# 2022-2024 IMPLEMENTATION STRATEGY

Saint Anthony Hospital

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# IDENTIFYING SIGNIFICANT HEALTH NEEDS

# ABOUT SAINT ANTHONY HOSPITAL

Saint Anthony Hospital in Chicago, Illinois, is a not-for-profit, 151-bed hospital serving the West and Southwest sides of Chicago. With 947 employees, Saint Anthony Hospital provides services primarily to residents of North Lawndale, Little Village, and Brighton Park, but also serves those in neighboring Cicero, Illinois. Saint Anthony Hospital is accredited by The Joint Commission, reviewed by the Illinois Department of Public Health and the College of American Pathologists. Saint Anthony Hospital is certified by the Illinois Emergency Management Agency and the Emergency Department Approved for Pediatrics.

Hospital facts and figures (FY21):

- 151 licensed beds
- 1,009 Employees
- 5197 Admissions
- 27,506 Patient Days
- 28,069 Emergency Department Visits
    - 2,987 Inpatient
    - 25,082 Outpatient
- 214,313 Outpatient Care Center Visits
- 2,274 Surgical Procedures

It is our mission to provide quality healthcare services with efficiency. Saint Anthony Hospital provides a plethora of services, some listed below:

- Inpatient
    - Medical Stabilization Unit
    - Children's Hospital
    - Psychiatry
    - Intensive Care Unit
    - Telemetry (Medical-Surgery)
    - Labor & Delivery
- Outpatient
- Emergency Care
- Surgical Services
- Diabetes Care
- Obstetrics
- Dialysis Center
- Rehabilitation
- Specialty Care
    - Urology
    - Gastrointestinal
    - Orthopedics
    - Ophthalmology
    - Interventional Radiology

Saint Anthony Hospital maintains a department dedicated to addressing its outreach objectives of serving the entire community, not only those who come through its doors. Building on a long tradition of service, the Community Wellness Department provides ongoing opportunities for the community to communicate their needs, allowing the hospital to determine services and allocate resources that align with the needs of the community.

This strategy strengthens Saint Anthony Hospital's capacity to better understand and reach the most vulnerable sectors of the community, while meeting pressing healthcare needs. The goal is to improve the community's health status by empowering citizens to make healthy life choices.

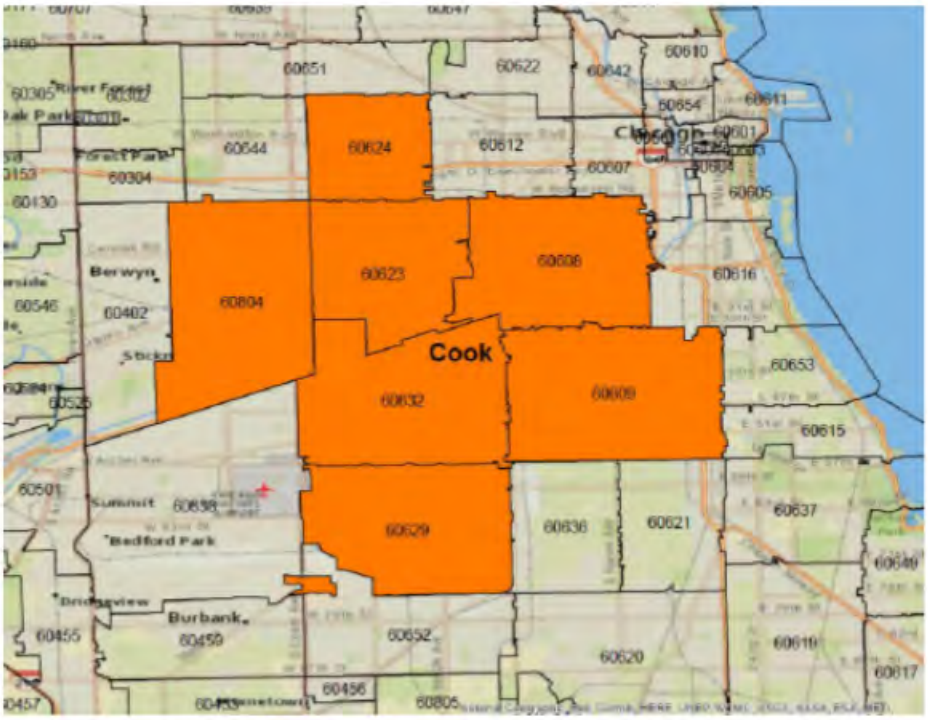
Saint Anthony Hospital completed its last Community Health Needs Assessment in 2018.

# OUR COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA)

Saint Anthony Hospital recently embarked on a comprehensive Community Health Needs Assessment (CHNA) process to identify and address the key health issues for our community.

## Definition of the Community Served

Saint Anthony Hospital's community, as defined for the purposes of the Community Health Needs Assessment and Implementation Strategy, include each of the residential ZIP Codes that comprise the hospital's Primary Service Area (PSA), including: 60608, 60609, 60623, 60624, 60629, 60632, 60804. A geographic description is illustrated in the following map.




This community definition was determined because over 75% of Saint Anthony Hospital's patients originate from this area.

## How CHNA Data Were Obtained

The CHNA incorporated data about the community from multiple sources, including both primary and secondary data:

- A population-based survey among a representative sample of community residents (the PRC Community Health Survey)
- An online survey of public health representatives, health providers, and a variety of other community service providers and stakeholders (the PRC Online Key Informant Survey)
- A review of existing vital statistics, public health, census, and other data

The CHNA allowed for extensive comparison to benchmark data at the state and national levels.

The assessment was conducted on behalf of Saint Anthony Hospital by PRC, a nationally recognized health care consulting firm with extensive experience conducting Community Health Needs Assessments in hundreds of communities across the United States since 1994.

# Identifying & Prioritizing Health Needs

## Areas of Opportunity

Significant health needs (or "Areas of Opportunity") were determined in our CHNA after consideration of various criteria, including: standing in comparison with benchmark data; identified trends; the preponderance of significant findings within topic areas; the magnitude of the issue in terms of the number of persons affected; and the potential health impact of a given issue.

## Prioritized List of Health Needs

After reviewing the Community Health Needs Assessment findings, internal team members and community stakeholders met to evaluate and prioritize the top health needs for our community. The participants were asked to evaluate each health issue along two criteria: 1) scope and severity of the health issue; and 2) the hospital's/community's ability to impact that issue. Individual ratings for each criterion were averaged for each tested health issue, and then these composite criteria scores were averaged to produce an overall score. This process yielded the following prioritized list of health needs for our community:

1. Injury & Violence
2. Diabetes
3. Nutrition, Physical Activity & Weight
4. Mental Health
5. Substance Abuse
6. Access to Healthcare Services
7. Potentially Disabling Conditions
8. Tobacco Use
9. Heart Disease & Stroke
10. Oral Health
11. Cancer
12. Respiratory Diseases
13. Sexual Health
14. Kidney Disease

# ADDRESSING THE SIGNIFICANT HEALTH NEEDS

# HOSPITAL-LEVEL COMMUNITY BENEFIT PLANNING

This summary outlines Saint Anthony Hospital's plan (Implementation Strategy) to address our community's health needs by 1) sustaining efforts operating within a targeted health priority area; 2) developing new programs and initiatives to address identified health needs; and/or 3) promoting an understanding of these health needs among other community organizations and within the public itself.

## Priority Health Issues to Be Addressed

In consideration of the top health priorities identified through the CHNA process — and taking into account hospital resources and overall alignment with the hospital's mission, goals and strategic priorities — it was determined that Saint Anthony Hospital would focus on developing and/or supporting strategies and initiatives to improve:

- Injury & Violence (paired with Substance Abuse)
- Diabetes/Nutrition, Physical Activity & Weight
- Mental Health
- Access to Health Care Services

## Issues That Will Not Be Addressed & Why

In acknowledging the wide range of priority health issues that emerged from the CHNA process, Saint Anthony Hospital determined that it could only effectively focus on those which it deemed most pressing, most under-addressed, and/or most within its ability to influence.

| **Health Priorities Not Chosen for Action** | ***Reason*** |
|---|---|
| Potentially Disabling Conditions | ***Saint Anthony*** *will be directly addressing Injury & Violence, Diabetes, Mental Health and Access to Health Care Services. These issues include Potentially Disabling Conditions, so the category will be addressed indirectly through identified priority areas.* |
| Tobacco Use | ***Saint Anthony Hospital*** *has limited resources and will address Tobacco Use as it relates to substance abuse concerns with higher levels of acuity.* |
| Heart Disease & Stroke | ***Saint Anthony Hospital*** *has limited resources and lower priority excluded this as an area chosen for action. Action plans for Nutrition and Diabetes will include activities and strategies that will benefit patients who suffer from Heart Disease and Stroke. In addition, SAH is a certified Stroke Center.* |
| Oral Health | ***Saint Anthony Hospital*** *believes that this priority area falls more within the purview of the county health department and other community health organizations.* |
| Cancer | ***Saint Anthony Hospital*** *considers the efforts outlined herein to improve access to health services will have a positive impact on early detection of cancers, and that a separate set of cancer-specific initiatives was not necessary.* |

| | |
|---|---|
| Respiratory Diseases | ***Saint Anthony Hospital*** *outlines efforts to improve access to health care access services which will provide resources to patients with respiratory-related diseases. Additionally, care coordination efforts related to nutrition and substance use will include related respiratory disease.* |
| Sexual Health | ***Saint Anthony Hospital*** *outlines efforts to improve access to health care access services which will provide resources and referrals to patients who have a higher level of need that we offer.* |
| Kidney Disease | ***Saint Anthony Hospital*** *identified Diabetes as a priority area. Since diabetes is often a co-occurring disease with Kidney Disease, it will not be a priority, but it will be addressed through other priority areas. It will also be addressed in the health care access priority.* |

# 2022-2024 IMPLEMENTATION STRATEGY

## Action Plans

The following displays outline Saint Anthony Hospital's plans to address those priority health issues chosen for action in the FY2022-2024 period.

| **Priority Area #1: Injury & Violence/Substance Use** | |
|---|---|
| **Community Health Need** | Saint Anthony Hospital is not a trauma center; however, Injury & Violence will be prioritized due to high incidents of domestic violence and substance use that leads to Injury & Violence. |
| **Goal(s)** | • Utilize Coordinated Care to improve outcomes of patients who seek services due to substance abuse and domestic violence.<br>• Reduce readmission rate of patients who seek services for needs related to injury, violence and substance abuse.<br>• Increase overall health of patients seeking services<br>• Address the root cause of health needs |
| **Target Population(s)** | This strategy will focus on patients being served by the Emergency Department, Medical Stabilization Unit, and the Community Wellness Program. |
| **Partnering Organization(s)** | **Internal:** SDOH Initiative, Community Wellness Department, MSU, ED<br>**External:** 9th, 10th and 11th District Chicago Police Departments, Mujeres Latinas en Acción, Gateway Foundation, NAMI, Michael Reese Hospital, Lawndale Christian Legal Center, I AM ABLE, Gateway |
| **Action Plan** | Strategy 1: Develop a coordinated care system to be utilized across the hospital for patients experiencing DV, SUD.<br>• Provide staff education around coordinated care and the Social Determinants of Health.<br>• Hire Care Coordinators to work with patients upon discharge to ensure follow up and ongoing services are obtained.<br>• Seek additional community partnerships to increase referral opportunities<br>• Work with families to provide resources for victim family members<br><br>Strategy 2: Annually evaluate readmission rates within the hospital by department and reason for admission.<br>• Allocate resources in relation to readmission rates, prioritizing resources to departments with higher readmission.<br><br>Strategy 3: Conduct community education around SUD, DV and Trauma-Informed services<br>• Locate community organizations who currently provide education and services for DV and SUD<br>• Determine gaps in education availability to determine staff development opportunities |

| Priority Area #2: Diabetes/Nutrition, Physical Activity & Weight | |
|---|---|
| **Community Health Need** | Saint Anthony Hospital provides services to patients who reside in areas considered Food Deserts. The COVID pandemic and surges in community violence have hindered access to safe exercise in the community. As a result, community members have reported overweight and obesity rates of 72.9 and 43.4 respectively. Nutrition, Physical Activity & Weight contribute to multiple health concerns, including Diabetes, Heart Disease and Stroke. |
| **Goal(s)** | • Provide education to patients admitted for Diabetes, Heart Disease and Stroke around the importance of Nutrition, Physical Activity & Weight.<br>• Provide referrals and support for outpatient diabetes patients to prevent admission<br>• Improve awareness of locations to access healthy foods.<br>• Partner with local organizations, including park districts, to connect patients to opportunities for safe physical activities. |
| **Target Population(s)** | Target population will include diabetes patients, heart disease patients, stroke patients from the Saint Anthony Hospital PSA. |
| **Partnering Organization(s)** | Lawndale Christian Health Center, Lawndale Christian Fitness Center, Boxing Out Negativity, YMCA, the Farm on Ogden, Chicago Park Districts, Equiticity, St. Agatha Catholic Church |
| **Action Plan** | Strategy 1: Provide care coordination to patients upon discharge.<br>• Identify additional internal and external partnerships for referrals<br>• Evaluate current and future partnerships for referral effectiveness<br>• Follow up with patients to ensure additional referrals are provided and utilized.<br><br>Strategy 2: Increase patient education around the relationship between Nutrition, Physical Activity & Weight and health conditions such as diabetes, stroke and heart disease.<br>• Develop virtual pre-recorded educational videos to share with patients in their preferred language<br>• Provide ongoing live education in the community with Saint Anthony Hospital's Certified Diabetic Educator |

| Priority Area #3: Mental Health | |
|---|---|
| **Community Health Need** | COVID 19 and high rates of community violence have led to increased concerns around Mental Health. During the most recent CHNA, 41.2% of those surveyed reported having fair/poor mental health, while only 19.9% have sought services. Since the beginning of the pandemic, 25.6% of those surveyed reported symptoms have gotten worse. Since 59% of those surveyed reported they would accept mental health treatment, it has been determined to be a priority. |
| **Goal(s)** | • Increase access to mental health service reach during and after the pandemic through the use of telehealth services, distributing supplies for in home privacy.<br>• Increase opportunities for group mental health services through school outreach and increased partnerships.<br>• Continue outreach to undocumented community members |
| **Target Population(s)** | Residents within the PSA, undocumented people throughout Chicago, LGBTQ+ population within the PSA. |
| **Partnering Organization(s)** | Bobby E Wright Behavioral Health, Encompassing Center, Brighton Park Neighborhood Council, I Am Able, Esperanza Health Center, Lawndale Christian Health Center, Hartgrove Behavioral Health, Gateway, NAMI, Cook County Sherriff, Chicago Police Department's Crisis Intervention Team (CIT), |
| **Action Plan** | Strategy 1: Provide free mental health services (group, family and individual) to uninsured or underinsured residents within the PSA at the Community Wellness locations.<br>• Redirect insured clients to access mental health services through their insurance plans<br>• Increase group therapy to increase service provision<br>Strategy 2: Offer mental health groups, individual therapy and psychiatric diagnoses in inpatient services.<br>• Provide inpatient services in preferred language<br>• Provide ongoing training to staff around trauma-informed care<br>Strategy 3: Increase services to the LGBTQ+ population at the hospital and community wellness locations<br>• Launch the Harmony Clinic to provide appropriate and trauma-informed care to the LGBTQ+ population and families<br>• Educate staff and families on LGBTQ+ cultural competence to improve service delivery |

| Priority Area #4: Access to Health Care Services | |
|---|---|
| **Community Health Need** | In 2021, 41.3% of respondents reported they went without coverage in the past year and 53.5% reported they had difficulty accessing healthcare needs such as prescriptions and primary care appointments in the past year. The community identified several barriers to accessing healthcare: Insurance instability, lack of health insurance, office hours, the cost of physician visits, appointment availability, lack of transportation, finding a physician and not accommodating the culture or language of participants. Key stakeholders indicated a high need for increased health literacy opportunities in the community. |
| **Goal(s)** | Facilitate more timely and improved healthcare by increasing patients' access to and utilization of health-related, wrap-around services. Address the local barriers for access to healthcare (i.e. language barrier, health literacy education, transportation, financial challenges, and computer literacy). |
| **Target Population(s)** | Families in the PSA who are uninsured or underinsured. Community members who are in need of health literacy and support. |
| **Partnering Organization(s)** | A Safe Haven, A Silver Lining, Center Home Hispanic Elderly, Chicago Suburban Westland Empowerment Network, Enlace, Esperanza Health Center, Garfield Park Community Council, Chicago Department of Public Health, Illinois 7th Congressional District, Illinois Hunger Coalition, Instituto del Progresso Latino, New City Supportive Living, North Lawndale Community Coordinating Council, Ombudsman Community Advisory Council, Pilsen Wellness Center, Prime Care Health Services, Sankofa, State Farm Insurance Agency (Darren Tillis), United for Better Living, United Way of Metropolitan Chicago |
| **Action Plan** | Strategy 1: Provide assistance and support to seniors, adults, and families with children enrolling in health-related government programs and public benefits<br>• Provide open enrollment assistance, targeted case management, and advocacy for individuals seeking access to government benefits come of which include Medicare, Medicaid, prescription drug coverage, SNAP, senior housing, and the senior companion program.<br>• Provide clients with information and referrals for other health and social services as needed.<br>• Conduct public information sessions, mass outreach, and flyer distribution to ensure that residents are aware of government benefits they may be eligible to receive.<br><br>Strategy 2: Promote health literacy to community members by conducting outreach in collaboration with partner organizations, (i.e., schools, faith-based organizations, community-based organizations)<br>• Create presentations and education materials in native languages.<br>• Provide education regarding the importance of preventative health screenings (mammogram, colonoscopy, etc).<br>• Provide education to individuals to better navigate/comprehend their healthcare plans/benefits.<br><br>Strategy 3: Partner with additional community organization to provide additional resources and promote wellness care appointments.<br>• Conduct outreach to community organizations<br>• Partner with community organization in advocating for additional resources. |

# Implementation Strategy Adoption

The Board of Saint Anthony Hospital approved this Implementation Strategy to undertake the outlined measures to better address the significant health needs of the community.

This Implementation Strategy document is posted on the hospital's website.