



2024 Community Health Needs Assessment

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Executive Summary

Carlinville Area Hospital & Clinics (CAH&C) is pleased to present the 2024 Community Health Needs Assessment (CHNA). Conducted every three years as required by the Affordable Care Act, the CHNA is a collaborative and systematic process designed to identify and address health needs. By engaging with local stakeholders, the assessment evaluates community health priorities, resources, and challenges. The resulting CHNA report plays a vital role in guiding the organization's planning, implementation, and evaluation of strategies and programs that benefit the community. This process ensures a deep understanding of local health needs, incorporates valuable community input, and supports the development of an actionable implementation strategy to improve health outcomes in our service areas.

Process Overview

For the FY2024 CHNA, CAH&C engaged in a detailed process that included:

- Collecting secondary data and demographic insights.
- Paralleled data collection utilizing the Macoupin County Health Department (IPLAN)
- Conducting focus group surveys with diverse community representation.
- Analyzing the data to identify critical health challenges.
- Presenting findings to the Board of Directors for review and approval.

Key Findings

Through a thorough process of analysis, and community engagement, the following priority health needs were identified:

1. ***Access to Healthcare Services***: Breaking down barriers to primary and specialty care, such as transportation issues, and ensuring fair and equitable care for residents of Macoupin County, Illinois.
2. ***Mental and Behavioral Health Treatment***: Improving access to mental health services, reducing stigma around seeking help, and expanding comprehensive treatment options for the community.
3. ***Workforce Development***: Strengthening local healthcare workforce, ensuring the community has the professionals needed to meet their healthcare needs now and in the future.
4. ***Food Insecurity***: Reducing food insecurity by promoting healthy eating habits and supporting sustainable food programs to improve mental and physical health.

Implementation Strategy

The implementation strategy focuses on actionable solutions informed by secondary data and community feedback. Each priority area will include measurable objectives to address underlying causes and evaluate progress. By collaborating with local leaders and leveraging resources, CAH&C is committed to developing targeted initiatives that address the key findings and improve overall community well-being. As a cornerstone of health in Macoupin County and

the surrounding areas, CAH&C remains dedicated to addressing these needs and advancing the health of our community. This report is made publicly accessible, reflecting our transparency and commitment to impactful healthcare delivery.

CAH&C Hospital Background, Mission, and Vision

Carlinville Area Hospital & Clinics (CAH&C) is designated as a rural, independent critical access hospital, but to Macoupin County, IL, we are much more—we are a Comprehensive Rural Health System dedicated to delivering exceptional healthcare. Serving Carlinville and the surrounding communities, CAH&C is renowned for its award-winning inpatient, outpatient, and rehabilitation services. Our 24-hour emergency department is equipped to provide rapid, expert care for STAT Stroke and STAT Heart emergencies.

Guided by visionary leadership and supported by a team of over 300 dedicated professionals, CAH&C combines innovation and modernized facilities to offer high-quality care across a wide range of specialties.

Current Hospital Services and Assets

Major Centers and Services	Statistics (FY2024)	New Services and Facilities
Diagnostic Imaging	Total Beds: 25	Mobile Medical Unit – Virden, IL
Emergency Care	Total Colleagues: 349	Gillespie Pediatrics
Infusion and Chemotherapy	Bed Side RNs: 64	TEE Procedures
Inpatient Care: Advanced Care Unit, Acute Care, Swing Bed Program	In-Patient Admissions: 412	Interventional Pain Management
Integrated Behavioral Health	ED Visits: 7,155	Urology
Laboratory	Births: 0	Total Joint Replacements
	Inpatient Surgeries: 55	Advanced Care Unit
Pediatric Medicine	Outpatient Surgeries: 1,630	Tele-Nocturnist
Rehabilitation Services	Physicians on Medical Staff: 96	Tele-Cardiology
Respiratory	Volunteers: 120	
Rural Health Clinic(s)	Economic Community Benefit: \$91.6 Million	
Sleep Clinic	Rural Health Clinic Visits 22,197	
Outpatient Specialty Clinic		
Surgery		
Transitional Care (Swing Bed)		
Walk-in Clinic; Carlinville & Virden		
Wound Clinic		

Hospital Accreditations

CAH&C received accreditation and licensure from: U.S. Department of Health and Human Services, Accreditation Commission for Healthcare (ACHC), Illinois Department of Public Health. CAH&C is affiliated with the American Hospital Association, Illinois Hospital Association, and the Illinois Critical Access Hospital Network (ICAHN).

Background

The Community Needs Health Assessment process is conducted every three years. In response to issues identified and prioritized and the implementation strategy developed to address them, Carlinville Area Hospital & Clinics has taken the following steps since the last CHNA.

CAH&C -CHNA 2021

Three prioritized needs were identified as significant health needs:

Priority #1 – Access to Mental and Behavioral Health Treatment

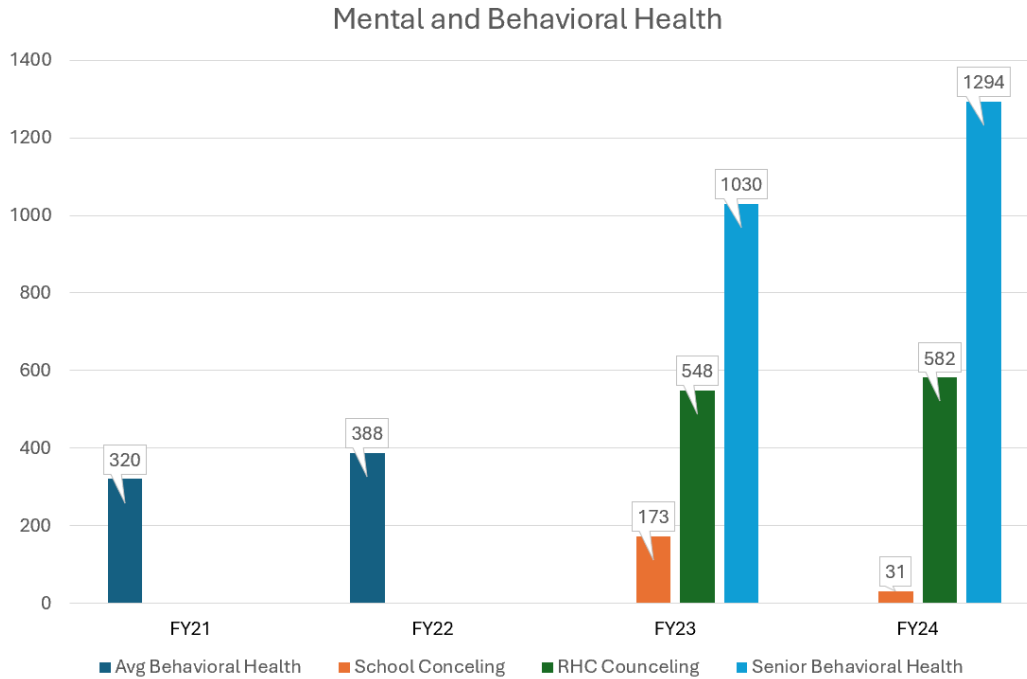


Improved access to prevention and early intervention services:

- CAH&C has successfully collaborated with schools and other community partners to determine appropriate prevention, education, and training for student and adult populations.
- Continued partnering with Primary Care physicians to develop a more expansive early detection and intervention protocol in conjunction with mental and behavioral health providers.

Increase access to care:

- CAH&C has increased the patient volumes of both mental health and behavioral health service lines as a direct result of increasing access points through telehealth visits, provider availability, and crisis screening through our other service lines such as Primary Care, Emergency Care, and In-Patient Care Programs.



Priority #2 – Food Insecurity



Improve access to prevention and early intervention services.

- Continued work with CAH&C providers in Primary Care, Specialty Care, Emergency Care, and In-Patient Care services to determine barriers to healthy living, i.e.- social determinants of health.
- Ongoing work with projects such as the Community Health Fair to provide health education, screenings, and referrals of care.
- Work with individuals to improve understanding of community resources and access opportunities.

Increase access to care:

- CAH&C continues to work with local food pantries and feeding programs such as Project 3rd Day and the Lunch Bunch to support access to food.
- Collaborate with community partners to expand opportunities for nutritional education.

Work with internal and external stakeholders to engage in unified planning and policy.

- Work with state and local leaders to factor health implications into policy and budget decisions.

Priority #3 – Workforce Development



Integrate programs and long-term goals with potential healthcare worker groups.

- CAH&C has developed programs that collaborate with schools, community colleges, and universities to implement programs that can provide a pipeline of future healthcare professionals.
- Work with existing career organizations to provide supervised mentorship and workforce training opportunities.

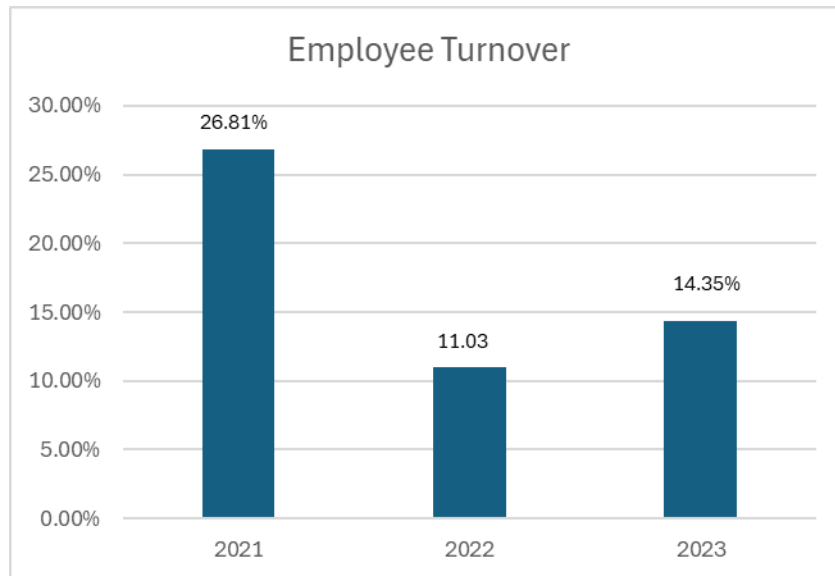
Develop workforce plans and training programs.

- Development of an extensive HR Re-Calibration program and expansive Nursing Clinical Ladder Program professional development program. The Clinical Ladder Program was also expanded to include Laboratory, Radiology, Cardiopulmonary, and Rehabilitation Professionals.
- Continue to offer CAH&C's current workforce a robust benefits package and competitive pay within or exceeding the regional market for their professions.

Work with internal and external stakeholders to engage to expand workforce development.

- Work with CAH&C's Foundation to support the scholarship program for local students pursuing a career in a healthcare field.
- Work with CAH&C's Auxiliary to support the scholarship program that provides funds to local students pursuing a career in nursing.

- Participation in job fairs such as Lewis Clark Community College and Carlinville High School. Also, creating the opportunity for virtual job fairs for difficult to hire positions, internally.



Communities Served by CAH&C and Demographic Data

A Complete review of Macoupin County, IL Demographics is located in Appendix A of this document.

For the purpose of this CHNA, Carlinville Area Hospital & Clinics defined its primary service area and populations as the general population within the geographic area in and surrounding the County of Macoupin, shown in detail below. The hospital’s patient population includes all who receive care without regard to insurance coverage or eligibility for assistance.

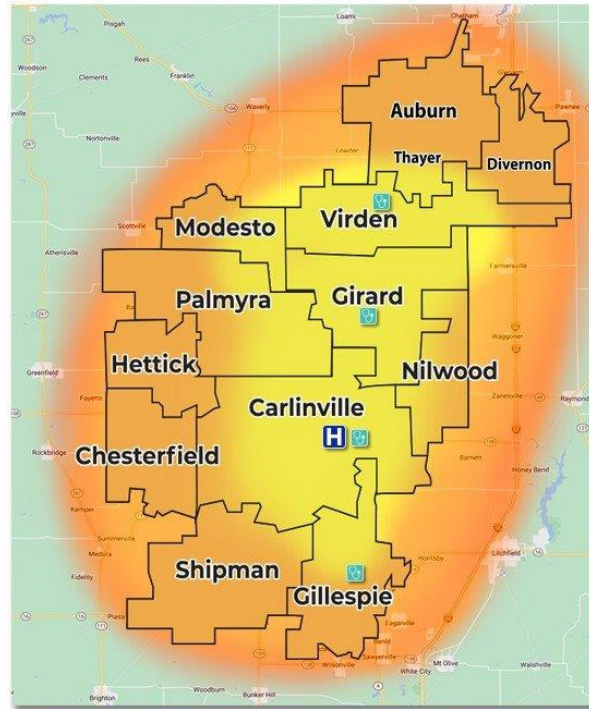
This territory covers approximately 863 square miles, with a population of approximately 44,018, and a population density of 52.1 persons per square mile. The hospitals’ patient population includes all who receive care without regard to insurance coverage or eligibility for assistance.

- Source Data: [U.S. Census Bureau QuickFacts: Macoupin County, Illinois](#)

Cities, Villages, and Unincorporated Communities

- | | |
|-----------------|------------------|
| Carlinville, IL | Girard, IL |
| Nilwood, IL | Chesterfield, IL |
| Hettick, IL | Palmyra, IL |
| Shipman, IL | Modesto, IL |
| Gillespie, IL | Virden, IL |
| Medora, IL | Bunker Hill, IL |
| Divernon, IL | Auburn, IL |
| Thayer, IL | Pawnee, IL |
| Chatham, IL | Brighton, IL |

Service Area Map



2024 CHNA Primary Data

Carlinville Area Hospital & Clinics elected to develop a robust community survey process to collect input and identify health concerns and needs in the delivery of healthcare and health services to improve wellness and reduce chronic illness for all residents of Macoupin County.

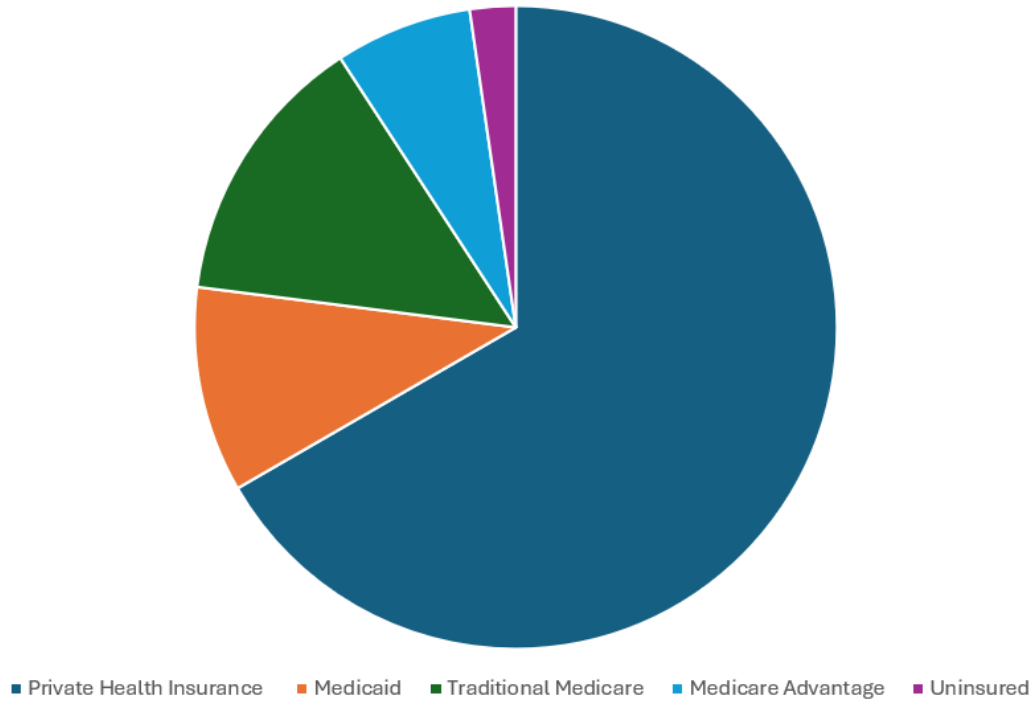
The survey was sent to targeted community members and posted for community at large via the CAH&C social media accounts, CAH&C website, and through direct email correspondence. The three target groups are.

1. Community At Large
2. Medical Professionals and Partners
3. Community Leaders and Representatives

Survey Results

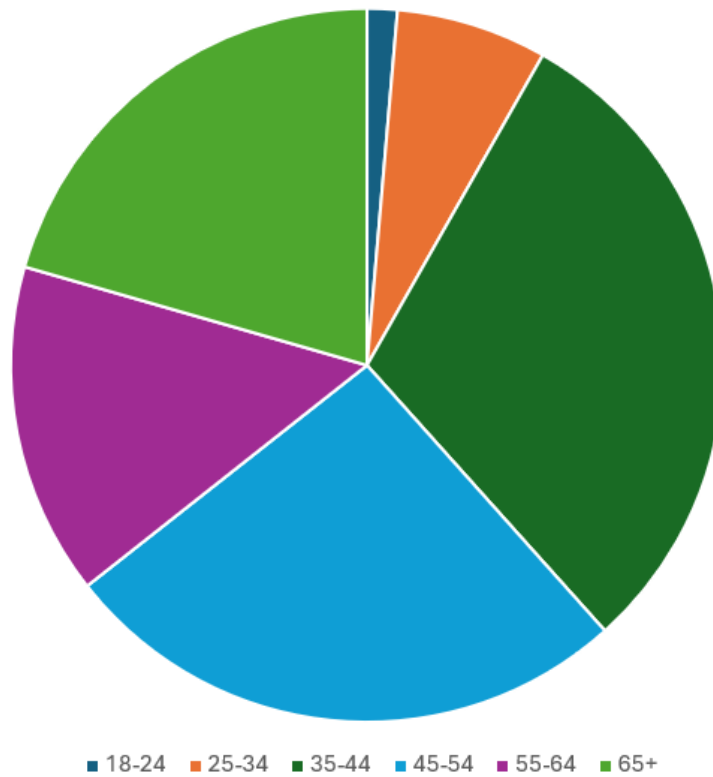
- 17 total Illinois zip codes were represented in the survey and consisted of those surrounding the CAH&C primary service area.
- Of the 103 total respondents to the CAH&C 2024 CHNA survey, 79.45% of them held private insurance, 12.33% were currently enrolled in Medicaid, 16.44% were currently enrolled in Traditional Medicare, 8.22% were currently enrolled in a Medicare Advantage Plan, and 2.74% of the respondents claimed to be currently uninsured.

Insurance %



- The respondent's birthdates represented a wide range of ages.

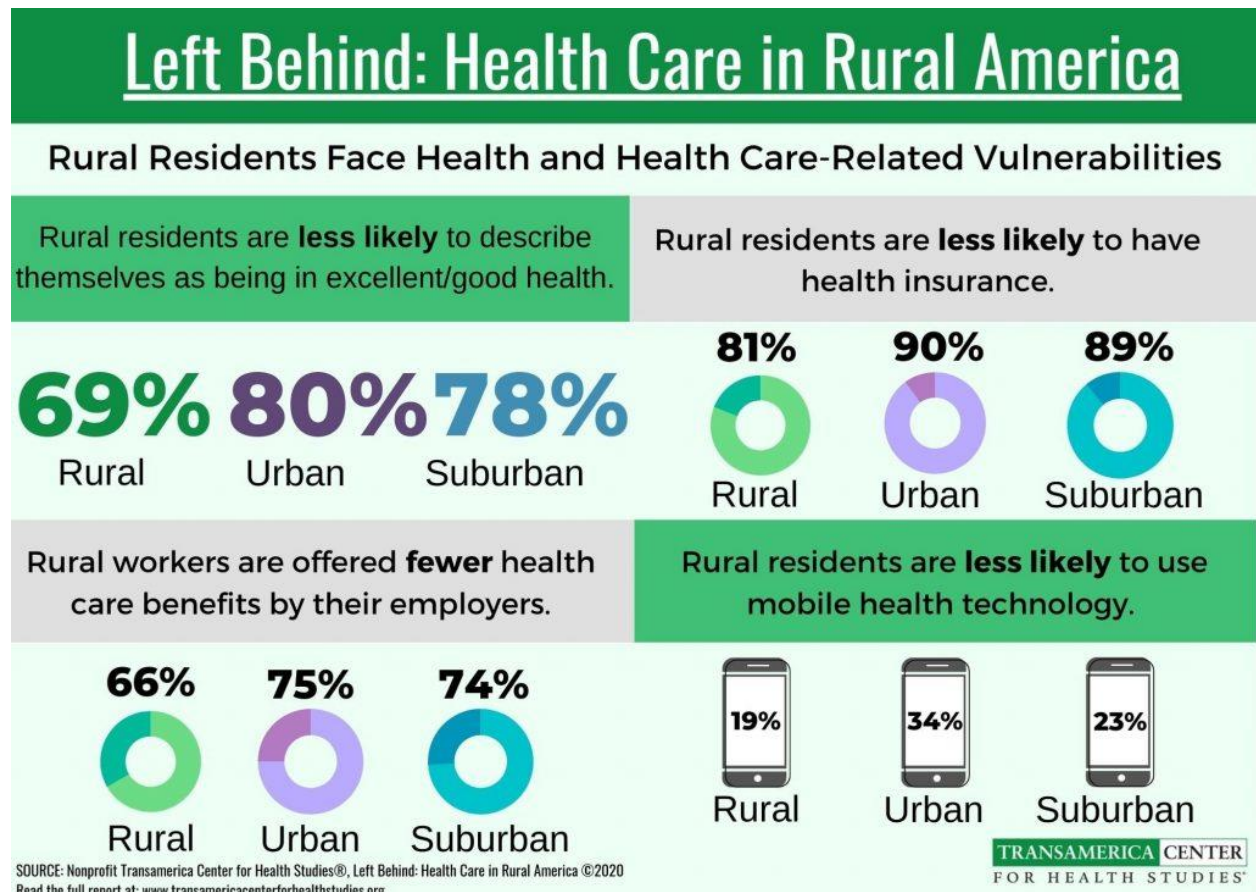
Ages



- 78.08% of the survey respondents were Female, while 20.55% of them were Male. 1.37% of the respondents elected not to disclose.
- The 2024 CHNA survey respondents were asked to select the top four problems within the community relating to health or a healthy lifestyle. The top four identified issues were.
 - 1) Access
 - 2) Mental and Behavioral Health
 - 3) Food Insecurity
 - 4) Workforce Development
- Survey Respondents also asked what the top 5 health issues are in the community. The top five identified issues are.
 - 1) Diabetes
 - 2) Mental Health Disorder
 - 3) Arthritis
 - 4) Heart Disease
 - 5) Chronic Pain

2024 Carlinsville Area Hospital & Clinics CHNA Priority of Needs

Priority #1 Access:



In response to the Community Health Needs Assessment (CHNA), CAH&C has prioritized improving access to healthcare—a critical issue for most rural populations where geographic, economic, and logistical barriers that often prevents individuals from receiving timely and adequate care.

Identifying the Challenge: Access to Care in Rural Communities

Rural America faces many typical challenges, Macoupin County, IL, although designated as a rural area, and designated as a provider shortage is an area of rural Illinois that has a comprehensive rural health system that has and continues to focus on expert care close to home. Some of the typical challenges of rural areas, include:

1. **Geographic Barriers:** With a sprawling rural landscape, rural residents often need to travel long distances to access healthcare services.
2. **Provider Shortages:** A limited number of healthcare providers in many rural areas results in longer wait times and fewer specialized services.
3. **Economic Constraints:** Many rural Illinois residents face financial barriers, including a lack of insurance coverage or high out-of-pocket costs.
4. **Transportation Issues:** Public transportation options are often limited in rural areas of Illinois, and not all residents have reliable access to private vehicles or timely access to emergency transportation.

These challenges across most rural areas contribute to delays in care, poorer health outcomes, and a higher prevalence of chronic conditions such as diabetes, heart disease, and obesity.

CAH&C's Strategic Approach to Addressing Access

Informed by the CHNA, Carlinville Area Hospital & Clinics has implemented several initiatives aimed at breaking down these barriers and ensuring that all residents of Macoupin County have access to high-quality healthcare.

1. **Geographical Barriers:**
Since the last Community Health Needs Assessment (CHNA) in 2021, CAH&C has developed a comprehensive rural health system with Primary Care at its core. This ongoing advancement of the rural healthcare delivery model continues to expand access to specialty care, effectively addressing the geographical barriers within its service area.
2. **Provider Shortages:**
The CAH&C strategy, centered on Primary Care, emphasizes ongoing recruitment and contractual strategies to strengthen its Primary Care services. Additionally, it has significantly expanded local Specialty Care offerings, bringing specialists directly to facilities within Macoupin County. This approach continues to address the provider shortages that many rural communities across America face, reducing barriers to access and improving healthcare for residents. The expanded specialties include:

1. General Surgery
2. Gastroenterology
3. Orthopedic Surgery
4. Allergy
5. Otolaryngology (ENT)
6. Pulmonary Medicine
7. Behavioral Health
8. Podiatry
9. Wound Care
10. Cardiology
11. Urology
12. Hospitalist Services
13. Emergency Medicine
14. Neurology
15. Rheumatology
16. Ophthalmology
17. Nephrology
18. Oncology
19. Gynecology
20. Interventional Pain Management



3. Economic Constraints:

As one of the largest employers in Macoupin County, IL, CAH&C has implemented

strategies to provide its employees and staff with a highly competitive benefits package. This ensures that our team has access to affordable healthcare options through industry-leading plans. Prioritizing cost control for both our staff and the residents we serve has always been a cornerstone of the CAH&C organization's mission.

4. **Transportation Issues:**

CAH&C has intensified its community outreach efforts to promote and educate residents about available transportation services and healthcare resources. Through regular health fairs, wellness programs, and mobile clinics, healthcare is brought directly to the community, increasing awareness and utilization of these vital services. CAH&C remains dedicated to continually assessing community needs and is committed to ensuring that residents have access to the resources necessary for their well-being.

Measuring Impact and Looking Ahead

CAH&C's initiatives are already yielding promising results. Patient satisfaction surveys reveal increased confidence in accessing care. The Primary and Specialty Care programs have facilitated thousands of patient visits that might otherwise have been missed. Through ongoing community needs assessments and the continuous expansion of service lines, CAH&C is making significant strides in addressing the critical health need of improved access to care.

However, the work is far from over. CAH&C is committed to continuously evaluating and refining its programs to meet the evolving needs of Macoupin County residents. Future plans include:

- Expanding mental health services to address the growing need for behavioral health care.
- Enhancing partnerships with local schools and businesses to promote wellness initiatives.
- Continued development of Primary Care and Specialty Care through service line expansion and provider recruitment.
- Continue to create a larger footprint in Macoupin and surrounding counties through expansion of locations.
- Investing in capital needs and infrastructure to provide expert care locally.
- Collaborating with local businesses to create a Direct to Employer insurance product, providing affordable coverage and convenient access to expert care for their workforce.

Conclusion

Carlinville Area Hospital & Clinics' commitment to addressing the CHNA-identified priority of access to care is a testament to its dedication to the health and well-being of Macoupin County. By removing barriers and improving accessibility, CAH&C is not only addressing immediate healthcare needs but also fostering a healthier, more resilient community. As the challenges of rural healthcare continue to evolve, CAH&C remains steadfast in providing compassionate, comprehensive care for all.

Priority #2 Mental and Behavioral Health Treatment:

In response to the Community Health Needs Assessment (CHNA), CAH&C has prioritized improving mental and behavioral health services—a growing concern for rural populations where geographic, economic, and logistical barriers often prevent individuals from receiving timely and adequate care.

Identifying the Challenge: Mental and Behavioral Health in Rural Communities

Macoupin County faces several challenges typical of rural areas, including:

1. **Limited Access to Providers:** A shortage of mental health professionals in the area often leads to long wait times and unmet needs.
2. **Stigma Surrounding Mental Health:** Cultural barriers and stigma prevent many residents from seeking the care they need.
3. **Economic Constraints:** Many individuals face financial barriers, including inadequate insurance coverage for mental health services.
4. **Transportation Issues:** Public transportation options are limited, making it difficult for residents to access counseling or treatment services.

These challenges contribute to higher rates of untreated mental health conditions such as depression, anxiety, and substance use disorders, which negatively impact overall community well-being.

CAH&C's Strategic Approach to Mental and Behavioral Health

Informed by the CHNA, Carlinville Area Hospital & Clinics has implemented several initiatives to improve access to mental and behavioral health services across Macoupin County.

1. **Expanding Telehealth Services**
Recognizing the potential of telehealth, CAH&C has implemented virtual counseling and psychiatric services. Telehealth reduces barriers such as travel distance and increases access to care for patients in remote areas.
2. **Integrating Behavioral Health into Primary Care**
CAH&C has adopted an integrated care model, embedding behavioral health specialists within primary care clinics. This approach allows for early intervention and seamless coordination between physical and mental health services.
3. **Community Education and Awareness Campaigns**
To combat stigma and promote mental health awareness, CAH&C regularly hosts workshops, community events, and informational campaigns. These efforts aim to normalize conversations about mental health and encourage individuals to seek help.
4. **Substance Use Disorder Programs**
Addressing the growing issue of substance use disorders, CAH&C has developed

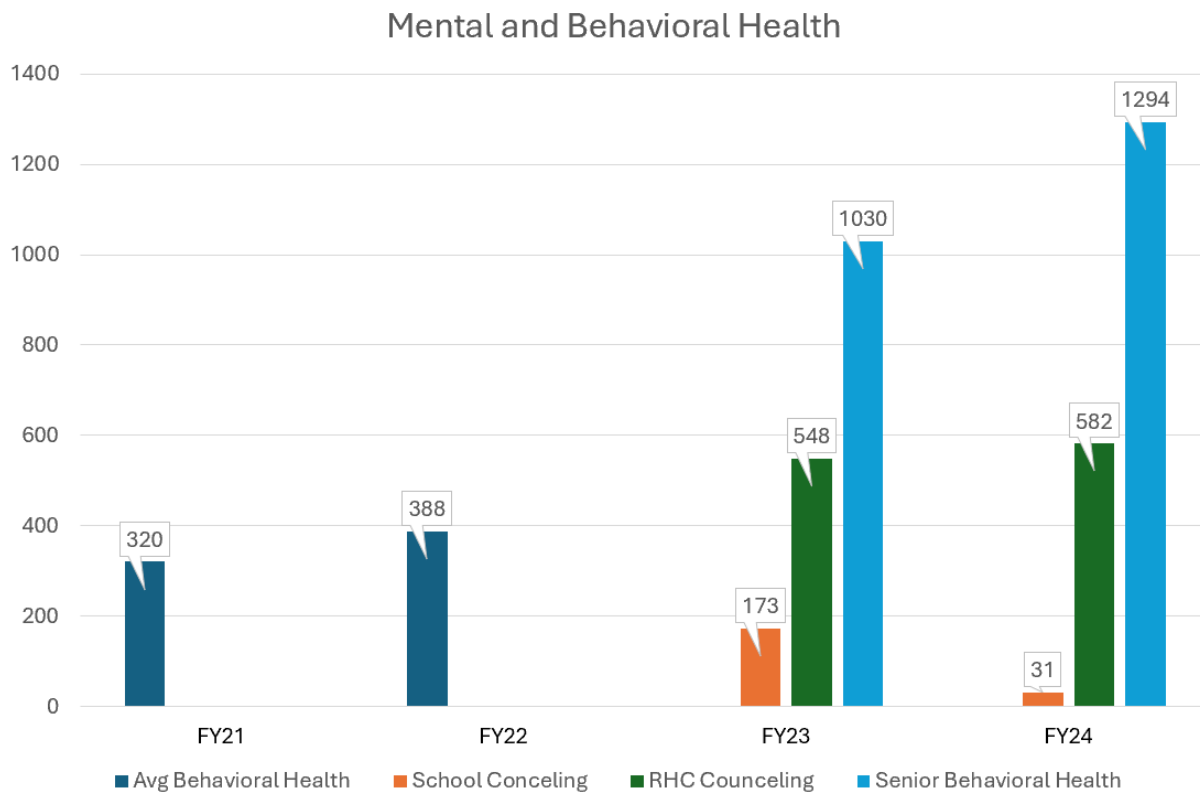
treatment and recovery programs, including counseling, medication-assisted treatment (MAT), and support groups.

5. Collaborations with Regional Partners

CAH&C have established partnerships with regional mental health organizations to bring additional resources and expertise to the community. This includes access to crisis intervention teams and specialized care providers.

Measuring Impact and Looking Ahead

CAH&C’s mental and behavioral health initiatives are already making a difference. Telehealth usage has increased significantly, and community feedback highlights improved access to services. Integrated care models have led to earlier detection and treatment of mental health issues, improving patient outcomes. As previously shown in this document, the following graph is a clear representation that the strategic approach which is underway within the CAH&C organization is working and Macoupin County residents are benefiting from these efforts.



Since the last CHNA in 2021, CAH&C has focused on building a comprehensive mental health system that addresses the unique challenges of rural healthcare delivery. By prioritizing collaboration and leveraging innovative solutions, the hospital continues to break down barriers to care.

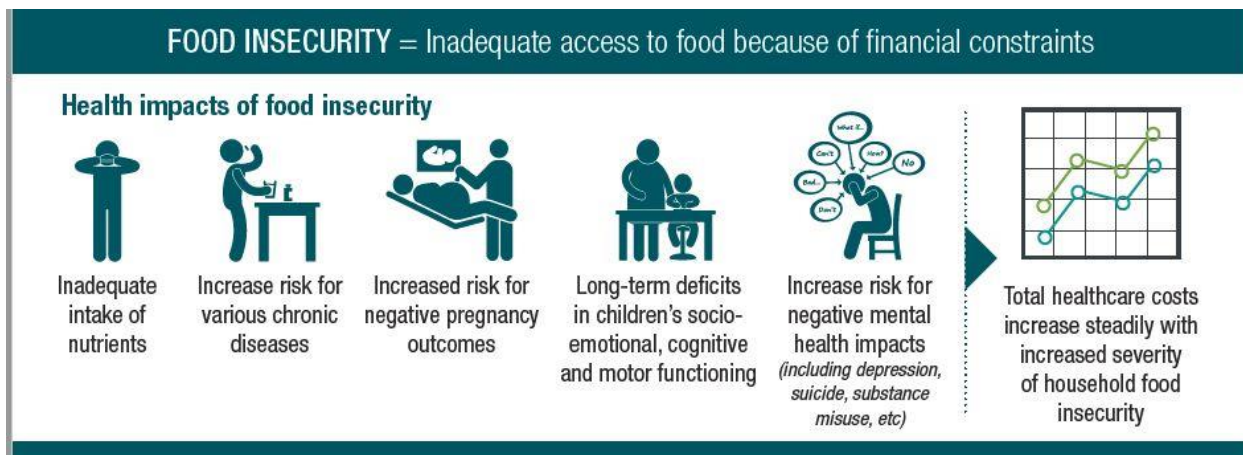
Future plans include:

- Expanding school-based mental health programs to reach younger populations.
- Increasing the availability of crisis intervention services.
- Investing in advanced training for staff to address complex mental health needs.
- Expanding Mental and Behavioral health Tele-Medicine options.

Conclusion

Carlinville Area Hospital & Clinics' commitment to addressing the CHNA-identified priority of mental and behavioral health is a testament to its dedication to the well-being of Macoupin County. By removing barriers and enhancing accessibility, CAH&C is fostering a healthier, more resilient community. As the challenges of rural healthcare continue to evolve, CAH&C remains steadfast in its mission to provide compassionate, comprehensive care for all.

Priority #3 Food Insecurity:



In response to the Community Health Needs Assessment (CHNA), CAH&C has prioritized addressing food insecurity—a significant issue in rural populations where limited access to nutritious food negatively impacts health outcomes.

Identifying the Challenge: Food Insecurity in Rural Communities

Macoupin County faces several challenges typical of rural areas, including:

1. **Limited Access to Grocery Stores:** Many areas in the county are "food deserts," where residents must travel long distances to access fresh and healthy food options.
2. **Economic Barriers:** Low-income households often struggle to afford nutritious foods, relying instead on cheaper, less healthy options.
3. **Transportation Issues:** Limited public transportation and lack of reliable private vehicles make it difficult for some residents to reach grocery stores or food pantries.
4. **Health Impacts:** Food insecurity is linked to higher rates of chronic diseases such as diabetes, hypertension, and obesity.

These challenges highlight the need for a coordinated community response to ensure residents have consistent access to nutritious food.

CAH&C's Strategic Approach to Addressing Food Insecurity

Informed by the CHNA, Carlinville Area Hospital & Clinics has implemented several initiatives to combat food insecurity across Macoupin County.

1. Community Food Pantries

CAH&C has continually partnered with local organizations such as Project 3rd Day and others to support and expand community food pantries. These pantries provide immediate relief to families in need, offering fresh produce, protein, and non-perishable items.

2. Nutrition Programs

Recognizing the importance of education, CAH&C offers programs and resources such as Lunch Bunch on healthy eating, meal planning, and budgeting for nutritious food. These programs empower residents to make informed choices. The 2024 efforts resulted in over \$16K in needed meals being served at the CAH&C main campus.

3. Partnerships with Local Farmers

Collaborating with local farmers, CAH&C promotes farm-to-table initiatives, connecting residents with fresh, locally grown produce through farmers' markets and community-supported agriculture (CSA) programs.

4. Screening for Food Insecurity in Healthcare Settings

CAH&C has integrated programs such as our partnered Community Health Fairs to combat many health-related crisis points including food insecurity screening into routine medical visits. Patients identified as food insecure are connected with resources such as food pantries, meal programs, and assistance services.

Measuring Impact and Looking Ahead

CAH&C's food insecurity initiatives are expected to continue to make a difference. Community food pantry usage has increased, and Lunch Bunch distribution programs have reached hundreds of households in remote areas. Nutrition education programs have received positive feedback, with participants reporting improved confidence in preparing healthy meals.

Since the last CHNA in 2021, CAH&C has focused on building a comprehensive approach to addressing food insecurity. By leveraging community partnerships and innovative solutions, the hospital is doing its part to reduce hunger and improve health outcomes.

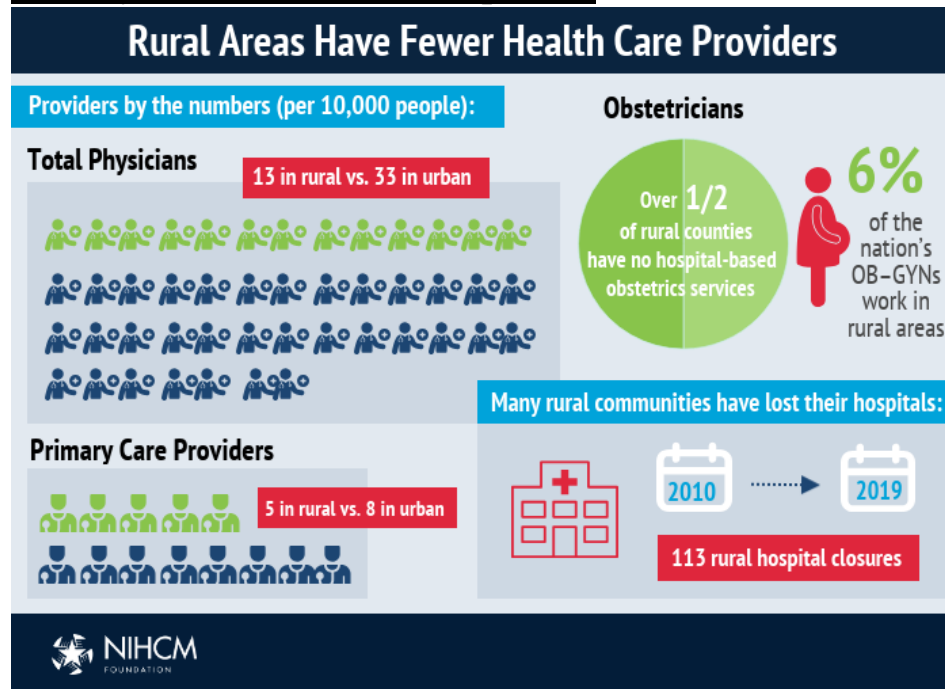
Future plans include:

- Expanding Lunch Bunch distribution programs to reach more underserved areas.
- Evaluation of school-based programs to provide nutritious meals and snacks to children.
- Enhancing collaborations with local businesses and non-profits to increase food availability.

Conclusion

Carlinville Area Hospital & Clinics' commitment to addressing the CHNA-identified priority of food insecurity is a testament to its dedication to the well-being of Macoupin County. By removing barriers to nutritious food and promoting healthier eating habits, CAH&C is fostering a stronger, more resilient community. As the challenges of rural healthcare and food access continue to evolve, CAH&C remains steadfast in its mission to provide compassionate, comprehensive care for all.

Priority #4 Workforce Development:



In response to the Community Health Needs Assessment (CHNA), CAH&C has prioritized workforce development—a pressing issue in rural areas where shortages of skilled workers limit economic growth and access to essential services.

Identifying the Challenge: Workforce Development in Rural Communities

Rural Illinois like most of rural America face several workforce challenges that are common, including:

1. **Shortages of Skilled Healthcare Professionals:** A limited workforce leads to difficulties in recruiting and retaining doctors, nurses, and other critical healthcare staff.
2. **Lack of Training and Education Opportunities:** Rural residents often have limited access to training programs, technical schools, and higher education institutions.

3. **Economic Barriers:** Many individuals face financial limitations that prevent them from pursuing education and skill development.
4. **Outmigration of Young Talent:** Young professionals frequently move to urban areas in search of better opportunities, exacerbating workforce gaps.

These challenges directly impact most hospitals ability to deliver comprehensive care and weaken the overall economic stability of their region.

CAH&C's Strategic Approach to Workforce Development

Over the past few years, Carlinville Area Hospital & Clinics has implemented a series of strategic initiatives to enhance workforce development and address the community's healthcare and economic needs. These efforts are yielding positive results, and we anticipate continued success as we execute these strategies in both the short and long term.

1. **Training Programs for Healthcare Careers**

CAH&C has partnered with local schools, community colleges, and regional organizations to create training programs for healthcare roles, including certified nursing assistants (CNA), medical assistants, and other in-demand positions.

2. **Clinical Partnerships**

To encourage hands-on learning, CAH&C offers clinical rotations, and job shadowing opportunities for students interested in healthcare careers. These experiences help develop a pipeline of future healthcare professionals.

3. **Scholarships**

CAH&C through its non-profit foundation provides significant financial support for individuals pursuing careers in healthcare. Scholarships programs make education more accessible and encourage local residents to stay and work within the community.

4. **Recruitment and Retention Strategies**

Recognizing the need for long-term workforce sustainability, Carlinville Area Hospital & Clinics (CAH&C) has developed competitive recruitment packages, robust professional development opportunities, and flexible work arrangements to attract and retain skilled professionals. By fostering an industry-leading rural healthcare culture, CAH&C continues to attract high-value talent. Additionally, the competitive benefits structure, identified through our recent HR recalibration, provides a significant advantage in both recruitment and retention efforts, setting CAH&C apart from other organizations.

5. **Education and Career Awareness**

Carlinville Area Hospital & Clinics (CAH&C) actively engages in outreach programs, including career fairs, workshops, and informational events, to raise awareness about opportunities in healthcare and other essential sectors. These initiatives aim to inspire both youth and adults to pursue rewarding and impactful careers. A key strategy delivering exceptional results is our Nursing Clinical Ladder Education and Advancement Program. This program not only fosters professional growth but also strengthens the future of healthcare in Macoupin County by developing skilled nursing talent.

Measuring Impact and Looking Ahead

CAH&C's workforce development initiatives are already yielding positive results. Partnerships with local schools have led to an increase in students entering healthcare training programs, while scholarship recipients are returning to the community to fill critical roles. Internships and clinical rotations have helped develop skilled professionals, ensuring a stronger healthcare workforce.

Since the last CHNA in 2021, CAH&C has focused on building a sustainable and skilled workforce to address immediate and future needs. By fostering local talent and investing in education, CAH&C is strengthening both the healthcare system and the community economy.

Future plans include:

- Expanding partnerships with regional colleges and universities to offer advanced training programs.
- Increasing scholarship opportunities for underserved populations to promote workforce diversity.
- Developing mentoring programs to support new professionals in healthcare roles.
- Advancement of the Nursing Clinical Ladder Program to promote profession growth for the skilled nursing staff.

Conclusion

Carlinville Area Hospital & Clinics' commitment to addressing the CHNA-identified priority of workforce development is a testament to its dedication to the long-term success of Macoupin County. By building a skilled, sustainable workforce, CAH&C is not only improving healthcare access but also contributing to the economic vitality of the region. As rural workforce challenges evolve, CAH&C remains steadfast in its mission to support professional growth and create opportunities for all.

RESOURCES AVAILABLE TO MEET THE PRIORITY HEALTH NEEDS

Hospital Resources:

- President/CEO
- Executive Team
- Hospital Department Head Team
- Hospital Providers
- Market Team

Healthcare Partner or other Resources including Telemedicine:

- Local Health Departments
- Mental and Behavioral Health Providers

- Providers in the Community

Community Resources:

- Schools
- Community Action Agencies
- Community Organizations
- Local Governments
- Law Enforcement
- EMS