



Public Health
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**Woodford County
Health Department**

FORCES OF CHANGE ASSESSMENT
FINAL REPORT

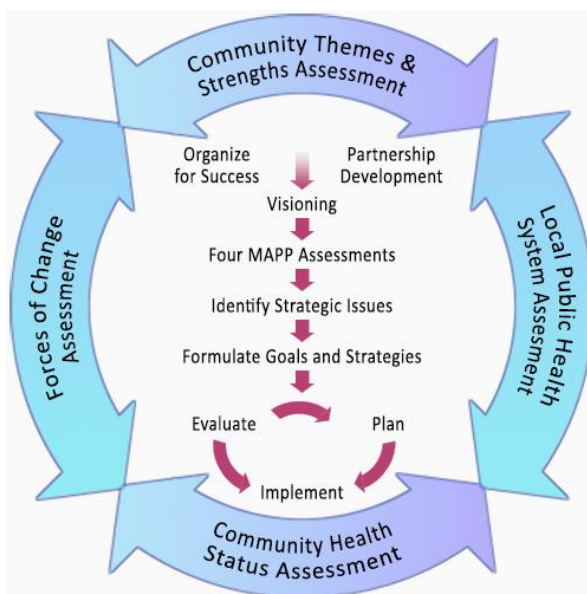
Introduction

The Tri-County MAPP Steering Committee is working to develop a Community Health Assessment (CHA) using the Mobilizing for Action through Planning and Partnership (MAPP) process. MAPP is a community-driven strategic planning framework that assists communities in developing and implementing efforts around the prioritization of public health issues and the identification of resources to address them as defined by the Ten Essential Public Health Services.

A community health needs assessment is a process that:

- Describes the state of health of the local population;
- Enables the identification of the major risk factors and causes of ill health; and
- Enables the identification of the actions needed to address these identified issues.

The MAPP process includes four assessment tools, as shown in the graphic below.



Forces of Change Assessment: Final Report

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Within the MAPP process, there are four assessment tools. One of these assessment tools is the Forces of Change Assessment (FOCA). The FOCA is aimed at identifying forces such as trends, factors, or events that are or will be influencing the health and quality of life of the community and the work of the local public health system.

- Trends are patterns over time, such as migration in and out of a community or a growing disillusionment with government.
- Factors are discrete elements, such as a community's large ethnic population, an urban setting, or the jurisdiction's proximity to a major waterway.
- Events are one-time occurrences, such as a hospital closure, a natural disaster, or the passage of new legislation.

During the FOCA, participants answer the following questions:

- What is occurring or might occur that affects the health of our community or the local public health system?
- What specific threats or opportunities are generated by these occurrences?

Process

On December 3, 2015 a group of 30 individuals participated in the FOCA.

A facilitator, Hillary Aggertt of Woodford County Health Department, walked the group through the following process:

1. The components of the FOCA were reviewed.
2. The large group worked on a SWOT analysis of the Community. Results are included in Appendix 1.
3. The large group worked on a SWOT analysis of the Public Health System. Results are included in Appendix 2.
4. The group was divided into 5 small groups by random order of registration. The 5 groups each started at a category of influence. Categories used in Woodford County included: Social, Economic, Legal, Political, Technical, Scientific and Ethical.
5. Each small group took their initial category, listed relevant forces of influence and accompanying threats and opportunities.
6. After a specified period of time, the small groups moved to the next group category, and reviewed a collection of notes from a different small group adding their own thoughts.
7. Each small group then proceeded to review the new collection of notes and added to them through 7 rotations.
8. The group came back together as a whole group to discuss each of the categories of influence and forces, threats, and opportunities.
9. Major themes for each category were identified.
10. The group voted on the more pressing forces of change for the public health system in the next three to five years.

Results

The FOCA started with two different SWOT analysis of Woodford County. This identified strengths, weakness, opportunities and threats in the county. The group was asked the following questions about the COMMUNITY and again for the Public Health System Assessment.

After each question, the group discussed and identified key areas relating to the community as a whole. It was suggested to remember to look at all three economic classes (poverty, middle class & wealth). **Appendix 1 (community) and Appendix 2 (public health system).**

Once the SWOT analyses were completed, the participants were randomly broken into groups to participate in a round robin exercise to look and analyze different categories including economic, ethical, legal, political, scientific, social, and technical topics. Participants were able to identify forces of change that affect the overall health and well-being of Woodford County residents. The following are some of the key points that were discussed:

Economics (Appendix 3):

- Unemployment/ layoffs
- Lack of state budget
- Financial wellness
- Lack of support for new businesses

Ethical (Appendix 4):

- Lack of confidentiality in healthcare (issues with knowing an individual)
- Balancing ethics
- Public perception of law enforcement
- Difference between medicinal and recreational drug use
- Abortion

Legal (Appendix 5):

- HIPPA
- Expensive costs of services
- Influence/Power of Insurance companies
- Affordable Care Act
- Lack of medical malpractice legislation

Political (Appendix 6):

- Lack of State Budget
- Political corruption
- Lack of progressive/forward thinking initiatives

Scientific (Appendix 7):

- Navigation of healthcare
- Technology
- Pharmacology abuse

Social (Appendix 8):

- Increased aging population
- Loss of funding for programs
- Access to healthcare

Technical (Appendix 9):

- Access to health information
- Access to telehealth opportunities
- Progressive changes in Technology
- Social media

Final list of Issues/Priorities (Appendix 10)**List of Attendees (Appendix 11)****Summary**

Once the assessment discussions were completed, the facilitator gave a brief overview of what each group discussed and created an overall list of topics/issues. Once this list was completed, each member voted on their top three topics to focus on to create change in the next three to five years. **(Appendix 10).**

Access overall was a huge concern but it was a contributing factor within multiple areas of focus. The top three issues at this time are mental health services, the lack of a state budget, and food access.

The State of Illinois has continued to have political issues with the current financial budget impasse and will continue to affect the local public health system and overall community in Woodford County. Local and state budget cuts have led to a decrease in funding for several human service providers including mental health. The unemployment rates have increased with major corporations like Mitsubishi, State Farm, and Caterpillar that have had significant layoffs and have impacted Woodford County residents. The lack of funding for mental health and other human service agencies will continue to be an overall issue for Woodford County and the State of Illinois.

Food access was identified due to the lack of healthy eating options in Woodford County. Several grocery stores have closed and this has limited the healthy food options for residents. The lack of local grocery stores in rural areas makes it extremely difficult to eat well, especially for families who have limited to no access to transportation and/or elderly. More and more

Woodford County residents are relying on food pantries and/or retail shops with limited food access.

Appendix 1: Community SWOT Assessment

Strengths	Weaknesses
<ul style="list-style-type: none"> - Access to Farming/ Agriculture - School system (education 1:1/athletics) - Strong work ethic - Access to local hospital - Safe neighborhoods (decreased violence) - Citizen support (small communities) - Multiple Faith Based options - Strong personal relationships - Access to multiple nursing homes - Strong family units - Strong Library community - Social Media (Increased access/communication) - Strong acceptance of values/traditions - Access to We Care 	<ul style="list-style-type: none"> - Large geographic size - Lack of access to Pedestrian trails - Limited Transportation - Stigma tied to different economic classes - Misuse of resources - Limited Economic Development opportunities - Navigation of healthcare - Lack of awareness - Strong Stereotypes/stigma when seeking personal care - Lack of resources - Limited access to care for disabled - Increased workload limited personal time/ increased unemployment - Lack of communities activities - Lack of Diversity - Lack of technology use - Social Media (mis-informed) - Awareness - Communication
Opportunities	Threats
<ul style="list-style-type: none"> - Increased Education - Increased Communication - Strong Family support - Access to Library services - Increase personal relationships in healthcare - Increase availability of Resources - Collaboration with partnering agencies/ community - 211 services to inform - Air quality/safe drinking water - Food safety - Extra-curricular activities - Increased knowledge - Economic Development - Awareness 	<ul style="list-style-type: none"> - Awareness, Access, Support, Communication - Perception of Need - Chronic health issues - Food access - Social media - Acceptance - Pedestrian Safety - Geographical divide - Seclusion - Lack of Funding - Trafficking - Increased suicides - Drug Use - Decreasing small business - Increase job duties

- Access	- Lack of dedicated time - Terrorism
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Appendix 2: Public Health System SWOT Assessment

Strengths	Weaknesses
<ul style="list-style-type: none"> - Transportation - Sensitivity to Rural areas - Access to local hospital - Access to food banks/pantries - Community Collaboration - Church assistance - Mental Health Services available - Agriculture opportunities - Continuum of Care (EMR, paper) 	<ul style="list-style-type: none"> - Change in demographics - Lack of budget/ funding - Layoffs/Hiring freezes - Outdated data - Increased Drug Use - Increased Crime - Community Denial - Affordable Healthcare (ACA) - Autonomy - Mental Health Services (Stigma/Stereotypes) - Lack of healthy food - Increased Medicaid recipients - Lack of Affordable daycare/pre-k - Increased Marijuana/vaping - Negative Perception of law enforcement - Perception of healthcare
Opportunities	Threats
<ul style="list-style-type: none"> - Increase in Higher Education - Mental Health - Developmental Disabilities - Planning for Disasters - Collaboration with Schools - Population growth (urban/rural) - Increase in healthcare providers - Policy change - Technology 	<ul style="list-style-type: none"> - Perception of Law Enforcement - Gang activity - Traffic Safety - Increased crime - Behavioral health - Awareness, Access - Technology - Urban vs. Rural (influence) - Hazardous Chemicals - Aging Population - Foodborne outbreaks - Obesity - Self- harm - Communicable Disease - Immunizations - Access to healthcare



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Appendix 3: Economics

Forces of Change (Trend, Events, Factors)	Threats Posed to the LPHS Or Community	Opportunities Created to the LPHS or Community	Score
•	• Lack of continuum of care due to incentives	• Third party billing	
• Job layoffs	<ul style="list-style-type: none"> • Stressors on services • Fewer resources • Stress on families <ul style="list-style-type: none"> ○ Domestic violence ○ Mental health ○ Substance abuse 	<ul style="list-style-type: none"> • Education <ul style="list-style-type: none"> ○ Services ○ Resources • Job re-training 	
• Lack of budget	<ul style="list-style-type: none"> • Mental health • Financial crisis • Personal choices <ul style="list-style-type: none"> ○ Essential needs 	<ul style="list-style-type: none"> • Communication changes • Increase in partnerships among services & agencies 	
• Financial wellness	<ul style="list-style-type: none"> • Substance abuse • School loans • Lack of resources • Mental health impact • Physical health impact • Job salaries 	<ul style="list-style-type: none"> • Education of debt • Management training in school • Education on stress management 	
• Lack of support for new businesses	<ul style="list-style-type: none"> • Not financially viable • No new jobs • Closure of existing businesses 	• Make financially viable policy changes	

Forces of Change (Trend, Events, Factors)	Threats Posed to the LPHS Or Community	Opportunities Created to the LPHS or Community	Score
<ul style="list-style-type: none"> Success stories of people who were temporarily using public aid to get back on their feet and have more success 	<ul style="list-style-type: none"> Increased crime Clients falsifying information Cycle of poverty among generations Stigma Entitlement Not applying their education to the workforce for better jobs 	<ul style="list-style-type: none"> Policy change to be able to educate citizens on budgeting issues Education that's applied to clients Bridges out of poverty connection <ul style="list-style-type: none"> New language to apply Share success stories to change stigma 	
<ul style="list-style-type: none"> Survival of basic needs 	<ul style="list-style-type: none"> Academic institutions misleading students about salary and job opportunities 		



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Appendix 4: Ethical

Forces of Change (Trend, Events, Factors)	Threats Posed to the LPHS Or Community	Opportunities Created to the LPHS or Community	Score
<ul style="list-style-type: none"> Lack of confidentiality Balancing financial/greed ethics and personal ethics Public perception of law enforcement 	<ul style="list-style-type: none"> Gossip/small town stigma Verifying services are used appropriately Law enforcement can be perceived by the public as "corrupt." 	<ul style="list-style-type: none"> Education about right to privacy and respect of that privacy. Prevent those that are scared to get help due to fear or negative connotations of assistance. 	
<ul style="list-style-type: none"> Difference between medicinal and recreational drug/marijuana use 	<ul style="list-style-type: none"> DUI's Misperceptions 	<ul style="list-style-type: none"> EDUCATION <ul style="list-style-type: none"> Strengths and weaknesses 	
<ul style="list-style-type: none"> Uncontrolled/unmonitored marijuana use 	<ul style="list-style-type: none"> Long-term effects Serving size/dosage Lack of regulations and policies 	<ul style="list-style-type: none"> EDUCATION 	
<ul style="list-style-type: none"> Selling of human remains 	<ul style="list-style-type: none"> Control Threats to human safety 	<ul style="list-style-type: none"> Advance medicine 	
<ul style="list-style-type: none"> Food production/agricultural rules and growing practices 	<ul style="list-style-type: none"> Availability and cost of produce and meats 		

Forces of Change (Trend, Events, Factors)	Threats Posed to the LPHS Or Community	Opportunities Created to the LPHS or Community	Score
<ul style="list-style-type: none"> Disparity based on income and access 	<ul style="list-style-type: none"> Delayed care High risk to the community Stress on services for health care providers 		
<ul style="list-style-type: none"> Faith community 	<ul style="list-style-type: none"> Faith communities and values 	<ul style="list-style-type: none"> Affect behaviors 	
<ul style="list-style-type: none"> Inequitable services and access 	<ul style="list-style-type: none"> Lower quality, or no service for some populations Mental health increases along with depression, suicide, violence, etc. 		
<ul style="list-style-type: none"> Organ donation 	<ul style="list-style-type: none"> Black-market for organ donation Money can influence the opportunity Threats to Planned Parenthood and other agencies 	<ul style="list-style-type: none"> More education on how to handle differences of opinions 	
<ul style="list-style-type: none"> Abortion 	<ul style="list-style-type: none"> Hot topic of what is ethical Controversy lying around this topic and stigma associated Agencies that are associated with this are judged 		



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Appendix 5: Legal

Forces of Change (Trend, Events, Factors)	Threats Posed to the LPHS Or Community	Opportunities Created to the LPHS or Community	Score
<ul style="list-style-type: none"> Influence/Power that Insurance Companies have 	<ul style="list-style-type: none"> Healthcare Fraud Less availability of healthcare and doctors in rural settings 	<ul style="list-style-type: none"> Create limits on influence/control that insurance companies have. 	
	<ul style="list-style-type: none"> Social hosting to minors Medical Marijuana and education about patient rights 	<ul style="list-style-type: none"> Creating a policy/ordinance change to prevent social hosting Partnerships with law enforcement 	
<ul style="list-style-type: none"> HIPPA/CIHE 	<ul style="list-style-type: none"> Difficulty sharing information 	<ul style="list-style-type: none"> EMR Coordinated Care Education of information that can be shared Educate clients on the importance of sharing information 	
<ul style="list-style-type: none"> Expensive costs of services 	<ul style="list-style-type: none"> Enforcement and Enactment of laws/changes 	<ul style="list-style-type: none"> Be more creative in finding funding sources. Coordinate, don't duplicate services 	
<ul style="list-style-type: none"> Obama Care 	<ul style="list-style-type: none"> Delay in services Lack of enough providers 	<ul style="list-style-type: none"> Education and assistance in plan selection. More people are insured and more agencies have the opportunity for expansion 	

Forces of Change (Trend, Events, Factors)	Threats Posed to the LPHS Or Community	Opportunities Created to the LPHS or Community	Score
<ul style="list-style-type: none"> Laws are constantly amended or changed 	<ul style="list-style-type: none"> Many laws are hard to understand in layman's terms Difficult to keep up with the changes due to constant updates and the amount of regulations can be overwhelming. 		
<ul style="list-style-type: none"> There is no cap on malpractice lawsuits and they can be abused 	<ul style="list-style-type: none"> Physicians are leaving the state Honest prescription companies 	<ul style="list-style-type: none"> Change current laws, set lawsuit cap and lobbying 	

Forces of Change (Trend, Events, Factors)	Threats Posed to the LPHS Or Community	Opportunities Created to the LPHS or Community	Score
<ul style="list-style-type: none"> Lack of State Budget 	<ul style="list-style-type: none"> Limited access to services, including mental health and addiction Loss of jobs Loss of overall services 	<ul style="list-style-type: none"> Adapt programs to use other funds Lobbying/advocacy/educate politicians 	
<ul style="list-style-type: none"> Election year 	<ul style="list-style-type: none"> Apathetic voters Citizens not voting Empty promises 	<ul style="list-style-type: none"> Voter awareness 	
<ul style="list-style-type: none"> Change of government power 	<ul style="list-style-type: none"> Uneducated voters Missed information Political party struggle <ul style="list-style-type: none"> We the party vs. we the people" Idealism Decisions are being made based on finances and not program employees 	<ul style="list-style-type: none"> Local candidate forums Idealism Greater political party collaboration New/different candidates 	
<ul style="list-style-type: none"> Create a budget based on prioritizing what services are necessary and what is no longer relevant 	<ul style="list-style-type: none"> Perceptions differing on Obamacare <ul style="list-style-type: none"> More services, but more expensive Grant stipulations are so strict that it hinders the purpose Women's Health/Planned Parenthood 	<ul style="list-style-type: none"> Mental health is rising and is needed New ways to find funding without grants What can others do? 	
<ul style="list-style-type: none"> County Board/City Government establishing policies 	<ul style="list-style-type: none"> Social hosting policy is unchanged and doesn't improve overall wellbeing of county 	<ul style="list-style-type: none"> Ordinance/policy updates Working towards health/safety 	
<ul style="list-style-type: none"> Progressive/forward thinking 	<ul style="list-style-type: none"> Misunderstanding health agencies and resources 	<ul style="list-style-type: none"> Supportive of community health 	



Forces of Change (Trend, Events, Factors)	Threats Posed to the LPHS Or Community	Opportunities Created to the LPHS or Community	Score
<ul style="list-style-type: none"> Navigation of healthcare 	<ul style="list-style-type: none"> Health knowledge Insurance Small hospitals consumed by larger entities Cumbersome 	<ul style="list-style-type: none"> Improved healthcare Access to modern healthcare Major hospitals in the area 	
<ul style="list-style-type: none"> Technology 	<ul style="list-style-type: none"> Internet access for most Misuse of resources (self-diagnosis) 	<ul style="list-style-type: none"> Better access 	
<ul style="list-style-type: none"> Pharmacology 	<ul style="list-style-type: none"> Abuse 	<ul style="list-style-type: none"> Better drugs 	
<ul style="list-style-type: none"> Genetically modified drugs 	<ul style="list-style-type: none"> Increased cost to patients <ul style="list-style-type: none"> Benefit vs. cost 		
<ul style="list-style-type: none"> Commercials/advertising 	<ul style="list-style-type: none"> Confuses mistrust of information Validate information Interferes with doctor being able to treat patient 	<ul style="list-style-type: none"> Choice Education 	



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Appendix 8: Social

Forces of Change (Trend, Events, Factors)	Threats Posed to the LPHS Or Community	Opportunities Created to the LPHS or Community	Score
<ul style="list-style-type: none"> • Increase in the aging population 	<ul style="list-style-type: none"> • Lower active support <ul style="list-style-type: none"> ○ Economics ○ Fewer resources • Decreasing structure of agriculture 	<ul style="list-style-type: none"> • Increase the active support by giving more time and resources 	
<ul style="list-style-type: none"> • Increase in refugee and immigrant population 	<ul style="list-style-type: none"> • Accommodations • Resources 	<ul style="list-style-type: none"> • Increased diversity 	
<ul style="list-style-type: none"> • Industry decrease 	<ul style="list-style-type: none"> • Decline in jobs and economics • Increase need to commute • Small percentage of the population works in the county they live 	<ul style="list-style-type: none"> • Encouraging rural living • Increase school support and attendance 	



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Appendix 9: Technical

Forces of Change (Trend, Events, Factors)	Threats Posed to the LPHS Or Community	Opportunities Created to the LPHS or Community	Score
<ul style="list-style-type: none"> • Local access to current health technology 	<ul style="list-style-type: none"> • Assumption of the same technology access • Self-diagnosed • Identity theft • Less personal contact/relations 	<ul style="list-style-type: none"> • More efficient/less expensive communication • More efficient services • Wide range of technical abilities <ul style="list-style-type: none"> ○ Facebook, Twitter, etc. 	
<ul style="list-style-type: none"> • Change in technology 	<ul style="list-style-type: none"> • Cyber bullying, lack of confidence • Spelling/personal communication decline • Desensitized to world news and human behavior • Less attention paid to children 	<ul style="list-style-type: none"> • Patient portals • News spreads quickly • Medical technology <ul style="list-style-type: none"> ○ Labs, appointment reminders • Virtual visits • Continuum of care 	
<ul style="list-style-type: none"> • Social media 	<ul style="list-style-type: none"> • Misinformation • Differentiate quality of source/information 	<ul style="list-style-type: none"> • Education • Disseminate information quickly & easily • Increased responsiveness 	
<ul style="list-style-type: none"> • Makes criminal activity easier <ul style="list-style-type: none"> ○ Human trafficking ○ Terrorism ○ Crime • More public access to legal and illegal online topics 	<ul style="list-style-type: none"> • Increase in criminal behavior 	<ul style="list-style-type: none"> • Education 	

Appendix 10: Final list of Issues/Priorities

- Mental Health (17)
- Lack of Funding (15)
- Food Access (7)
- Increased poverty (6)
- Chronic Disease (6)
- Safety (5)
- Technology (3)
- Individualism vs. Community (3)
- Increased Aging population (3)
- Decrease in Workforce (3)
- Resource (2)
- Cyberbullying (2)
- Legal limitations (1)
- Insurance Power (1)
- Local Policy Change (0)
- Diversity (0)

The group discussed multiple contributing factors that were included in other topics and agreed there would be impact when focusing on a specific issue. The group decided not to vote on these factors that included Access, Stigma, Education, Perception, Increased or lack of support, and communication but would work on it when looking at mental health, funding, and food access.

Appendix 11: Forces of Change Attendees

Forces of Change Attendees	
December 3, 2015	
Name	Agency
Joanie Montoya	Advocate Eureka Hospital
Barb Scherr	Advocate Eureka Hospital
Sally Gambacorta	Advocate Eureka Hospital
Anna Laible	Advocate Eureka Hospital
Nancy Aldridge	Advocate Eureka Hospital Board
Lauren Jones	Bradley University
Dylan Fischer	Chestnut Health Systems
Joan Herron	Eureka Public Library District
Teresa Block	Eureka School District
Paul Weir	Eureka United Methodist Church / Advocate Church Partners
LaDonna Lehman	Goodfield State Bank
Brandi Gerber	Heartline and Heart House
Lisa Doty, RN	Metamora Township High School
Kathi Paxton	Roanoke-Benson High School
Robert Hart	Rock Creek Bible Church
Tricia Larson	Tazwood Center for Wellness
Denise Urycki	The gitm Foundation
Kim Keenan	The gitm Foundation
Lisa Maynard	Think First: Illinois Neurological Institute
Jenna Smith	U of I Extension
Mike Hutchinson	We Care, Inc.
Curt Rocke	Woodford County Emergency Management
Bonnie Allen	Woodford County Health Department (Board Member)
Hillary Aggertt	Woodford County Health Department (Facilitator)
Jenna Brugger	Woodford County Health Department (Note-taker)
Melissa Theleman	Woodford County Health Department
Dustin Schulz	Woodford County Health Department
Eric Lane	Woodford County Health Department
Diane Gregoire	Woodford County Housing
Matt Smith	Woodford County Sheriff's Department
Tiffani Schmitt	Woodford County Special Education Association