Our Mission:

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

Mercyhealth conducted a Community Health Needs Assessment (CHNA) designed to identify health and quality of life issues in the Harvard, Illinois community. This systematic approach helped identify issues where changes in the healthcare delivery system and continued collaboration could improve patient care, preventive services and overall health and quality of life in the community.

Results from this study can be used for strategic decision-making purposes as they directly 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 ("Code") Section 501(r)(3). It includes:

1. A description of the community served by Mercyhealth Harvard Hospital.
2. A description of the process and methods used.
3. An account of how the broad interests of the community served were obtained and incorporated into the assessment.
4. A prioritized description of the health needs identified.
5. A description of existing health care facilities and other resources available to meet the community health needs identified through the CHNA.

This report is available to the public via the Mercyhealth website.
I. INTRODUCTION

Background

For over 125 years, Mercyhealth has touched the lives of millions of individuals throughout southern Wisconsin and northern Illinois. Our innovative services, committed professionals and dedication to community outreach and to meeting the needs of the underserved, have led to Mercy’s incredible transformation over the last 25 years. Beginning as a stand-alone hospital, Mercy has become a vertically integrated health system with 70 facilities serving 26 communities throughout southern Wisconsin and northern Illinois. Today, Mercyhealth is a vertically integrated health care delivery system organized to provide a comprehensive continuum of care to our communities.

II. METHODOLOGY

Multiple sources were utilized to complete the CHNA. A detailed analysis of secondary data was used to assess the community profile, morbidity rates, causes of mortality and health status of the community. Additionally, a community based survey was completed to examine perceptions of the community health issues, unhealthy behaviors, quality of life issues, healthy behaviors and access to healthcare. Finally, community leaders and stakeholders participated in a key informant survey to further enhance the versatility of the data utilized in this survey.

Secondary Data

Mercyhealth analyzed demographic, socioeconomic and health-related data from a variety of publicly available sources, including the Illinois Department of Public Health, the United States Census Bureau and the Center for Disease Control’s County Health Rankings. Within each section of the report there are definitions, importance of category, data and interpretations.

Primary Data Collection

In addition to secondary data sources, primary data was also collected. This section describes the methods used to collect, verify and analyze primary survey data.

A. Survey Design

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.

To properly assess the perceived health needs of the community, the surveys included specific questions to rate and assess:
   a. Health issues in the community;
   b. Unhealthy behaviors in the community;
   c. Well-being;
   d. Accessibility to healthcare; and
e. Healthy behaviors

A copy of the survey is available in APPENDIX A (English & Spanish).

B. Sample Size

We calculated sample size needed by using a standard formula based on the population size, margin of error, confidence level and standard of deviation. Our calculation encompasses a 90% confidence level, a +.5 margin of error and a standard deviation of .5.

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

For this survey, the minimum sample size was 271 surveys. The data collection for this community health needs assessment yielded a total of 367 usable responses, exceeding the threshold of the desired 90% confidence interval.

C. Data Collection

Several data collection techniques were used. The primary technique was the acquisition of a mailing list and the distribution of surveys via the United States Postal Service. The secondary technique used was the creation of an online survey (English and Spanish). The survey web link was distributed via email, the Mercyhealth website and also included on the printed survey. The final distribution technique used was the in-person distribution of surveys to various businesses, churches and charitable organizations. The survey was conducted in the 60033 area code, though individuals working and spending recreational time in the Harvard area were also asked to participate. Versions of both the online and paper survey were translated and distributed in Spanish.

DEMOGRAPHIC PROFILE

Population

Population data characterize individuals residing in the Harvard community, providing an overview of population growth trends. Population data is the foundation for analysis of data.

Population Growth

US Census data and population estimates indicate the population of Harvard has significantly increased (22.6%) between 2000 and 2015.
Age, Gender and Race Distribution

Population data broken out by age, gender and race provide a foundation to analyze issues and trends impacting demographic factors, including economic growth and the distribution of healthcare services. Understanding the cultural diversity of communities is necessary when considering healthcare service delivery systems and infrastructure.

Age

The graph below shows that the percentage of individuals in Harvard in the age groups Under 18, 18-24 and 45-64 all increased, while the age groups of 25-44 and 65+ decreased. The median age of Harvard residents is 27.5 years, much lower than the McHenry County median age of 39.3.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>2000</th>
<th>2010</th>
<th>2015 (Est)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 18</td>
<td>33.4%</td>
<td>35.3%</td>
<td>35.7%</td>
</tr>
<tr>
<td>18 - 24</td>
<td>9.4%</td>
<td>7.6%</td>
<td>10.2%</td>
</tr>
<tr>
<td>25 - 44</td>
<td>31.3%</td>
<td>29.6%</td>
<td>28.6%</td>
</tr>
<tr>
<td>45 - 64</td>
<td>16.8%</td>
<td>19.2%</td>
<td>18.00%</td>
</tr>
<tr>
<td>65+</td>
<td>9.1%</td>
<td>8.3%</td>
<td>7.5%</td>
</tr>
</tbody>
</table>

Median age of Harvard residents in 2015: 27.5

Source: U.S. Census Bureau, American Community Survey, 2011-2015 ACS 5-year Estimates
Gender

The gender distribution of Harvard residents has remained consistent from 2010 to 2015, showing a near even percentage of male and female residents.

Race

The racial distribution in Harvard has changed considerably from 2000 to 2015. Hispanics now comprise 50 percent of the population, compared to 38 percent in 2000.

<table>
<thead>
<tr>
<th>Race Distribution - Harvard, IL</th>
<th>2000</th>
<th>2010</th>
<th>2015 (Est)</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>76.3%</td>
<td>71.5%</td>
<td>78.1%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>0.9%</td>
<td>0.9%</td>
<td>0.1%</td>
</tr>
<tr>
<td>American Indian and Alaska Native</td>
<td>0.4%</td>
<td>0.8%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Asian</td>
<td>1.4%</td>
<td>0.7%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other</td>
<td>18.8%</td>
<td>22.9%</td>
<td>19.0%</td>
</tr>
<tr>
<td>Hispanic or Latino (any race)</td>
<td>37.8%</td>
<td>35.2%</td>
<td>50.3%</td>
</tr>
<tr>
<td>Two or more races</td>
<td>2.3%</td>
<td>3.0%</td>
<td>2.7%</td>
</tr>
</tbody>
</table>

Source: US Census Bureau

Economic Information

Median income divides households into two segments, with one-half of households earning more than the median income and the other half earning less. Median income is considered a more reliable factor than average income because it is not significantly impacted by unusually high or...
low-income values. The definition of poverty is lacking sufficient income to meet one’s basic needs. Therefore, poverty is associated with numerous chronic social, health, education, and employment conditions.

Median Income Level

The median household income (MHH) of Harvard residents has remained consistent from 2000 to 2015. Conversely, residents of both McHenry County (19%) and the State of Illinois (24%) have seen an increase in their MHH during this same timeframe. It is noted that Harvard’s MHH is significantly lower than that of both McHenry County and the State of Illinois.

Unemployment

Harvard’s most recent unemployment rate sits at 10.7%, compared to 8.0% for McHenry County and 9.1% for the State of Illinois.

Source: U.S. Census Bureau, American Community Survey, Selected Economic Characteristics, 2015
Families in Poverty

Poverty has a significant impact on the development of children and youth. In Harvard, the percentage of families living in poverty between 2010 and 2015 has increased 3.9%. The overall poverty rate in Harvard is 26.6%, much higher than the State of Illinois poverty rate of 14.3%.

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Harvard</td>
<td>22.7%</td>
<td>26.6%</td>
</tr>
<tr>
<td>McHenry County</td>
<td>6.2%</td>
<td>7.9%</td>
</tr>
<tr>
<td>State of Illinois</td>
<td>12.6%</td>
<td>14.3%</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau

Education

Research suggests that the higher level of educational attainment and the more successful one is in school, the better one’s health will be and the greater likelihood of one selecting healthy lifestyle choices. Accordingly, an increase in years of education is strongly related to an individual’s propensity to earn a higher salary, obtain better employment and foster multidimensional success in life.

Harvard has a higher rate of residents graduating high school than both McHenry County and the State of Illinois. However, Harvard has fewer residents with a college degree than both McHenry County and the State of Illinois.


Source: U.S. Census Bureau, American Community Survey, Educational Attainment, 2015

PREVENTION BEHAVIORS

Accessibility

The availability of healthcare services is critical. As such, healthcare accessibility must address both the associated financial costs and the supply and demand of medical services.

Insurance Coverage

Information gathered from the County Health Rankings and the U.S. Department of Health and Human Services show McHenry County residents possess healthcare coverage at a higher rate than the national average. The overall trend shows the uninsured rate dropping significantly from 2011 to 2016, most likely due to the passage and implementation of the Affordable Care Act in 2010.
Insured community survey respondents indicated that 98.3% were able to see healthcare providers that accept their insurance and 90.9% had seen a healthcare provider they consider their regular provider within the past 12 months.

**Access to Care**

Harvard is unique in the fact that it is a small community and there are a wide variety of health care services available, however, it does not have the population to support every resident’s needs. In the survey, respondents were asked a series of questions in regard to accessing various types of health services ranging from providers that accept the respondents’ health insurance to mental health services.

In the CHNA 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, including primary care provided by a physician (patients presented to ED or Urgent Care instead), dental care, mental health services, drug and alcohol treatment and medications.
Medical Care
Respondents selected “can’t afford to pay for a doctor’s visit” and “co-pay/deductible too high” as the top reasons they don’t have a primary physician or seek medical care. When asked why they don’t have health insurance, “too expensive” and “place where you work does not offer it” 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 don’t have a regular dental provider. When asked why they don’t have dental insurance, “too expensive” and “feel like you don’t need dental insurance” were selected as the primary reasons.

Mental Health
6.5% 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/Drug Treatment
1.4% of respondents reported that in the past 12 months, they or someone in their household needed drug or alcohol treatment but could not access it.

Medications
9.4% 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”
and the secondary reason was the “other” category with answers ranging from “not covered under insurance” to “pharmacy did not have it.”

**Wellness**

Preventative healthcare measures, including a routine well-visit, obtaining a flu shot, living a healthy lifestyle and getting screenings for diseases, are essential to fighting morbidity and mortality while reducing healthcare costs.

**Frequency of Checkups**

The Centers for Disease Control and Prevention reports that regular health exams and tests can help find problems before they start. These checkups can also help identify problems early, when chances for treatment and cure are better. By getting the appropriate health services, screenings, and treatments, individuals are taking steps to improve their chances for living a longer, healthier life. The Illinois Behavioral Risk Factor Surveillance System’s (IBRFSS) latest data shows that 69.2% of McHenry County residents had a checkup within the past 12 months, higher than the State of Illinois’s health care utilization rate of 68.8%.

**Regular Healthcare Provider**

Research suggests that individuals with a regular or established healthcare provider are more likely to seek preventative care and less likely to use emergency services for care. This saves both resources and funds in the healthcare system overall. In 2014, 84.9% of McHenry County residents had a regular healthcare provider, compared to 80.9% for the State of Illinois. (IBRFSS, 2014).

**Immunizations**

Preventative measures including immunizations and vaccinations greatly impact the overall health and well-being of a community. Data available from the 2014 IBRFSS shows that only 34.6% of McHenry County residents received a flu shot within the past 12 months, compared to 38.5% at the State level, and only 20.5% had received a pneumonia vaccination, compared to 32.9% for the State of Illinois.

![Flu Shot in the Past Year - McHenry County 2007-2014](chart.png)

Source: IBRFSS
Physical Activity

Regular physical activity has been shown to increase emotional, physical and mental well-being. Over 75% of McHenry County residents stated they had exercised within the last 30 days.

*Physical activity/exercise data collection and reporting perimeters changed from 2009-2014 so this information was omitted from the above graph.*

SYMPTOMS AND PREDICTORS

Tobacco Use

An analysis of the leading indicators regarding morbidity and mortality must be conducted in order to properly allocate healthcare resources. This allows healthcare organizations to more effectively target affected populations. Research suggests tobacco use causes a wide variety of adverse medical conditions.

In 2016, the CDC reported 16% of adults (18+) in McHenry County use tobacco products. This is lower than the state rate of 17% for the same year, however, both are higher than the national rate of 15%.

According to the CDC, tobacco use/smoking cigarettes is the leading cause of preventable disease and death in the United States. Tobacco use continues to decline in the US, but remains high in certain populations. Those at risk for increased exposure to and use of tobacco are those
with low levels of education, males, young adults, those living in the South and Midwest, LGBT individuals, individuals living below the poverty level, disabled people and certain races and ethnicities.

**Alcohol Abuse**

Excessive alcohol use impairs decision-making, often leading to adverse consequences and outcomes. Excessive alcohol use/binge drinking directly contributes to a number of short- and long-term health risks.

Excessive alcohol consumption increases the risk of many harmful health conditions. Short-term health risks include injuries such as automobile accidents, falls and other avoidable bodily injuries. Violence and risky sexual behaviors are also short-term health risks associated with binge drinking. Long-term health risks include cancers, heart disease, high blood pressure, mental health problems, social problems and alcoholism (CDC, 2017).

A 2016 CDC study shows 23% of adults in McHenry County report binge drinking and heavy alcohol consumption, higher than both the state of Illinois rate (22%) and national rate (17%).

![2016 Tobacco Use and Binge Drinking McHenry County](image)

Source: Centers for Disease Control and Prevention; County Health Rankings 2016

**Overweight and Obesity**

Nationally, obesity is a significant problem. Overweight and obese individuals have a greater risk and occurrence of health issues due to the increased stress on their bodies caused by excess weight. Medical costs to treat weight related health issues is staggering and puts a financial crunch on state and federal health care monies.

According to a 2016 study by the State of Obesity Project, Illinois now has the 18th highest adult obesity rate in the United States. McHenry county ranks lower in the percentage of overweight
and obese people in both the state of Illinois and the nation. The IBFSS shows a decline in overweight and obese people in McHenry County from 2009 to 2014.

![Obesity Prevalence 2012](image)

<table>
<thead>
<tr>
<th></th>
<th>McHenry County</th>
<th>Illinois</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Underweight / Normal</td>
<td>40.7%</td>
<td>36.6%</td>
<td>36.7%</td>
</tr>
<tr>
<td>Overweight</td>
<td>32.4%</td>
<td>36.4%</td>
<td>35.8%</td>
</tr>
<tr>
<td>Obese</td>
<td>26.9%</td>
<td>27.0%</td>
<td>27.5%</td>
</tr>
</tbody>
</table>

Source: Community Commons, Community Health Needs Assessment, Health Outcomes

**Predictors of Heart Disease**

Cardiovascular disease (CVD) is recognized as the leading cause of death worldwide. Hypertension (high blood pressure), high cholesterol and diabetes mellitus are considered major risk factors for developing CVD. Additionally, there are numerous additional health conditions that occur as a consequence of cardiovascular disease, including coronary heart disease, atherosclerosis, cardiac arrhythmias, myocardial infarction, stroke, carotid artery disease and renal dysfunction or failure.
Diseases/Morbidity

Cardiovascular, Respiratory & Diabetes

The majority of cardiovascular, respiratory and diabetic related illnesses are chronic and require continuous monitoring. Lack of adequate healthcare for these conditions can lead to recurrent
hospital and physician visits, an increase in overall health issues and an increase in healthcare costs.

Cancer

There are numerous types of cancer, each having their own symptoms, cure rates and methods for treatment.

Cancer Incidence Rates – McHenry County

<table>
<thead>
<tr>
<th>Type</th>
<th>Cases</th>
<th>Rate*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prostate</td>
<td>895</td>
<td>119.1</td>
</tr>
<tr>
<td>Lung &amp; Bronchus</td>
<td>449</td>
<td>70.1</td>
</tr>
<tr>
<td>Colon &amp; Rectum</td>
<td>333</td>
<td>50.5</td>
</tr>
<tr>
<td>Bladder</td>
<td>273</td>
<td>44.2</td>
</tr>
<tr>
<td>Kidney &amp; Renal Pelvis</td>
<td>186</td>
<td>25.4</td>
</tr>
<tr>
<td>Total All Cancers Combined</td>
<td>3,559</td>
<td>517.4</td>
</tr>
</tbody>
</table>

*Age adjusted incidence rate per 100,000 population

Morbidity & Mortality

Presenting data that focuses on causes of morbidity and mortality provides an opportunity to define and quantify which diseases are causing the most deaths.

### Leading Causes of Death - McHenry County 1999-2015

<table>
<thead>
<tr>
<th>Cause</th>
<th>Crude Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lung or Bronchus Cancer</td>
<td>42.6</td>
</tr>
<tr>
<td>Atherosclerosis</td>
<td>42.6</td>
</tr>
<tr>
<td>COPD</td>
<td>31.6</td>
</tr>
<tr>
<td>Dementia</td>
<td>25.4</td>
</tr>
<tr>
<td>Alzheimer's Disease</td>
<td>24.7</td>
</tr>
<tr>
<td>Heart Attack (AMI)</td>
<td>18.2</td>
</tr>
<tr>
<td>Congestive Heart Failure</td>
<td>18.2</td>
</tr>
<tr>
<td>Stroke</td>
<td>17.9</td>
</tr>
<tr>
<td>Breast Cancer</td>
<td>14.0</td>
</tr>
</tbody>
</table>

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

Source: Centers for Disease Control and Prevention, National Center for Health Statistics, Underlying Cause of Death 1999-2015 on CDC WONDER online database.
Prioritization of Health-Related Issues

The purpose and importance of this Community Health Needs Assessment is to identify the most critical health related needs in the Harvard community. To identify these needs, we must collect and consider community perceptions of health issues, unhealthy behaviors and issues relating to well-being. By combining community perception 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.

Perceptions of Health Issues

Survey participants were asked to rate the overall health of the Harvard community. Based on survey responses, 53.5% rated Harvard as “somewhat healthy,” while 31.5% rated Harvard as “healthy.”

The CHNA also asked survey participants, “What do you think are the five factors that make a healthy community?” Access to healthcare was the primary answer chosen by 13.7% of respondents. Low crime/safe neighborhoods, good schools, a good place to raise children and good jobs and a healthy economy followed closely.
Community perceptions of health problems may vary greatly from the actual health issues in the area. The CHNA survey asked participants to choose the top five health problems in their community based on a list of 23 options. Participants ranked obesity as the top health problem with alcohol abuse following.

<table>
<thead>
<tr>
<th>Top 5 Harvard Community Health Problems</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity</td>
<td>13.6%</td>
</tr>
<tr>
<td>Alcohol Abuse</td>
<td>13.2%</td>
</tr>
<tr>
<td>Drug Abuse</td>
<td>11.1%</td>
</tr>
<tr>
<td>Cancers</td>
<td>8.5%</td>
</tr>
<tr>
<td>Aging Problems</td>
<td>8.1%</td>
</tr>
</tbody>
</table>

Source: 2017 Harvard CHNA Survey
High blood pressure and heart disease/stroke were ranked 9th and 12th but are risk factors that contribute to the leading causes of death in McHenry County (Morbidity & Mortality Chart page 17).

**Perceptions of Unhealthy Behaviors**

Respondents were asked to choose the top five most concerning risky behaviors in Harvard. They were given a list with eighteen choices. Alcohol abuse was ranked number one, closely followed by drug abuse. Drunk driving, poor eating habits and lack of exercise rounded out the bottom three with very close numbers. These responses directly tie into the responses received for the perception of the top five community health problems.
Top 5 Harvard Community Risky Behaviors

<table>
<thead>
<tr>
<th>Behavior</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Abuse</td>
<td>15.1%</td>
</tr>
<tr>
<td>Drug Abuse</td>
<td>14.6%</td>
</tr>
<tr>
<td>Drunk Driving</td>
<td>10.9%</td>
</tr>
<tr>
<td>Poor Eating Habits</td>
<td>10.5%</td>
</tr>
<tr>
<td>Lack of Exercise</td>
<td>10.2%</td>
</tr>
</tbody>
</table>

Source: 2017 Harvard CHNA Survey

Perceptions of Personal and Community Well-Being

Residing in a safe community with adequate housing, food and health care resources plays a large role in personal and community well-being. Survey participants were asked questions regarding their perceptions of personal health, household concerns and community environment.

Participants were asked, “How would you rate your own personal health?” Over half of the survey participants chose “healthy” while more than 30% chose “somewhat healthy.”
Participants were asked about household health problems and concerns. Their top five issues were managing weight, exercising and fitness, eating well/nutrition, access to safe, affordable places to exercise and stress management.

For a community to be a desirable, healthy place to reside, residents must feel safe and secure in the environment in which they surround themselves. The health of the environment directly impacts the health and well-being of the community. Survey respondents were asked to choose their top five concerning environmental issues from a list of 22 options. Unsafe neighborhoods/crime ranked number one.
### Top 5 Harvard Community Risky Behaviors

<table>
<thead>
<tr>
<th>Risky Behavior</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsafe neighborhoods/crime</td>
<td>10.1%</td>
</tr>
<tr>
<td>Trash or litter in public areas</td>
<td>9.6%</td>
</tr>
<tr>
<td>Lack of sidewalks/walking paths</td>
<td>8.9%</td>
</tr>
<tr>
<td>Lack of bike lanes/bike paths</td>
<td>7.9%</td>
</tr>
<tr>
<td>Mosquito/tick carried diseases</td>
<td>6.7%</td>
</tr>
</tbody>
</table>

Source: 2017 Harvard CHNA Survey

### Community Leader Health Perceptions

A key informant survey was conducted among leaders in the Harvard community. Stakeholders targeted were school leaders, business owners, religious leaders, city officials, and police and fire officials. The purpose of this separate survey with this specific group of people was to garner insight from those members of the community that are directly involved in the care and well-being of both the community and its residents.

Key informants were asked to rank thirteen health-related issues based on the most concerning to the Harvard community.

### Key Informant Community Health Concerns

<table>
<thead>
<tr>
<th>Health Concern</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol and drug use</td>
<td>15.6%</td>
</tr>
<tr>
<td>Access to care</td>
<td>13.3%</td>
</tr>
<tr>
<td>Physical activity</td>
<td>13.3%</td>
</tr>
<tr>
<td>Mental health</td>
<td>11.1%</td>
</tr>
<tr>
<td>Chronic disease</td>
<td>8.9%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>8.9%</td>
</tr>
<tr>
<td>Growth &amp; development</td>
<td>6.7%</td>
</tr>
<tr>
<td>Reproductive &amp; sexual health</td>
<td>6.7%</td>
</tr>
</tbody>
</table>

Source: 2017 Harvard Key Informant CHNA Survey

In addition to ranking community health concerns, key informants were asked several subjective questions. Answers varied based on the participant’s occupation/role in the community. Though there was a large variance in answers, three themes emerged among all respondents. Language barriers, poverty and physical activity/lack of spaces for physical activity were all repeated throughout the responses received from this select group of people. When asked to rate health and quality of life in Harvard, respondents general response was below average or average which they attributed to many issues, including those listed above.
Community Resources

CHNA survey participants were asked to choose from a list of healthcare program, service and educational opportunities they desired in their community.

<table>
<thead>
<tr>
<th>Desired Health Services for Harvard</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthcare resources for the uninsured/underinsured</td>
<td>8.2%</td>
</tr>
<tr>
<td>Health education to prevent chronic conditions (e.g. diabetes, high blood...</td>
<td>9.3%</td>
</tr>
<tr>
<td>Exercise resources</td>
<td>10.9%</td>
</tr>
<tr>
<td>Senior services</td>
<td>11.6%</td>
</tr>
<tr>
<td>Affordable insurance options</td>
<td>12.6%</td>
</tr>
</tbody>
</table>

Source: 2017 Harvard CHNA Survey

Summary of Key Findings - Community Health Issues

A thorough analysis of the data in this document was used to identify the most important health-related issues in the community.

- Compared to state of Illinois statistics, McHenry County has a greater proportion of residents who use tobacco and engage in binge drinking.
- The portion of McHenry County residents with diabetes is larger than both the state and national rates.
- The majority of McHenry County residents are not receiving flu shots or pneumonia vaccinations.
- Poverty and unemployment in Harvard continue to exceed the county and state average.
- Obesity, physical activity and access to safe exercise locations are concerns for residents of Harvard.
- Slightly more than one-half of the Harvard population identifies as Hispanic or Latino
- The median household income of Harvard residents is significantly lower than both McHenry County and the State of Illinois
Prioritization

Mercyhealth reviewed and prioritized the health needs of the Harvard community. They are as follows:

1. Prevention – General Wellness
2. Poverty
3. Alcohol & Drugs
4. Physical Activity & Nutrition
5. Prevention – Heart Disease
6. Prevention – Diabetes
APPENDIX A

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.

Please return this survey or complete the survey online at https://www.surveymonkey.com/r/harvardchna
En español visite https://www.surveymonkey.com/r/espharvardchna

Demographics
1. What is your zip code? _____________

2. Which category below includes your age?
☐ Under 18
☐ 18-25
☐ 26-40
☐ 41-55
☐ 56-65
☐ 66-74
☐ 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
☐ Homemaker
☐ Retired
☐ Military
☐ Student
☐ 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?
☐ Live alone
☐ 2
☐ 3
☐ 4
☐ 5
☐ 6
☐ 7
☐ 8 or more

9. How many people in your household are under the age of 18?
☐ No one in my household is under the age of 18
☐ 1
☐ 2
☐ 3
☐ 4
☐ 5
☐ 6
☐ 7
☐ 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
☐ 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)

- Alcohol abuse
- Cancers
- Diabetes
- Drug abuse
- HIV/AIDS
- Lung disease
- Obesity
- Suicide
- 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
- 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
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

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 of 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 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.
Favor de devolver esta encuesta o completarla en línea:
https://www.surveymonkey.com/r/espHarvardChnA

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)
   - Hispánica/Latina
   - Nativa Americana/Nativo de Alaska (No hispana)
   - Asiática (No hispana)
   - Dos razas o más
   - Si no aparece su raza/etnia en la lista, por favor identifiquese
4. ¿Cuál es su estado civil?
   - Soltero/a/un/a no 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.g. Ph.D., M.D., etc.)
6. ¿Cuál es su estado laboral?
   - Empleado - Tiempo Completo
   - Empleado - Tiempo Parcial
   - Sin trabajo y buscando trabajo
   - Sin trabajo y no buscando trabajo
   - Incapacitado para trabajar
   - Jubilado
   - Estudiante
   - Ama de Casa
   - Militar
   - Otro

7. ¿Cuántos 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
   - 2
   - 3
   - 4
   - 5
   - 6
   - 7
   - 8 o más
9. ¿Cuántas personas en su hogar tienen menos de 18 años?
   - Nadie en mi hogar tiene menos de 18 años
   - 1
   - 2
   - 3
   - 4
   - 5
   - 6
   - 7
   - 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 identifiquese
11. ¿Cuál es su orientación? (Por favor, solo escoja una opción)
    - Heterosexual
    - Hombre Homosexual
    - Lesbian
    - Bisexual
    - Si no aparece, por favor identifiquese

Preguntas de Salud Comunitaria
12. ¿Cómo calificaría la salud de Harvard en general?
    - Muy Sana
    - Sana
    - Más o Menos Sana
    - Mal
    - Muy Mal
13. ¿Qué piensa usted que son los cinco (5) factores que contribuyen a una comunidad sana? (Marque sus cinco primeras opciones)
- Buen lugar para criar niños
- Bajo crimen/Vecindarios seguros
- Bajo nivel de maltrato de niños
- Buenas escuelas
- Acceso a la atención médica
- Acceso a la atención dental
- Parques y recreo
- Medio ambiente limpio
- Vivienda económica
- Buenos trabajos y una economía sana
- Fuertes relaciones familiares
- Comportamiento y estilo de vida sana
- Baja tasa de muerte y enfermedad
- Valores/Apoyo religiosos o espirituales
- Otro

14. ¿Cuáles son los cinco (5) mayores problemas de salud en su comunidad? (Marque sus cinco primeras opciones)
- Abuso de alcohol
- Abuso de drogas
- Alta Presión de Sangre
- Cáncer
- Demencia
- Diabetes
- Embarazo en adolescentes
- Heridas de pistolas
- Abuso de sustancias
- Enfermedad del corazón y derrame cerebral
- Problemas de enfermedades de envejecimiento
- Enfermedad de los pulmones
- Enfermedades de transmisión sexual
- Muerte infantil
- Problemas dentales
- Salud Mental
- Suicidio
- VIH/SIDA
- Violación/Acoso sexual
- Violencia
- Violencia Doméstica
- Otro

15. ¿Cuáles son los cinco (5) comportamientos riesgosos de su comunidad? (Marque sus primeras cinco opciones)
- Abuso de alcohol
- Abuso de drogas
- Falta de ejercicio
- Homofobia
- Malos hábitos de comer
- Racismo
- Sexo seguro
- Uso de Tabaco
- No recibir atención médica
- Armas no guardadas
- Manejar bajo los efectos del alcohol
- 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 las áreas públicas
- Falta de recursos comunitarios para los desaparecidos
- Falta de aceras/senderos
- Falta de senderos y carriles para bicicletas
- Falta de lugares seguros para recreo/parque
- Agua insegura/no limpia para beber
- Radón
- Sistemas sépticos que no funcionan
- Eliminación de residuos peligrosos
- Vecindarios inseguros/amenaza
- Enfermedades transmitidas por zancudos/garrapatas
- Edificios inseguros/abandonados
- Vivienda insegura/antihigiénica
- Peligro de pintura de plomo
- Contaminación de agua subterránea por agricultura
- Humo de segunda mano
- Falta de playas seguras para nadar
- Super desarrollo/demasiada urbanización nueva
- Agua insegura de ríos, arroyos y lagos
- Calle/Calleja insegura
- Comida insegura
- Otro

17. ¿Cuáles programas de atención médica, educación de salud o servicios de salud le gustaría que se ofrezcan en su comunidad? (Marque todo lo que aplique)
- Ninguno- tenemos todo lo necesario
- No se
- Recursos de atención médica para los que no tengan seguro médico o con seguro médico insuficiente
- 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, alta presión, condiciones de corazón, asma, etc.)
- Opciones económicas de seguro médico
- Servicios para la salud mental
- Servicios dentales
- Servicios para abuso de alcohol y drogas
- Otro

Preguntas de Condiciones de Salud
18. ¿Cómo calificaría su propia salud?
- Muy sana
- Sana
- Más o menos sana
- Mal
- Muy mal
19. ¿Cuáles de las siguientes cosas son problemas o preocupaciones de salud para usted o para alguien en su casa? (Marque todo lo que aplique)
- Comer bien/Nutrición
- Acceso a comida nutritiva y económica
- Ejercicio/Aptitud 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
- Abuso del alcohol
- Depresión u otras preocupaciones de salud mental
- Control de estrés
- Acceso a tratamiento de salud mental
- Acceso a tratamiento de alcohol u otras drogas
- Acoso (Bullying)
- Violencia doméstica
- Violación/Acoso sexual
- Control de ira
- Acceso a cuidado para niños económico y seguro
- Acceso a cuidado para mayores económico y seguro
- Cuidar a familiares descapacitados
- Prevenir Embarazo
- Prevenir enfermedades de transmisión sexual
- Preparar para un desastre o emergencia
- Otro

20. ¿Tiene seguro médico?
- Sí
- No (Sí "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. ¿Durante los últimos 12 meses, ha ido usted con 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), diganos por qué. (Marque todo lo que aplique)
- No aplicable (N/A)
- No sé cómo encontrar un proveedor
- No hay proveedores cerca de donde yo vivo
- Co-pago o deducible es demasiado alto para mí
- No puedo pagar por una cita
- 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 diganos por qué. (Marque todo lo que aplique)
- No aplicable
- 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 (Sí no, salte al #28)

27. ¿Tiene la habilidad de ver a un proveedor dental que acepte su seguro?
- Sí
- No

28. Si no tiene un proveedor dental regular, diganos por qué. (Marque todo lo que aplique)
- No aplicable
- 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 diganos por qué. (Marque todo lo que aplique)
- No aplicable
- Demasiado costoso
- El lugar donde yo trabajo no 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 pudo accederlo?
☐ 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 diarios por qué? (Marque todo lo que aplique)
☐ No aplicable
☐ Demasiado costoso
☐ No pude obtener una receta de un doctor
☐ Había barreras de idioma/cultura
☐ El medicamento en específico que necesito no estuvo disponible
☐ No pude conseguir transporte 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 tomar el tiempo a responder a esta encuesta. Agradecemos su participación.

Por favor, regrese esta encuesta a:

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

Key Informant #1

Of the following focus areas, please rank order the top 5 major health-related issues in the Harvard community:

1. **Alcohol and drug use**
2. **Nutrition**
3. **Chronic disease**
4. **Oral health**
5. **Communicable disease**
6. **Physical activity**
7. **Environmental & occupational health**
8. **Reproductive & sexual health**
9. **Growth & development**
10. **Tobacco**
11. **Injury & violence**
12. **Access to care**
13. **Mental health**

*****************************************************************

1. In general, how would you rate health and quality of life in Harvard?
   - Health - Poor
   - Quality of Life - Average

2. In your opinion, has health and quality of life in Harvard improved, stayed the same, or declined over the past few years?
   - Declined

3. Why do you think it has (based on answer from question #2: improved, stayed the same, or declined)?
   - Influx of folks who are unemployed or choose not to work, selling drugs, etc.

4. What other factors have contributed to the (based on answer to question #2: improvement, decline or health and quality of life staying the same)?
   - Lack of sentencing for serial criminal acts and these folks on the streets

5. Are there people or groups of people in Harvard whose health or quality of life may not be as good as others?
   - Yes
     a. Who are these persons or groups (whose health or quality of life is not as good as others)?
        - Low income and section 8 imports
     b. Why do you think their health/quality of life is not as good as others?
        - Ignorance, language

6. What barriers, if any, exist to improving health and quality of life in Harvard?
   - Being illegal and not seeking care

7. In your opinion, what are the most critical health and quality of life issues in Harvard?
   - Illegal immigrants

8. What needs to be done to address these issues?
   - Deportation and fine employers who don’t background employees

9. In your opinion, what else will improve the health and quality of life in Harvard?
   - Law enforcement, housing code enforcement and jail sentences, deportations
Key Informant #2

Of the following focus areas, please rank order the top 5 major health-related issues in the Harvard community:

<table>
<thead>
<tr>
<th>Rank</th>
<th>Issue</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Injury &amp; violence</td>
</tr>
<tr>
<td>2</td>
<td>Alcohol and drug use</td>
</tr>
<tr>
<td>3</td>
<td>Mental health</td>
</tr>
<tr>
<td>4</td>
<td>Chronic disease</td>
</tr>
<tr>
<td>5</td>
<td>Access to care</td>
</tr>
<tr>
<td></td>
<td>Nutrition</td>
</tr>
<tr>
<td></td>
<td>Oral health</td>
</tr>
<tr>
<td></td>
<td>Physical activity</td>
</tr>
<tr>
<td></td>
<td>Reproductive &amp; sexual</td>
</tr>
<tr>
<td></td>
<td>Tobacco</td>
</tr>
<tr>
<td></td>
<td>Communicable disease</td>
</tr>
<tr>
<td></td>
<td>Environmental &amp; occupational</td>
</tr>
<tr>
<td></td>
<td>Growth &amp; development</td>
</tr>
<tr>
<td></td>
<td>Reproductive &amp; sexual</td>
</tr>
<tr>
<td></td>
<td>Tobacco</td>
</tr>
</tbody>
</table>

1. In general, how would you rate health and quality of life in Harvard?
   - Below average

2. In your opinion has health and quality of life in Harvard improved, stayed the same, or declined over the past few years?
   - Declined

3. Why do you think it has (based on answer from question #2: improved, stayed the same, or declined)?
   - Economic factors, limited state funding, lower income residents, walkers can’t get around during bad weather

4. What other factors have contributed to the (based on answer to question #2: improvement, decline or to health and quality of life staying the same)?
   - Gambling machines, limited rental (affordable) property in quality locations, affordable housing is in high crime area

5. Are there people or groups of people in Harvard whose health or quality of life may not be as good as others?
   - Yes
      a. Who are these persons or groups (whose health or quality of life is not as good as others)?
         - Senior Citizens
      c. Why do you think their health/quality of life is not as good as others?
         - Difficulties brought on by age, limited income and lack of resources

6. What barriers, if any, exist to improving health and quality of life in Harvard?
   - Limited quality employment & higher paying jobs

7. In your opinion, what are the most critical health and quality of life issues in Harvard?
   - Lack of convenient, affordable health care, no one is taking new patients

8. What needs to be done to address these issues?
   - Smart Growth – determine where new development should be accommodated

9. In your opinion, what else will improve the health and quality of life in Harvard?
   - More of a sense of Community
Key Informant #3

Of the following focus areas, please rank order the top 5 major health-related issues in the Harvard community:

1. Alcohol and drug use  
2. Communicable disease  
3. Nutrition  
4. Physical activity  
5. Reproductive & sexual  
   Chronic disease  
   Oral health  
   Environmental & occupational  
   Tobacco  
   Growth & development  
   Mental health  
   Injuries & violence  
   Tobacco  
   Access to care  

1. In general, how would you rate health and quality of life in Harvard?  
   I see increasing numbers of young diabetics. Children are not active enough. There is a need for community recreation.
2. In your opinion has health and quality of life in Harvard improved, stayed the same, or declined over the past few years?  
   Declined slightly
3. Why do you think it has (based on answer from question #2: improved, stayed the same, or declined)?  
   See #1 please
4. What other factors have contributed to the (based on answer to question #2: improvement, decline or to health and quality of life staying the same)?  
   It is possible that language barriers contribute to a lack of health education.
5. Are there people or groups of people in Harvard whose health or quality of life may not be as good as others?  
   Yes
   a. Who are these persons or groups (whose health or quality of life is not as good as others)?  
      Hispanics & homeless
   b. Why do you think their health/quality of life is not as good as others?  
      Language barriers and social fears
6. What barriers, if any, exist to improving health and quality of life in Harvard?  
   See #5
7. In your opinion, what are the most critical health and quality of life issues in Harvard?  
   See the rankings please
8. What needs to be done to address these issues?  
   Community recreation with education services
9. In your opinion, what else will improve the health and quality of life in Harvard?  
   See #8
Key Informant #4

Of the following focus areas, please rank order the top 5 major health-related issues in the Harvard community:

1. Alcohol and drug use
2. Access to care
3. Chronic disease
4. Physical activity
5. Mental health

************************************************************

1. In general, how would you rate health and quality of life in Harvard?
   Average

2. In your opinion, has health and quality of life in Harvard improved, stayed the same, or declined over the past few years?
   Stayed the same

3. Why do you think it has (based on answer from question #2: improved, stayed the same, or declined)?
   There has been no major effort to make the city a more walkable city or to encourage residents to participate in health care initiatives. There is an abundance of fast food restaurants in town but none offer many healthy options.

4. What other factors have contributed to the (based on answer to question #2: improvement, decline or to health and quality of life staying the same)?
   See note above

5. Are there people or groups of people in Harvard whose health or quality of life may not be as good as others?
   Yes
   a. Who are these persons or groups (whose health or quality of life is not as good as others)?
      ESL speakers, those who have no access to good quality health insurance
   b. Why do you think their health/quality of life is not as good as others?
      Money and language are barriers as is education level

6. What barriers, if any, exist to improving health and quality of life in Harvard?
   Transportation to and from medical centers would be a big improvement. Adding new or replacing aging sidewalks to connect areas of the city would be a good step in encouraging residents to be more active.

7. In your opinion, what are the most critical health and quality of life issues in Harvard?
   Alcohol and drug use, easy access to health care and chronic disease

8. What needs to be done to address these issues?
   Better education, more public transportation options, particularly to health centers and infrastructure improvements to remove barriers to physical exercise.

9. In your opinion, what else will improve the health and quality of life in Harvard?
   Promote the parks better so residents are aware of what is offered at each, provide regular transportation to medical centers and improve the walkability of the city.
Key Informant #5

Of the following focus areas, please rank order the top 5 major health-related issues in the Harvard community:

2. Alcohol and drug use
4. Oral health

5. Chronic disease
3. Access to care

Communicable disease
Physical activity

Environmental & occupational
Reproductive & sexual

Growth & development
Tobacco

Injury & violence

Mental health

*****************************************************************************

1. In general, how would you rate health and quality of life in Harvard?
   Good for many people in Harvard, primarily those that are financially secure

2. In your opinion, has health and quality of life in Harvard improved, stayed the same, or declined over the past few years?
   I think there has been an overall decline.

3. Why do you think it has (based on answer from question #2: improved, stayed the same, or declined)?
   Changes in the economy – job losses, foreclosures, lack of health insurance, etc. Additionally, the increase in Hispanic population (both legal and illegal) with the poor jobs and lack of health insurance, etc.

4. What other factors have contributed to the (based on answer to question #2: improvement, decline or to health and quality of life staying the same)?
   I think seniors are at risk for a decline due to the multiple choices for Medicare and related policies. Many seniors are opting for what they think are supplemental policies when they are really Medicare replacement policies. When the time comes, they have limited coverage, limited options, etc.

5. Are there people or groups of people in Harvard whose health or quality of life may not be as good as others?
   Yes

   a. Who are these persons or groups (whose health or quality of life is not as good as others)?
      Seniors on limited/fixed incomes that do not qualify for other services. Hispanics, especially those that are illegal.

   b. Why do you think their health/quality of life is not as good as others?
      Seniors with low incomes, but not low enough to qualify for Medicaid, are often unable to afford the goods and services they need and there is not help for them. Hispanics, especially illegal, have limited access to preventive and routine healthcare and, therefore, often wait until a crisis situation to seek medical attention. This means a trip to the ED much sicker (and costly) than if they had been seen earlier.

6. What barriers, if any, exist to improving health and quality of life in Harvard?
   Lack of funding for more services for seniors to help keep them in their homes. For the Hispanics, especially those that are illegal, there is a lot of FEAR in this Trump-era.

7. In your opinion, what are the most critical health and quality of life issues in Harvard?
   Mental health services and preventive/routine care to prevent/limit trips to the ED.

8. What needs to be done to address these issues?
   Affordable mental health services in this area, as well as follow up and assistance for affording medications.

9. In your opinion, what else will improve the health and quality of life in Harvard?
   Investment (financial and non-financial) in services for seniors – such as programs offered by the Harvard Senior Center and parks and other recreational opportunities for all citizens of Harvard.
Key Informant #6

Of the following focus areas, please rank order the top 5 major health-related issues in the Harvard community:

- Alcohol and drug use
- Chronic disease
- Communicable disease
- Environmental & occupational
- Growth & development
- Injury & violence
- Mental health
- Access to care
- Tobacco
- Reproductive & sexual
- Communicable disease
- Physical activity
- Nutrition

1. In general, how would you rate health and quality of life in Harvard?
   - Below average

2. In your opinion, has health and quality of life in Harvard improved, stayed the same, or declined over the past few years?
   - Same

3. Why do you think it has (based on answer from question #2: improved, stayed the same, or declined)?
   - Lack of information on healthy lifestyle, lack of access to care

4. What other factors have contributed to the (based on answer to question #2: improvement, decline or to health and quality of life staying the same)?
   - Lack of information on healthy lifestyle, lack of access to care

5. Are there people or groups of people in Harvard whose health or quality of life may not be as good as others?
   - Yes
     a. Who are these persons or groups (whose health or quality of life is not as good as others)?
        - Low socio-economic group
     b. Why do you think their health/quality of life is not as good as others?
        - Lack of information on healthy lifestyle, lack of access to care

6. What barriers, if any, exist to improving health and quality of life in Harvard?
   - Outdoor and indoor facilities for community to engage in physical activity; language barrier (i.e. Spanish)

7. In your opinion, what are the most critical health and quality of life issues in Harvard?
   - Programs for healthy lifestyle, nutrition and physical activity for all ages

8. What needs to be done to address these issues?
   - Community initiative to inform and promote healthy lifestyles

9. In your opinion, what else will improve the health and quality of life in Harvard?
   - n/a
Key Informant # 7

Of the following focus areas, please rank order the top 5 major health-related issues in the Harvard community:

1. Alcohol and drug use
2. Chronic disease
3. Communicable disease
4. Growth & development
5. Mental health

1. In general, how would you rate health and quality of life in Harvard?
   Good

2. In your opinion, has health and quality of life in Harvard improved, stayed the same, or declined over the past few years?
   Stayed the same

3. Why do you think it has (based on answer from question #2: improved, stayed the same, or declined)?
   My perception is service and availability haven’t changed.

4. What other factors have contributed to the (based on answer to question #2: improvement, decline or to health and quality of life staying the same)?
   No change.

5. Are there people or groups of people in Harvard whose health or quality of life may not be as good as others?
   Yes
   a. Who are these persons or groups (whose health or quality of life is not as good as others)?
      Those from disadvantaged socioeconomic groups
   b. Why do you think their health/quality of life is not as good as others?
      I have observed them.

6. What barriers, if any, exist to improving health and quality of life in Harvard?
   The economy

7. In your opinion, what are the most critical health and quality of life issues in Harvard?
   Economic

8. What needs to be done to address these issues?
   More, higher paying jobs

9. In your opinion, what else will improve the health and quality of life in Harvard?
   An improvement in the economy
Of the following focus areas, please rank order the top 5 major health-related issues in the Harvard community:

3. Alcohol and drug use
5. Chronic disease
   Communicable disease
___ Oral health
   Environmental & occupational
2. Physical activity
   Reproductive & sexual
1. Growth & development
4. Tobacco
   Injury & violence
   Access to care
   Mental health

1. In general, how would you rate health and quality of life in Harvard?
   Pretty good
2. In your opinion, has health and quality of life in Harvard improved, stayed the same, or declined over the past few years?
   Declined 2007-2013, been improving since then
3. Why do you think it has (based on answer from question #2: improved, stayed the same, or declined)?
   Generally in parallel with the economy
4. What other factors have contributed to the (based on answer to question #2: improvement, decline or to health and quality of life staying the same)?
   Language barrier for some, fear of authority for undocumented, lack of understanding of available resources
5. Are there people or groups of people in Harvard whose health or quality of life may not be as good as others?
   Yes
   a. Who are these persons or groups (whose health or quality of life is not as good as others)?
      Unemployed, Hispanic minority, elderly
   b. Why do you think their health/quality of life is not as good as others?
      Poverty, isolation, lack of knowledge of resources
6. What barriers, if any, exist to improving health and quality of life in Harvard?
   Poverty, unemployment, language barrier for portion of Hispanic community
7. In your opinion, what are the most critical health and quality of life issues in Harvard?
   Poverty, unemployment, underemployment
8. What needs to be done to address these issues?
   Economic improvement, proactive outreach
9. In your opinion, what else will improve the health and quality of life in Harvard?
   IT improvements for rural elderly to access health services remotely
**Key Informant #9**

Of the following focus areas, please rank order the top 5 major health-related issues in the Harvard community:

| 1. | Alcohol and drug use | 4. | Nutrition |
| 2. | Chronic disease | 5. | Oral health |
| 3. | Communicable disease | Physical activity |
| 4. | Environmental & occupational | Reproductive & sexual |
| 5. | Growth & development | Tobacco |
| 6. | Injury & violence | Access to care |
| 7. | Mental health |

1. In general, how would you rate health and quality of life in Harvard?
   - Below average

2. In your opinion, has health and quality of life in Harvard improved, stayed the same, or declined over the past few years?
   - Declined

3. Why do you think it has (based on answer from question #2: improved, stayed the same, or declined)?
   - Declining local economy

4. What other factors have contributed to the (based on answer to question #2: improvement, decline or to health and quality of life staying the same)?
   - Loss of community resources

5. Are there people or groups of people in Harvard whose health or quality of life may not be as good as others?
   - Yes
     a. Who are these persons or groups (whose health or quality of life is not as good as others)?
        - Low income, Hispanics/minorities
     b. Why do you think their health/quality of life is not as good as others?
        - Lower income and access to resources

6. What barriers, if any, exist to improving health and quality of life in Harvard?
   - Employment, prejudice

7. In your opinion, what are the most critical health and quality of life issues in Harvard?
   - Economics, employment opportunities, income, resources

8. What needs to be done to address these issues?
   - Development of local economy

9. In your opinion, what else will improve the health and quality of life in Harvard?
   - Development of cross-cultural communication and identity
APPENDIX C

Characteristics of Survey Respondents

Survey Respondent Age

Source: 2017 Harvard CHNA Survey

Survey Respondent Gender

Source: 2017 Harvard CHNA Survey
Survey Respondent Race

- White: 94%
- Hispanic/Latino: 3%
- Black: 3%
- Other: 0%

Source: CHNA Survey

Survey Respondent Education

- Less than High School: 1%
- Some High School: 2%
- High School: 25%
- Some College: 25%
- Associate's Degree: 13%
- Bachelor's Degree: 18%
- Graduate Degree: 16%

Source: CHNA Survey
Survey Respondent People in Household

Source: 2017 Harvard CHNA Survey
## APPENDIX D

### McHenry County Community Health Resources

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Type of Service</th>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Inpatient</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mercy Harvard Hospital</td>
<td>Critical access hospital</td>
<td>Harvard</td>
</tr>
<tr>
<td>Mercy Harvard Care Center</td>
<td>Inpatient rehabilitation</td>
<td>Harvard</td>
</tr>
<tr>
<td>Centegra Hospital</td>
<td>Full-service hospital</td>
<td>Huntley, McHenry, Woodstock</td>
</tr>
<tr>
<td><strong>Outpatient</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mercy Harvard Clinic South</td>
<td>Family medicine; lab; diabetes center; occupational health and medicine; pediatrics; weight management</td>
<td>Harvard</td>
</tr>
<tr>
<td>Mercy Harvard Hospital Clinic</td>
<td>Cardiology; gastroenterology; general surgery; sleep medicine; pulmonology; vascular surgery ophthalmology; heart and vascular; podiatry</td>
<td>Harvard</td>
</tr>
<tr>
<td>Mercy Diabetes Center</td>
<td>Diabetes education</td>
<td>Harvard, Woodstock</td>
</tr>
<tr>
<td>Mercy Harvard Rehabilitation Center</td>
<td>Physical therapy; occupational therapy</td>
<td>Harvard</td>
</tr>
<tr>
<td>Mercy Harvard Sleep Disorders Center</td>
<td>Sleep testing; sleep apnea treatment; sleep disorders</td>
<td>Harvard</td>
</tr>
<tr>
<td>Mercy Harvard Pain Center</td>
<td>Pain management</td>
<td>Harvard</td>
</tr>
<tr>
<td>Mercy Regional Eye Center</td>
<td>Ophthalmology</td>
<td>Harvard, Woodstock</td>
</tr>
<tr>
<td>Mercy Regional Heart and Vascular</td>
<td>Heart; vascular</td>
<td>Harvard, Woodstock</td>
</tr>
<tr>
<td>Center</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mercy Assisted Care</td>
<td>Home health, hospice</td>
<td>Harvard</td>
</tr>
<tr>
<td>Mercy Assisted Care - HME</td>
<td>Home medical equipment &amp; supplies</td>
<td>Harvard</td>
</tr>
<tr>
<td>Mercy Harvard Treatment Coordination</td>
<td>Wound care; dressing changes; IV therapy; medication administration; transfusion services; catheter care; ports; PICC line care; phlebotomy; caregiver and patient education</td>
<td>Harvard</td>
</tr>
<tr>
<td>Center</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Harvard Physical Therapy</td>
<td>Physical therapy</td>
<td>Harvard</td>
</tr>
<tr>
<td>Mercy Algonquin Medical Center</td>
<td>Otolaryngology; internal medicine; lab; podiatry</td>
<td>Algonquin</td>
</tr>
<tr>
<td>Mercy Crystal Lake Chiropractic and</td>
<td>Chiropractic; massage therapy</td>
<td>Crystal Lake</td>
</tr>
<tr>
<td>Rehabilitation Center</td>
<td></td>
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</tr>
<tr>
<td>Medical Center/Service Center</td>
<td>Services Offered</td>
<td>Location</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-------------------</td>
<td>----------</td>
</tr>
<tr>
<td>Mercy Crystal Lake Medical Center - East</td>
<td>Audiology; allergy/immunology; diabetes care; family medicine; lab; otolaryngology; pediatrics; pulmonology; weight management</td>
<td>Crystal Lake</td>
</tr>
<tr>
<td>Mercy Crystal Lake Medical Center - South</td>
<td>Family medicine; gastroenterology; lab; OB/GYN; orthopedic surgery; pediatrics; podiatry; radiology</td>
<td>Crystal Lake</td>
</tr>
<tr>
<td>Mercy Crystal Lake OB/GYN</td>
<td>OB/GYN</td>
<td>Crystal Lake</td>
</tr>
<tr>
<td>Mercy Northwest Women's Group</td>
<td>OB/GYN; women's health services</td>
<td>Lake in the Hills</td>
</tr>
<tr>
<td>Mercy Pediatrics</td>
<td>Pediatrics</td>
<td>Algonquin</td>
</tr>
<tr>
<td>Mercy Richmond Medical Center</td>
<td>Family medicine; senior adult health care; lab</td>
<td>Richmond</td>
</tr>
<tr>
<td>Mercy Woodstock Medical Center</td>
<td>Cardiology; dermatology; family medicine; gastroenterology; general surgery; OB/GYN; hand surgery, imaging services; internal medicine; lab; massage therapy; neurology; nutrition; occupational health &amp; medicine; occupational therapy; orthopaedic surgery; pediatrics; physical therapy; plastic &amp; cosmetic surgery; radiology; podiatry; pulmonology; rheumatology; weight management</td>
<td>Woodstock</td>
</tr>
<tr>
<td>Mercy McHenry Eye Center</td>
<td>Ophthalmology</td>
<td>McHenry</td>
</tr>
<tr>
<td>Mercy Memory Center</td>
<td>Memory loss services</td>
<td>Woodstock</td>
</tr>
<tr>
<td>Mercy Orthotics and Prosthetics Center</td>
<td>Orthotics &amp; prosthetic services</td>
<td>Woodstock</td>
</tr>
<tr>
<td>Centegra Physician Care</td>
<td>Family practice</td>
<td>Algonquin; Fox Lake; Spring Grove</td>
</tr>
<tr>
<td>Centegra Aesthetic Plastic &amp; Reconstructive Surgery Institute</td>
<td>Plastic &amp; Reconstructive Surgery</td>
<td>Crystal Lake</td>
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<tr>
<td>Centegra Physician Care - McHenry County Orthopedics</td>
<td>Orthopedics; imaging</td>
<td>Crystal Lake</td>
</tr>
<tr>
<td>Centegra Physician Care</td>
<td>Internal medicine; pediatrics; OB; endocrinology; psychology; rheumatology; physiatry; occupational health</td>
<td>Crystal Lake</td>
</tr>
<tr>
<td>Centegra Physician Care - Surgical Associates</td>
<td>Surgery</td>
<td>Crystal Lake</td>
</tr>
<tr>
<td>Centegra Physician Care - Gavers</td>
<td>Cardiology; surgery</td>
<td>Crystal Lake</td>
</tr>
<tr>
<td>Centegra Physician Care - Fox Valley</td>
<td>Internal medicine; psychology</td>
<td>Crystal Lake</td>
</tr>
<tr>
<td>Centegra Physician Care</td>
<td>Neurology</td>
<td>Crystal Lake</td>
</tr>
<tr>
<td>Centegra Health Center - Medical Office Building 1</td>
<td>Family practice; internal medicine; neurology; OB; pediatrics; psychology</td>
<td>Huntley</td>
</tr>
<tr>
<td>Centegra Health Center - Medical Office Building 2</td>
<td>Endocrinology; rheumatology</td>
<td>Huntley</td>
</tr>
<tr>
<td>Centegra Back and Spine Center</td>
<td>Back; spine</td>
<td>Huntley</td>
</tr>
<tr>
<td>Centegra Physician Care</td>
<td>Cardiology; chiropractic; orthopedics</td>
<td>Huntley</td>
</tr>
<tr>
<td>Service Type</td>
<td>Organization Name</td>
<td>Specialties</td>
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<tr>
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<tr>
<td>Heart Failure Clinic</td>
<td>Centegra Heart Failure Clinic</td>
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<tr>
<td>Physician Care</td>
<td>Centegra Physician Care</td>
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</tr>
<tr>
<td>Health Center</td>
<td>Centegra Health Center</td>
<td>Medica imaging</td>
</tr>
<tr>
<td>Rehabilitation &amp; Sports Medicine</td>
<td>Centegra Rehabilitation &amp; Sports Medicine Clinic</td>
<td>Rehab; sports medicine</td>
</tr>
<tr>
<td>Back and Spine Center</td>
<td>Centegra Back and Spine Center</td>
<td>Internal medicine; family practice; cardiology; psychology; chiropractic;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>endocrinology; OB/GYN</td>
</tr>
<tr>
<td>Urgent/Immediate Care</td>
<td>Mercyhealth Urgent Care</td>
<td>Urgent Care</td>
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<tr>
<td></td>
<td>Advocate Clinic at Walgreens</td>
<td>Immediate Care</td>
</tr>
<tr>
<td></td>
<td>Centegra Health Center</td>
<td>Immediate Care</td>
</tr>
<tr>
<td>Mental Health/Alcohol &amp; Substance</td>
<td>Pioneer Center for Human Services</td>
<td>Community based human services including residential behavioral health</td>
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<tr>
<td>Abuse</td>
<td>Meridian Behavioral Health</td>
<td>Counseling; therapy; psychological services; substance abuse treatment</td>
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<td>Proactive Behavioral Services</td>
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<td>Family Alliance, Inc</td>
<td>Behavioral health; counseling services</td>
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<td>Centegra Physician Care</td>
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<td>Centegra Outpatient Behavioral Health</td>
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<td>The Mathers Clinic</td>
<td>Counseling; therapy; psychological services; substance abuse treatment</td>
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### Senior Services

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