

AMITA Health Saint Francis Hospital Evanston

Community Health Needs Assessment Service Area Overview

2019

Executive Summary

AMITA Health Saint Francis Hospital Evanston (AHSFHE) and members of the Alliance for Health Equity, a collaborative of over 30 hospitals, 7 health departments, and 100 community partners, have worked together over the last 12 months to build this comprehensive Community Health Needs Assessment (CHNA) in Chicago and Cook County. Using the Mobilizing for Action through Planning and Partnerships (MAPP) model for the CHNA, the Alliance engaged diverse groups of community residents and stakeholders and gathered robust data from various perspectives about health status and health behaviors.

Together with our community stakeholders, we have identified the following prioritized health needs in our community:

Social and Structural Determinants of Health, including policies that advance equity and promote physical and mental well-being, and conditions that support healthy eating and active living.

Access to Care, Community Resources, and Systems Improvements, consisting of timely linkage to appropriate care, and resources, referrals, coordination, and connection to community-based services.

Mental Health and Substance Use Disorders, especially reducing stigma, increasing the reach and coordination of behavioral health services, and addressing the opioid epidemic.

Chronic Condition Prevention and Management, focusing especially on metabolic diseases such as diabetes, heart disease, and hypertension, and on asthma, cancer, and complex chronic conditions.

To be successful, AHSFHE will continue to partner with local public health departments across Chicago and suburban Cook County to adopt shared and complimentary strategies and leverage resources to improve efficiencies and increase effectiveness for overall improvement. Data sharing across the local public health departments was instrumental in developing this CHNA and will continue to be an important tool for establishing, measuring, and monitoring outcome objectives. The shared leadership model driving the CHNA will be essential to continue to balance the voice of all partners in the process including the hospitals, health departments, stakeholders, and community members.

AHSFHE will develop a Community Health Implementation Plan for the next three years that describes the programs we are undertaking to address these prioritized health needs in our community.

The full collaborative CHNA as well as assessment reports can be found here:

<https://allhealthequity.org/projects/2019-chna-reports/>

Our Hospital and Community

AMITA Health

AMITA Health is an award-winning health system committed to delivering compassionate care to nearly 6.6 million residents in Chicago and its surrounding suburbs.

As a faith-based health system in the respective Catholic and Adventist traditions, AMITA Health is committed to delivering inclusive and compassionate care, communicating clearly with patients and their families, respecting the faith traditions of all people, and honoring the dignity of everyone we serve. When people come to AMITA Health, they can expect to receive the very best care — and to be treated like family.

In keeping with the faith-based traditions of its legacy health systems, AMITA Health treats the whole person, including the physical, emotional, mental and spiritual needs of the people it serves. The system continually works to identify and to address community health needs, with a special focus on serving the needs of the poor, vulnerable and marginalized. AMITA Health annually provides more than \$82 million in community health and transformation programs and \$48 million in financial assistance.

AMITA Health Saint Francis Hospital Evanston

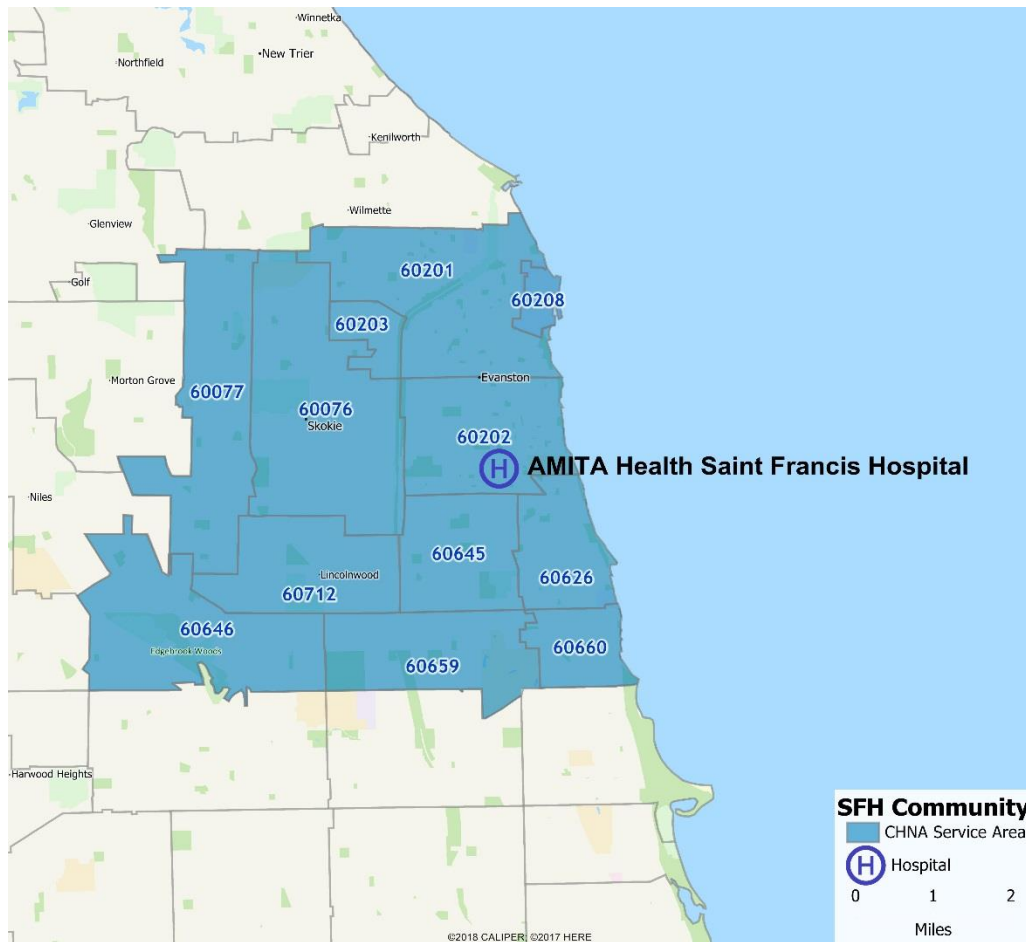
AMITA Health Saint Francis Hospital Evanston is a 215-bed, full service medical facility that provides high-quality, compassionate and family-centered medical care to residents of Edison Park, Rogers Park, Evanston and the surrounding communities. The hospital is a recognized leader in cardiac and Level 1 emergency trauma services. AHSFHE was also awarded the Magnet Nursing Designation by the American Nurses Credentialing Center, the U.S. News and World Report Best Hospital, Metro Chicago and the Joint Commission Certified Primary Stroke Center and Chest Pain Center.

Alliance for Health Equity

In 2018 and 2019, AMITA Health Saint Francis Hospital Evanston participated in the Alliance for Health Equity (AHE), facilitated by the Illinois Public Health Institute. Together, the Alliance developed a collaborative Community Health Needs Assessment (CHNA) for Cook County. The link to our Collaborative Community Health Needs Assessment for Chicago and Suburban Cook County can be found at allhealthequity.org/2019-chna-reports/. This cover document for that CHNA provides more information about the service area of AHSFHE, its existing programs, and its specific needs within the context of the needs identified and prioritized in its service area.

AHSFHE Community

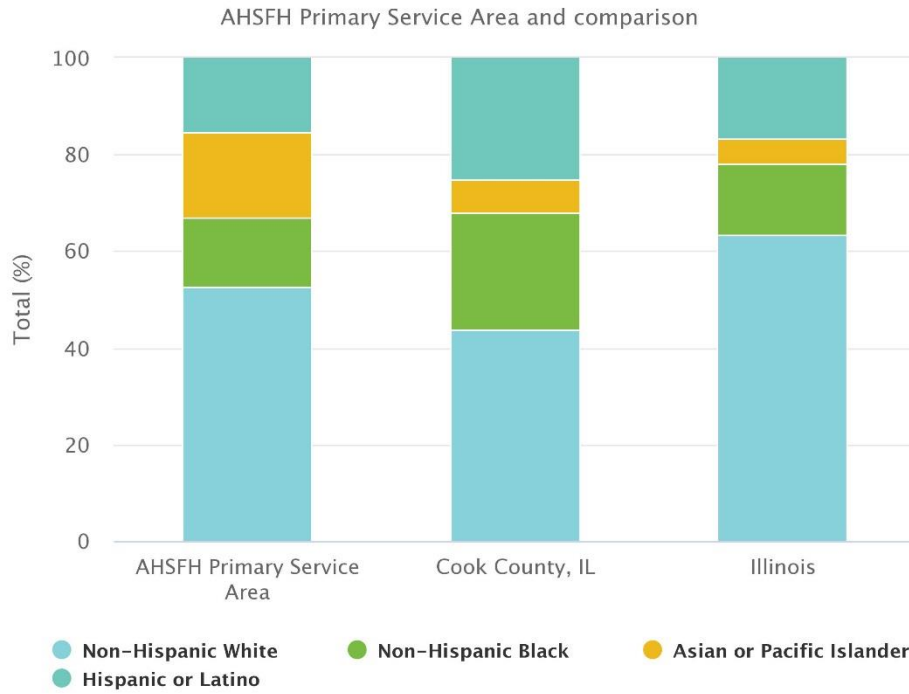
The AHSFHE community consists primarily of Evanston and two Chicago community areas: Rogers Park and West Ridge. We define the AHSFHE primary service area as the collection of ZIP codes where approximately 75% of hospital patients reside, and we focus our community health improvement on this service area.



The communities served by the hospital are quite different. Evanston is a suburb north of Chicago and part of the North Shore communities. Evanston is a thriving community that is recognized for being a strong economic community. The residents enjoy numerous civic events, lakefront recreation and the prestige of Northwestern University within the community. As of 2019, the total population of Evanston, Edison Park, Rogers Park and West Ridge was 328,676. The service area of AHSFHE is a majority of non-Hispanic White and consists of 21% children under the age of 18 and 15% adults 65+. The median household income is between \$41,120-\$114,208. Rogers Park and West Ridge are particularly noted for their diverse communities. West Ridge has a high rate of Asian and Pacific Islanders and Rogers Park is the home of Loyola University Chicago Campus. Rogers Park and West Ridge have a poverty rate of 25% and 21% respectively and are the focus areas of the AHSFHE service area. West Ridge also has a thriving Jewish and Asian community and stands out for the diversity of languages spoken.

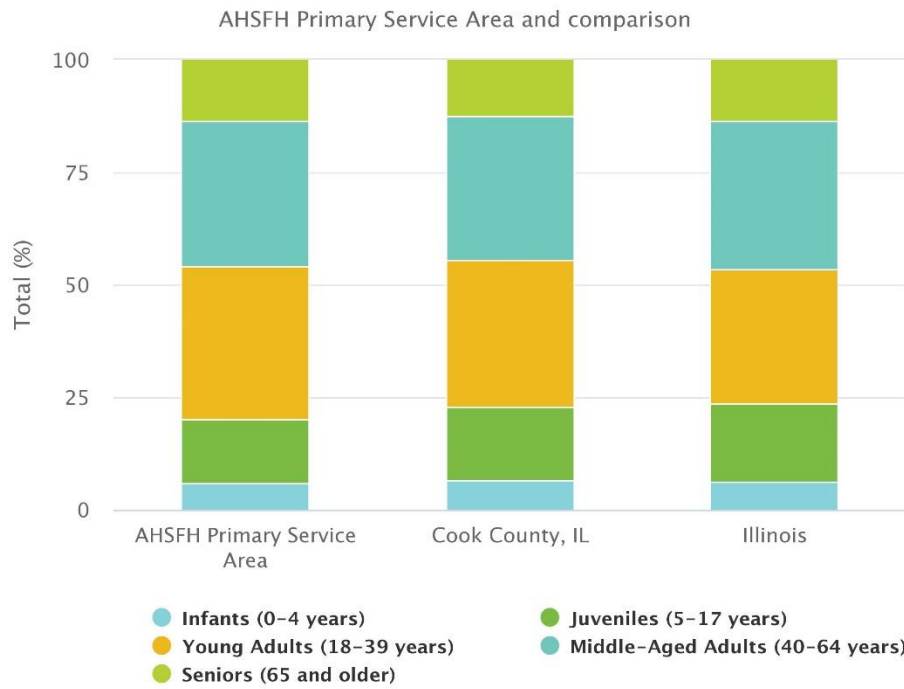
Below are charts showing the diversity of the AHSFHE community in terms of age, race, and ethnicity.

Population by Race/Ethnicity, 2011–2015



Data source: American Community Survey (ACS: Table B01001; Decennial Census: Table P012) | Created by Metopio | <https://metop.io>

Population by Age, 2011–2015



Data source: American Community Survey (ACS: Table B01001; Decennial Census: Table P012) | Created by Metopio | <https://metop.io>

Prioritized Health Needs

These prioritized health needs were selected in coordination with community residents and stakeholders through dedicated workgroups, focus groups, and 5,934 survey responses. They represent where AHSFHE will focus its community health efforts over the next three years, although it also offers programs serving health needs beyond these four prioritized issues. For more information on the process of selecting these community needs, please refer to the full CHNA (“Primary Data”).

Social and Structural Determinants of Health

Goal: Improving social, economic, and structural determinants of health while reducing social, racial, and economic inequities.

The social and structural determinants of health such as poverty, unequal access to community resources, unequal education funding and quality, structural racism, and environmental conditions are underlying root causes of health inequities. Additionally, social determinants of health often vary by geography, gender, sexual orientation, age, race, disability, and ethnicity. The strong connections between social, economic, and environmental factors and health are apparent in Chicago and suburban Cook County, with health inequities being even more pronounced than many national trends.

Access to Care, Community Resources, and Systems Improvements

Goal: Increasing access to care and community resources.

Healthy People 2020 states that access to comprehensive healthcare services is important for achieving health equity and improving quality of life for everyone. Disparities in access to care and community resources were identified as underlying root causes of many of the health inequities experienced by residents in Cook County.

Mental Health and Substance Use Disorders

Goal: Improving mental health and decreasing substance abuse.

Community mental health issues are exacerbated by long-standing inadequate funding as well as recent cuts to social services, healthcare, and public health. The World Health Organization (WHO) emphasizes the need for a network of community-based mental health service, and has found that the closure of mental health facilities is often not accompanied by the development of community-based services, leading to a service vacuum. In addition, research indicates that better integration of behavioral health services, including substance use treatment, into the healthcare continuum has a positive impact on overall health outcomes.

Chronic Condition Prevention and Management

Goal: Preventing and reducing chronic conditions, with a focus on risk factors.

The number of individuals in the U.S. who are living with a chronic disease is projected to continue increasing well into the future. In addition, chronic diseases account for approximately 64% of deaths in Chicago. As a result, it will be increasingly important for the healthcare system to focus on prevention of chronic disease and the provision of ongoing care management.

Health Needs in the AHSFHE Community

Notwithstanding the above prioritized health needs throughout Chicago and Cook County, the AHSFHE community has its own particular needs because of the healthcare resources, gaps, and socio-economic conditions that it contains.

Social and Structural Determinants of Health

The communities served by AMITA Health Saint Francis Hospital Evanston – Rogers Park, West Ridge, Edison Park and Evanston have a significant proportion of individuals who are faced with poverty and the economic inequity that results in health disparities. Rogers Park has the lowest household income, the highest poverty rate and the highest children living in poverty. Both Rogers Park and West Ridge have a high number of immigrants, refugees and individuals who speak limited English. West Ridge is somewhat better than the median household income in Rogers Park and the City of Chicago. Evanston, while much better than Rogers Park, West Ridge and Chicago, it is in the lower range of median household income when compared to other Suburban Cook County areas. In addition, racial and ethnic minorities have lower mean per capita incomes than White non-Hispanics in Chicago and Cook County by approximately 50%. Approximately 3 times the African American population and 2 times the Hispanic/Latino is living at or below 100% of the poverty level population compared to Whites Non-Hispanic

Access to Care, Community Resources, and Systems Improvements

Issues impacting access to care and support services include lack of insurance, lack of providers accepting Medicaid and funding cuts in social services. Inequities in access to care and community resources include individuals who are from low income households, diverse racial and ethnic groups, immigrants and refugees.

Mental Health and Substance Use Disorders

Issues related to mental health and substance use, referred to jointly as “behavioral health” have become a significant public health issue due to inadequate funding and the lack of systems to support the needs in Chicago and Cook County. Stigma and the reluctance to discuss behavioral health problems openly are also factors that contribute to community mental health and substance use issues.

Chronic Condition Prevention and Management

Preventing and Reducing Chronic Disease Chronic disease conditions—including type 2 diabetes, obesity, heart disease, stroke, cancer, arthritis and HIV/AIDs—are among the most common and preventable of all health issues. Chronic disease is extremely costly to individuals and to society. The findings indicate that chronic disease is an issue that affects populations across income levels, race and ethnic groups. The leading causes of death in Chicago are heart disease, cancer and stroke.

Evaluation of Impact: Previous CHNA Implementation Strategy

An important piece of the three-year CHNA cycle is revisiting the progress made on priority needs set forth in the preceding CHNA. By reviewing the actions taken to address the prioritized needs and evaluating the impact those actions have made in the community, it is possible to better target resources and efforts during the next CHNA cycle.

The table below describes actions taken from the AMITA Health Saint Francis Hospital’s previous Implementation Strategy to address each priority need including any indicators for improvement. Included is any community input received from the previous 2016 CHNA and corresponding Implementation Strategy.

Social, Economic & Structural Determinants of Health		
Action Taken	Status of Action(s)	Results
Provision of Achieving Dreams, school-based career pipeline program.	In-Progress/On-Going	<ul style="list-style-type: none"> In partnership with Chicago Public Schools and Evanston Township High School, this initiative allows students from local CPS high schools enrolled in an allied health or the health sciences career track to receive exposure to the health care field through site visits, job shadow days and a 6-week internship at the hospital. The program partner hospitals with schools from low income communities and/or schools with a larger percentage of at-risk students. 118 students participated between 2017-2019
Green & Healthy Homes Initiative	Complete	<ul style="list-style-type: none"> A pilot program was initiated in 2017 & 2018 to reduce asthmatic episodes by providing household remediation of mold and other common triggers.
Access to Care & Community Resources		
Action Taken	Status of Action(s)	Results
Provision of ACA Insurance Exchange enrollment navigators.	Complete	<ul style="list-style-type: none"> Patient financial counselors and Affordable Care Act (ACA) Navigators assisted uninsured members of the community with obtaining health

		<p>insurance.</p> <ul style="list-style-type: none"> This assistance was provided to over 200 community members in 2018.
Mental Health and Substance Abuse		
Action Taken	Status of Action(s)	Results
Provision of Mental Health First Aid Trainings for the community.	In-Progress/On-Going	<ul style="list-style-type: none"> In partnership with community organization, 49 persons were provided with the training in 2017-2019.
Chronic Disease		
Action Taken	Status of Actions(s)	Results
Provision of free Diabetes Prevention Program to low income community.	Complete	<ul style="list-style-type: none"> The program was offer in 2017-2019 to the community. 134 community members participated the program.
Provided the We're Out Walking program with the City of Evanston to promote fitness and community building.	Complete	<ul style="list-style-type: none"> 86 women participated in the program between 2017 & 2018

Upon review of the actions taken since the previous CHNA, greater need for outcome-based reporting was noted. As such, further refinement of the next Implementation Strategy and the reporting of outcomes will be a focus.

Implementation

Community Assets

AMITA Health Saint Francis Hospital Evanston will continue working with organizations and stakeholders in its community to address its prioritized health needs, including:

City of Evanston-Department of Health & Human Services	Evanston Public Library
Naomi Ruth Cohen Institute for Mental Health	Asian Human Services
CPS Career and Technical Education Program	Peer Services
Michael Reese Health Trust	CPS-Sullivan High School
Rogers Park Business Alliance	Between Friends
Catholic Parishes	Loyola University
Cradle to Career	Family Focus of Evanston
Bethel African Methodist Episcopal Church	Seventh Day Adventist of Evanston
Mental Health America Northshore	Calm Classrooms
Saint Nicholas Church	Northwestern University
	Mobile Care Foundation

Implementation Plan and Collaborative Action

Driven by a shared mission and a set of collective values that have guided the CHNA process and decision making, AHSFHE and its community partners will work together to develop implementation plans and collaborative action targeted to achieving the shared vision of improved health equity, wellness, and quality of life across our community. Engaging in this collaborative CHNA process has developed a solid foundation and opened the door for many opportunities moving forward. The Regional Leadership Teams and Stakeholder Advisory Teams look forward to building on the momentum, working in partnership with diverse community stakeholders at regional and local levels to address health inequities and improve community health in our communities.

Publication

AMITA Health Saint Francis Hospital Evanston will share this document and related Implementation Strategies to address the needs identified in this document with all internal stakeholders including employees, volunteers and physicians. This Community Health Needs Assessment is available at amitahealth.org/about-us/community-benefit and is also broadly distributed within our community to stakeholders including community leaders, government officials, and service organizations.

We welcome feedback on this Community Health Needs Assessment and its related Implementation Strategy. Kindly send any feedback you have to the following address:

AMITA Health
Attn: Community Health
200 S Wacker Dr. FL 11
Chicago, IL 60606

The Board of Directors of AMITA Health has formally delegated authority to approve this CHNA to the Evanston Community Leadership Board, comprised of community and hospital stakeholders and business leaders. This plan has been reviewed and approved in 2019.