

Community Health Needs Assessment Implementation Plan 2017-2019

Advocate Sherman Hospital

Date Created: May 2017

Date Reviewed/Updated:

PRIORITY AREA: Obesity/Nutrition/Physical Activity

GOAL: Reduce the prevalence of Kane County residents who are obese by 1% by 2020.

LONG TERM INDICATORS OF IMPACT

	Baseline Value, Date and Source	Frequency
1. Increase the percent of Kane County adults who engage in 30 minutes of moderate physical activity 5 or more times per week by 2.5%	35.2% Kane County Health Department, Community Health Needs Assessment Community Health Survey, 2014	Once every three years
2. Reduce the percentage of Kane County adults age 20 and older who engage in no leisure-time physical activity	16.3% Healthy Communities Institute, Centers for Disease Control, 2016	Annual
3. Reduce the percentage of children and adolescents aged 2 to 19 years who are considered obese	15.9% Kane County low income pre-school children age 2 to 4 Healthy Communities Institute, United States Department of Agriculture, 2012	Annual
	11.5% Illinois adolescents Nutrition, Physical Activity and Obesity: Data, Trends and Maps website, Centers for Disease Control and Prevention, 2016	Annual
4. Increase the percentage of Kane County adults consuming five servings of fruits or vegetables per day	18.5% Kane County (2007-2009) Healthy Communities Institute, Illinois Behavioral Risk Factor Surveillance System, 2016	Once every three years
	16.9% Sherman Hospital Primary Service Area, Kane County Health Department Community Health Needs Assessment, Community Health Survey, 2014	Once every three years
5. Reduce the proportion of adults who are considered obese	23.5% Sherman Hospital Primary Service Area Kane County Health Department Community Health Needs Assessment, Community Health Survey, 2014	Once every three years
	29.9% Kane County, (2010-2014) Healthy Communities Institute, Behavioral Risk Factor Surveillance System, 2016	Once every three years

STRATEGY #1: Implement walking campaigns in targeted Elgin neighborhoods or communities within the Advocate Sherman Hospital Primary Service Area.	TYPE: Changing the Context
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PARTNERS: Activate Elgin, additional community partners to be determined

BACKGROUND ON STRATEGY

Evidence of effectiveness: *Let’s Move!*

Let’s Move! is a comprehensive initiative that was launched by the First Lady in 2010 and is dedicated to solving the problem of obesity within a generation. Cities, towns, and counties can be recognized, through the *Let’s Move!* Cities, Towns and Counties initiative, for the great work they are already doing to make their communities healthier! Based on the Taskforce’s recommendations, *Let’s Move!* national efforts focus on: 1) creating a healthy start for children; 2) empowering parents and caregivers; 3) providing healthy foods in schools; 4) improving access to healthy, affordable foods; and 5) increasing physical activity. The national goal is to reduce the rate of childhood obesity to five percent by 2030. Subject matter experts work with the community to help the city, town, or county make progress in the initiative.

United States Department of Health and Human Services <http://www.letsmove.gov/> (click here)

The Community Guide rates the evidence as strong for social support interventions in community settings to increase physical activity and improve physical fitness among adults. Interventions focus on building, strengthening, and maintaining social networks that provide supportive relationships for behavior change (e.g., setting up a buddy system, making contracts with others to complete specified levels of physical activity, or setting up walking groups or other groups to provide friendship and support). The recommendation is based on the review of nine studies in which the median effect was a 44% increase in the time spent being physically active and a 20% increase in energy expenditure. (Source: The Community Guide, Community Preventive Services Task Force, Physical Activity: Social Support Interventions in Community Settings, February 2001).

<https://www.thecommunityguide.org/findings/physical-activity-social-support-interventions-community-settings> (click here)

In order to increase physical activity in low-income communities in Elgin, Advocate Sherman Hospital with work in collaboration with Activate Elgin to implement the *Let’s Move!* initiative in neighborhoods within Elgin.

SHORT TERM INDICATORS

Process Indicators	Annual Targets by December 31		
	2017	2018	2019
1. Number of neighborhoods assessed for walkability within Elgin	1	Add 1	Add 1
2. Number of individuals who participate in <i>Let’s Move!</i> neighborhood walks, events and activities	40	60	80
Impact Indicators	2017	2018	2019
1. Percentage of adults who increased walking 30 minutes per day, 5 times per week for a period of 24 weeks as measured by an exercise log and self-report in survey	10%	12%	15%

STRATEGY #2: Improve parents’ and childcare providers’ knowledge and skills in nutrition and physical education practices through the Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) Program	TYPE: Education and Counseling; Changing the Context
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PARTNERS: Local Child Care Centers, Greater Elgin Family Care Center, Kane County Health Department

BACKGROUND ON STRATEGY

Evidence of effectiveness: The Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) program is an evidence-based childcare facility intervention. NAP SACC aims to advance childcare by improving the nutritional value of food served, the amount and quality of exercise, staff-child interactions, and policies and practices related to environmental characteristics. The intervention was developed based on research conducted with stakeholder groups including childcare providers, parents, and experts in the field.

GO NAP SACC has developed an organizational assessment that spans 14 areas of nutrition, physical activity, and environment to identify strengths and areas for improvement for the childcare facility. <https://gonapsacc.org/> (click here)

Advocate Sherman Hospital will lead the Go NAP SACC assessment process with the Child Care Centers. Follow up will include assistance in the creation of action plans, training, and support in achieving the NAP SACC certification.

SHORT TERM INDICATORS

Process Indicators	Annual Targets by December 31		
	2017	2018	2019
1. Number of program (planning, implementation and sustainability) meetings to develop approach with Kane County Health Department	2	3	3
2. Number of child care centers that complete the self-assessment	3	5	5
3. Number of child care center educators that complete action plans	2	Add 2	Add 2
4. Number of children enrolled in the child care centers with active plans	20	40	60
5. Number of trainings and/or educational sessions provided on nutrition and/or physical activity for the staff per year	0	2	2
6. Number of trainings and educational sessions provided on nutrition and/or physical activity for the parents per year	0	4	4
7. Number of child care centers that achieve NAP SAC certification	0	2	4
Impact Indicators	2017	2018	2019
1. Percentage improvement from pre to post Go NAP SACC self-assessment results	Baseline	TBD	TBD
2. Number of policies or environmental changes in the child care setting for all participating in Go NAP SACC	Baseline	TBD	TBD
3. Increase in number of minutes children spend in physical activity each day in the child care setting	Baseline	TBD	TBD
4. Decrease in number of minutes children spend on screen time each day in the child care setting	Baseline	TBD	TBD

STRATEGY #3: Identify individuals living in census tracts within Elgin and Carpentersville designated as food deserts who are food insecure and refer them to community resources.	TYPE: Education and Counseling: Changing the Context
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PARTNERS: Community partners, Community Gardens, local food pantries, Farmers Markets, SNAP Program, Kane County Health Department

BACKGROUND ON STRATEGY

Evidence of effectiveness: A 2-item Food Insecurity screen was sensitive, specific, and valid among low-income families with young children. The Food Insecurity screen rapidly identifies households at risk for food insecurity, enabling providers to target services that ameliorate the health and developmental consequences associated with food insecurity. <http://pediatrics.aappublications.org/content/126/1/e26> (click here)

2-Item Screen for Food Insecurity:

1. "Within the past 12 months we worried whether our food would run out before we got money to buy more" (often, sometimes, never)
2. "Within the past 12 months the food we bought just didn't last and we didn't have money to get more" (often, sometimes, never)

In collaboration with community partners, Advocate Sherman Hospital will administer the food insecurity questionnaire to residents of the Sherman Hospital service area. The hospital will specifically target screening residents living in census tracts designated as food deserts in Elgin and Carpentersville. Residents who are identified as food insecure will be educated on community resources and referred to community support organizations and programs.

SHORT TERM INDICATORS

Process Indicators	Annual Targets by December 31		
	2017	2018	2019
1. Number of individuals who complete Food Insecurity Questionnaire representing their household	20	100	150
2. Number of households identified as food insecure as measured through the food pantry and FeedingAmerica.org (click here)	3	13	20
3. Number of individuals referred to community resources including, food pantries, SNAP, WIC Farmers Markets, community gardens or other services	20	100	150

ALIGNMENT WITH COUNTY/STATE/NATIONAL PRIORITIES

Strategy	County IPLAN	SHIP (State Health Improvement Plan)	Healthy People 2020
1, 2 & 3	<p>Increase the proportion of Kane County adults who engage in 30 minutes of moderate physical activity 5 or more times per week by 2.5% (Kane County Health Department Community Health Improvement Plan, March 2015)</p> <p>Reduce the proportion of McHenry County adults who engage in no leisure-time physical activity (McHenry County Healthy Community Study, 2014)</p>	<p>Goal 3: Increase opportunities for active living. Measurable Objectives by 2021</p> <p>Reduce the percentage of Illinois adults reporting no physical activity in the last 30 days</p> <p>Reduce the percentage of Illinois children who report not engaging in vigorous physical activity (Healthy Illinois 2021 State Health Improvement Plan, April 2016)</p>	<p>Physical Activity (PA)</p> <p>PA-1: Reduce the proportion of adults who engage in no leisure-time physical activity</p> <p>PA-2: Increase the proportion of adults who meet current Federal physical activity guidelines for aerobic physical activity and for muscle-strengthening activity</p>

Strategy	County IPLAN	SHIP (State Health Improvement Plan)	Healthy People 2020
2	Reduce the proportion of Kane County children and adolescents aged 2 to 19 years who are considered obese (Kane County Health Department Community Health Improvement Plan, March 2015)	Goal 2: Increase opportunities for healthy eating. Measurable Objectives by 2021: Reduce the percentage of obesity among children ages 10-17 (Healthy Illinois 2021 State Health Improvement Plan, April 2016)	Nutrition and Weight Status (NWS) NWS-10.4: Reduce the proportion of children and adolescents aged 2 to 19 years who are considered obese
3	Increase the percentage of Kane County adults consuming 5 + servings of fruits and/or vegetables a day (Kane County Health Department Community Health Improvement Plan, March 2015 and McHenry County Healthy Community Study, 2014)	Goal 4: Increase community-clinical linkages to reduce chronic diseases Strategy: Integrate food insecurity screening and referral systems in clinical settings (Healthy Illinois 2021 State Health Improvement Plan, April 2016)	Nutrition and Weight Status (NWS) NWS-12: Eliminate very low food security among children NWS-13: Reduce household food insecurity and in doing so reduce hunger

Advocate Sherman Hospital has developed this implementation plan to meet a prioritized need identified through a community health needs assessment process. The hospital may refocus resources if necessary to best address the needs of its community.