2022 Community Health Needs Assessment

NorthShore University HealthSystem

2023-2024 Implementation Strategy Plan

Evanston Hospital | Glenbrook Hospital | Highland Park Hospital | Skokie Hospital

NorthShore – Edward-Elmhurst Health's Mission

The core mission of NorthShore – Edward Elmhurst is to "help everyone in our communities be their best."

Mission

Help everyone in our communities be their best.

Vision

Safe, seamless and personal. Every person, every time.

Values

Act with Kindness

Meet people where they are and show empathy through listening

Earn Trust

Act with integrity and accountability to earn and maintain trust

Respect Everyone

Champion diversity, equity and inclusion for all through mutual respect

Build Relationships

Develop meaningful connections that have a positive impact on everyone who crosses our path

Pursue Excellence

Seek out ways to keep learning and growing so we can deliver the best care to all, every time

About NorthShore – Edward-Elmhurst Health

NorthShore – Edward-Elmhurst Health is a fully integrated healthcare delivery system committed to providing access to quality, vibrant, community-connected care, serving an area of more than 4.2 million residents across six northeast Illinois counties. Our more than 25,000 team members and more than 6,000 physicians aim to deliver transformative patient experiences and expert care close to home across more than 300 ambulatory locations and eight acute care hospitals – Edward (Naperville), Elmhurst, Evanston, Glenbrook (Glenview), Highland Park, Northwest Community (Arlington Heights) Skokie and Swedish (Chicago) – all recognized as Magnet hospitals for nursing excellence. Located in Naperville, Linden Oaks Behavioral Health, provides for the mental health needs of area residents.

NorthShore – Edward-Elmhurst Health desires to continue providing clinical programs and services to meet community health needs, while also pursuing continuous improvement in existing and future programs to improve the overall health of individuals in the communities it serves.

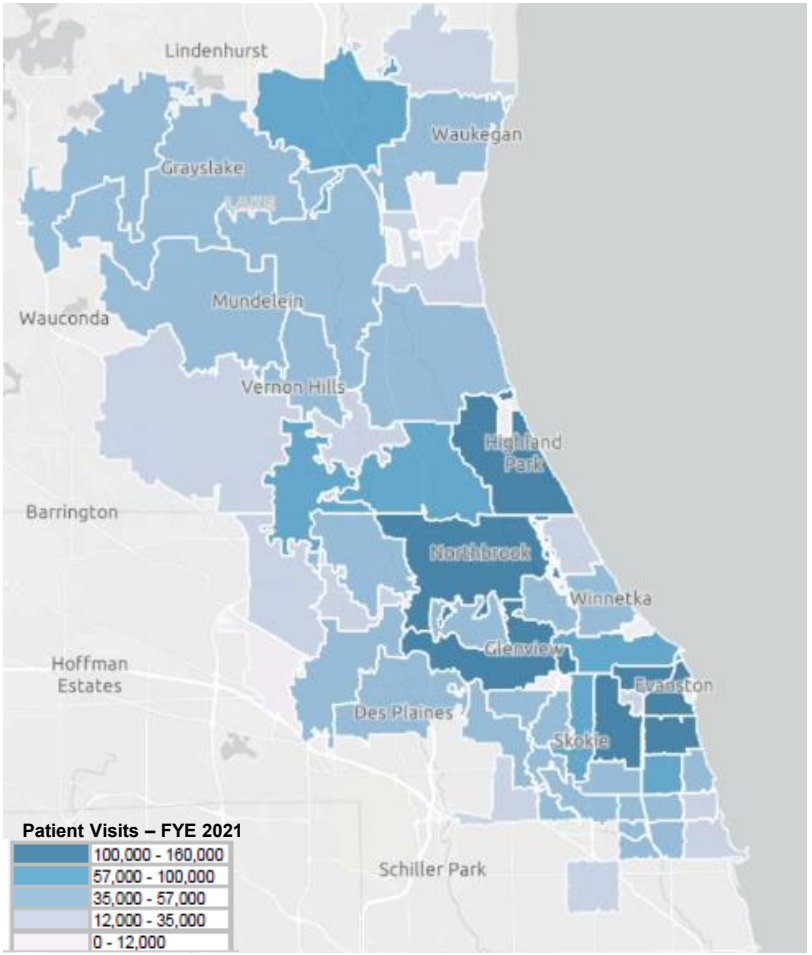
This joint Implementation Strategy Plan (ISP) was conducted by the following hospitals within NorthShore – Edward-Elmhurst Health: Evanston, Glenbrook, Highland Park and Skokie. These four hospitals collectively serve the same communities within NorthShore University HealthSystem (NorthShore). For the remainder of this report "NorthShore" will refer to these four hospitals. Please note that Edward-Elmhurst Health, Swedish Hospital and Northwest Community Healthcare develop and release their own separate ISPs.

Purpose of a Hospital's Implementation Strategy

An Implementation Strategy Plan (ISP) outlines how a hospital plans to address community health needs and is intended to satisfy the requirements set forth by state law and the Internal Revenue Code Section 501(r)(3) regarding Community Health Needs Assessments (CHNA) and Implementation Strategy. The ISP process is meant to align NorthShore University HealthSystem's (NorthShore) initiatives and programs with goals, objectives and indicators that address significant community health needs described in the CHNA.

Community Definition

NorthShore's patients collectively come from a large geographic area. For purposes of this report, the community served by NorthShore includes 54 zip codes in Lake County, northern Cook County and the north side of Chicago. The map to the right shows the level to which each zip code utilizes NorthShore's services and is based on inpatient, outpatient and emergency room visits.



How the CHNA Implementation Strategy was Developed

The ISP was developed after the comprehensive Community Health Needs Assessment (CHNA) was completed. Please refer to the complete CHNA for the full report. Strategies and action plans were developed based on a consensus among a steering committee comprised of NorthShore leaders after input from each of the respective disciplines. The organization intends to undertake the following strategies to meet the identified community health needs. Most of the strategies and initiatives will be coordinated and advanced through teams comprised of representatives from each of the four hospitals included in this joint implementation strategy. In instances where an initiative applies to a specific hospital facility, the hospital facility has been identified in the detailed action plans.

It is important to note that our health equity work is fundamental and integrated throughout our priority needs' strategies on the following pages.

This ISP will be reviewed annually during the two-year lifespan of the 2022 CHNA and updated as needed to ensure viability and impact. NorthShore's impact will be communicated regularly to reporting agencies and our community.

Access to Health Services

- Expand efforts to identify and respond to social determinants of health (SDOH), such as medication, transportation, housing.
- Explore ways to enhance access to services and/or partnerships via NorthShore or other community organizations.
- Increase the members in the community that have a medical home.
- Enhance partnerships with local community organizations addressing access to care.

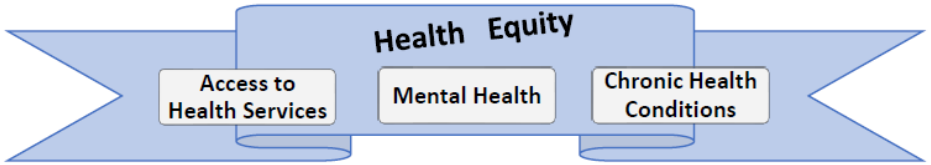
Mental Health

- Build community's capacity to understand and respond to mental health challenges and emergencies.
- Expand access to mental health resources in the community.
- Explore programs to reduce stigma surrounding mental health.
- Enhance partnerships with local community organizations addressing mental health.

Chronic Health Conditions

- Address high blood pressure and diabetes through targeted interventions and outreach.
- Enhance partnerships with local community organizations addressing chronic health conditions.
- Improve preventative cancer screening rates for breast, cervical and colorectal cancer.

NorthShore University HealthSystem



Health Equity – Foundational to Our Approach

We are addressing disparities in health and well-being, advancing access and improving patient outcomes across all the communities we serve. This work is fundamental and integrated throughout our priority needs on the following pages of our ISP.

As an organization, we have key commitments around measurement, learning and action which are critical to our ongoing health equity work. By improving our data collection efforts on areas such as Race, Ethnicity and Language (REAL), we are able to get a more complete picture of our patient and community demographics, allowing us to improve the way we meet our community's needs and deliver care, all in a welcoming and affirming environment. Enhancing screening opportunities for Social Determinants of Health (SDOH) allows us to better understand challenges and barriers that our community members face, so we can navigate them to critical resources and services they may need. Finally, partnering with community organizations through our Community Investment Fund allows us to further address priority health needs in a powerful, collaborative way.

Health equity commitments include:

Measurement: We are working to accurately capture race, ethnicity, language and other preferences and to ensure that all of our patients' perspectives are captured in our measurement systems	• Reduce % of all patients who have had a face to face encounter at NorthShore who we document as "Other, Declined or Unknown" • Educate and engage front line staff on REAL and/or SOGI data collection improvement efforts
Learning: We are investing in leading practices and new ways to listen to our patients and community members, incorporating feedback to understand and impact social determinants of health	• Develop a consistent and reliable process to collect, visualize, and intervene on Social Determinants of Health (SDOH) data • Educate and engage team members on SDOH screening efforts
Action: We are investing in and partnering with like-minded community organizations to close the gap on health disparities.	• Enhance partnerships and provide funding through NorthShore's Community Investment Fund (CIF) to help local organizations build capacity and increase impact, with at least 80% of annual CIF awardee partners addressing CHNA priority needs • Build and expand Health Equity Community Liaison program to deepen community partnerships within under-resourced communities

NorthShore Steering Committee Members

Executive Co-Chairs

Mahalakshmi Halasyamani, MD System Chief Clinical Officer

Gabrielle Cummings, President, Legacy NorthShore Acute Care Operations & Highland Park Hospital

Christine Bloomfield, Senior Consultant, Transformation Management Office

Brandon Buchanan, Director, Health Equity

Jenise Celestin, Director, NorthShore Community Relations

Tameka Crump, Practice Manager, Evanston Hospital Community Health Center

Hania Fuschetto, Manager, Community Relations, Glenbrook & Highland Park Hospitals

Catherine Glunz, MD, Medical Director, Evanston Hospital Community Health Center

Jesse Peterson Hall, President, Glenbrook Hospital

Thomas Hensing, MD, Medical Oncology

Samantha Maras, Assistant Vice President, Ambulatory, Quality and Population Heath

Mark Schroeder, Manager, Community Relations, Evanston & Skokie Hospitals

Robyn Thurston, Director, Medical Group Operations

Jeffery Zakem, Manager, Office of Community Health Equity & Engagement

Access to Health Services

ACTIONS NORTHSHORE PLANS TO TAKE TO ADDRESS THE HEALTH NEED

Strategy	Initiatives/Programs	Reportable Metrics/Anticipated Impact	Collaborations
1. Expand efforts to identify and respond to social determinants of health (SDOH), such as medication, transportation, housing.	• Implement and expand SDOH screening referral tool within CHC, ETHS Health Center, medical group practices, and emergency departments.* • Continue to develop capacity at CHC to better service uninsured and underinsured.* (Evanston Hospital) • Explore ways to reduce transportation cost barrier.* • Educate NorthShore medical providers on the services available at the CHC and develop collateral to support navigation for under-resourced individuals.* (Evanston Hospital) • Explore opportunities to participate in community health fairs with CHC team members based on insights from SDOH screening.* (Evanston Hospital)	% of patients screened, % of patients with SDOH needs identified, % of patients connected to resources/services via referrals Increase the number of NorthShore patients with medical homes. # of parking vouchers/total amount # of providers educated # of health fairs and participants	SDOH referral platform; community based organizations addressing SDOH; local FQHCs; NorthShore Community Health Center; NorthShore Immediate Care sites; NorthShore medical residents
2. Explore ways to enhance access to services and/or partnerships via NorthShore or other community organizations.	• Explore opportunity to expand school-based health center.* • Partner with community organizations (including FQHCs and/or mobile medical providers) that serve underserved communities.* • Continue to partner with Erie Evanston/Skokie to provide specialty medical care services.* (Evanston and Skokie Hospitals)	# of students served $'s or clinics # of referrals/$'s of care provided	Evanston Township High School; local school systems; community based organizations; Erie Evanston/Skokie Health Center; Rosalind Franklin University
3. Increase the members in the community that have a medical home.	• Build and expand Health Equity Community Liaison program to offer navigation and support for underrepresented and/or under-resourced individuals.* • Explore ways to better connect individuals to a primary care physician/medical home, such as via collaborative public awareness campaign or other outreach tactics.*	$'s invested # of navigators # of individuals connected to a primary care physician/medical home	Local health departments; community healthcare organizations and FQHCs; NorthShore's Health Equity Team; NorthShore's SDOH Committee; NorthShore's Corporate Communications Team
4. Enhance partnerships with local community organizations addressing access to care.	• Provide funding through NorthShore's Community Investment Fund (CIF) to help local organizations build capacity and increase impact.*	$'s invested, >80% of annual CIF awardee partners addressing CHNA priority needs	Community based organizations; Community Investment Fund (CIF) partners; NorthShore's Office of Community Health Equity and Engagement

*denotes initiative with health equity integration

Mental Health

ACTIONS NORTHSHORE PLANS TO TAKE TO ADDRESS THE HEALTH NEED

Strategy	Initiatives/Programs	Reportable Metrics/Anticipated Impact	Collaborations
1. Build community's capacity to understand and respond to mental health challenges and emergencies.	• Collaborate with community partner(s) to train community members in Mental Health First Aid (MHFA). • Collaborate with local organizations/community stakeholders to provide MHFA "Train the Trainer" instructor trainings, with a focus on trainers serving underrepresented and under resourced populations.* • Partner with newly trained MHFA instructors to provide MHFA responder sessions in NorthShore's service area with a focus on underserved and communities of color.* • Partner with organizations serving non-English speaking (ESL) community members to develop mental health information sessions that address and destigmatize mental health issues.*	# of community sessions # of community members (responders) trained # of instructors trained # of languages supported # under-resourced communities reached	The Josselyn Center; community based organizations; faith communities; local FQHCs
2. Expand awareness and access to mental health resources in the community.	• Expand access to mental health services at Evanston Township High School (ETHS) with additional therapy and medication management clinic services.* • Evaluate NorthShore.org for ease of access for mental health resources and language around stigma.	Expand therapeutic services for students at Evanston Hospital and ETHS.	Evanston Township High School; community based organizations; NorthShore's Corporate Communications Team
3. Explore programs to reduce stigma surrounding mental health.	• Explore providing education and training in middle and high schools. • Explore marketing strategies (including social media or via other channels) to raise awareness and destigmatize mental health for youth and adults.	# of trainings # of students trained	Local school systems; community based organizations; NorthShore's Corporate Communications Team
4. Enhance partnerships with local community organizations addressing mental health.	• Provide funding through NorthShore's Community Investment Fund (CIF) to help local organizations build capacity and increase impact.*	$'s invested, >80% of annual CIF awardee partners addressing CHNA priority needs	Community based organizations; Community Investment Fund (CIF) partners; NorthShore's Office of Community Health Equity and Engagement

*denotes initiative with health equity integration

Chronic Health Conditions

ACTIONS NORTHSHORE PLANS TO TAKE TO ADDRESS THE HEALTH NEED

Strategy	Initiatives/Programs	Reportable Metrics/Anticipated Impact	Collaborations
1. Address high blood pressure and diabetes through targeted interventions and outreach.	• Utilize lens of equity tool to identify health disparities related to high blood pressure and diabetes. Target health screenings to populations identified through lens of equity tool.* • Direct navigation to a medical home for screened individuals in need of a primary care provider based on SDOH screening.* • Increase efforts around education for patients and providers and improve available data to help inform improvements efforts, inclusive of all patients.* • Dialogue about additional improvements with multidisciplinary leaders via system collaborative and weekly multidisciplinary meetings.	Quality improvement metrics Improve clinical processes to reduce outcome disparities Improve health and clinical outcomes across vulnerable populations Improve control of diabetes A1c and high blood pressure levels	NorthShore Medical Providers NorthShore Quality Department NorthShore Health Equity
2. Enhance partnerships with local community organizations addressing chronic health conditions.	• Improve partnerships within underserved communities re: BC screening rates.* • Provide funding through NorthShore's Community Investment Fund (CIF) to help local organizations build capacity and increase impact.*	$'s invested, >80% of annual CIF awardee partners addressing CHNA priority needs	Community based organizations; NorthShore's Office of Community Health Equity and Engagement

3. Improve preventative cancer screening rates for breast, cervical and colorectal cancer.	• Target outreach to patients overdue for preventive screenings.
	  • Increase access to screening appointments.
	  • Increase collaboration with affiliates.
	• Use Lens of Equity tool to better understand screening rate disparities, for example focused within lower median family income (MFI) communities.*
	• Build and expand Health Equity Community Liaison program to offer navigation and support for underrepresented and/or under-resourced individuals overdue for specific cancer screenings.*
		# of patients contacted; # of screenings completed
		Reductions in health disparities
		Increase screening rates for breast, cervical and colorectal screenings
			NorthShore Medical Providers
			NorthShore Quality Department
			NorthShore Health Equity
			Community based organizations
			Faith based organizations
			FQHC's and CHC's
			Public Schools

*denotes initiative with health equity integration

Significant Health Needs Not Addressed

IRS regulations require that the CHNA Implementation Strategy include a brief explanation of why a hospital facility does not intend to address any significant health needs identified through the CHNA.

Many of these needs are incorporated into other priority areas, which is additionally detailed on the following slide.

Identified Need	Reason for Not Addressing / How Need is Tied to Priorities and Health Equity
Affordability of Healthcare	While not a priority need, this is incorporated into Access to Health Services and Health Equity.
Cancer	While not a priority need, this is incorporated into Chronic Health Conditions and Health Equity.
Heart Disease	While not a priority need, this is incorporated into Chronic Health Conditions and Health Equity.
Health Literacy	While not a priority need, this is incorporated into Access to Health Services and Health Equity.
Maternal and Child Health	This need was not selected for further prioritization in the CHNA process due to focus groups/surveys. However, NorthShore continues to address this need via comprehensive services, as well as partnerships with local FQHCs and other organizations to raise awareness about this issue.
Obesity	While not a priority need, this is incorporated into Chronic Health Conditions and Health Equity.
Preventative Care	While not a priority need, this is incorporated into Chronic Health Conditions and Health Equity.
Food Insecurity	While not a priority need, this is incorporated into Access to Health Services priority via SDOH screening enhancements.
Lack of Affordable Housing	While not a priority need, this is incorporated into Access to Health Services priority via SDOH screening enhancements.
Poverty	While not a priority need, this is incorporated into Access to Health Services and Health Equity.
Violence/Safety	While not a priority need, this is incorporated into Access to Health Services priority via SDOH screening enhancements, as well as expanded Pathways Program.

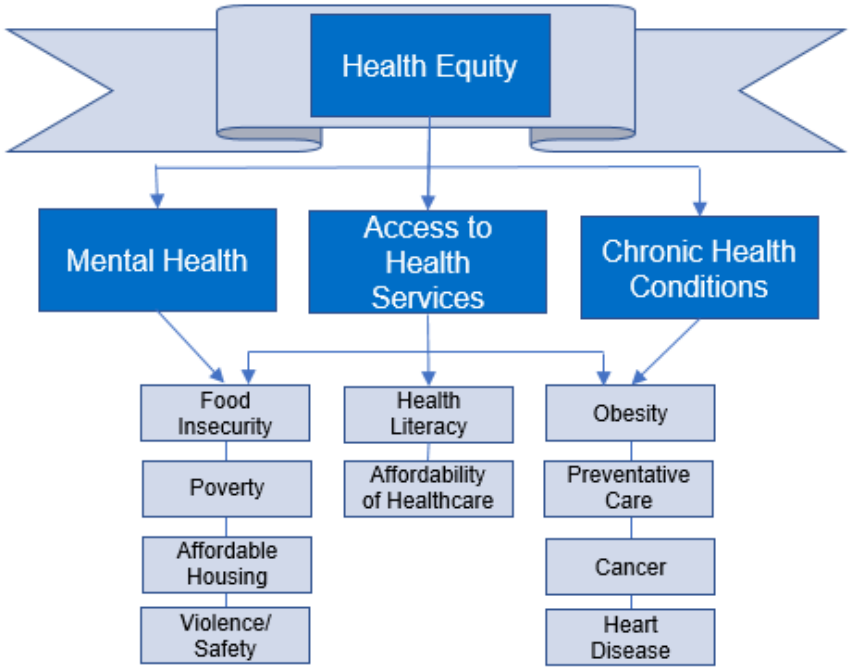
Incorporating Other Identified Needs Into Selected CHNA Priority Areas

NorthShore continues to address our community's health needs via comprehensive services as well as robust community partnerships. Although some identified needs were not selected as a Priority Need within this ISP, the visual below demonstrates how the many of the needs are tied to our selected priority areas.

As described in detail in the CHNA, NorthShore prioritized three significant health needs during the CHNA process:

- Access to Health Services
- Mental Health
- Chronic Health Conditions

NorthShore is also integrating health equity throughout strategies for each of the three prioritized areas above.



Conclusion

In partnership with internal and external stakeholders, including local public health departments, we have taken an in-depth look at the needs and assets in the communities we serve. We are committed to addressing those needs through implementation strategies, in partnership with communities most impacted by health inequities.

Comments regarding the Community Health Needs Assessment and/or Implementation Strategy can be submitted to the organization by contacting:

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