Advocate Christ 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 Christ Medical Center plans to address their prioritized community health needs.

SUMMARY OF ADVOCATE CHRIST MEDICAL CENTER COMMUNITY HEALTH NEEDS ASSESSMENT PROCESS

Every three years, the hospital works with community partners and stakeholders to complete a comprehensive CHNA. The Community Health department is responsible for pulling data from our data platform and for collecting input from the community to gain an in-depth understanding of the communities' health needs. Collaboration and partnership are a crucial component of the hospital's CHNA process therefore, the hospital is a member of the Alliance for Health Equity and the Southland Partnership Group. In addition, the hospital has a Community Health Council that provides oversight of the CHNA process and selects the hospital's priority health needs.

Advocate Christ's community health staff presented extensive data to the CHC during a series of four meetings from March 2022 through June 2022. Advocate Christ's CHNA process utilized a mixed-method approach, which included the collection and review of secondary data from existing sources and primary data from both qualitative (survey) and quantitative methods (focus groups). Indicators presented included the topics listed below. In June 2022, members of the CHC gathered to participate in an exercise to help prioritize the health needs of the community using data that was presented in earlier months.

Indicators presented included the following topics:

- Access to Care
- Asthma
- Cancer
- COVID
- Demographics
- Dental Health
- Diabetes
- Heart Disease
- Hypertension/Stroke
- Mental Health
- Survey and Focus Groups Results
- Violence/homicide

Based upon comprehensive community data and feedback, our Community Health Council selected two health priorities for the 2022 CHNA. The priorities selected include the following:

- Mental/Behavioral Health
- Obesity

Advocate Christ will outline plans to address Mental/Behavioral Health and Obesity in the 2023 community health improvement plan.

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SIGNIFICANT HEALTH NEEDS IDENTIFIED AND SELECTED FOR IMPLEMENTATION STRATEGY AND WHY

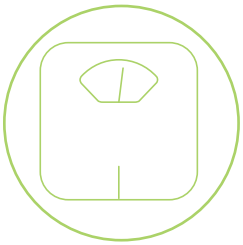
The CHC members selected mental/behavioral health and obesity as the top priorities on which to focus for Advocate Christ's 2022 CHNA. As part of the selection process, consideration for implementing any program will include the following criteria:

- Degree to which community partners are involved in co-designing programming solutions for the health issue
- Hospital and community resources available to address the health issue
- The hospital's capacity to address the health issue
- Goals and metrics that can be effectively and efficiently evaluated

Mental Health/Behavioral Health

The community needs assessment identified access to mental health services, including substance abuse and addiction services, as one of the primary areas of opportunity to improve the well-being of the south suburban communities served by Advocate Christ. With behavioral health crises on the rise nationwide, quickly and effectively caring for people in crisis is a priority. The high rates of emergency department visits and hospitalizations for individuals experiencing acute mental health crises are preventable with expanded access to services. The need for behavioral health services has been amplified because of the lasting effects of the Covid-19 pandemic on individuals, families, and communities.

It was recognized by the council that mental health is a growing health issue in the hospital's PSA. The CHC selected mental health as the most pertinent health need priority due to the increase in emergency department and hospitalization rates, and the growing need for community services and resources. In June 2022 Advocate South Suburban announced that behavioral health services will be transitioning from Advocate Christ Hospital to Advocate South Suburban Hospital. The unit is expected to open in 2023.



Obesity

The Community Health Council selected obesity as its second priority to address as part of the hospital's CHNA based on results in the PSA, and county. Obesity prevalence continues to increase and even more so among race and ethnicities. Individuals with obesity are at higher risks for chronic health conditions such as diabetes, heart disease, cancer, and are more susceptible to contracting COVID-19. Community health staff will explore opportunities to develop strategies to address obesity in the communities with the greatest need in the PSA.

HEALTH PRIORITY: Mental/Behavioral Health

IMPACT:

Improve the mental health status of the Advocate Christ PSA residents through education and ensuring access to mental and behavioral health services

DESCRIPTION OF HEALTH NEED DATA:

In the PSA, 14.64 percent of resident adults ages 18 and older report 14 or more days during the past 30 days during which their mental health was not good. This is higher than the Illinois rate of 13.4 percent and the Cook County rate of 12.9 percent. The zip codes in the PSA with highest rates of poor mental health are West Englewood (60636) at 19.5 percent, Justice (60458) at 17.2 percent, and Chicago Ridge (60415) at 16.6 percent, with all zip codes increasing over time.

In the PSA, the ED rate due to mental health is 846.3 per 100,000 residents. This is lower than the Illinois rate of 988.6 per 100,000 residents and the Cook County rate of 917.1 per 100,000 residents. The zip codes in the PSA with the highest ED rate due to mental health are West Englewood (60636) at 2,345.0 per 100,000 residents and Hometown (60456) at 1,283.5 per 100,000 residents. Also, the rates were highest among the Non-Hispanic Black population at 1,651.8 per 100,000 residents, young adults (ages 18-39 years) at 1,285.0 per 100,000 residents and juveniles (ages 5-17 years) at 822.1 per 100,000 residents and males (912.4 per 100,000 residents) higher than females (782.1 per 100,000 residents).

The hospitalization rate due to mental health in the PSA is 582.0 per 100,000 residents, which is higher than the Illinois rate of 543.6 per 100,000 residents, but much lower than the Cook County rate of 639.9 per 100,000 residents. The zip 40 codes in the PSA with the highest hospitalization rate due to mental health are West Englewood (60636) at 1,860.6 per 100,000 residents and Chicago Ridge (60415) at 1,139.1 per 100,000 residents. Also, the rates are highest in the PSA among the Non-Hispanic Black population at 1,188.2 per 100,000 residents, young adults (ages 18-39 years) at 760.6 per 100,000 residents and middle-aged adults (ages 40-64 years).

The hospitalization rate due to substance use in the PSA is 353.9 per 100,000 residents. This is higher than the Illinois rate of 268.1 per 100,000 residents. The PSA rates are highest for hospitalization rate due to substance use among the Non-Hispanic White population at 615.3 per 100,000 residents, middle-aged adults (40-64 years) at 689.0 per 100,000 residents and males (503.1 per 100,000 residents) are extremely more likely to be hospitalized than females (176.6 per 100,000 residents). Also, the rates are highest in the PSA among those residents living in the zip codes of West Englewood (60636) at 993.8 per 100,000 residents and Worth (60482) at 565.0 per 100,000.

HEALTH PRIORITY: Mental/Behavioral Health cont.

ALIGNMENT WITH EXISTING STRATEGIES

LOCAL:

- Access to Behavioral Health Services
  - 211 Metro Chicago access helpline – connecting people to referral sources for: food, housing, utility payment assistance, health care, transportation, childcare, employment, **mental health,** disaster information and assistance, and more services
- Mentalhealth.Chicago.gov

STATE:

- Illinois crisis intervention and response teams
  - Mobile units and BH triage

NATIONAL:

- Health Conditions: Mental and Behavioral Health, Improve Mental Health
  Mental Health and Mental Disorders - Healthy People 2030 | health.gov
- 988 Suicide and Crisis Lifeline - **three-digit, nationwide phone number to connect directly to the 988 Suicide and Crisis Lifeline.**

STRATEGY #1: Increase knowledge and reduce stigma related to mental/behavioral health

SPECIFIC INTERVENTIONS	COLLABORATIVE PARTNERS	OBJECTIVES
• Offer educational speaking engagements to reduce behavioral health stigma and increase mental health awareness • Continue offering upon request Mental Health First Aid (MHFA) trainings to educate individuals on how to identify, understand and respond to signs of mental illness. • Offer Healing Circle sessions to local High schools	• Faith-Based Institutions • Local High schools and Colleges/Universities • Community-Based Organizations • Local libraries • Fraternities and Sororities • Barbershops & Hair Salons • Oak Lawn District High School (s) • AAH Faith & Health Partnerships • Recovering Home	• Increase knowledge related to mental health illness • Establish access to mental health resources • Offer MHFA training upon request

MEASURING OUR IMPACT

- Number of attendees and BH workshops offered in high-risk community areas
- Engagement with collaborative partners to expand services

HEALTH PRIORITY: Mental/Behavioral Health cont.

STRATEGY #2: Provide AH teammates BH workshop trainings; includes ED nurses, CHWs and nursing new hires.

SPECIFIC INTERVENTIONS	COLLABORATIVE PARTNERS	OBJECTIVES
• Work with hospital leadership to provide workshops and referral resources during hospital onboarding orientation.	• AH Faith & Health Partnerships • ACMC Nursing Education dept • ACMC Nursing Leadership	• Increase knowledge related to mental health illness

MEASURING OUR IMPACT

- Number of workshops presented during orientation or specifically requested.
- Pre and post assessments; post evaluation percentage of participants who are adequately prepared to address mental health issues during patient care.

HEALTH PRIORITY: Obesity

IMPACT:

Increase physical activity, access to healthy produce, and to provide education and healthy cooking resources in the Advocate Christ PSA.

DESCRIPTION OF HEALTH NEED DATA:

The 2021 State of Obesity Report claims that the COVID-19 pandemic added new obstacles and exacerbated already existing barriers to healthy eating and physical activity in 2020 and 2021 as well as intensified already existing racial and economic inequities in the United States. The effects of underlying social, economic, and environmental conditions influence the health and well-being of Americans including emerging data which suggests eating habits shifted, physical activity declined, stress and anxiety increased, food insecurity worsened, and many Americans gained weight throughout the pandemic. Effects of the COVID-19 pandemic, both direct and indirect, fell disproportionately on certain populations, including the low-income communities and communities of color. The obesity rate in adults in the PSA is 30.8, 29.2 for Cook County, and 32.2 for Illinois respectively.

ALIGNMENT WITH EXISTING STRATEGIES

LOCAL: ADVOCATE HEALTH CARE FOOD SECURITY

- Establishing a hospital-based food pantry
- Advocate Christ Medical Center Diabetes Prevention Program
- Advocate Health Care Food Farmacy Program
- Expansion of pilot Healthy Cooking and Eating program in partnership with Restoration Ministries and area chefs

STATE: LAKE MICHIGAN SCHOOL FOOD SYSTEMS INNOVATION HUB

- US Department of Agriculture (USDA) awarded $16 million to the Illinois Public Health Institute (IPHI) and its partners over the next five and a half years to establish the Lake Michigan School Food System Innovation Hub through a consortium of organizations across Illinois, Michigan, Wisconsin, and Northern Indiana.
- The Innovation Hub will strengthen the K-12 school food supply chain, improving access to nutritious, locally grown, and culturally relevant foods for children in the Lake Michigan region.

NATIONAL: HEALTHY PEOPLE 2030

- Increase the proportion of eligible persons completing Centers for Disease Control and Prevention (CDC)-recognized lifestyle change programs

HEALTH PRIORITY: Obesity cont.

STRATEGY #1: Continue the CDC Prevent T2 Diabetes Prevention Program with a focus on weight loss for participants

SPECIFIC INTERVENTIONS	COLLABORATIVE PARTNERS	OBJECTIVES
• Continue offering Prevent T2 diabetes prevention program for community, with an emphasis on weight reduction • Continue to work with the Foundation and Community Health to expand Food Farmacy to Christ's campus • Introduction of healthy cooking instruction classes to students in the Restoration Ministries program • Continue to work with hospital medical staff to introduce a hospital-based food pantry on campus	• AMG physicians referring participants to DPP program • Greater Chicago Food Depository • DPP lifestyle coach • Restoration Ministries, Michuda Construction • Advocate Health Foundation	• Decrease participant's initial weight by 9 percent from initial weight in DPP program • Increase number of DPP programs within each year by one. • Offer healthy eating cooking classes for DPP participants throughout the year • Future expansion of piloted programs

MEASURING OUR IMPACT

- 10 percent weight loss reduction from initial weight for 40% of DPP participants
- Number of participants enrolled in expanded Food Farmacy program
- Number of participants enrolled in expanded piloted cooking program

STRATEGY #2: Implement physical activity protocol for DPP participants that focuses on obesity.

SPECIFIC INTERVENTIONS	COLLABORATIVE PARTNERS	OBJECTIVES
• Provide resources that educate participants about obesity and its health hazards. • Encourage a minimum of 150 physical activity minutes weekly. • Gather weekly physical activity minutes from DPP participants.	• CDC newsletter • Provide monthly fitness newsletter to participants • Investigate fitness instructor to provide a weekly online, and in-person physical activity.	• Physical activity and knowledge aimed at increasing weight loss.

MEASURING OUR IMPACT

- Weekly physical activity minutes recorded by participants
- Ensuring monthly newsletter is shared among DPP participants and students

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.