Advocate Illinois Masonic Medical Center Community Health Implementation Strategy

January 1, 2023 - December 31, 2025

Community health improvement is an effective tool for creating a shared vision and supporting a planned and integrated approach to improving health outcomes. The basic premise of community health improvement is that entities identify community health issues, prioritize those that can be addressed, and then develop, implement, and evaluate strategies to address those issues. Tax-exempt hospitals are required to conduct a community health needs assessment (CHNA) and develop an implementation strategy to document how the hospital will address prioritized community health needs. The following outlines a summary of the CHNA process and provides details on Advocate Illinois Masonic Medical Center's plans to address their prioritized community health needs.

SUMMARY OF ADVOCATE ILLINOIS MASONIC MEDICAL CENTER COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

Advocate Illinois Masonic Medical Center (Advocate Illinois Masonic) completed a comprehensive community health needs assessment (CHNA) process in 2022. This CHNA report describes the process and includes demographic and socioeconomic data for Advocate Illinois Masonic's primary service area (PSA) and key findings regarding the PSA's health status. For the purposes of this report, the "community" was defined as the medical center's PSA. The PSA consists of 21 zip codes in Cook County. Demographic and socioeconomic data for the medical center's PSA was collected and analyzed to obtain a thorough picture of the health and social needs for the PSA. Data collected included primary and secondary, quantitative and qualitative data.

As part of the CHNA process, Advocate Illinois Masonic established a Community Health Council (CHC) comprised of hospital and community stakeholders who provided valuable input for the CHNA process. The CHC began the initial stage of prioritization using a prioritization grid that rated each health need using criteria including severity of the health issue, effectiveness of possible interventions and the degree to which community partners are involved in addressing the health issue. After using the prioritization grid to narrow the health needs down from nine to four, the CHC used the tabulation method to vote on the final two health needs.



SIGNIFICANT HEALTH NEEDS IDENTIFIED AND SELECTED FOR IMPLEMENTATION STRATEGY AND WHY

The top nine health needs evaluated for Advocate Illinois Masonic's PSA were determined to be: 1.) Access to Care, 2.) Cancer, 3.) COVID-19, 4.) Diabetes, 5.) Health and Nutrition, 6.) Heart Disease, 7.) Mental Health, 8.) Respiratory Health, 9.) Substance and Alcohol Use. The CHC selected **health and nutrition** and **behavioral health** as the priority health needs to be addressed for the medical center's PSA. The CHC also recognized the importance of addressing root causes of health issues, such as social drivers of health, thus Council members decided to ensure the hospital integrated **social drivers of health (SDOH)** into each of the prioritized health need strategies. To ensure the medical center develops an effective 2023-2025 Community Health Implementation Strategy, the hospital's Community Health Department will collaborate with community partners to create strategies that address the priority health needs using a collective impact model.



Health and Nutrition

Health Lifestyles was chosen as one of the two health need priorities due to many chronic diseases and health issues that are related to poor nutrition and physical activity. The physical environment of a community such as availability of affordable, fresh food and safe places to be physically active affect residents' ability to exercise, eat a healthy diet, and maintain a healthy body weight.



Behavioral Health

Behavioral health was selected as the other health priority. This health priority includes mental health and substance/alcohol use. The rates of mental health issues and substance use are continuing to increase over time, and it's anticipated that the impact will be severe due to the implications of COVID-19. In the PSA, the mental health hospitalization rate is 615.32 per 100,000 residents and highest among Non-Hispanic Black and Asian or Pacific Islander populations.

HEALTH PRIORITY: Health and Nutrition (Social Drivers of Heath are consider in the selected priority)

IMPACT:

Promote access to health and nutrition services for vulnerable populations and communities in Advocate Masonic's PSA by enhancing hospital services and community programs that address chronic disease management and awareness of the social drivers of health (SDOH).

DESCRIPTION OF HEALTH NEED DATA:

- In 2020, the PSA's food insecurity rate was 14.5 percent, which is a four percent increase from 2018. The PSA communities with the highest rates of food insecurity include Rogers Park (60626) at 19.8 percent, West Ridge (60659) at 19.2 percent and Uptown (60640) at 18.8 percent.
- Approximately 32.4 percent of adults are obese, making Illinois the 23rd highest in obesity out of 51 U.S. states. In the PSA, 26.8 percent of adults (aged 18 and older) are obese. The PSA with the highest rates of obesity include Humboldt Park (60651) at 38.6 percent, Belmont Cragin (60639) 34.1 percent and Rogers Park (60626) at 29.6 percent.

ALIGNMENT WITH EXISTING STRATEGIES

LOCAL:

- Cook County Health Strategic Plan 2023-2025
 - Develop systems of care and education that provide for an empowered patient experience
 - Partner with patients, families, and caregivers to optimize patient outcomes and the patient experience.
 - The comprehensive health needs of our patients and communities are fully met.
- Healthy Chicago 2025
 - Have access to nutritious food and local food businesses thrive

STATE:

- Healthy Illinois 2021
 - Improve chronic disease management

NATIONAL:

- Healthy People 2030
 - Reduce household food insecurity and hunger
 - Reduce the proportion of children and adolescents with obesity
- U.S Department of Health and Human Services: Health Workforce Strategic Plan 2021
 - Enhance health care quality through professional development, collaboration and evidence-informed practice.
- Biden-Harris Administration National Strategy on Hunger, Nutrition, and Health 2022
 - Improve food access and affordability
 - Support physical activity for all
 - Enhance nutrition and food security research

HEALTH PRIORITY: Health and Nutrition cont.

STRATEGY #1: Hospital-Based Food Pantry Program

SPECIFIC INTERVENTIONS

- Expand the IMMC hospitalbased food pantry by working with internal hospital leaders
- Partner with communitybased organizations to screen for food insecurity and create community based pantries in high-risk neighborhoods.

COLLABORATIVE PARTNERS

- Nourishing Hope
- Advocate Illinois
 Masonic services lines
 (Oncology, Cardiology,
 Care Management, etc.)
- Community Health at Onward Center in Belmont-Cragin
- Northwest Side Housing Center in Belmont Cragin

OBJECTIVES

- Increase awareness of food insecure (FI) patients in our PSA.
- Improve access to immediate food resources for FI patients.
- Reinforce clinical wrap-around services for individuals that screen positive for FI

MEASURING OUR IMPACT

- Total number of patients served by the hospital pantry program
- · Total number of patients screened
- Total number of community individuals served by the community-based pantry
- Total number of community individuals screened
- Total number of partners involved, annually, in efforts to advance food insecurity initiatives

HEALTH PRIORITY: Health and Nutrition cont.

STRATEGY #2: Integrate the Nourishing Hope Online Market Program

SPECIFIC INTERVENTIONS

- The Online Market program is a supplemental program that support individuals in need.
- Integrate the Online Market program into the hospital-based food pantry program
- Develop a strategic plan to ensure all food insecure patients screened at Advocate Illinois Masonic have immediate access the Online Market program.
- Grow the online market referral program to ensure community partners also have access to the online market.

COLLABORATIVE PARTNERS

- Nourishing Hope
- Advocate Illinois
 Masonic services lines
 (Oncology, Cardiology,
 Care Management, etc.)
- Community Health at Onward Center in Belmont-Cragin
- Northwest Side Housing Center in Belmont Cragin

OBJECTIVES

- Decrease the number of people seeking immediate food assistance and enroll them in a sustainable food program.
- Improve access to healthy food options at no cost to the individual.

MEASURING OUR IMPACT

- Total number of referrals made to the Online Market from Advocate Illinois Masonic and community partners
- Total number of patients enrolled to the Online Market
- Total of partners actively involved in the Online Market program

^{*}Impact measures are subject to change depending on the direction of each intervention.

HEALTH PRIORITY: Health and Nutrition cont.

STRATEGY #3: Build capacity by leveraging community and hospital-based interventions that promote chronic disease management, health and wellness

COLLABORATIVE SPECIFIC INTERVENTIONS **OBJECTIVES PARTNERS** Partner with Advocate Illinois Community Health Improve chronic disease self-Masonic's clinical leaders to align management in Advocate patients Onward Center clinical goals in the community and community participants Advocate Illinois and ensure program support Improve health outcomes and Masonic Medical in neighborhoods experiencing metrics, such as blood pressure Center's clinical leaders greater need. readings, glucose control and and residents Partner with community weight-loss Advocate Community organizations to implement Create accessible programs in Health Mobile Van chronic disease management communities experiencing greater programs. Local Federally hardship Qualified Health Align with local organizations Coordinate clinical services Centers (FQHC) and support community driven in alignment with community efforts that address health Other communityprogram education, prevention and based organizations Increase health professional chronic disease management doing similar work development opportunities for - an emphasis on the minority, future healthcare leaders Spanish speaking population Partner with colleges and universities that specialize

MEASURING OUR IMPACT

- Number of community programs implemented per year
- Improvement in clinical outcomes per program (Decrease A1C, Blood Pressure, Weight)
- Number of participants enrolled in the program(s)

in Public Health or related education and provide health professional development

opportunities.

• Number of clinical services and screening provided in the community

HEALTH PRIORITY: Behavioral Health - Mental Health and Substance Use (Social Drivers of Heath are consider in the selected priority)

IMPACT:

Improve access, awareness and coordination to mental health and substance use prevention services by increasing training opportunities for local leaders and developing community programs that are accessible to all individuals in need of services.

DESCRIPTION OF HEALTH NEED DATA:

- In the PSA, 13.44 percent of adult residents 18 and older self-reported having mental health that wat not good. The PSA's rate is higher when compared to the county at 12.90 percent and the state at 13.36 percent of adult residents.
- The PSA's mental health hospitalization rate is 615.32 per 100,000 residents and highest among Non-Hispanic Black and Asian or Pacific Islander populations.
- In 2020, the alcohol use hospitalization rate was 175.90 per 100,000 residents in the PSA, which is higher than the city of Chicago and county and significantly higher than the state. There is a racial disparity with the Non-Hispanic White population having the highest rates of hospitalization due to alcohol use.
- The prevalence rate of depression in the medical center's PSA is also high at 18.71 percent compared to Chicago at 18.30 percent and Cook County at 17.30 percent. Additionally, the PSA's schizophrenia hospitalization rate is high at 224.02 per 100,000 residents compared to Cook County at 172.72 per 100,000 residents and Illinois at 103.79 per 100,000 residents.

ALIGNMENT WITH EXISTING STRATEGIES

LOCAL:

- Cook County Health Strategic Plan 2023-2025
 - Develop systems of care and education that provide for an empowered patient experience

STATE:

- Healthy Illinois 2021
 - Improve Behavioral Health outcomes

NATIONAL:

- Healthy People 2030
 - Increase the proportion of persons with co-occurring substance use disorders and mental health disorders who receive treatment for both disorders
- Substance Abuse and Mental Health Services Administration (SAMHSA) 2022 Strategic Plan
 - Promoting resilience and emotional health for children, youth and families
 - Enhancing access to suicide prevention and crisis care
 - Preventing overdose

HEALTH PRIORITY: Behavioral Health cont.

STRATEGY #1: Increase training opportunities related to behavioral health for clinical and non-clinical leaders with Advocate Illinois Masonic's PSA

SPECIFIC INTERVENTIONS	COLLABORATIVE PARTNERS	OBJECTIVES
 Coordinate Youth and/or Adult Mental Health First Aid Training (MHFA) events in areas of need Implement Domestic Violence and De-escalation training provided by Apna Ghar Support Anti-Racism Training programs in the PSA Coordinate awareness trainings and evidence-based interventions in partnership with Sertoma Centre 	 Sertoma Centre National Alliance on Mental Illness Chicago (NAMI) Advocate Health's Faith and Health Partnerships Apna Ghar Faith-based organizations Community-based organization in the PSA 	 Promote diverse training opportunities that address the root causes associated with behavioral health Increase awareness of root causes associated with behavioral health Address the implicit biases associated with behavioral health Introduce best practices and deescalation skills in a clinical and non-clinical setting

MEASURING OUR IMPACT

- · Number of trainings organized
- Number of individuals trained
- Increase in pretest and posttest evaluation

HEALTH PRIORITY: Behavioral Health cont.

STRATEGY #2: Implement evidence-based practices that address diverse needs within Advocate Illinois Masonic's PSA by collaborating with internal behavioral health services and community-based organizations

SPECIFIC INTERVENTIONS	COLLABORATIVE PARTNERS	OBJECTIVES		
 Identify opportunities within Advocate Illinois Masonic's PSA to develop support programs in clinical and non-clinical settings Implement the evidence based QPR Suicide Prevention program for school staff and faculty. Explore opportunities to create community-based access points for individuals with behavioral health concerns, such as the Living Room Program First Episode (Elizabeth Sheynezon) First Access 	 Illinois Masonic Medical Center's Behavioral Health Service line Community-based organization in the PSA 	 Increase access to mental and substance use support programs in the PSA Promote clinical referrals to community-based programs Enhance community resources for clinical leaders Increase access to preventive resources for Advocate patients that are being discharge for behavioral health related conditions Create access points to immediate behavioral health services through a Living Room Program model 		
MEACURING OUR IMPACT				

MEASURING OUR IMPACT

- Number of support group session held
- Number of participants served
- Number of referrals made to community organizations or support programs

HEALTH PRIORITY: Behavioral Health cont.

STRATEGY #3: Build community capacity for behavioral health services by partnering with community-based organizations that support mental health and substance use individuals impacted by social drivers of health in the PSA

SPECIFIC INTERVENTIONS	COLLABORATIVE PARTNERS	OBJECTIVES		
 Identify and support community organizations that address behavioral health and the social drivers of health, such as housing and employment. Integrate the Mental Wellness Services provided by Nourishing Hope in Advocate Illinois Masonic's food pantry program 	 Nourishing Hope: Mental Wellness Services Community-based organization in the PSA Northwest Side Housing Center Thresholds Howard Brown 	 Increase social support and resiliency among individuals with behavioral health concerns in the PSA Reinforce community and clinical linkages to address the non-clinical needs of individuals with behavioral health concerns 		
 Support local coalitions and community organizations that address substance use and mental health in areas experiencing greater hardship Explore interventions that address the behavioral health concerns associated with the Hispanic/Latino population 	• CommunityHealth	 Increase resources and capacity for the Hispanic/ Latino population Increase coordination to local community support services 		
MEASURING OUR IMPACT				

MEASURING OUR IMPACT

- · Number of individuals served
- Number of patients referred to the Mental Wellness Services program
- Number of new programs or interventions developed in partnership with local community-based organizations

Note: Plans to address selected CHNA priorities are dependent upon resources and may be adjusted on an annual basis to best address the health needs of our community.

^{*}Impact measures are subject to change depending on the direction of each intervention.