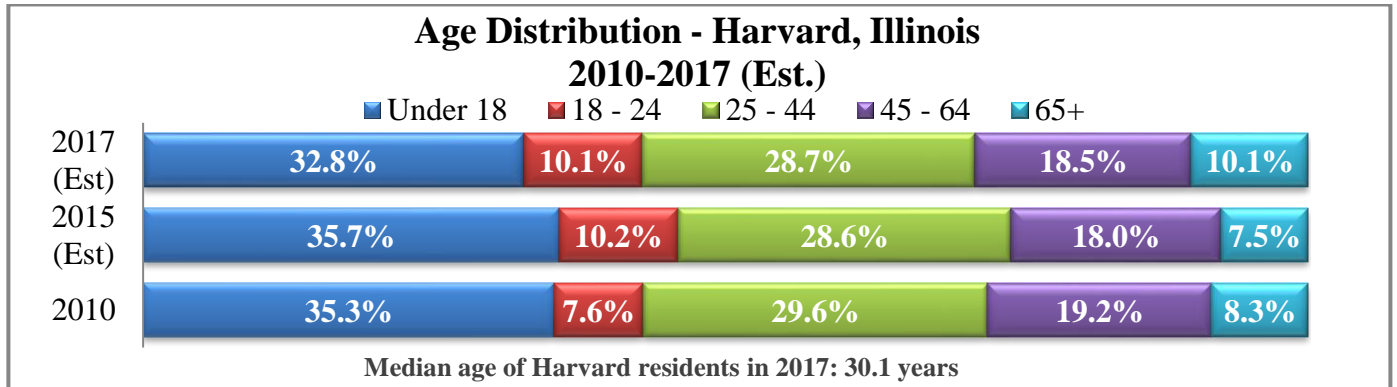


Source: U.S. Census Bureau, ACS, Comparative Social Characteristics, 5-Year Estimates 2009-2013 and 2014-2018



## Age

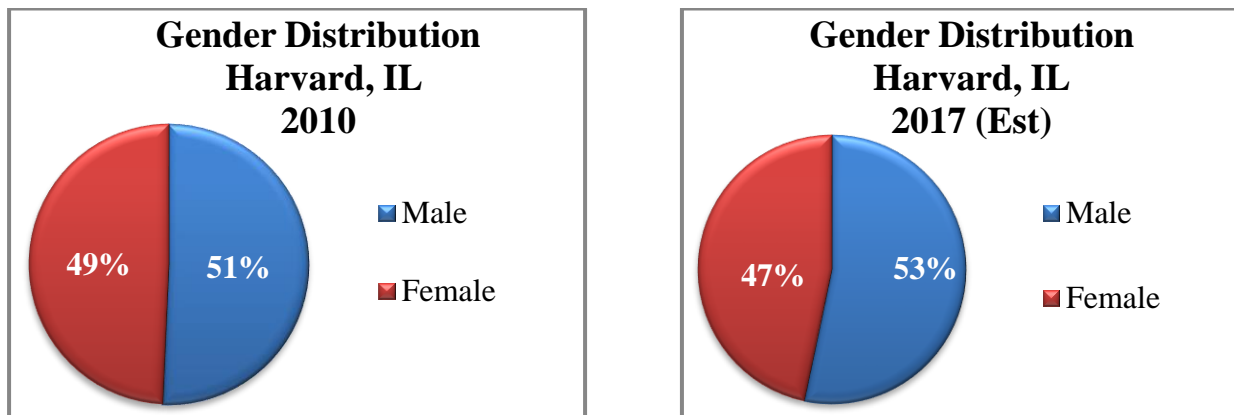
From 2015 to 2017, the percent of Harvard residents younger than age 25 declined, while the percent of Harvard residents age 25 and up increased. The largest percentage point decline was among residents under 18, and the largest percentage point increase was among residents age 65 and older. The median age of Harvard residents is 30.1 years, lower than the McHenry County median age of 39.9.



Source: U.S. Census Bureau, American Community Survey, 2011-2017 ACS 5-year Estimates

## Gender

The gender distribution of Harvard residents changed between 2010 to 2017, with the percent of male residents increasing from 51% to 53%.



Source: U.S. Census Bureau, 2010 Census and 2018 Estimates

## Race

The largest racial groups in Harvard and McHenry County are White (91.1% and 92.0%, respectively) and Other (6.5% and 2.9%, respectively). The percent of the population that is White has increased since 2010.

## Hispanic or Latino Population

Hispanic ethnicity is different than race. An individual identifying with a Hispanic ethnicity can be any race. Nearly half of the population in Harvard (49.8%) is Hispanic or Latino, up from 35.2% in 2010. Harvard has a larger proportion of Hispanic or Latino population than McHenry County (13.4%, up from 12.1% in 2009-2013).

<b>Race Distribution - Harvard, IL</b>				<b>Race Distribution - McHenry County, IL</b>	
	<b>2010</b>	<b>2009-2013 (Est.)</b>	<b>2014-2018 (Est.)</b>	<b>2009-2013 (Est.)</b>	<b>2014-2018 (Est.)</b>
<b>White</b>	71.5%	76.0%	91.1%	91.5%	92.0%
<b>Black or African American</b>	0.9%	0.1%	0.3%	1.3%	1.9%
<b>American Indian and Alaska Native</b>	0.8%	0.0%	0.1%	0.1%	0.1%
<b>Asian</b>	0.7%	0.9%	0.1%	2.6%	2.9%
<b>Other</b>	22.9%	19.0%	6.5%	2.6%	1.1%
<b>Two or more races</b>	3.0%	1.7%	1.9%	1.8%	2.1%
<b>Ethnicity – Harvard, IL</b>				<b>Ethnicity – McHenry County, IL</b>	
<b>Hispanic or Latino (any race)</b>	35.2%	50.3%	49.8%	12.1%	13.4%

Source: U.S. Census Bureau, 2010 Census, 2015 and 2019, American Community Survey 5-Yr Estimates

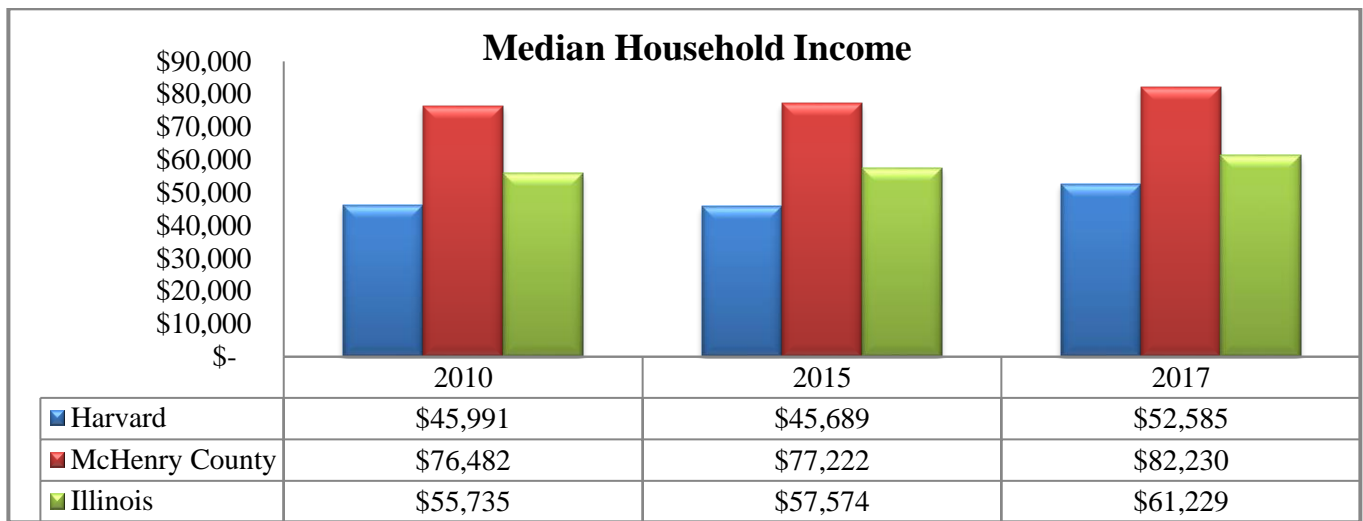
## Social and Economic Characteristics

Economic and social insecurity often are associated with poor health. Poverty, unemployment, and lack of educational achievement affect access to care and a community’s ability to engage in healthy behaviors. Ensuring access to social and economic resources provides a foundation for a healthy community.

### Median Family Income

Median income divides households into two segments, with half of households earning more than the median income and the other half earning less. Median income can be a better descriptor than average income because it is not skewed by outlier high or low incomes.

Median household income has risen since 2010 in Harvard, McHenry County, and Illinois. Harvard’s median income (\$52,585) remains lower than both the county (\$82,230) and the state (\$61,229).

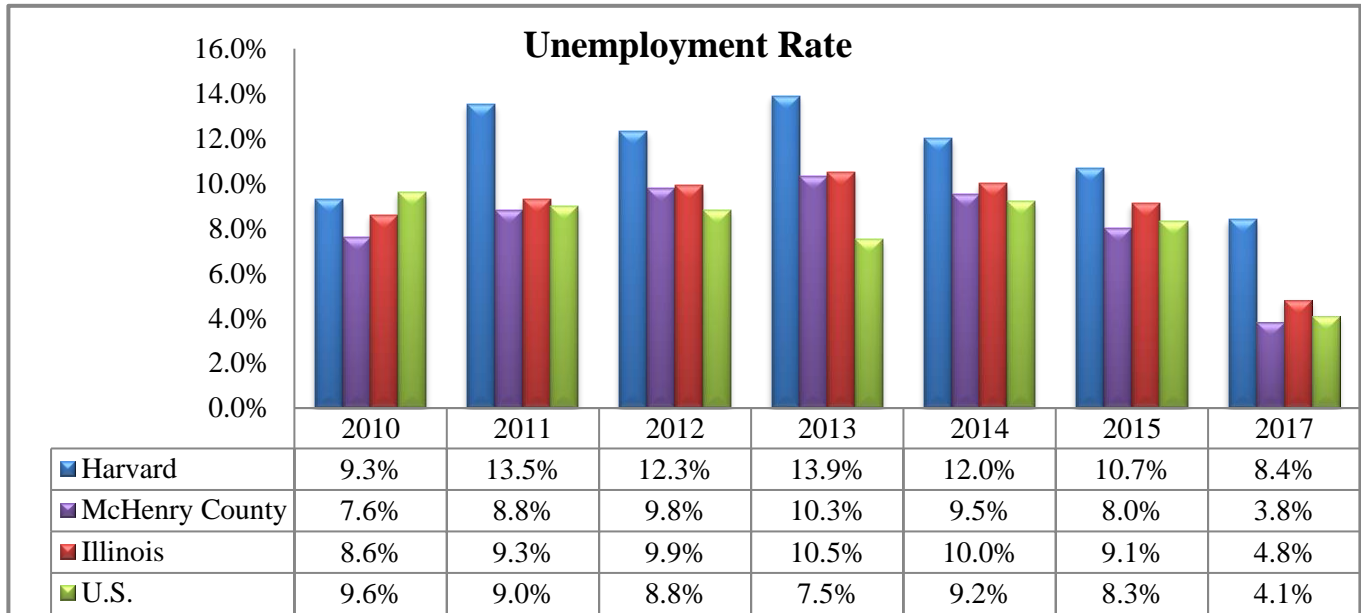


Source: U.S. Census Bureau, American Community Survey, Selected Economic Characteristics, 2010, 2015, and 2017

## Unemployment

Unemployment affects the unemployed individual and their family, not only with respect to income, but also with respect to health and mortality. Unemployment creates barriers to access including insurance coverage, health services, healthy food, and other necessities that contribute to poor quality of health.

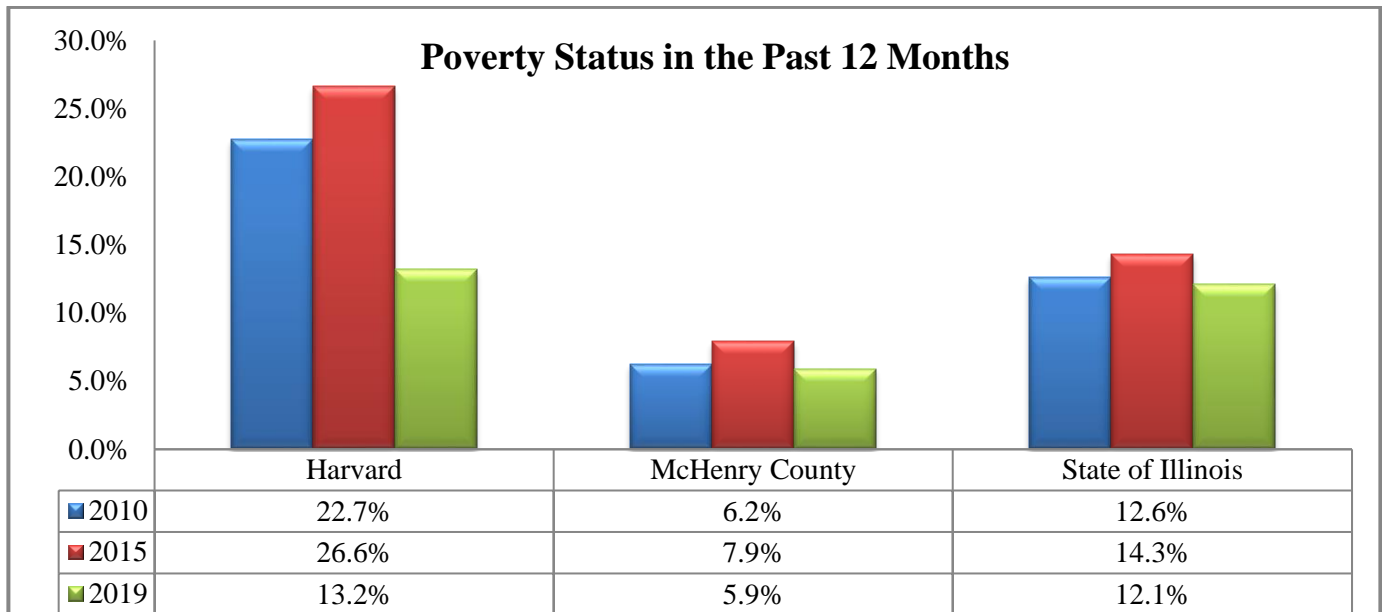
Since 2013, unemployment rates have decreased in Harvard, McHenry County, and Illinois. In 2017, unemployment rates in Illinois (4.8%) and McHenry County (3.8%) were above the national average (4.1%), but the unemployment rate in Harvard was more than twice the national average.



Source: U.S. Census Bureau, American Community Survey, Selected Economic Characteristics, 2010-2017

## Poverty

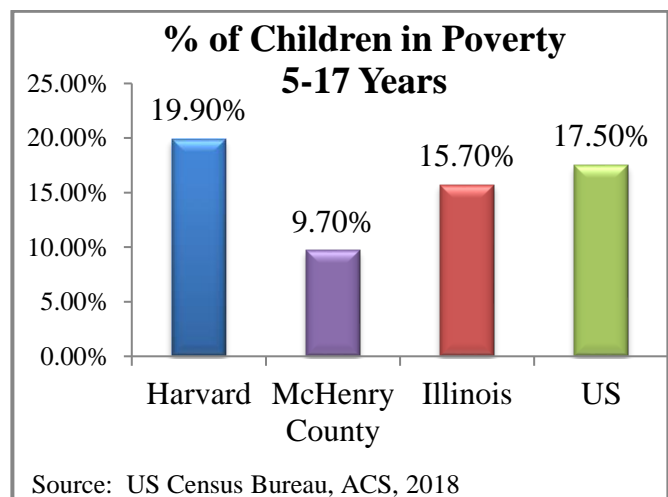
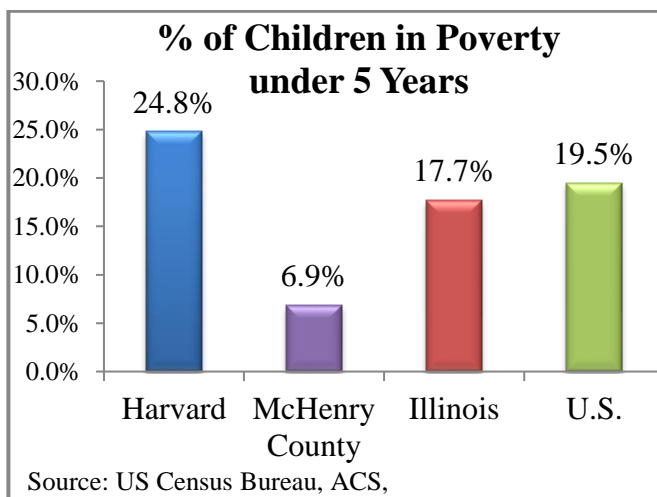
The percentage of Harvard’s population living in poverty is 13.2%, higher than McHenry County (5.9%) and Illinois (12.1%). Between 2015 and 2019, the percentage of people living in poverty declined in Harvard, McHenry County, and Illinois.



Source: U.S. Census Bureau, 2013-2019, Small Area Income and Poverty Estimates (SAIPE), 2010, 2015, and 2019

Research shows that poverty is the single greatest threat to a child’s wellbeing. Poverty can impede a child’s ability to learn and can contribute to social, emotional, and behavioral problems. Poverty also can contribute to poor physical and mental health. Risks are greatest for children who experience poverty when they are very young and/or who experience deep and persistent poverty.

Nearly one quarter of children under age 5 in Harvard live in poverty (24.8%), and nearly one fifth of children age 5 to 17 (19.9%). This is above the rates of childhood poverty for the county (6.9% and 9.7%), Illinois (17.7% and 15.7%) and the nation (19.5% and 17.5%).

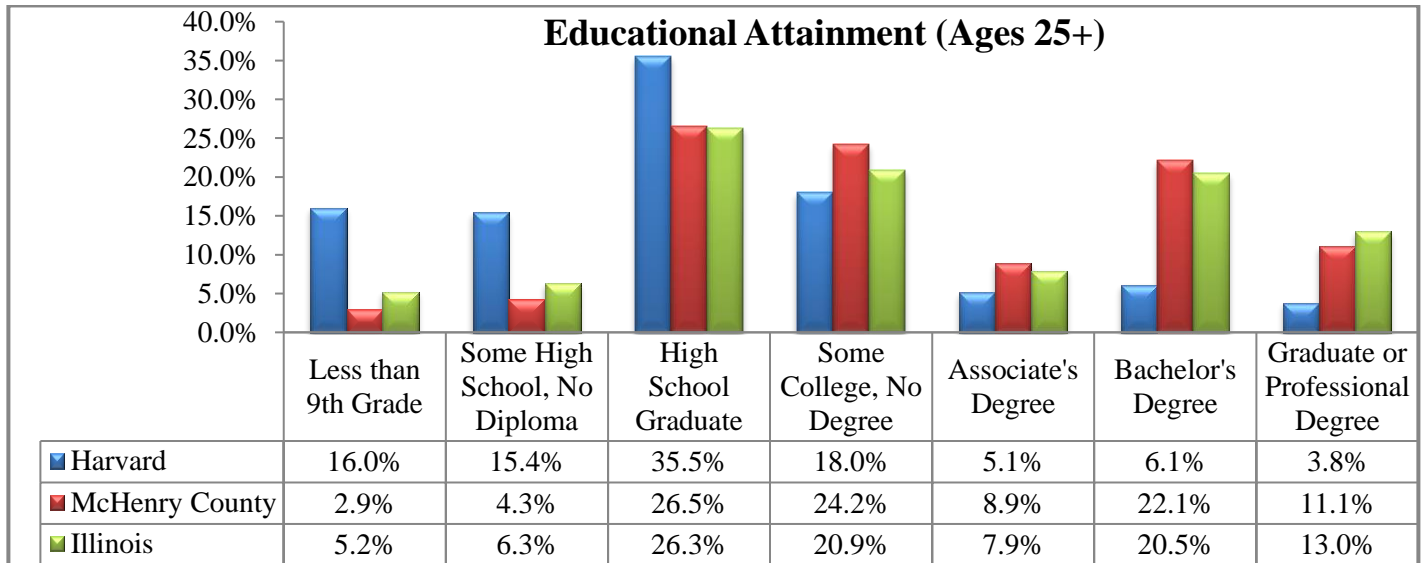


Source: U.S. Census Bureau's American Community Survey, Age by Ratio of Income to Poverty Level in the Past 12 Months (Universe: Population for whom poverty status is determined), 2014 to 2018 1-Year Estimates, Table C17024

## Education

Educational attainment has been linked to positive health outcomes and greater likelihood of selecting healthy lifestyle choices. Educational attainment is strongly related to higher salaries, more employment options and the ability to earn a livable wage.

The percent of adults over age 25 in Harvard without a high school diploma or GED is 31.4%. This is higher than both McHenry County (7.2%) and Illinois (11.5%). 35.5% of adults over age 25 in Harvard graduated from high school, compared to 24.2% in McHenry County and 20.9% in Illinois.

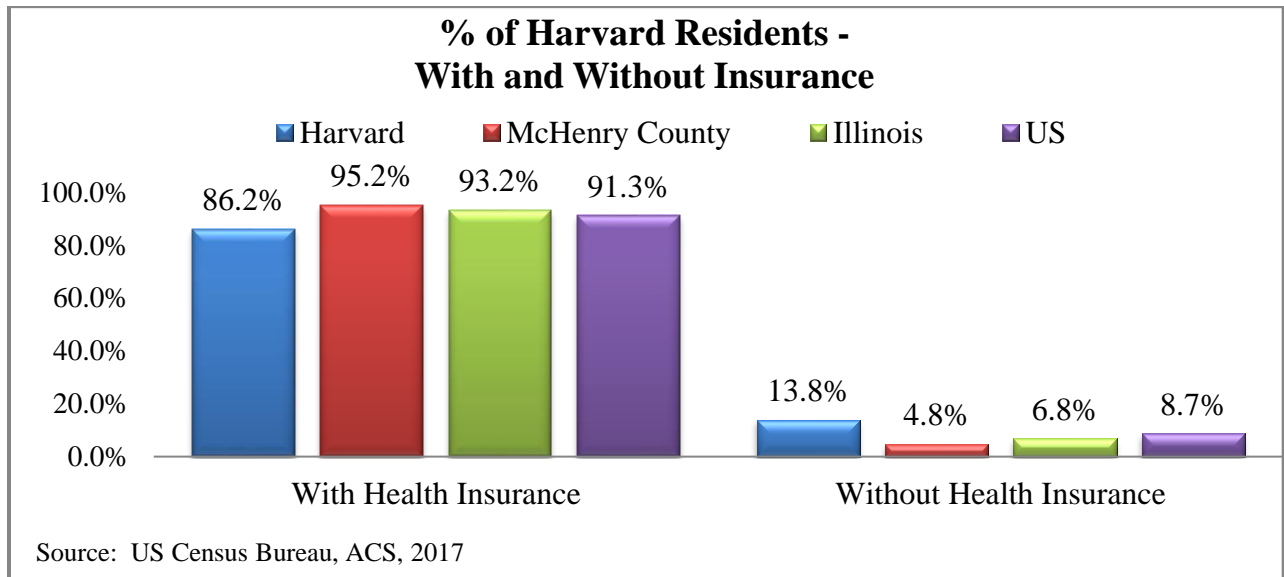


Source: U.S. Census Bureau, American Community Survey, Educational Attainment, 2017

## Insurance Coverage

Lack of adequate health insurance is a barrier to healthcare. Not having insurance or not having adequate insurance coverage impedes access to primary care and preventative services, specialty services, and other health services, which in turn can lead to worse physical and mental health.

In 2017, 13.8% of the population in Harvard did not have health insurance. Reasons commonly cited for not having health insurance include the inability to afford medical insurance premiums and the inability to qualify for medical assistance programs.



## Clinical Care

### **Access to Primary Care**

Physicians classified as "primary care physicians (PCPs)" by the American Medical Association include General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs, and General Pediatrics MDs. Physicians age 75 and over and physicians practicing sub-specialties within the listed specialties are excluded.

A PCP provides preventive care, teaches healthy lifestyle choices, identifies and treats common medical conditions, and makes referrals to medical specialists when needed. Access to PCPs supports healthy communities. Through routine check-ups, primary care can avoid or mitigate potentially serious problems.

As of 2019, McHenry County had 1 PCP for every 1,940 residents, higher than the Illinois rate.

### **Access to Dental Care**

A dentist is defined as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.), who is licensed by the state to practice dentistry and who is practicing within the scope of that license.

Untreated dental disease can lead to health problems including pain, infection, and tooth loss and can impact quality of life. Although lack of dental providers is only one barrier to accessing oral health care, much of the country suffers from shortages. According to the Wisconsin Office of Rural Health, Rock County is considered to be a Health Professional Shortage Area (HPSA) for dental services.

In 2019, McHenry County had 1 dentist for every 1,650 residents, higher than the Illinois rate.

### **Access to Mental Health Providers**

Mental health providers include psychiatrists, psychologists, clinical social workers, and counselors that specialize in mental health care. In 2019, McHenry County had 1 mental health provider for every 570 residents, higher than the Illinois rate.

### **Lack of a Consistent Source of Primary Care**

Individuals without a consistent source of primary care experience worse health outcomes and higher emergency department (ED) utilization.

The Illinois Behavioral Risk Factor Surveillance System's (IBRFSS) 2017 data shows that an average of 70% of Collar County residents - which includes northern Illinois residents from five counties DuPage, Kane, Lake, McHenry, and Will - had a checkup within the past 12 months, which is consistent with the State of Illinois's rate of 70%. No recent information was available for Harvard.

In 2017, 82.6% of Collar County residents had a regular health care provider, compared to 81.9% for Illinois (IBRFSS, 2017). No recent information was available for Harvard.



## Immunization

Immunizations help prevent many debilitating and life-threatening diseases that impact both children and adults.

In 2017, 38.3% of Collar County residents had received an influenza immunization within the past 12 months, compared to 37.5% for Illinois. 38.7% of Collar County residents had received a pneumonia immunization, compared to 38.1% for Illinois. No recent information was available for Harvard.

The Illinois State Board of Education reports the protection rate averages for the Harvard Community School District are above 98.1%.

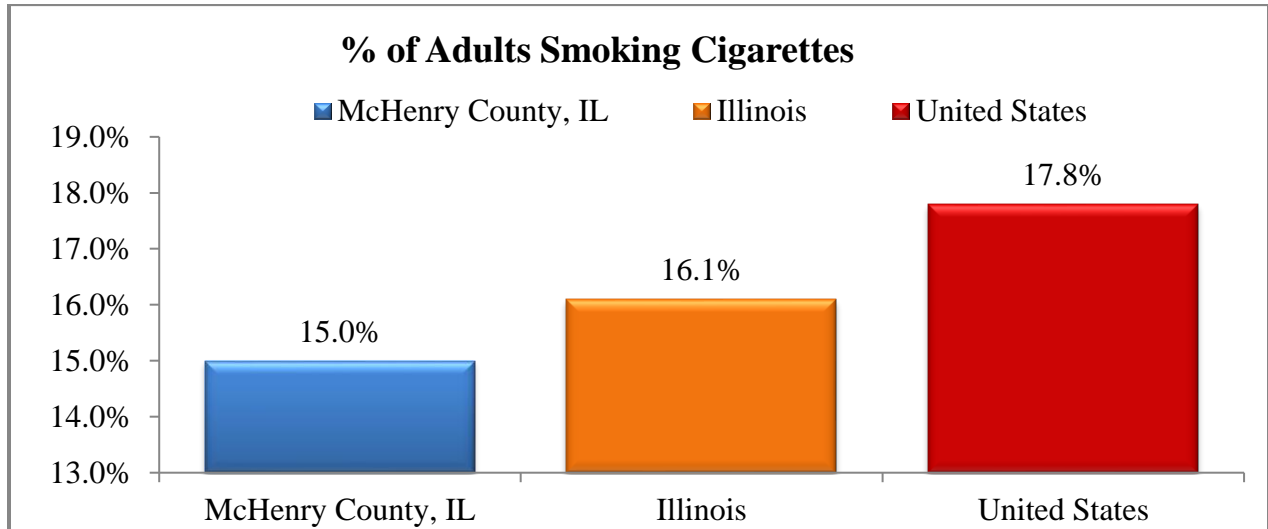
<b>Harvard Immunization Status of School-Age Children 2018-2019</b>	
<b>Immunization</b>	<b>Average % Rate of Immunization Protection</b>
Polio	99.1%
Invasive Meningococcal Disease	98.5%
Varicella/Chickenpox	99.1%
Invasive Pneumococcal Disease	98.7%
Haemophilus Influenza Type B (Hib)	98.7%
Hepatitis B	99.4%
Measles, Mumps & Rubella	98.8%
Tetanus, Diphtheria and Acellular Pertussis (TDAP)	98.9%
Diphtheria, Pertussis, Tetanus (DTP/DTaP/Td)	98.1%

Source: Illinois State Board of Education, School Year Immunization Status

## Health Behaviors

### Tobacco Use

Tobacco use is linked to various cancers, cardiovascular disease, and respiratory conditions, as well as low birthweight and other adverse health outcomes. The percent of adults in McHenry County who report using tobacco products (15.0%) is lower than both Illinois (16.1%) and the nation (17.8%). No recent information was available for Harvard.

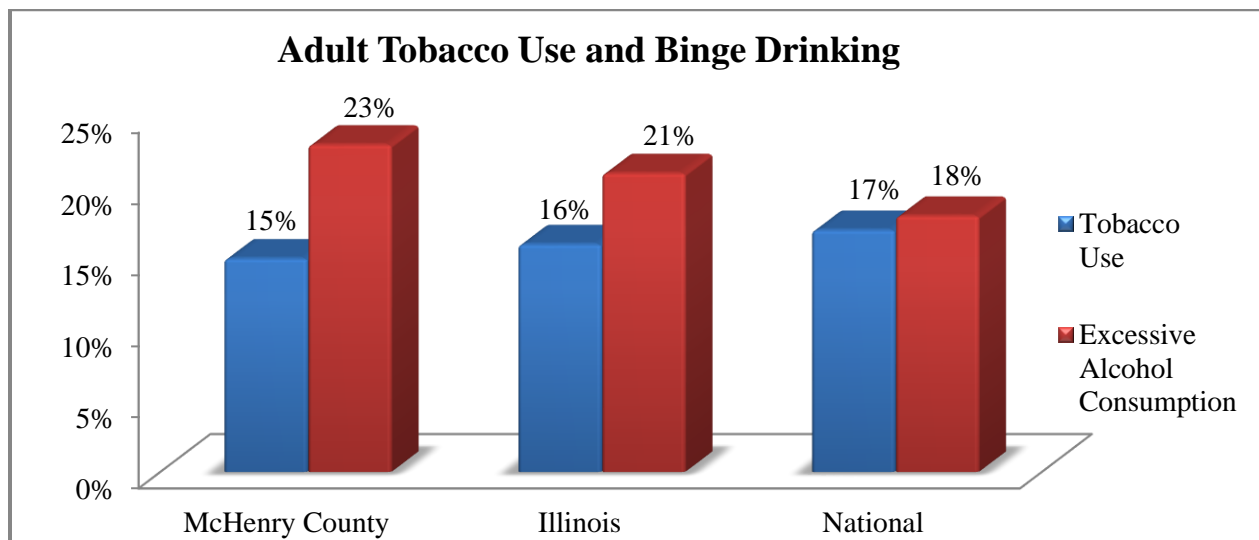


Source: CDC; County Health Rankings 2016

### Alcohol Consumption

Excessive alcohol consumption is a risk factor for a number of adverse health outcomes including cirrhosis, cancers, hypertension, and untreated mental and behavioral health issues. According to the Centers for Disease Control and Prevention (CDC), approximately 80,000 deaths are attributed annually to excessive drinking, and it is the third leading lifestyle-related cause of death in the U.S.

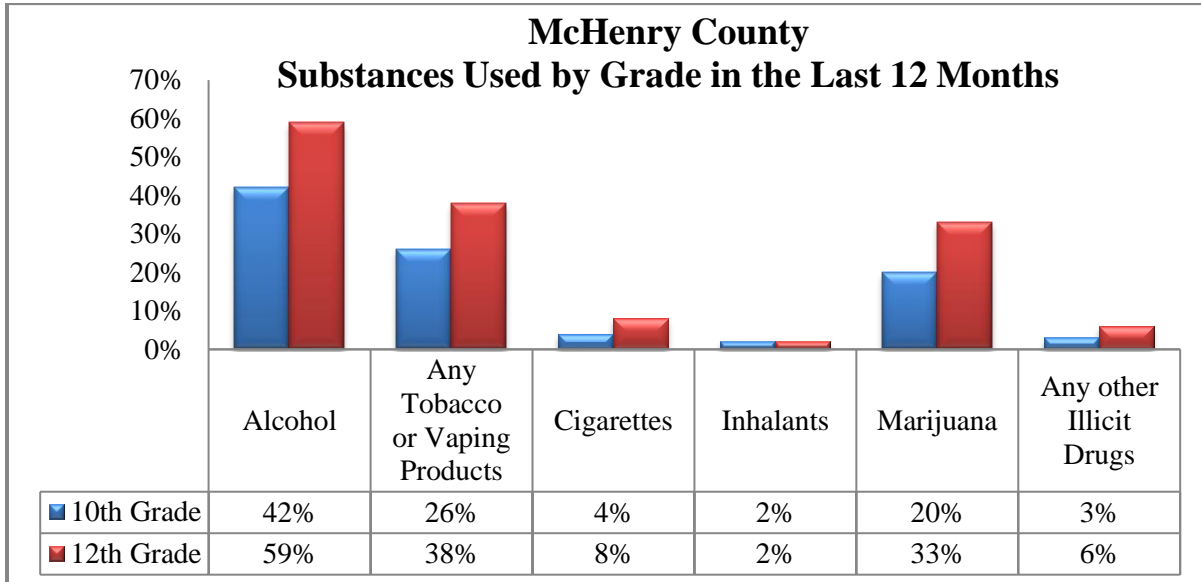
Binge alcohol consumption is defined as males having five or more drinks on one occasion and females having four or more drinks on one occasion. The percent of adults in McHenry County who reported binge drinking (23%) is higher than both Illinois (21%) and the nation (17%). No recent information was available for Harvard.



### Adolescent Substance Use

Substance use among young people puts them at increased risk for developing substance abuse disorders and other related health consequences, and it may impact their academic achievements.

The 2018 Illinois Youth Survey reports show that 29% of 10<sup>th</sup> and 12<sup>th</sup> grade students in Illinois reported binge drinking, compared to 27% in McHenry County.



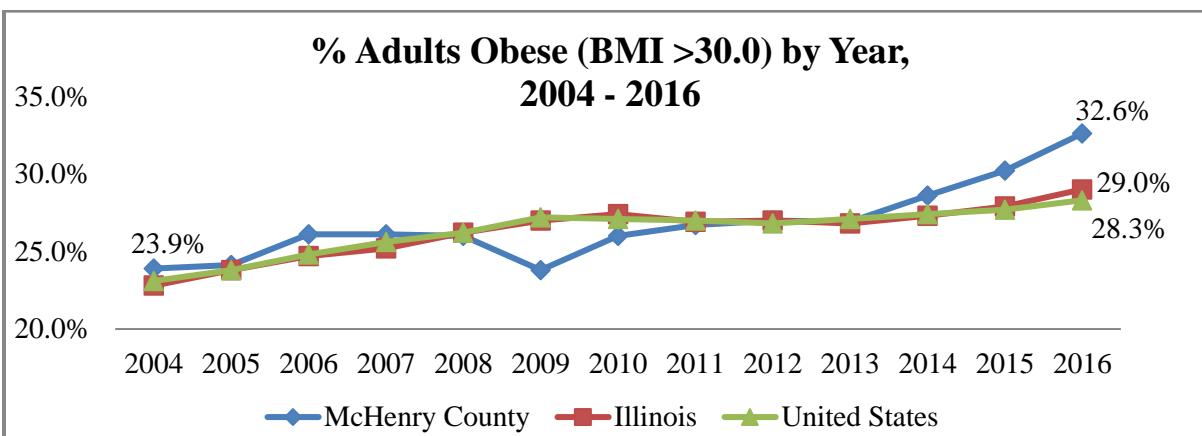
Source: Illinois Youth Survey (2018) by Illinois Center for Prevention Research & Development and Illinois Department of Human Services, McHenry County

## Health Outcomes

### Obesity

Obesity places individuals at increased risk for chronic diseases. Overweight is defined as a body mass index (BMI) of 25 or higher; obesity is defined as a BMI of 30 or higher.

According to a 2018 study by the State of Obesity Project, Illinois has the 24<sup>th</sup>-highest adult obesity rate in the U.S. The percentage of people who are overweight and obese in McHenry County is lower than both Illinois and the nation. In McHenry County, the percent of obese adults between 2014 and 2016 increased from 28.6% to 32.6%, compared to 29.0% in 2016 for Illinois and 28.3% for the nation.



Source: CDC, National Center for Chronic Disease Prevention and Health Promotion. 2016.

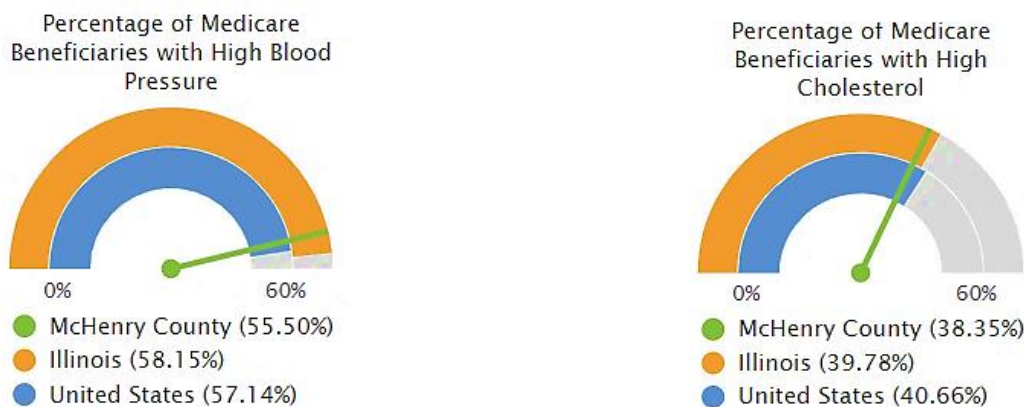
## Chronic Disease

Chronic diseases such as heart disease, cancer, and diabetes are the leading causes of death and disability in the U.S., as well as key drivers of the nation’s \$3.5 trillion in annual health care costs.

### Heart Disease

Heart disease is a leading cause of death in the U.S., causing about 1 in 4 deaths (CDC, 2019). Hypertension (high blood pressure), high cholesterol, and smoking are considered major risk factors for developing heart disease. Additionally, there are numerous health conditions that occur as a consequence of cardiovascular disease, including atherosclerosis, cardiac arrhythmia, myocardial infarction, stroke, carotid artery disease and renal dysfunction or failure.

The percent of Medicare beneficiaries in McHenry County who have high blood pressure (55.5%) is lower than both Illinois (58.15%) and the nation (57.14%). The percent of Medicare beneficiaries in McHenry County who have high cholesterol (38.35%) is lower than both Illinois (39.78%) and the nation (40.66%).



Source: Centers for Medicare and Medicaid Services, 2017

### Cancer

Cancer is the second leading cause of death in the U.S., exceeded only by heart disease. Among males in McHenry County, prostate is the most common type of cancer. Among females in McHenry County, breast is the most common type of cancer.

#### Cancer Incidence Rates – McHenry County

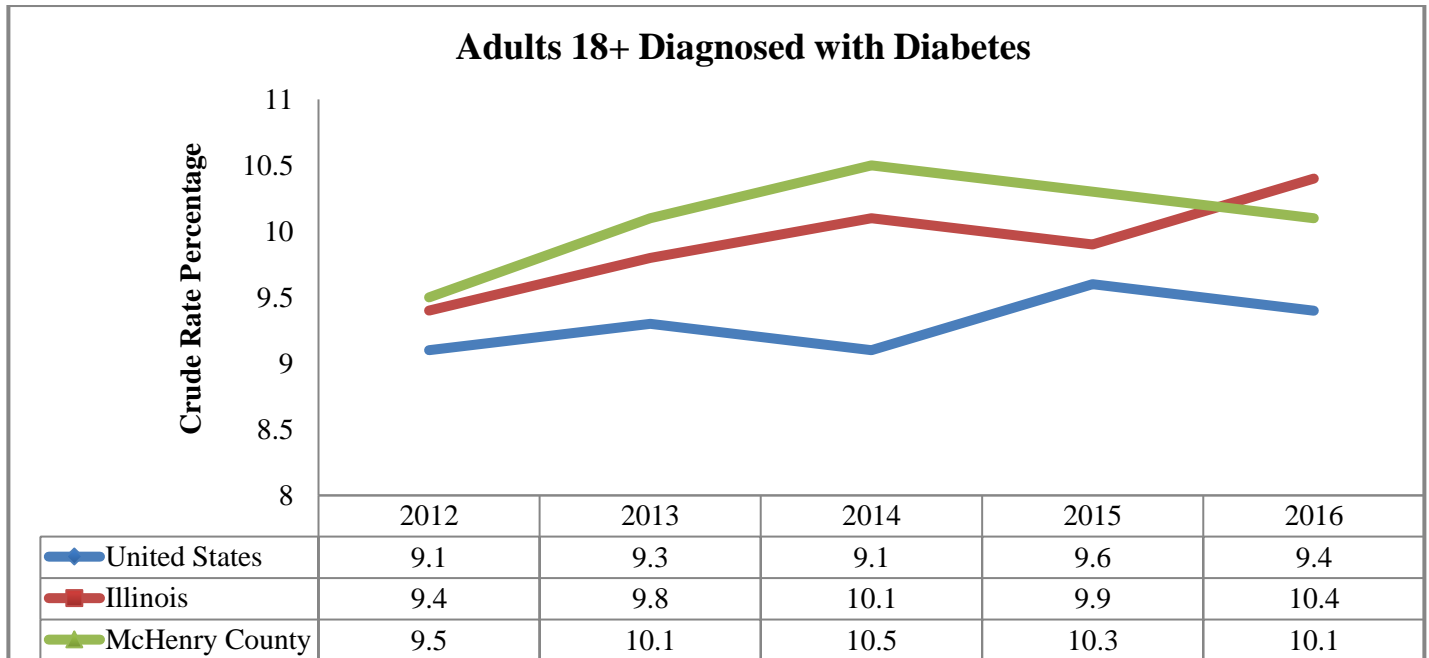
Males			Females		
Type	Cases	Rate*	Type	Cases	Rate*
Prostate	869	101.8	Breast (invasive)	1233	137.2
Lung & Bronchus	450	63.1	Lung & Bronchus	509	59.3
Colon & Rectum	353	47.2	Uterus	280	29.1
Bladder	269	39.1	Colon & Rectum	311	35.4
Kidney & Renal Pelvis	179	21.7	Kidney & Renal Pelvis	104	11.9
All Cancers Combined	3,671	478.7	All Cancers Combined	3,890	444.5

\*Age adjusted incidence rate per 100,000 population

Source: Illinois Department of Public Health, Illinois Cancer Registry, 2012-2016

## Diabetes

The percent of adults age 18 and over in McHenry County who have ever been told by a doctor that they have diabetes (10.1%) is lower than Illinois (10.4%) but higher than the nation (9.4%). This rate has declined in McHenry County since 2014.



Note: Crude Rate = Count / Population \* 100,000

Source: U.S. Diabetes Surveillance System, Division of Diabetes Translation, CDC, 2012-2016

## Mortality

Leading causes of death in McHenry County include cancer, heart disease and accidents.

<b>Leading Causes of Death McHenry County in 2017</b>	
Cause	Crude Rate
<b>Cancer</b>	147.4
<b>Heart Disease</b>	156.2
<b>Accidents</b>	59.8
<b>Stroke</b>	36.2
<b>Chronic Lower Respiratory Diseases</b>	34.9
<b>Diabetes Mellitus</b>	24.6
<b>Alzheimer's Disease</b>	23.9
<b>Kidney Disease</b>	12.3
<b>Intentional Self-Harm</b>	12.3
<b>Sepsis</b>	11.6

Note: Crude Rate = Count / Population \* 100,000

Source: Illinois Department of Public Health (IDPH), Leading Cause of Death for McHenry in 2017

# Household Survey

## Introduction

An initial review of publicly available health needs assessments was conducted to evaluate and identify common themes and approaches to collecting the necessary data. Working with a group designing a survey for another county, we adapted the survey to ensure all critical areas were being addressed for our specific area.

The survey was distributed primarily to residents of the 60033 zip code, which includes the community of Harvard. Individuals who work and spend recreational time in the Harvard area were also asked to participate.

In order to ensure input from Harvard's Spanish-speaking population, a community likely to be medically underserved, versions of both the online and paper survey were translated and distributed in Spanish. See appendix C for the questionnaire.

## Sample Size

The sample size was calculated by using a standard formula based on the population size, margin of error, confidence level and standard of deviation. The calculation encompasses a 95% confidence level, a +.5margin of error and a standard deviation of .5.

$$\text{Necessary Sample Size} = (Z\text{-score})^2 * \text{StdDev} * (1\text{-StdDev}) / (\text{margin of error})^2$$

For this survey, the minimum sample size was 263 surveys. The data collection for this CHNA yielded a total of 358 usable responses, exceeding the confidence interval threshold.

## Survey Distribution and Data Collection

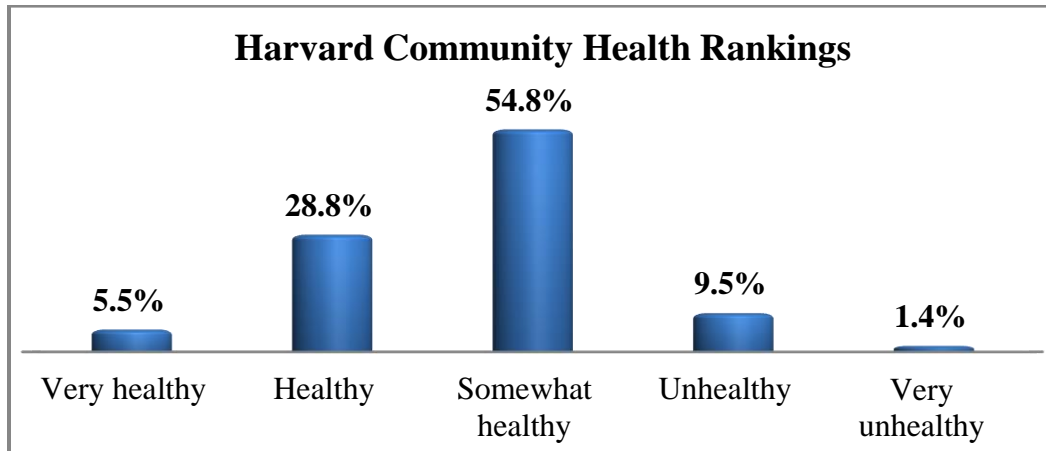
We distributed surveys using three approaches:

1. Mail survey: we acquired a mailing list from the U.S. Postal Service for the 60033 zip code, and sent mail surveys to a sample of these households
2. Online survey: a link to the survey in both English and Spanish was promoted in the Mercyhealth Health News online newsletter, the Mercyhealth McHenry Facebook page, and the Mercyhealth Wire (internal newsletter)
3. In-person survey distribution: paper surveys were hand delivered to the third grade class families of Harvard's Crosby Elementary School, various businesses, churches, and charitable organizations

## Perceptions of Community Health Issues and Factors

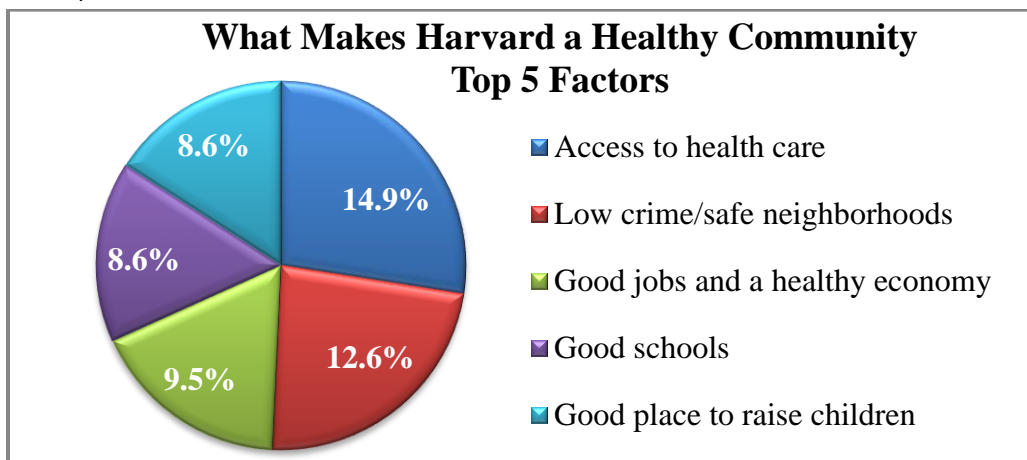
### Overall Health of the Community

Survey participants were asked to rate the overall health of the Harvard community. 54.8% rated Harvard as “somewhat healthy,” while 28.8% rated Harvard as “healthy.”



Source: 2020 Harvard CHNA Survey Response Data

The survey asked respondents “what do you think are the five factors that make a healthy community?” Access to health care was the primary answer chosen by 14.9% of respondents., followed by low crime/safe neighborhoods (12.6%), good jobs and a healthy economy (9.5%), and good schools and good place to raise children (8.6% each).



Source: 2020 Harvard CHNA Survey Response Data

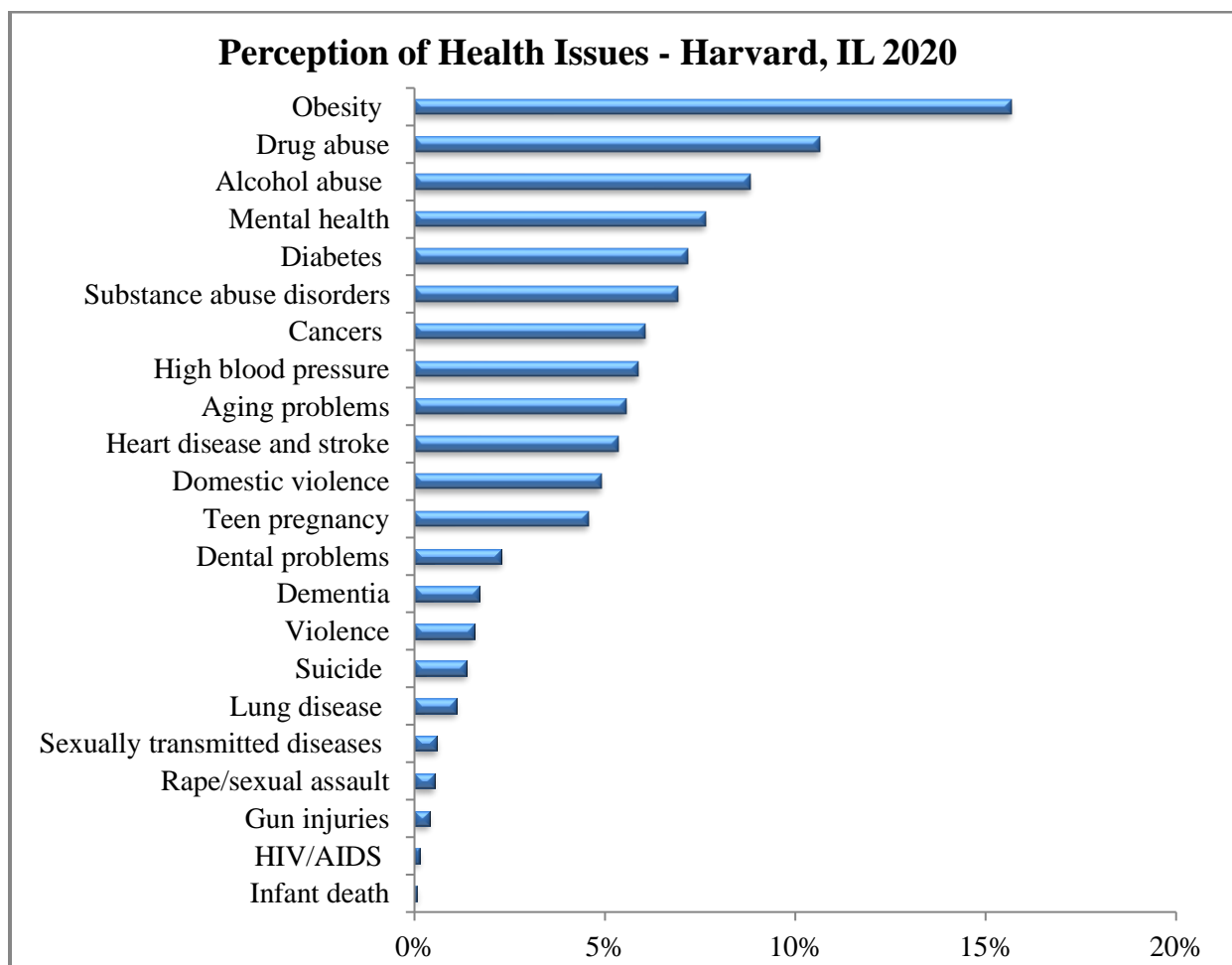


### Health Problems in the Community

The survey asked respondents to choose the top five health problems in their community from on a list of 23 options. Participants ranked obesity as the top health problem, followed by drug and alcohol abuse..

Top 5 Harvard Community Health Problems	
Obesity	15.7%
Drug Abuse	10.6%
Alcohol Abuse	8.8%
Mental Health	7.6%
Diabetes	7.2%

Source: 2020 Harvard CHNA Survey Response Data



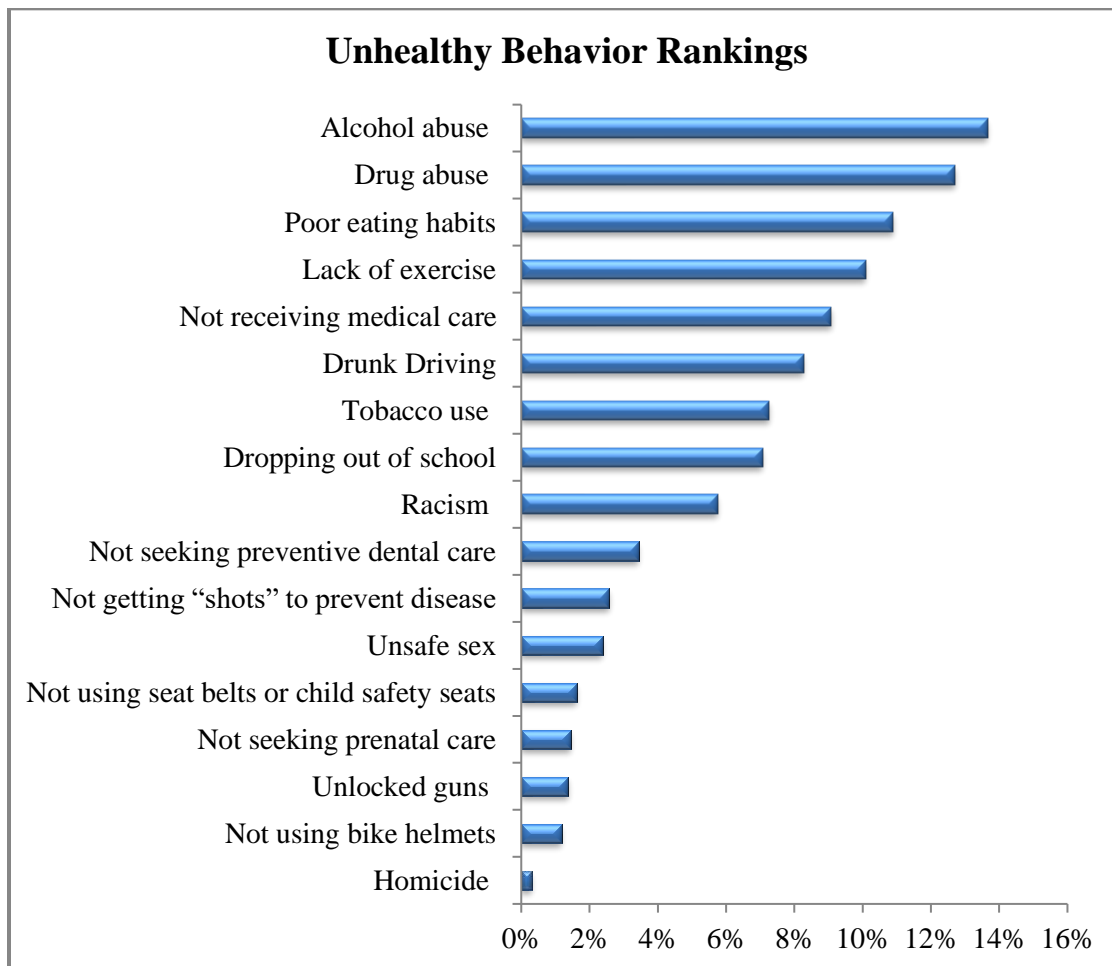
Source: 2020 Harvard CHNA Survey Response Data

### Perceptions of Unhealthy Behaviors

Respondents were asked to choose the top five most concerning risky behaviors in Harvard from a list of 18 choices. Alcohol abuse was ranked number one, followed by drug abuse, drunk driving, poor eating habits, and lack of exercise.

Top 5 Unhealthy Behaviors	
Alcohol Abuse	13.7%
Drug Abuse	12.7%
Poor Eating Habits	10.9%
Lack of Exercise	10.1%
Not Receiving Medical Care	9.1%

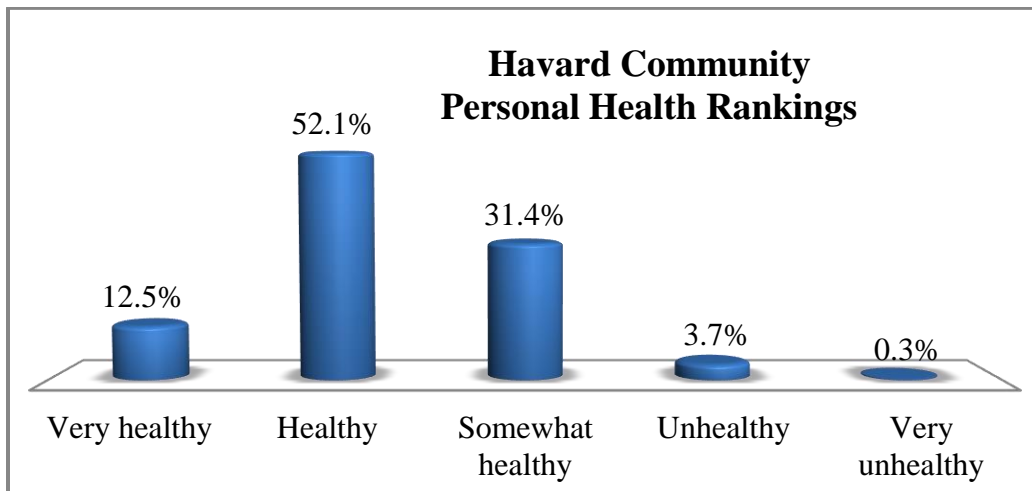
Source: 2020 Harvard CHNA Survey



Source: 2020 Harvard CHNA Survey Response Data

### Perceptions of Wellbeing

Participants were asked, “how would you rate your own personal health?” Over half of the survey participants chose “healthy,” and more than 30% chose “somewhat healthy.”



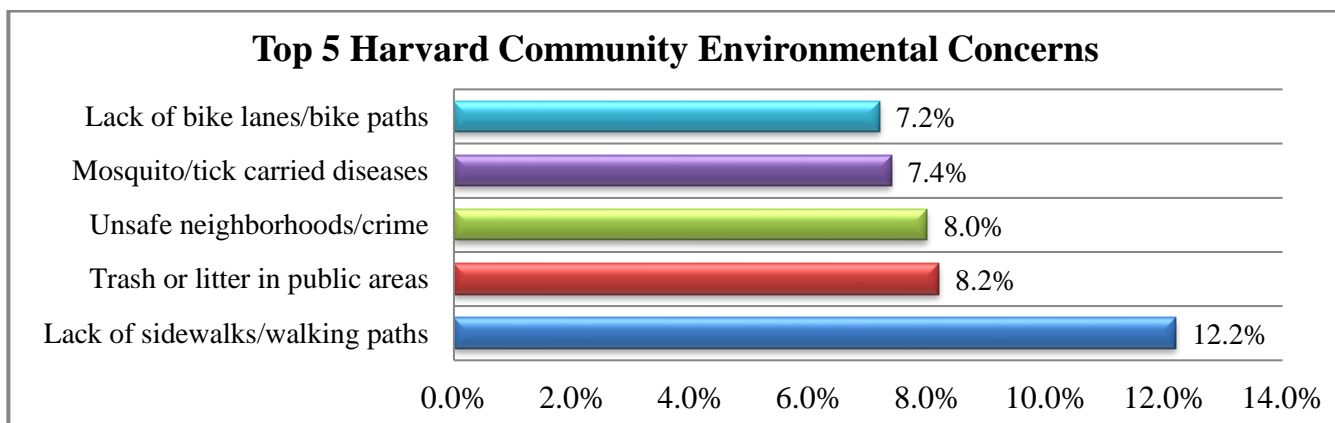
Source: 2020 Harvard CHNA Survey Response Data

Respondents were asked about health problems or concerns in their households. Respondents ranked exercising/fitness as the top household health concern, followed by eating well/nutrition and managing weight.

Top 5 Household Health Concerns	
Exercising/fitness	12.4%
Eating well/nutrition	11.5%
Managing weight	10.5%
Stress management	8.7%
Access to safe, affordable places to exercise	7.5%

Source: 2020 Harvard CHNA Survey

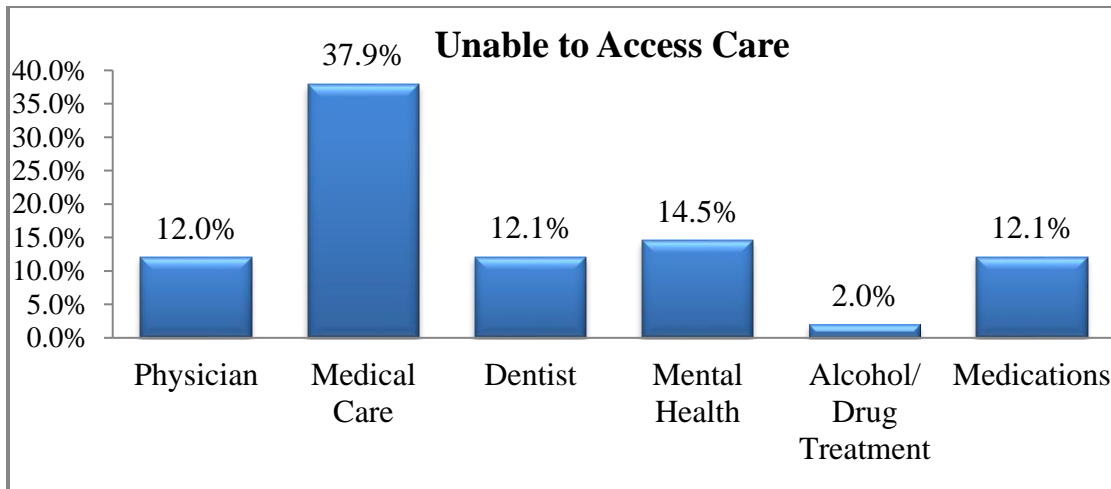
Survey respondents were asked to choose the top five most concerning environmental issues from a list of 22 options. Lack of sidewalks/walking paths ranked number one.



Source: 2020 Harvard CHNA Survey

## Access to Medical Care

Survey respondents were asked, “was there a time when you needed care but were not able to get it?” Access to various types of health care was assessed.



Source: 2020 Harvard CHNA Survey

### Medical Care

Respondents selected “can’t afford to pay for a doctor’s visit” and “feel like I don’t need one” as the top reasons they do not have a primary physician or seek medical care. When asked why they do not have health insurance, “too expensive” and “not qualified for medical assistance” were listed as the primary reasons. Access to health care is greatly diminished when residents are uninsured and lack a primary care provider.

### Dental Care

Respondents selected “can’t afford to pay for a dental visit” and “feel like I don’t need one” as primary reasons they do not have a regular dental provider. When asked why they do not have dental insurance, “too expensive” and “feel like you don’t need dental insurance” were selected as the primary reasons.

### Mental Health

14.5% of respondents reported that in the past 12 months, they or someone in their household needed to see a mental health professional but could not.

### Alcohol or Drug Addiction Treatment

2.0% of respondents reported that in the past 12 months, they or someone in their household needed drug or alcohol addiction treatment but could not access it.

### Medications

12.1% of respondents reported that in the past 12 months, they or someone in their household needed medications but could not get them. The primary reason selected was “too expensive” followed by “specific medication I needed was not available.”

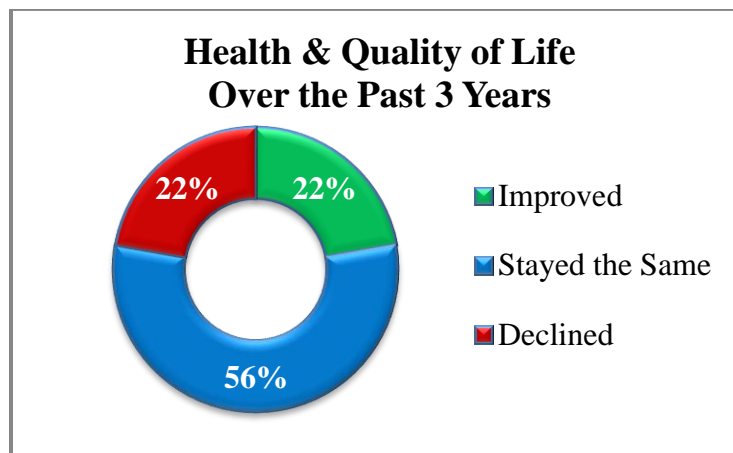
## Key Informant Interviews

Key informant interviews were conducted among leaders in the Harvard community. 18 stakeholders were contacted including school leaders, business owners, religious leaders, city officials, community program leaders to police and fire officials. Nine leaders agreed to be interviewed. The purpose of interviewing this specific group of individuals was to gather insight from those members of the community that are directly involved in the care and wellbeing of the community and its residents.

Key informants were asked several subjective questions. Answers varied based on the participant's occupation/role in the community. Though there were large variances in answers, four barriers emerged repeatedly among respondent responses: access to transportation, lack of employment opportunities, low income, and language barriers.

### Overall Health of the Community

When asked to rate the overall health and quality of life in Harvard over the past three years, over two-thirds of respondents agree that the health and quality of life has stayed the same or improved, which they attributed to the critical access hospital (MHH) and initiatives led by the new mayor and other new community leaders within the school district.



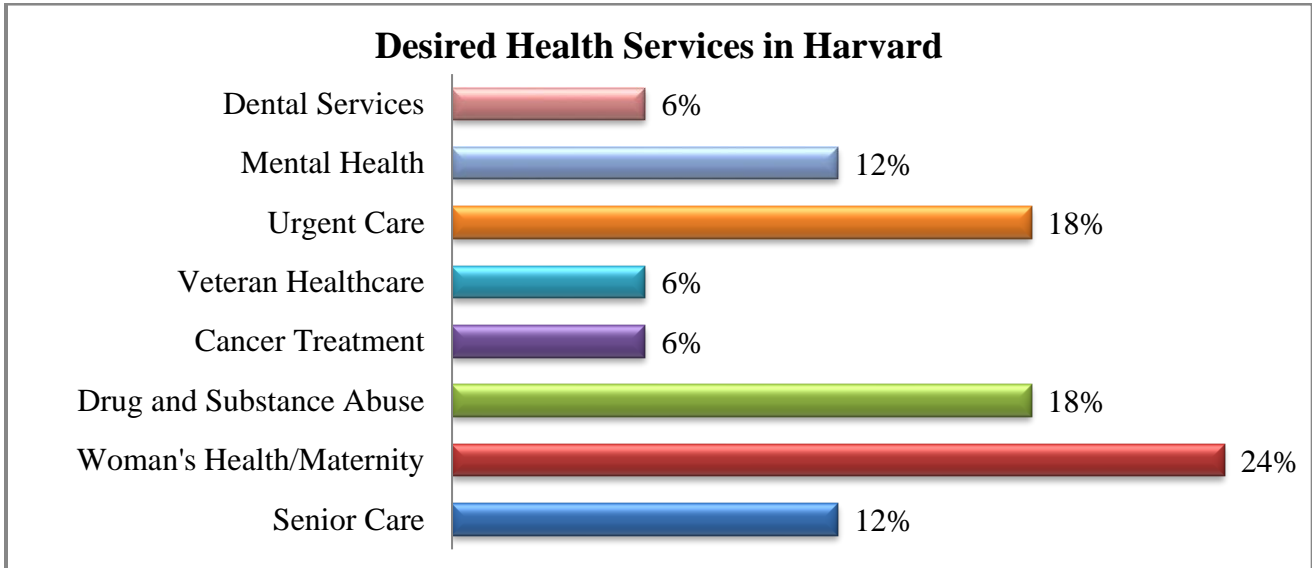
Source: 2020 Harvard CHNA Key Informant Survey

### Community Resources

Key informants were asked to describe resources in Harvard that promote health and improve quality of life. Community resources mentioned included:

- MHH and associated clinics
- McRide Dial-A-Ride Service
- Pioneer Center for Human Services
- A Way Out
- Enterprise zone created by mayor
- Rosecrance counseling program in school district
- Community Health Dental Services

Key informants were asked to describe health services that would improve the health and quality of life in Harvard. Women’s health care services, urgent care, mental health, and drug and substance abuse treatment were the top critical health care needs and services described.



Source: 2020 CHNA Key Informant Survey

## Prioritization of Health-Related Issues

By combining community perceptions with the data outlined previously in this assessment, and taking community resources into account, we can prioritize the most important health concerns in the community.

MHH representatives considered the above findings surrounding health needs in McHenry County to identify what we consider to be the most significant health needs.

The significant health needs are as follows:

1. Improve the general health of individuals living in the primary service area
2. Improve the health status of individuals with chronic illnesses and promote healthy lifestyles through educational offerings
3. Improve the health of patients with specific needs including: mental health, substance abuse, and geriatric health needs
4. Reduce likelihood of opioid addiction beginning and/or continuing
5. Response to COVID-19 to effectively care for the needs of our community and to ensure up-to-date education and preparedness during a pandemic (the pandemic began after the survey and key informant interviews were completed, and was determined by MHTC to be a priority for the community)

All significant health needs identified above are addressed in the implementation plan for this CHNA, which details how MHH intends to respond to these needs over the next three years (Appendix A). The Implementation Plan in Appendix A was approved by the Mercyhealth Board of Directors on June 17, 2020.

## Appendix A



## Appendix B

### Actions Related to Mercyhealth Hospital & Medical Center – Harvard 2017-20 Implementation Plan

#### General Health

**Strategy #1:** *Improve the general health of individuals living in the primary service area.*

#### Access to Care

Continue to develop and offer various access sites and venues for primary care (adult and pediatric) medical services

- Mercyhealth Services currently offered in Harvard:
  - Inpatient:
    - Critical access hospital
    - Inpatient rehabilitation
    - Family medicine
    - Laboratory service
    - Diabetes therapies
    - Occupational health & medicine
    - Pediatrics
    - Weight management
    - Cardiology
    - Gastroenterology
    - General surgery
    - Pulmonology
    - Vascular surgery
    - Ophthalmology
    - Podiatry
    - Physical therapy
    - Occupational therapy
    - Hospice
    - Home medical equipment & supplies
    - Treatment coordination
  - Respite care
  - Long term skilled nursing care
  - Sub-acute rehab therapies
- **Mercyhealth Hospital and Medical Center – Crystal Lake, an 11 bed critical access hospital is scheduled to break ground in 2021**
  - **Anticipated opening in 2023**

- Outpatient
  - Family medicine
  - Laboratory services
  - Diabetes therapies
  - Occupational health & medicine
  - Pediatrics
  - Weight management
  - Cardiology
  - Gastroenterology
  - General surgery
  - Sleep medicine
  - Pulmonology
  - Ophthalmology
  - Heart & vascular medicine
  - Podiatry
  - Physical therapy
  - Occupational therapy
  - Pain management
  - Home health
  - Hospice
  - Home medical equipment & supplies

#### Health Improvement and Maintenance

Proactively manage Harvard's Medicare population through ACO initiatives focused on preventative care.

- Conduct outreach for Medicare Annual Wellness Visits

- Other screening and compliance measures

Promote the use of MyChart patient portal as a communication vehicle/tool for patients and physicians to enhance access and compliance

- Monitor patient activation rate
  - FY'16: 25.1%
  - FY'19: 42.1%

Continue to offer a wide array of community educational health and screening programs

- Community health education and screenings:
  - Body image education at local high schools
  - Minimum of four free blood pressure screening clinics per year
  - Stroke education programs
  - Heart health programs
  - Nutritional education
  - Health care career development with local high schools
  - Mercyhealth open house/health fair
  - Community health fair at local high school

Provide community support through monetary donations, volunteer time and donations of various goods

- Donations
  - PADS Shelter
  - Giving Tree
  - Hats & Mittens Drive
  - Local food pantries
  - Community Education Foundation
  - Harvard Chamber of Commerce
  - Society of St. Vincent De Paul

Continue partnering with the Community Health Partnership of Illinois Harvard Clinic

- Clinic utilization and increased low to no cost health care services for all residents of Harvard
  - As of 2020, Mercyhealth has continued to be in regular communication with Community Health Partnerships of Illinois to ensure both healthcare providers are serving the community and addressing the need for low to no cost health care services for the residents of Harvard

### **Chronic Disease Prevention**

***Strategy 2: Improve the health status of individuals with chronic illnesses and promote healthy lifestyles through educational offerings***

### ***Cardiovascular, Respiratory and Diabetic Chronic Illnesses***

Obesity education

- Attend and participate in community health fairs in the area
  - Partner with community organizations to educate the public and address these issues

- Between June 2016 and July 2020, 2,273 events were attended as part of Community-Based Clinics and Health Fair Screenings through Mercyhealth with a total of 332,808 participants

#### Hypertension and high cholesterol awareness and education

- Free blood pressure checks and educational materials at Mercyhealth locations and health fairs
  - Between June 2016 and July 2020, 2,273 events were attended as part of Community-Based Clinics and Health Fair Screenings with a total of 332,808 participants
- Participate in National Cholesterol Education Month

#### **Health of Patient's with Specific Needs**

**Strategy #3:** *Improve the health of patient's with specific needs, including: mental health, substance abuse and geriatric health needs.*

#### ***Mental Health***

- Provide referrals to the Mercy Options Program
- Partner with community programs for additional services
  - Currently working with NAMI to establish on site program and services

#### ***Geriatric Services***

- Provide education and referrals to community resources
- Partner with the Harvard Senior Center for programs and education
  - Partner on the "Walk with Ease" campaign

## Appendix C

Mercyhealth is conducting a Community Health Assessment survey to better understand the health concerns and needs in Harvard. We invite anyone that lives, works, learns, or plays in Harvard to take the survey. The information obtained from the Community Health Assessment will be used in the development of an action plan to help ensure that Harvard reaches its full health potential.

We encourage you to take this survey online at the following link:

English: <https://www.surveymonkey.com/r/chnaharvard>

Española: <https://www.surveymonkey.com/r/espchnaharvard>

If you are unable to complete the survey online, please send the completed survey by mail in the enclosed envelope.



### Demographics

1. What is your zip code? \_\_\_\_\_
  2. Which category below includes your age?
    - Under 18
    - 18-24
    - 25-39
    - 40-54
    - 55-64
    - 65-74
    - 75 or older
  3. What race/ethnicity best describes you? (Please choose only one)
    - White (Non-Hispanic)
    - Black/African American (Non-Hispanic)
    - Hispanic/Latino
    - American Indian/Alaska Native (Non-Hispanic)
    - Asian (Non-Hispanic)
    - Two or more races
    - If not listed, please self-identify \_\_\_\_\_
  4. What is your current marital status?
    - Single/never married
    - Married
    - Separated
    - Divorced
    - Widowed
    - Live with partner
  5. What is your highest level of education?
    - 8th grade or less
    - Some High School
    - High School/GED
    - Some College
    - Associate's Degree/Technical school graduate
    - Bachelor's Degree
    - Master's Degree
    - Advanced Degree (e.g. Ph.D., M.D., etc.)
  6. What is your current employment status?
    - Employed- Full-time
    - Employed- Part-time
    - Out of work and looking for work
    - Out of work but not currently looking for work
    - Unable to work
    - Retired (*continued on next column*)
  - Student
  - Homemaker
  - Military
  - Other \_\_\_\_\_
  7. What is your annual household income?
    - Under \$14,999
    - \$15,000 - \$24,999
    - \$25,000 - \$44,999
    - \$45,000 - \$64,999
    - \$65,000 - \$94,999
    - \$95,000 - \$134,999
    - Over \$135,000
  8. How many people live in your household?

<input type="checkbox"/> Live alone	<input type="checkbox"/> 2
<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 5	<input type="checkbox"/> 6
<input type="checkbox"/> 7	<input type="checkbox"/> 8 or more
  9. How many people in your household are under the age of 18?

<input type="checkbox"/> No one in my household is under the age of 18	
<input type="checkbox"/> 1	<input type="checkbox"/> 2
<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 5	<input type="checkbox"/> 6
<input type="checkbox"/> 7	<input type="checkbox"/> 8 or more
  10. How do you describe yourself? (Please choose only one)
    - Male
    - Female
    - Trans Male
    - Trans Female
    - Gender Nonconforming
    - If not listed, please self-identify \_\_\_\_\_
  11. What is your orientation? (Please choose only one)
    - Heterosexual or straight
    - Gay
    - Lesbian
    - Bisexual
    - If not listed, please self-identify \_\_\_\_\_
- ### Community Health Questions
12. How would you rate the overall health of Harvard?
    - Very healthy (*continued on other side*)

- Healthy
- Somewhat healthy
- Unhealthy
- Very unhealthy

13. What do you think are the five (5) factors that make a healthy community? (Check your top five)

- Good place to raise children
- Low crime/safe neighborhoods
- Low level of child abuse
- Good schools
- Access to health care
- Access to dental care
- Parks and recreation
- Clean environment
- Affordable housing
- Good jobs and a healthy economy
- Strong family life
- Healthy behaviors and lifestyles
- Low death and disease rates
- Religious or spiritual values/support
- Other \_\_\_\_\_

14. What are the top five (5) health problems in your community? (Check your top five)

- |  |  |
|--|--|
| <input type="checkbox"/> Alcohol abuse | <input type="checkbox"/> Aging problems      |
| <input type="checkbox"/> Cancers       | <input type="checkbox"/> Dental problems     |
| <input type="checkbox"/> Diabetes      | <input type="checkbox"/> Dementia            |
| <input type="checkbox"/> Drug abuse    | <input type="checkbox"/> Gun injuries        |
| <input type="checkbox"/> HIV/AIDS      | <input type="checkbox"/> Infant death        |
| <input type="checkbox"/> Lung disease  | <input type="checkbox"/> Mental health       |
| <input type="checkbox"/> Obesity       | <input type="checkbox"/> Rape/sexual assault |
| <input type="checkbox"/> Suicide       | <input type="checkbox"/> Teen pregnancy      |
| <input type="checkbox"/> Violence      | <input type="checkbox"/> Domestic violence   |
- Heart disease and stroke
  - High blood pressure
  - Sexually transmitted diseases (STDs)
  - Substance abuse disorders
  - Other \_\_\_\_\_

15. What are the five (5) most concerning risky behaviors in your community? (Check your top five)

- Alcohol abuse
- Dropping out of school
- Drug abuse
- Drunk Driving
- Homicide
- Lack of exercise
- Racism
- Poor eating habits
- Tobacco use
- Unsafe sex
- Unlocked guns
- Not receiving medical care
- Not seeking preventative dental care
- Not using seat belts or child safety seats
- Not getting "shots" to prevent disease
- Not using bike helmets (continued on next column)

- Not seeking prenatal care
- Other \_\_\_\_\_

16. What are the five (5) environmental issues that concern you the most in your community? (Check your top five)

- Trash or litter in public areas
- Lack of handicapped accessible community resources
- Lack of sidewalks/walking paths
- Lack of bike lanes/bike paths
- Lack of safe places for recreation/parks
- Unsafe/unclean drinking water
- Radon
- Septic systems not working
- Household hazardous waste disposal
- Unsafe neighborhoods/crime
- Mosquito/tick carried diseases
- Unsafe/abandoned buildings
- Unsafe/unsanitary housing
- Lead paint hazards
- Groundwater pollution from agriculture
- Secondhand smoke
- Lack of safe swimming beaches
- Overdevelopment/too much new development
- Unsafe/unclean river, creek, and lake water
- Unsafe roads/highways
- Unsafe food
- Other \_\_\_\_\_

17. What healthcare, health education, health services or programs would you like to see offered in your community? (Check all that apply)

- None- we have everything we need
- Don't know
- Healthcare resources for the uninsured/underinsured
- Exercise resources
- Nutrition education
- Wellness programs
- Senior services
- Parenting services
- Health education to prevent chronic conditions (e.g. diabetes, high blood pressure, heart conditions asthma, etc.)
- Affordable insurance options
- Mental health services
- Dental services
- Alcohol and drug abuse services
- Other \_\_\_\_\_

#### Health Condition Questions

18. How would you rate your own personal health?

- Very healthy
- Healthy
- Somewhat healthy
- Unhealthy
- Very unhealthy

(Continued on next page)

19. Which of the following are health problems or concerns for you or someone in your household? (Check all that apply)

- Eating well/nutrition
- Access to healthy, affordable food
- Exercising/fitness
- Access to safe, affordable places to exercise
- Access to medical equipment & supplies
- Access to home health services
- Managing weight
- Access to affordable dental care
- Access to affordable health care
- Getting flu shots and other vaccines
- Quitting smoking
- Secondhand smoke
- Alcohol use/abuse
- Depression or other mental health concerns
- Stress management
- Access to mental health treatment
- Access to alcohol and other drug treatment
- Bullying
- Domestic violence
- Rape/sexual abuse
- Anger management
- Access to affordable, safe child care
- Access to affordable, safe elder care
- Caring for family members with disabilities
- Preventing pregnancy
- Preventing sexually transmitted diseases (STDs)
- Preparing for an emergency disaster
- Other \_\_\_\_\_

20. Do you have health insurance?

- Yes
- No (If no, go to #22)

21. Are you able to see a healthcare provider (doctor, nurse practitioner, physician's assistant, nurse) that accepts your insurance?

- Yes
- No

22. In the past 12 months, have you seen a healthcare provider (doctor, nurse practitioner, physician's assistant, nurse) that you consider your regular provider?

- Yes
- No

23. If you don't have a regular healthcare provider (doctor, nurse practitioner, physician's assistant, nurse), tell us why: (Check all that apply)

- Not applicable (N/A)
- Don't know how to find a healthcare provider
- No healthcare provider is close to where I live
- Co-pay/deductible too high
- Can't afford to pay for a doctor's visit
- Can't get an appointment

- Language/cultural barriers
- Feel like I don't need one
- Other \_\_\_\_\_

24. In the past 12 months, have you, or someone in your household, used an Emergency Room or Urgent Care because you could not see a physician?

- Yes
- No

25. If you don't have health insurance, tell us why: (Check all that apply)

- Not applicable (N/A)
- Too expensive
- Place(s) where you work does not offer it
- Not qualified for the plan where you work
- Not qualified for medical assistance
- Don't know where/how to sign up for health insurance
- Feel like you don't need health insurance
- Other \_\_\_\_\_

26. Do you have dental insurance?

- Yes
- No (If no, go to #28)

27. Are you able to see a dental provider that accepts your insurance?

- Yes
- No

28. If you don't have a regular dental provider, tell us why: (Check all that apply)

- Not applicable (N/A)
- Don't know how to find a dental provider
- No dental provider is close to where I live
- No dental providers accept my insurance
- Can't afford to pay for a dental visit
- Can't get an appointment
- Language/cultural barriers
- Feel like I don't need one
- Other \_\_\_\_\_

29. If you don't have dental insurance, tell us why: (Check all that apply)

- Not applicable (N/A)
- Too expensive
- Place(s) where you work does not offer it
- Not qualified for the plan where you work
- Not qualified for dental assistance
- Don't know where/how to sign up for dental insurance
- Feel like you don't need dental insurance
- Other \_\_\_\_\_

*(Continued on other side)*

30. In the past 12 months, was there a time when you, or someone in your household, needed to see a mental health professional, but could not?

- Yes
- No

31. In the past 12 months, was there a time when you or someone in your household needed alcohol or other drug treatment, but could not access it?

- Yes
- No

32. In the past 12 months, was there a time when you, or someone in your household, needed medications, but could not get them?

- Yes
- No

33. If you, or someone in your household, could not get the medications you needed, tell us why: (Check all that apply)

- Not applicable (N/A)
- Too expensive
- Could not get a prescription from a physician
- Language/cultural barriers
- Specific medication I needed was not available
- Lack of ride to pharmacy
- Inconvenient pharmacy hours
- Do not have a pharmacy
- Other \_\_\_\_\_

34. Do you have anything else you would like us to know?

On behalf Mercyhealth we would like to thank you for taking the time to respond to the survey. Your participation is greatly appreciated.

Please return this survey to:

Planning and Business Development  
2400 N. Rockton Ave.  
Rockford, IL 61103



Mercyhealth está realizando una encuesta de Evaluación de Salud Comunitaria para entender mejor las preocupaciones y necesidades de salud en Harvard. Invitamos a cualquier persona que viva, trabaje, estudie, o juegue en Harvard a completar la encuesta. La información obtenida de la encuesta de Evaluación de Salud Comunitaria será utilizada para elaborar un plan de acción para asegurar que Harvard alcance todo su potencial de salud comunitaria.

Le recomendamos que realice esta encuesta por internet usando el siguiente enlace:

Español: <https://www.surveymonkey.com/r/espchnaharvard>

Inglés: <https://www.surveymonkey.com/r/chnaharvard>

Si no puede completar la encuesta por internet, envíe la encuesta completa por correo en el sobre adjunto.

#### Demografía

1. ¿Cuál es su código postal? \_\_\_\_\_

2. ¿Qué categoría abajo incluye su edad?

- Menor de 18
- 18-25
- 26-40
- 41-55
- 56-65
- 66-75
- 75 o Mayor

3. ¿Qué raza/etnia le describe mejor a usted? (Por favor, escoja sólo una opción)

- Blanca (No hispana)
- Negra/Afroamericana (No hispana)
- Hispana/Latina
- Nativo Americana/Nativo de Alaska (No hispana)
- Asiática (No hispana)
- Dos razas o más
- Si no aparece su raza/etnia en la lista, por favor identifiqúese \_\_\_\_\_

4. ¿Cuál es su estado civil?

- Soltero/a/nunca se ha casado
- Casado/a
- Separado/a
- Divorciado/a
- Viudo/a
- Vivo con mi pareja

5. ¿Cuál es el nivel más alto de su educación?

- 8° Grado o menos
- Escuela Secundaria Parcial
- Escuela Secundaria/GED
- Universidad Parcial
- Grado de Asociado/Graduado de escuela técnica
- Grado de Licenciatura
- Maestría
- Grado Avanzado (e.j. Ph.D., M.D., etc.)

6. ¿Cuál es su estado laboral?

- Empleado - Tiempo completo
- Empleado - Medio tiempo
- Sin trabajo y buscando trabajo
- Sin trabajo y no buscando trabajo
- Incapacitado para trabajar
- Jubilado

- Estudiante
- Ama de Casa  Militar
- Otro \_\_\_\_\_

7. ¿Cuál es el ingreso anual de su hogar?

- Menos de \$14,999
- \$15,000 - \$24,999
- \$25,000 - \$44,999
- \$45,000 - \$64,999
- \$65,000 - \$94,999
- \$95,000 - \$134,999
- Más de \$135,000

8. ¿Cuántas personas viven en su hogar?

- Vivo solo  5
- 2  6
- 3  7
- 4  8 o más

9. ¿Cuántas personas en su hogar tienen menos de 18 años?

- Nadie en mi hogar tiene menos de 18 años
- 1  5
- 2  6
- 3  7
- 4  8 o más

10. ¿Cómo se describe? (Por favor, escoja sólo una opción)

- Hombre
- Mujer
- Hombre Transgénero
- Mujer Transgénero
- Género no conforme
- Si no aparece, por favor identifiqúese \_\_\_\_\_

11. ¿Cuál es su orientación? (Por favor, solo escoja una opción)

- Heterosexual
- Hombre Homosexual
- Lesbiana
- Bisexual
- Si no aparece, por favor identifiqúese \_\_\_\_\_



### Preguntas de Salud Comunitaria

12. ¿Cómo calificaría la salud de Harvard en general?

- Muy Sana
- Sana
- Más o Menos Sana
- Mal
- Muy Mal

13. ¿Cuáles piensa usted que son los cinco (5) factores que contribuyen a una comunidad sana? (Marque sus primeras cinco opciones)

- Buen lugar para criar niños
- Criminalidad baja/ Vecindarios seguros
- Nivel bajo en el maltrato de niños
- Buenas escuelas
- Acceso al cuidado de salud
- Acceso al cuidado dental
- Parques y recreación
- Medio ambiente limpio
- Vivienda económica
- Buenos trabajos y una economía sana
- Vida familiar sólida
- Comportamiento y estilo de vida saludables
- Índice de muerte y enfermedad baja
- Valores religiosos o espirituales/ apoyo
- Otro \_\_\_\_\_

14. ¿Cuáles son los cinco (5) problemas principales de salud en su comunidad (Marque sus primeras cinco opciones)

- Alcoholismo
- Cáncer
- Diabetes
- Drogadicción
- VIH/SIDA
- Enfermedad de los pulmones
- Obesidad
- Suicidio
- Violencia
- Muerte infantil
- Enfermedad del corazón y derrame cerebral
- Presión arterial alta
- Enfermedades de transmisión sexual
- Trastorno por el abuso de sustancias
- Otro \_\_\_\_\_
- Problemas de envejecimiento
- Problemas dentales
- Demencia
- Heridas por pistola
- Muerte infantil
- Salud mental
- Violación/agresión sexual
- Embarazo en adolescentes
- Violencia doméstica

15. ¿Cuáles son los cinco (5) comportamientos riesgosos en su comunidad? (Marque sus primeras cinco opciones)

- Alcoholismo
- Abandonar la escuela
- Drogadicción
- Manejar bajo los efectos del alcohol
- Homicidio
- Falta de ejercicio
- Racismo

- Malos hábitos para comer
- Uso de tabaco
- Sexo Inseguro
- Armas de fuego no guardadas
- No recibir cuidado médico
- No buscar atención dental preventiva
- No utilizar cinturones de seguridad o asientos de seguridad para niños
- No recibir vacunas para prevenir enfermedades
- No utilizar cascos para bicicletas
- No buscar atención médica prenatal
- Otro \_\_\_\_\_

16. ¿Cuáles son los cinco (5) problemas del medio ambiente que más le preocupan en su comunidad? (Marque sus primeras cinco opciones)

- Basura en áreas públicas
- Falta de acceso a los recursos comunitarios para los discapacitados
- Falta de banquetas/senderos
- Falta de carriles y senderos para bicicletas
- Falta de lugares seguros de recreación/parques
- Agua para beber contaminada/sucia
- Radón
- Sistemas sépticos que no funcionan
- Eliminación de desechos domésticos peligrosos
- Vecindarios inseguros/crimen
- Enfermedades transmitidas por mosquitos/garrapatas
- Edificios inseguros/abandonados
- Vivienda insegura/ antihigiénica
- Peligro por pintura a base de plomo
- Contaminación de agua subterránea por agricultura
- Humo de segunda mano
- Falta de playas seguras para nadar
- Superdesarrollo/demasiada urbanización nueva
- Agua contaminada de ríos, arroyos y lagos
- Calles/Carretera inseguras
- Comida contaminada
- Otro \_\_\_\_\_

17. ¿Cuáles programas de atención médica, educación de salud o servicios de salud le gustaría que se ofrezcan en su comunidad? (Marque todas las que apliquen)

- Ninguno- tenemos todo lo necesario
- No sé
- Recursos de atención médica para los que no tengan seguro médico o con insuficiente cobertura médica
- Recursos para ejercicio
- Educación de nutrición
- Programas de bienestar
- Servicios para personas de la tercera edad
- Servicios para padres
- Educación de salud para prevenir condiciones crónicas (e.j. diabetes, presión arterial alta, condiciones del corazón, asma, etc.)
- Opciones económicas de seguro médico
- Servicios para la salud mental
- Servicios dentales

- Servicios para el alcoholismo y drogadicción
- Otro \_\_\_\_\_

### Preguntas sobre la Condición de Salud

18. ¿Cómo calificaría su propia salud?

- Muy sana
- Sana
- Más o menos sana
- Mal
- Muy mal

19. ¿Cuáles de los siguientes son problemas o preocupaciones de salud que usted o alguien en su casa tienen? (Marque todas las que apliquen)

- Comer bien/ nutrición
- Acceso a comida nutritiva y económica
- Ejercicio/ salud física
- Acceso a lugares seguros y económicos para hacer ejercicio
- Acceso a suministros y equipo médico
- Acceso a atención médica en el hogar
- Control de peso
- Acceso a atención dental económica
- Acceso a atención médica económica
- Recibir la vacuna contra la influenza y otras vacunas
- Dejar de fumar
- Humo de segunda mano
- Uso/abuso del alcohol
- Depresión u otras preocupaciones de salud mental
- Control de estrés
- Acceso a tratamiento de salud mental
- Acceso a tratamientos para el alcohol u otras drogas
- Acoso (Bullying)
- Violencia doméstica
- Violación/abuso sexual
- Manejo de la ira
- Acceso económico y seguro al cuidado de niños
- Acceso económico y seguro para el cuidado de ancianos
- Cuidar a familiares discapacitados
- Prevenir embarazo
- Prevenir enfermedades de transmisión sexual
- Prepararse para un desastre de emergencia
- Otro \_\_\_\_\_

20. ¿Tiene seguro médico?

- Sí
- No (Si "no" Salte al #22)

21. ¿Puede usted ir a un proveedor médico (doctor, enfermera en práctica avanzada, auxiliar médico, enfermera) que acepte su seguro médico?

- Sí
- No

22. ¿En los últimos 12 meses, ha ido usted a un proveedor (doctor, enfermera en práctica avanzada, auxiliar médico, enfermera) que usted considera ser su proveedor regular?

- Sí
- No

23. ¿Si no tiene un proveedor regular (doctor, enfermera en práctica avanzada, auxiliar médico, enfermera), díganos por qué: (Marque todas las que apliquen)

- No aplica
- No sé cómo encontrar un proveedor
- No hay proveedores cerca de donde yo vivo
- El co-pago o deducible es demasiado alto para mí
- No puedo pagar por una cita al doctor
- No puedo obtener una cita
- Hay barreras de idioma/cultura
- No creo que necesito uno
- Otro \_\_\_\_\_

24. ¿Durante los últimos 12 meses, usted, o alguien en su casa ha utilizado la sala de emergencias o cuidado urgente porque no pudo ver a un doctor?

- Sí
- No

25. Si no tiene seguro médico díganos por qué: (Marque todas las que apliquen)

- No aplica
- Demasiado costoso
- Lugar(es) donde trabajo no lo ofrece
- No califico para el plan de mi trabajo
- No califico para asistencia médica
- No sé dónde/cómo inscribirme para seguro médico
- Siento que no necesito seguro médico
- Otro \_\_\_\_\_

26. ¿Tiene seguro dental?

- Sí
- No (Si no, salte al #28)

27. ¿Puede usted ver a un proveedor dental que acepte su seguro?

- Sí
- No

28. Si no tiene un proveedor dental regular, díganos por qué: (Marque todas las que apliquen)

- No aplica
- No sé cómo encontrar un proveedor dental
- No hay un proveedor dental cerca de donde yo vivo
- No hay un proveedor dental que acepte mi seguro
- Una visita dental es demasiado costosa
- No puedo obtener una cita
- Hay barreras de idioma/cultura
- Siento que no necesito uno
- Otro \_\_\_\_\_

29. Si no tiene seguro dental díganos por qué: (Marque todas las que apliquen)

- No aplica
- Demasiado costoso
- El lugar(es) donde yo trabajo no lo ofrece
- No califico para el plan de mi trabajo
- No califico para asistencia dental
- No sé dónde/cómo inscribirme para seguro dental
- Siento que no necesito seguro dental
- Otro \_\_\_\_\_

30. ¿Durante los últimos 12 meses, usted o alguien en su casa necesitó ver a un profesional de salud mental pero no pudo?

- Sí
- No

31. ¿Durante los últimos 12 meses, usted o alguien en su casa necesitó tratamiento para la adicción a drogas o al alcohol pero no tuvo acceso?

- Sí
- No

32. ¿Durante los últimos 12 meses, usted o alguien en su casa necesitó medicamentos pero no los pudo obtener?

- Sí
- No

33. Si usted o alguien en su casa no pudo obtener sus medicamentos díganos por qué: (Marque todas las que apliquen)

- No aplica
- Demasiado costoso
- No pude obtener una receta de un doctor
- Había barreras de idioma/cultura
- El medicamento específico que necesitó no estuvo disponible
- No pude conseguir transportación a la farmacia
- Las horas de la farmacia son inconvenientes para mí
- No tengo una farmacia
- Otro \_\_\_\_\_

34. ¿Hay algo más que usted quiere que sepamos?

De parte de Mercyhealth nos gustaría darle las gracias por tomarse el tiempo de responder a esta encuesta. Agradecemos mucho su participación.

Por favor, regrese esta encuesta a:

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