

In sickness and in health<sup>™</sup>

# **IMPLEMENTATION STRATEGY PLAN** FY 2017 - 2019

AMITA HEALTH ALEXIAN BROTHERS BEHAVIORAL HEALTH HOSPITAL HOFFMAN ESTATES, IL

## EXECUTIVE SUMMARY

The AMITA Health Alexian Brother Behavioral Health Hospital assessment was conducted by the Professional Research Consultants, Inc. in cooperation with MCHC and other partnering hospitals. It incorporates data from both quantitative and qualitative sources. The goals of the assessment were to:

- Engage public health and community stakeholders including low-income, minority and other underserved populations
- Assess and understand the community's health issues and needs
- Understand the health behaviors, risk factors and social determinants that impact health
- Identify community resources and collaborate with community partners
- Make the Community Health Needs Assessment (CHNA) widely available
- Use Assessment findings to develop and implement a 2017 2019 Community Health Plan (implementation strategy) based on the Hospital's prioritized issues

The information in this presentation is not exhaustive or conclusive, rather an overview of the issues most prominent in the primary and secondary services areas. As a psychiatric hospital, ABBHH only addresses mental health as it is the sole priority of this hospital. Our most widely accessed and programming which benefits the entire community is highlighted, but ABBHH provides continuous support and leadership to schools, police departments, domestic violence shelters and social service agencies on a continuous basis.



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# The mission of AMITA Health is to extend the healing ministry of Jesus.

Our Community Benefit Program is Integral to our Mission.

It Responds to identified needs in the community. It Empowers local organizations serving the most vulnerable populations. It Supports the government's efforts to enhance population health. It Helps families living in poverty to access affordable healthcare.

It Improves the health of the communities we live in.



### **DEMOGRAPHICS & METHODOLOGY**

In the ABBHH service area, the population is slightly older with 15.4% of residents over age 65 as compared to 13.9% in Illinois. 19.2% of the population is Hispanic, a higher percentage as compared to 16.7% in Illinois and 17.4% in the US. The community's social determinants are fairly average, except that there are 7.6% of residents that is considered "linguistically isolated" i.e. do not speak English. Nearly 15% of the population lives at or below 100% of the poverty level and 32.3% are at or below the 200% of the poverty level, representing 2,174,865 individuals. The service area for the hospital is comprised of 84 residential zip codes based on patient origin. A complete description of sample size and survey design is available on the website at amitahealth.org/communityneeds.

#### **SURVEYS**

#### INTERVIEWS

#### DATA

An Online Key Informant Survey was conducted as part of this assessment. Key informants comprised those individuals who have a broad interest in the health of the community. There was a total of 60 stakeholders participants for this region. A list of stakeholders was provided by MCHC member hospitals participating in the overall assessment process The strategy used for this assessment entailed a telephone interview methodology of 1,033 individuals age 18 and older in the Total Service Area. The surveys were distributed to individual hospitals that were part of the larger assessment thus involving multiple regions and hospital service areas.

This assessment incorporates a selection of secondary data from 17 sources in order to support the research quality. Benchmark data was collected from the Centers for Disease Control and the U.S. Department of Health and Human Services. The nationwide risk factor data was taken from the 2013 PRC National Health Survey and Healthy People 2020.



# **PRIORITY ISSUES**

The chart below reveals the substantial areas of opportunity as it relates to community benefit. As a psychiatric hospital, ABBHH focuses only on the area's top priority of Mental Health, which includes leadership, education, screening, diagnosis and treatment of all mental illnesses. ABBHH provides services and programming for each of the Mental Health related priorities below, including Substance Abuse, Community Violence, Family Violence and Dementia/Alzheimer's Disease which all fall under the umbrella of mental health. The priority issues set forth below, other than those related to mental health are not conditions which ABBHH treats.

|  | 0                    | 9%     | 10%     | 20%   | 30%   | 40%     | 50%   | 60%     | 70%      | 80%    | 90%  | 1009 |
|--|----------------------|--------|---------|-------|-------|---------|-------|---------|----------|--------|------|------|
| PRIORITY ISSUE                           | Mental Health        | 82.1   |         |       |       |         |       |         |          |        | 8.9% |      |
| Diabetes                                 |                      | 69.8%  |         |       |       |         |       |         |          | 18.9%  |      |      |
| Nutrition, Physical Activity, and Weight |                      |        | 66.0%   |       |       |         |       |         | 3        | 22.6%  |      |      |
| Substance Abuse                          |                      | 51.9%  |         |       |       |         |       |         | 33.3%    |        |      |      |
| Heart Disease and Stroke                 |                      | 51.99  |         |       | 1.9%  |         |       |         | 38.5%    |        |      |      |
| Access to Health Care Services           |                      | 35.2%  |         | 35.2% |       |         | 38.9% |         |          |        |      |      |
| Family Planning                          |                      |        | 3       | 4.0%  |       |         | 38.0  | %       |          |        |      |      |
| Oral Health/Dental Care                  |                      | 33.3%  |         |       |       | 42.6%   |       |         |          |        |      |      |
| Community Violence                       |                      |        | 32.1%   |       |       |         | 30.2% |         |          |        |      |      |
| Family Violence                          |                      | 31.4%  |         | .4%   |       |         | 37.3% |         |          |        |      |      |
| Cancer                                   |                      | 26.0%  |         | þ     | 56.0% |         |       | 0%      |          |        |      |      |
| Dementia/Alzheimer's Disease             |                      | 25.0%  |         |       |       |         | 46.2% |         |          |        |      |      |
| Sexually Transmitted Diseases            |                      | 24.5%  |         |       |       | 44.9%   |       |         |          |        |      |      |
| Tobacco Use                              |                      | 24.1%  |         |       | 51.9% |         |       |         |          |        |      |      |
| R  | Respiratory Diseases |        | 23.5%   |       | 39.2% |         |       |         |          |        |      |      |
| Infant and Child Health                  |                      | 1      | 18.9%   |       | 50.9% |         | .9%   |         |          |        |      |      |
| Unintentional Injury                     |                      | 1      | 8.4%    |       | 30.6  | %       |       |         |          |        |      |      |
| Arthritis/Osteoporosis/Back Conditions   |                      | 12.5   | %       |       | 43.   | 3%      |       |         |          |        |      |      |
|  | HIV/AIDS             |        | %       |       | 34.0% | 1       |       |         |          |        |      |      |
| Immunization and                         | Infectious Diseases  | 9.4%   |         |       | 45.3% |         |       |         |          |        |      |      |
| Chr                                      | onic Kidney Disease  | 8.2%   | 8.2%    |       | 46.9% |         |       |         |          |        |      |      |
| Hearing and Vision Problem               |                      | .0%    |         |       | 53.1% |         |       |         |          |        |      |      |
|  | -                    |        |         |       |       |         |       |         |          |        |      |      |
| -  | Major Problem 🔲 🛛    | lodera | ate Pro | blem  | 🗆 Min | or Prol | blem  | 🔲 No Pi | roblem / | At All |      |      |



## **IMPLEMENTATION PLAN: MENTAL HEALTH**

Goal: Maintain and expand existing community call access center to provide the community with screening and referrals for mental health issues

Strategy: Staff a free 24/7 mental health call center with Master's trained mental health providers who receive calls from the community and can provide assessments and referrals as appropriate and serve as a guide for the community at a vulnerable time in their lives. This is an unduplicated service in Illinois.

Community Partner: The Call Center at the Alexian Brothers Behavioral Health Hospital

Public Policy: Advocate for state and federal funding for our community mental health centers.

Expected Impact: There are no other 24/7 free screening and referral mental health centers in Illinois. The call center not only provides immediate access to professional help, it can help family members determine what resources are available and how emergent their situation may be. The call center began service on 1/30/2014 and for the 11 months of that year received 77,994 calls. In 2015 they received 104,744, 2016 is expected to exceed that number by 42% or 14,873 persons served. As funding has been impacted due to the lack of a state budget, our expectation is that more calls for referrals will be fielded as the community struggles to find resources for their loved ones.





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AMITA Health Website: http://www.amitahealth.org

Community Benefit Webpage: http://www.amitahealth.org/communityneeds