



2023-2025
UChicago Medicine
AdventHealth
LaGrange
Community
Health Plan



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Acknowledgements

This community health plan was prepared by Fabiola Zavala, Director of Community Health, with contributions from members of UChicago Medicine AdventHealth LaGrange Community Health Needs Assessment Committee representing health leaders in the community and hospital leaders.

We are especially grateful for the internal and external partners who helped guide the development of the community health plan which will enable our teams to continue fulfilling our mission of Extending the Healing Ministry of Christ.



EXECUTIVE SUMMARY



I Executive Summary

Adventist Midwest Health d/b/a UChicago Medicine AdventHealth LaGrange will be referred to in this document as UChicago Medicine AdventHealth LaGrange or the “Hospital”.

Community Health Needs Assessment Process

UChicago Medicine AdventHealth LaGrange in La Grange, Illinois conducted a community health needs assessment in 2022. The assessment identified the health-related needs of the community including low-income, minority and other underserved populations. This assessment process was the most comprehensive to date and included survey questions related to diversity, equity and inclusion. In addition, the priorities were defined, when possible, in alignment with Healthy People 2030, national public health priorities to improve health and well-being.

In order to ensure broad community input, UChicago Medicine AdventHealth LaGrange created a Community Health Needs Assessment Committee (CHNAC) to help guide the Hospital through the assessment process. The CHNAC included representation from the Hospital, public health experts and the broad community. This included intentional representation from low-income, minority and other underserved populations. The prioritization process sought to balance our ability to impact the greatest number of people who are facing the greatest disparities.

The CHNAC and HHNAC met throughout 2021-2022. The members reviewed the primary and secondary data, helped define the priorities to be addressed and helped develop the Community Health Plan to address those priorities. Learn more about Healthy People 2030 at <https://health.gov/healthypeople>.

Community Health Plan Process

The Community Health Plan (CHP), or implementation strategy, is the Hospital’s action plan to address the priorities identified from the CHNA. The plan was developed by the CHNAC, HHNAC and input received from stakeholders across sectors including public health, faith-based, business and individuals directly impacted.

The CHP outlines targeted interventions and measurable outcomes for each priority noted below. It includes resources the Hospital will commit and notes any planned collaborations between the Hospital and other community organizations and hospitals.

The identified goals and objectives were carefully crafted, considering evidence-based interventions and AdventHealth’s Diversity, Equity, and Inclusion and Faith Accountability strategies. UChicago Medicine AdventHealth LaGrange is committed to addressing the needs of the community, especially the most vulnerable populations, to bring wholeness to all we serve.



I Executive Summary

Priorities Addressed

The priorities addressed include:

1. Access to Care and Community Resource
2. Priority Health Conditions (Preventions & Treatment)

See page 9 for goals, objectives and next steps for each priority selected to be addressed.

Priorities Not Addressed

The priorities not addressed include:

1. Social and Structural Determinants of Health

See page 14 for an explanation of why the Hospital is not addressing these issues.



The Community Health Plan is a three-year strategic plan and may be updated during implementation based on changing community needs or availability of resources. AdventHealth recognizes community health is not static and high priority needs can arise or existing needs can become less pressing. The Hospital may pivot and refocus efforts and resources to best serve the community.

I Executive Summary

Board Approval

On March 22, 2023, the UChicago Medicine AdventHealth LaGrange Board approved the Community Health Plan goals, objectives and next steps. A link to the 2023 Community Health Plan was posted on the Hospital's website prior to May 15, 2023.

Ongoing Evaluation

UChicago Medicine AdventHealth LaGrange's fiscal year is January – December. For 2023, the Community Health Plan will be deployed beginning May 15, 2023, and evaluated at the end of the calendar year. In 2024 and beyond, the CHP will be evaluated annually for the 12-month period beginning January 1st and ending December 31st. Evaluation results will be attached to the Hospital's IRS Form 990, Schedule H. The collective monitoring and reporting will ensure the plan remains relevant and effective.

For More Information

Learn more about the Community Health Needs Assessment and Community Health Plan for UChicago Medicine AdventHealth LaGrange at <https://www.adventhealth.com/community-health-needs-assessments>.



ABOUT ADVENTHEALTH



| About AdventHealth

UChicago Medicine AdventHealth LaGrange is part of AdventHealth. With a sacred mission of Extending the Healing Ministry of Christ, AdventHealth strives to heal and restore the body, mind and spirit through our connected system of care. More than 80,000 skilled and compassionate caregivers serve 4.7 million patients annually. From physician practices, hospitals, outpatient clinics, skilled nursing facilities, home health agencies and hospice centers, AdventHealth provides individualized, wholistic care at nearly 50 hospital campuses and hundreds of care sites throughout nine states.

Committed to your care today and tomorrow, AdventHealth is investing in research, new technologies and the people behind them to redefine medicine and create healthier communities.

About UChicago Medicine AdventHealth LaGrange

UChicago Medicine AdventHealth LaGrange is part of the AdventHealth Great Lakes Region. The AdventHealth Great Lakes region is comprised of UChicago Medicine AdventHealth Bolingbrook, UChicago Medicine AdventHealth GlenOaks, UChicago Medicine AdventHealth La Grange and UChicago Medicine AdventHealth Hinsdale, all in the State of Illinois. UChicago Medicine AdventHealth LaGrange is a 196-bed, full service medical facility that provides high-quality, compassionate and family-centered medical care to the residents of LaGrange and the surrounding communities. UChicago Medicine AdventHealth LaGrange offers emergency medical services, heart and vascular care, cancer care, obstetrics and women’s services, lab and imaging services and surgical services. UChicago Medicine AdventHealth LaGrange has earned a number of nationally recognized awards and safety grades including, ANCC Magnet Designation, Joint Commission Hospital Behavioral Health and Home Health accreditation, Joint Commission Advanced Primary Stroke Center Certification, Blue Distinction Specialty Care for Hip and Knee Replacement and CMS Start Rating program – 5 Star.



PRIORITIES ADDRESSED



Access to Care and Community Resources

Access to care is a key driver to health. Access can be influenced by both cost and availability. According to 30% of community survey respondents, their households are never, rarely or only sometimes able to pay for health care (family doctor, prescriptions, etc.). An important factor is availability of care and requires having an adequate number of providers in a community. There is a shortage of primary care, mental health and dental care providers in the county. The county has fewer providers by population compared to both the state and the nation. For example, the rate of primary care providers in Cook County is 1,810:1, compared to the IL rate of 1,240:1 and the national rate of 1,030:1. Focusing on access to care will enable the Hospital to align to local efforts and resources to create targeted strategies to improve access for all resident in its community.

Goal 1: Increase access to comprehensive and high-quality health care services

Objective 1.1: By December 31, 2025, host 12 enrollment events to give patients and community members an opportunity to enroll in health care coverage.

Target Population: Uninsured adults with a special focus on Hispanic/ Latinx

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Support Pillars Community Health in their efforts to provide low-cost primary health care services to eligible residents of Cook County	# of people served	Financial support, Residency Clinics, Nurse Care Coordinator	Pillars Community Health, BEDSPlus	X	X	X
Develop opportunities for patients and community members to enroll for health care coverage	# of enrollment events # of people enrolled	Staff time, logistics	Pillars Community Health, University of Illinois Extension		X	X
Promote use of the Whole Health Hub to identify access to care resources for individuals	# of searches for access to care resources # of closed loop referrals	Staff time, collateral, marketing	Faith Community and community-based organizations		X	X

Priority Health Conditions (Prevention and Treatment)

During the assessment, 47.2% of community survey respondents shared depression/anxiety were a problem in their home. It was also found that 5.3% believed prescription drug use was a problem in their home and nearly 53% believe it is a problem in Cook County. Public data also found that 56% of 12th graders use alcohol, with 16% reporting they have engaged in binge drinking in the last two weeks. Awareness and the need to address behavioral health has been growing in the country and locally. By addressing behavioral health as a priority, the Hospital can align to local, state and national efforts for resource collaboration and to create better outcomes opportunities over the next three years.

Goal 1: Improve access to chronic disease screenings and management

Objective 1.1: By December 31, 2025, 90% of participants in the clinics and educational programs will have improved knowledge of how to manage their chronic condition.

Target Population: Black/ African-American and Hispanic/ Latinx

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Coordinate and host Mission Clinic that provides free chronic disease screenings and resources	# of people served	Staff time and financial support Community Health, Clinicians, Marketing, and Mission teams	DuPage Health Coalition, National Alliance on Mental Illness (NAMI) Metro Suburban, Pillars Community Health, Cook County Health Department, Faith Communities	X	X	X
Host chronic disease management and maternal and child health educational sessions	# of educational sessions # of participants Pre- and post-test to increase participant knowledge	Staff time, logistics, marketing	Age Options, Aging Care Connections, University of Illinois, March of Dimes, American Heart Association	X	X	X
Chronic Disease Awareness Campaign	# of people reached Pre- and post-survey Flyers, social media posts	Community Health, Marketing, and Mission teams staff time	University of Illinois Extension, American Heart Association, American Diabetes Association		X	X
Sepsis Awareness Campaign	# of people reached Pre- and post-survey Flyers, social media posts	Community Health, Marketing, and Diversity, Equity and Inclusion (DEI) Council staff time	Community-based agencies and Faith Community		X	X

Priority Health Conditions (Prevention and Treatment)

Goal 2: Increase the proportion of people who get a referral for mental health and/ or substance misuse services after an emergency department visit

Objective 2.1: By December 31, 2025, increase the percentage of mental health and substance misuse patients who are assessed in the Emergency Department to receive a referral for outpatient or alternative resources from 35.14 % to 45.14%.

Objective 2.2: By December 31, 2025, create a loop referral agreement with at least two agencies for the Whole Health Hub. The Whole Health Hub is an AdventHealth branded platform our clinical teams use to refer patients to nearby social services agencies based on the patient’s individual needs.

Target Population: Adults in need of mental health or substance misuse treatment

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Collect Emergency Department assessment and referral data for patients with mental health and substance misuse concerns	# of patients assessed #of referrals to community-based behavioral health resources	Behavioral Health team will refer Emergency Department patients to community-based behavioral health resources	Lutheran Social Services of Illinois, Haymarket, Metropolitan Family Service	X	X	X
Recruit agencies to claim their profile in the Whole Health Hub. Identify most frequent conditions needing a referral and most frequent agency being referred to. Data will drive strategic decision-making when identifying new organizations to recruit for WHH.	# of conditions # of agencies	Behavioral Health team staff time to pull and analyze data	findhelp	X	X	
Create a closed loop referral agreement with the two agencies being referred to the most using the Whole Health Hub	# of closed loop referrals # of partner agencies	Staff time to develop and execute referral agreement for Whole Health Hub	Outpatient, alternative behavioral health or substance use resources			X

Priority Health Conditions (Prevention and Treatment)

Goal 3: Increase awareness of mental health and substance misuse challenges to reduce stigma

Objective 3.1: By December 31, 2025, 90% of participants will have a knowledge increase after attending the community-wide mental health and substance misuse educational series.

Objective 3.2: By December 31, 2025, increase knowledge and skills (ex. how to intervene when a person is experiencing a mental health challenge/crisis) of at least 90% of Mental Health First Aid training participants.

Target Population: All community members and professionals interested in receiving mental health or substance misuse education

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Acquire continuing education unit (CEU) provider status in order to provide professional level CEUs	Approve provider status	Cost of application and staff time	N/A	X		
Develop mental health and substance misuse educational series (professional (CEU) and general community)	# of educational events	Staff time	School Districts, community-based organizations	X	X	X
Promote and support mental health and substance misuse educational series	Collateral # of participants (general community) # of participants (professionals receiving CEUs)	Staff time, marketing, logistics	National Alliance on Mental Illness (NAMI) Metro Suburban, Pillars Community Health		X	X
Schedule, promote and support Mental Health First Aid (MHFA) trainings	# of trainings # of participants Flyers, social media posts	Staff time to schedule trainings and coordinate with community partners, marketing, logistic	NAMI Metro Chicago	X	X	X

PRIORITIES NOT ADDRESSED



I Priorities Not Addressed

UChicago Medicine AdventHealth LaGrange also identified the following priorities during the CHNA process. In reviewing the CHNA data, available resources, and ability to impact the specific identified health need, the Hospital determined these priorities will not be addressed.

Social and Structural Determinants of Health

During the assessment, affordability and access of transportation and safe housing was cited often by community members as a barrier to quality of life and good health. During the assessment, 31% of community survey respondents shared they never or rarely have access to public transportation for activities such as grocery shopping, getting to work or appointments, etc.

The Hospital decided that housing and transportation, although an identified need for a multitude of reasons, is being addressed as countywide by other organizations better positioned to address it and the Hospital could not make meaningful change in the time allotted for the next community health plan.





**Adventist Midwest Health d/b/a
UChicago Medicine AdventHealth LaGrange**

CHP Approved by the Hospital Board on: March 22, 2023

For questions or comments please contact:
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