

# AMITA Health Saints Mary & Elizabeth Medical Center Chicago

## Community Health Needs Assessment Service Area Overview

2019

## Executive Summary

AMITA Health Saints Mary and Elizabeth Medical Center Chicago (AHSMEMC) 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, AHSMEMC 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.

AHSMEMC 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 Saints Mary & Elizabeth Medical Center Chicago

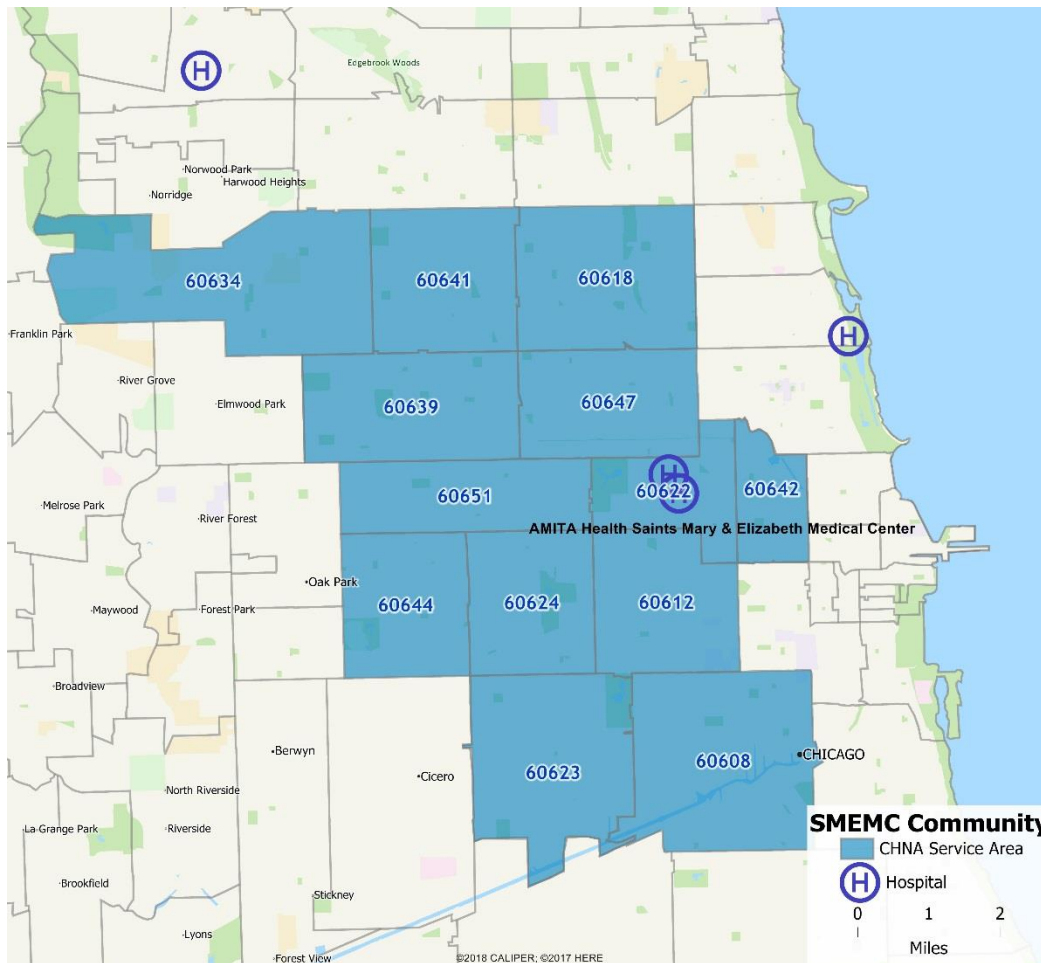
AMITA Health Saints Mary and Elizabeth Medical Center (AHSMEMC) is an award-winning medical center on Chicago's near northwest side that has been meeting the health needs of Belmont-Cragin, Hermosa, Humboldt Park, Logan Square and West Town residents for over 100 years. Founded by the Poor Handmaids of Jesus Christ, AHSMEMC continues to carry out its mission of providing “compassionate, holistic care with a spirit of healing and hope in the communities it serves.”

### Alliance for Health Equity

In 2018 and 2019, AMITA Health Saints Mary & Elizabeth Medical Center Chicago 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/](http://allhealthequity.org/2019-chna-reports/). This cover document for that CHNA provides more information about the service area of AHSMEMC, its existing programs, and its specific needs within the context of the needs identified and prioritized in its service area.

### AHSMEMC Community

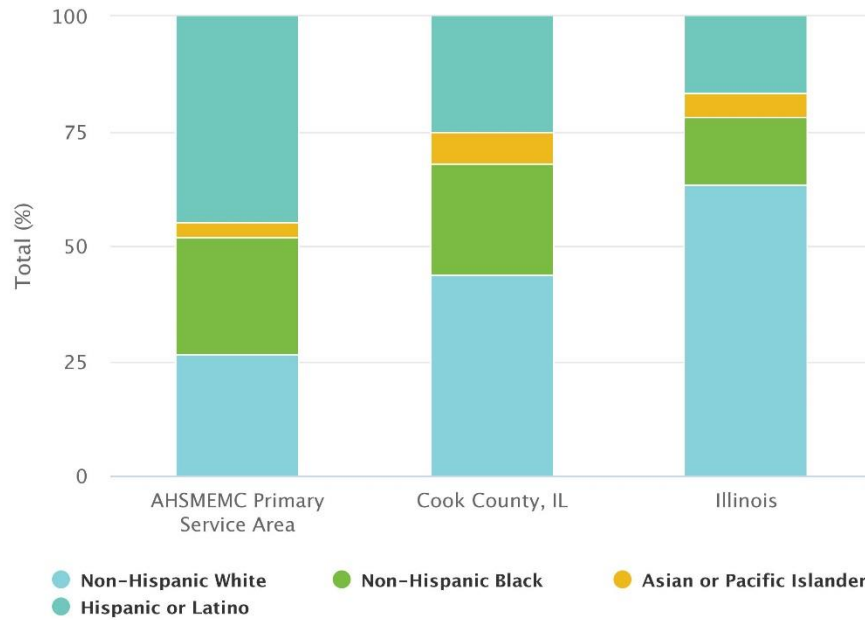
The AHSMEMC service area consists primarily of five community areas: Belmont-Cragin, Hermosa, Humboldt Park, Logan Square, and West Town. We define the AHSMEMC primary service area as the collection of ZIP codes where approximately 75% of hospital patients reside, and we focus our community health improvement on this service area.



Below are charts showing the diversity of the AHSMEMC community in terms of age, race, and ethnicity. Overall, the CHNA service area has a very large Hispanic/Latino population: more than three-quarters of residents in both Hermosa and Belmont Cragin identify as Hispanic/Latino, and half of residents in Logan Square and Humboldt Park identify as Hispanic/Latino. Humboldt Park also has a large African American population.

### Population by Race/Ethnicity, 2011–2015

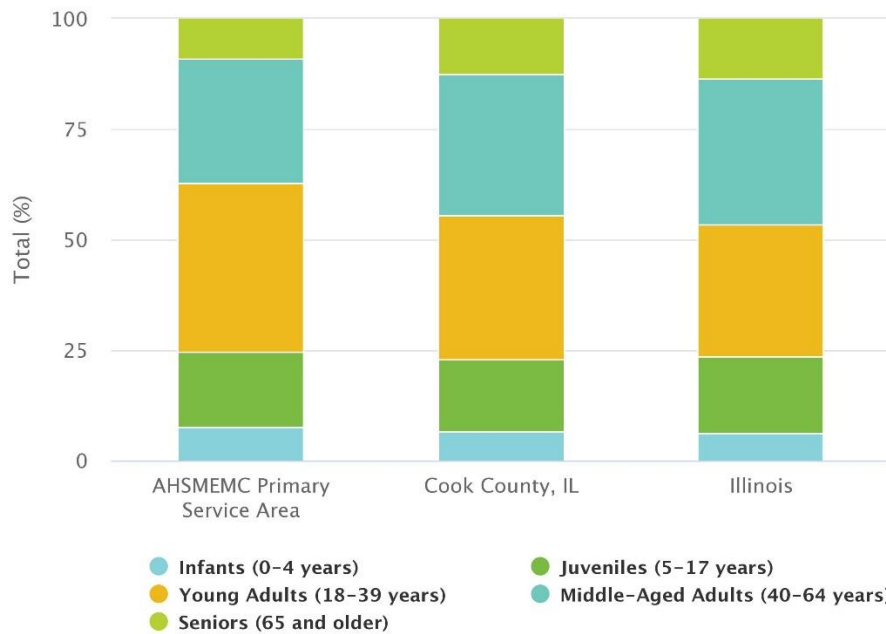
AHSMEMC Primary Service Area and comparison



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

### Population by Age, 2011–2015

AHSMEMC Primary Service Area and comparison



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 AHSMEMC 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 AHSMEMC Community

Notwithstanding the above prioritized health needs throughout Chicago and Cook County, the AHSMEMC 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

Humboldt Park has one of the highest rates of poverty in the region.

Logan Square, Humboldt Park, and Belmont Cragin all have areas where there are few or no healthy food options compared to the number of fast food choices. All communities in the service area have food insecurity rates higher than the U.S. average.

Almost 50% of residents in the CHNA service area were cost-burdened by housing (meaning they paid more than 30% of their income on housing); owners were more likely to be cost burdened than renters.

### Access to Care, Community Resources, and Systems Improvements

Over half (52%) of emergency room outpatients at AHSMEMC are enrolled in Medicaid, while 16% did not use insurance.

Belmont Cragin, Hermosa, Logan Square, and Humboldt Park have a shortage of primary care physicians. In West town, the shortage is primarily for low-income residents. Mental Health care shortages are experienced across the AHSMEMC service area.

### Chronic Condition Prevention and Management

Heart disease and cancer are the leading age-adjusted causes of mortality across the CHNA service area.

In terms of health outcomes, Humboldt Park stands out as having particularly poor health for almost every indicator examined.

## 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 Saints Mary and Elizabeth Medical Center’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 youth workforce development program	In-Progress/On-Going	<ul style="list-style-type: none"> <li>In partnership with Chicago Public Schools (CPS) 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.</li> <li>The program partner hospitals with schools from low income communities and/or schools with a larger percentage of at-risk students.</li> <li>95 students participated between 2017-2019</li> </ul>
Provision of Safety & Violence Workshops	Complete	<ul style="list-style-type: none"> <li>These workshops are collaborated with the 12th and 14th District police and various schools to give open forum to discuss youth violence.</li> <li>In addition, classes have been given to parents to be more supportive by defining the disparities that we are addressing.</li> </ul>
Access to Care & Community Resources		
Action Taken	Status of Action(s)	Results
Provision of ACA Insurance	Complete	<ul style="list-style-type: none"> <li>Patient financial counselors and Affordable Care Act (ACA) Navigators</li> </ul>



Exchange enrollment navigators.		<p>assisted uninsured members of the community with obtaining health insurance.</p> <ul style="list-style-type: none"> <li>This assistance was provided to over 200 community members in 2018.</li> </ul>
LifeSmart Program for seniors & women in the community	Complete	<ul style="list-style-type: none"> <li>Hosted a 10-week program to seniors and women in the community to provide health education on topics such as nutrition, exercise, domestic violence and cardiovascular disease. The program is held in seven different locations throughout the community, including Julia Center Women’s Group, schools and parent groups. Screenings are provided in the first and last sessions to observe the progress each individual has made. Sixty-seven women &amp; seniors participated.</li> </ul>
<b>Mental Health and Substance Abuse</b>		
<b>Action Taken</b>	<b>Status of Action(s)</b>	<b>Results</b>
Provision of Mental Health First Aid Trainings for the community.	In-Progress/On-Going	<ul style="list-style-type: none"> <li>In partnership with community organization, 81 persons were provided with the training in 2017-2019.</li> </ul>
<b>Chronic Disease</b>		
<b>Action Taken</b>	<b>Status of Actions(s)</b>	<b>Results</b>
Provision of Children’s Awareness of Nutrition, Diabetes, and Obesity (CANDO) Camp	In-Progress/On-Going	<ul style="list-style-type: none"> <li>Provided free screenings for the general community that includes a full lipid cholesterol panel and A1C test for diabetes. Individuals with an abnormal diabetes result are followed by the Certified Diabetes Nurse Educator. The individuals with abnormal cholesterol results are also contacted by a hospital nurse.</li> <li>121 students participated in 2017-2019.</li> </ul>

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 Saints Mary & Elizabeth Medical Center Chicago will continue working with organizations and stakeholders in its community to address its prioritized health needs, including:

AIDS Foundation of Chicago	HAS
American Cancer Society	NAMI
Anshe Amet Synagogue	West Town Bikes
Catholic Charities	Cristo Rey
El Rincon	Roberto Clemente Academy
Asian Human Services	La Casa Norte
Bickerdike Redevelopment Corporation	Prime Care
Catholic Charities	Erie Family Health Centers
Greater Humboldt Park Diabetes	Susan G. Komen
Puerto Rican Cultural Center	Josephinum Academy
Empowerment Center	Elevate
McCormick Tribune YWCA	Chicago White Sox Community Fund

### 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, AHSMEMC 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 Saints Mary & Elizabeth Medical Center Chicago 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](https://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 West Town Community Leadership Board, comprised of community and hospital stakeholders and business leaders. This plan has been reviewed and approved in 2019.