



**HSHS**  
**St. John's**  
**Hospital**

# Health Needs Assessment 2018 Implementation Plan

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## Introduction

HSHS St. John's Hospital is located in Sangamon County, Illinois. For more than 140 years, the hospital has been a leader in health and wellness in Sangamon and surrounding counties. St. John's Hospital provides a wide range of specialties, including a level one trauma center, level two pediatric trauma center, neonatal intensive care unit, St. John's Children's Hospital and the nationally recognized Prairie Heart Institute at HSHS St. John's Hospital.

St. John's partners with other area organizations to address the health needs of the community, living its mission to reveal and embody Christ's healing love for all people through our high quality Franciscan health care ministry, with a preference for the poor and vulnerable. The hospital is part of Hospital Sisters Health System (HSHS), a highly-integrated health care delivery system serving more than 2.6 million people in rural and mid-sized communities in Illinois and Wisconsin. HSHS generates approximately \$2 billion in operating revenue with 15 hospitals and has more than 200 physician practice sites. Our mission is carried out by 14,000 colleagues and 2,100 physicians in both states who care for patients and their families.

HSHS has a rich and long tradition of addressing the health needs in the communities we serve. This flows directly from our Catholic identity. In addition to community health improvement services guided by the triennial CHNA process, the hospital contributes to other needs through our broader community benefit program. This includes health professions education, subsidized health services, research and community building activities. In FY2017, the hospital's community benefit contributions totaled \$35,244,897.

## Prioritized Significant Health Needs

Based on the community health needs assessment (CHNA) planning and development process described, the following community health needs were identified:

- 1. Access to care**
- 2. Child maltreatment**
- 3. Maternal and infant health**
- 4. Substance Abuse - Drugs**

### Health Needs That Will Not Be Addressed

As an outcome of the prioritization process, the following community health needs were also identified and will not be addressed directly by the hospital for the reasons indicated:

**Asthma** - The local county health department is the lead on asthma education and treatment. Additionally, a community roundtable convened to help identify and mitigate asthma triggers in inner-city and older homes.

**Education** - External and internal advisory committee members felt education could be wrapped into each of the final priority areas as a way to raise awareness, educate and see positive change occur.  
**Food Access** - This need is addressed by groups including the Central Illinois Food Bank, Illinois Coalition of Community Services, genHkids Coalition, COMPASS for kids, local school districts and the county health department. The hospital supports these efforts by donating monetary and in-kind resources to these programs and organizations.

**Housing** - In the past year, a group of community stakeholders has come together to address housing issues and disparities in Sangamon County. A representative from St. John's sits on that committee. St. John's will continue to support its efforts.

**Mental Health** – Memorial Behavioral Health takes the lead on mental and behavioral health issues in the community. United Way of Central Illinois has also included a mental health strategy in its health vision council priorities and funding. The hospital will support these efforts by donating resources.

**Violent Crime** – The access to care collaborative developed in response to the 2015 CHNA has led to a decrease in crime in the Enos Park neighborhood. By expanding the collaborative, we will continue to impact crime across the city and county. The hospital will continue to support these initiatives and others through monetary and in-kind donations.

## Implementation Plan

St. John's implementation plan is part of a broad community effort to address four priority health needs in the community. The hospital works collaboratively with a broad range of direct service organizations, coalitions and government agencies to address these needs.

The 2018 implementation plan outlines the actions the hospital will take to address Sangamon County's health needs. However, as noted below, many strategies will be implemented collaboratively. Recognizing that no one organization affects substantial community change alone, the long-term outcomes identified in this implementation plan will be achieved as community organizations work together for collective impact.

### Access to Care

Access to care has many dimensions. In Sangamon County, there is a direct correlation between access barriers and ZIP codes ranked worst on the socio needs index. Existing data shows social determinants of health and health disparities lead to a higher incidence of emergency department visits and hospitalization of individuals in low-income neighborhoods.

Access to care efforts implemented since the 2015 CHNA have led to a measurable improvement in health for residents in the Enos Park neighborhood. Using the effective model in place, strategies will be adapted to meet the unique needs of additional neighborhoods in Springfield. By addressing access barriers in socio-economically disadvantaged neighborhoods, health outcomes will continue to improve.

**Goal:** Build on the success of the Enos Park access to care collaborative to enhance services in Enos Park and expand the access to care collaborative to the Pillsbury Mills neighborhood. Explore expansion to additional neighborhoods in Springfield, Illinois.

### Long Term Performance Indicators:

- By June 30, 2021:
  - Increase the number of participating residents who have a medical home, measured by patient medical records.
  - Participating residents will decrease their use of hospital emergency departments for non-emergent care and decrease hospitalizations for ambulatory sensitive conditions, measured by hospital electronic medical records.
  - Increase health outcomes and quality of life for program participants, measured by self-sufficiency scale.

### Strategy 1: Continue Enos Park Access to Care Collaborative\*

In FY2019 the hospital has agreed to continue to collaborate with Memorial Medical Center and SIU Center for Family Medicine to support ongoing efforts in Enos Park to improve access to health and health care.

**FY2019 Performance Indicators:**

- By June 30, 2019, identify additional opportunities to enhance program sustainability.
  - Explore opportunities to collaborate with managed care. Medicaid case managers to increase client capacity through coordinating service delivery.
  - Use improved health outcomes and demonstrated health care savings to advocate for reimbursement of CHW home visits.
- Neighborhood advisory group will continue to inform strategies taken to address concerns impacting individual and neighborhood health.

**Strategy 2: Expand the Access to Care Collaborative to Pillsbury Mills Neighborhood\***

In FY2019 the hospital has agreed to collaborate with Memorial Medical Center and SIU Center for Family Medicine to expand the access to care collaborative to the Pillsbury Mills neighborhood and explore expansion opportunities to other neighborhoods in Springfield, Illinois.

**FY2019 Performance Indicators:**

- Establish a neighborhood advisory group by November 31, 2018.
  - Build relationships with the Pillsbury Mills Neighborhood Association and neighborhood residents to help adapt the CHW model to meet the unique needs of the neighborhood.
- Identify specific neighborhood needs to inform the CHW program by January 31, 2019.
  - Hold focus groups in the neighborhood to determine access barriers from the residents' perspective.
  - Conduct a photo study to highlight neighborhood assets and gaps as well as individual and neighborhood challenges to health.
- Implement the community health worker program by March 30, 2019.

**Strategy 3: Expand Provider Council to include providers serving Pillsbury Mills\***

The provider council has proven successful in providing education and training opportunities for social service and health providers serving Enos Park. In FY2019 we will expand the council to include providers serving Pillsbury Mills to create a synergistic approach to establishing referral networks and coordinated care of clients.

**FY2019 Performance Indicators:**

- By March 30, 2019, we will identify additional providers serving neighborhoods including Enos Park and Pillsbury Mills.
- By June 30, 2019, we will provide at least two educational and/or training opportunities for local service providers.
  - Educational opportunities will be provided by both hospitals in the collaborative.

**\* For Strategies 1 through 3:**

Community Resources:

- Sangamon County Department of Public Health
- Memorial Medical Center
- Memorial Behavioral Health
- SIU Center for Family Medicine
- Central Counties Health Centers
- Enos Park Neighborhood Improvement Association
- Pillsbury Mills Neighborhood Association
- Third Presbyterian Church
- Social service providers

Hospital Resources:

- Steering committee
- 50 percent of program budget
- Provide appropriate training for provider council
- Data analysis

Supporting Information:

- Target population: Residents of Enos Park and Pillsbury Mills neighborhoods.
- Strategies developed and deployed in Enos Park have led to an increase in insured individuals with a medical home. There has also been a decrease in unnecessary emergency visits, an increase in employment and income, improved housing conditions and increased access to food with the clients served by the program.
- Strategies developed and deployed in Enos Park specifically around summer engagement camps have led to a decrease in neighborhood crime and police calls.

## Child Maltreatment

In Sangamon County, we continue to see an increase in reported cases of child abuse and neglect. Currently one in five children is abused or neglected. The likelihood of poor health outcomes and risky behaviors for children who have experienced abuse and neglect increases significantly. Child maltreatment includes physical, sexual and emotional abuse; neglect; and the exploitation of children.

Goal: Integrate screening tools for early identification and intervention of child abuse in the health care setting.

### **Long Term Performance Indicators:**

- By June 30, 2021 primary care clinicians will be equipped to effectively screen, identify and intervene in child abuse and neglect cases.
  - o Note - Intervention strategies will be taken by the appropriate agencies. The primary care physician's role will be to effectively identify and report suspected cases of child maltreatment.
- By June 30, 2021 emergency providers will be equipped to effectively identify and engage appropriate authorities in cases of suspected human trafficking.

## **Strategy 1: Trauma Informed Care**

The hospital will collaborate with existing partners to provide trauma-informed care educational sessions for key stakeholders across sectors. A trauma-informed approach helps the stakeholder realize the widespread impact of trauma and understand potential paths for recovery. This done by: 1. Recognizing the signs and symptoms of trauma in individuals; 2. Understanding the appropriate steps to engage providers in intervention; 3. Fully integrating knowledge about trauma into policies, procedures and practices; and 4. Actively resisting re-traumatization.

### **FY2019 Performance Indicators:**

- By June 30, 2019, 85 percent of training attendees will report an increased awareness of adverse childhood experiences and how they impact emotional, mental and physical health, and wellness.
- By June 30, 2019, 85 percent of training attendees will report a better understanding of trauma-informed care on exit surveys.

Community Resources:

- SAMHSA certified trauma informed care trainer
- Healthcare organizations
- Federally qualified health centers
- Public and private schools and school districts
- Prevent Child Abuse - Illinois
- Department of Children and Family Services

Hospital Resources:

- Event space
- Content expert
- Continuing education credit
- Media/advertising

Supporting Information:

- Target population: Community members who work with the public.
- Evidence base: According to the Journal of Christian Nursing, trauma-informed care can transform the care-giving experience by changing the experience to one that promotes a holistic recovery.
- Evidence base: Substance Abuse and Mental Health Service Administration indicates trauma-informed care education can help create an awareness of trauma as it relates to health outcomes. A trauma-informed community can better recognize the signs of trauma and understand the appropriate steps for intervention and recovery.

## **Strategy 2: Human Trafficking training for emergency providers.**

In the U.S. human trafficking (HT) rose 35.7% from 2016 to 2017. The human trafficking in Illinois fact sheet reports an estimated 25,000 women and children are being trafficked as prostitutes and 1,818 victims have been rescued since 2012. Calls to the national HT hotline estimate Illinois ranks 10th for the number of reported cases of HT in the U.S. The human trafficking task force in Illinois identified three cities in Central Illinois as 'hotspots' of human trafficking activity. This is due to their proximity to Interstate 55, federally recognized as providing easier access to the transportation of victims due to its proximity to the railway and intersection through numerous cities and international airports. The cities are Peoria, Illinois; Springfield, Illinois; and Litchfield, Illinois.

The human trafficking of person's report estimates 1/3 of all trafficked victims are children. The National Institutes of Health estimates 33% of trafficking victims will seek care in a health care setting.

### **FY2019 Performance Indicators:**

- By June 30, 2019, 85% emergency department providers will be trained to identify and respond to suspected human trafficking victims.
- By June 30, 2019, adopt a plan to expand training across St. John's Hospital departments and ambulatory care centers.

Community Resources:

- Central Illinois Federal Bureau of Investigation
- Central Illinois Human Trafficking Task Force
- Local domestic violence and child abuse agencies

Hospital Resources:

- Training space
- Content expert

Supporting Information:

- Target population: Child victims of exploitation.
- Evidence base: Human Trafficking in Illinois Fact Sheet, 2015.
- Evidence base: According to the National Institutes of Health, health care practitioners, particularly emergency physicians and other ED health workers, are well-positioned to identify and assist victims. Practitioners must be sensitive to the widespread presence of trafficking and understand victims' vulnerabilities and critical needs. More resources should be devoted to training health care practitioners about this emerging issue and equipping healthcare systems to address the trafficking issue head-on.

## Maternal and Infant Health

1. Focus on first-time mothers.
2. Focus on pre-term babies born  $\geq 32$  weeks in the NICU.
3. Focus on accidental infant asphyxiation.

### Goal:

1. Develop community-wide strategies to address accidental suffocation and strangulation of infants.
2. Utilize a home-visiting nurse to assist first-time moms and NICU infants and families to identify resources and provide timely care for healthier infants and moms.

### Long Term Performance Indicators:

- By June 30, 2021, decrease the incidence of accidental infant asphyxiation, include suffocation and strangulation, reported annually.
- By June 30, 2021, improve the health of infants and their families.

## Strategy 1: Explore the issue of infant mortality, particularly accidental asphyxiation

In Sangamon County, there were 27 total infant deaths reported in the first year of life. These deaths occurred in the home. Eighteen deaths were attributed to accidental asphyxiation. While the number of infants impacted does not represent a large percentage of total babies born, we feel education can better equip parents and guardians on infant safety post discharge.

### Mid Term Performance Indicators:

- By June 30, 2019, develop a collaborative plan to address infant death caused by asphyxiation.

#### Community Resources:

- HSHS St. John's Hospital Neonatal Intensive Care Unit
- SIU Center for Family Medicine
- Sangamon County Coroner
- Sangamon County health and social service providers
- Memorial Medical Center

#### Hospital Resources:

- Colleague time
- Other as identified

#### Supporting Information:

- Target population: Broader community with a focus on mothers with infants.
- Evidence base: According to the National Institute of Health, accidental suffocation and strangulation occurs when something limits a baby's breathing. Among babies, accidental suffocation is responsible for three quarters of all unintentional injury deaths.

## Strategy 2: Beyond the NICU

Beyond the NICU will use trained NICU nurses to make home visits to give vulnerable parents of premature children the support they need to provide their at-risk babies with the best possible start in life. Since infant outcomes are closely tied to maternal health and well-being, this program will focus on assessing and improving maternal mental health and family preparedness.

### Mid Term Performance Indicators:

- By June 30, 2020, 75 percent of infants and families enrolled in the program will have successfully completed the full 18-month program.
  - NICU nurses will work with NICU follow-up clinic doctors to assess and evaluate initial data and outcomes including infant growth (height, weight and length z-score, parent engagement score, maternal infant bonding assessment/score) and compare it against historical controls.



Community Resources:

- HSHS St. John's Hospital Neonatal Intensive Care Unit
- SIU Healthcare Department of Pediatrics
- HSHS St. John's Foundation
- Sangamon county social service providers

Hospital Resources:

- Monetary support
- NICU nurses
- Home health department
- Colleague time

Supporting Information:

- Target population: Infants born 32 weeks or less discharged from SJS NICU to a residence in Sangamon County.
- Evidence base: According to the National Institute of Health, home visiting intervention programs are associated with decreases in harsh parenting, improved cognition and language development, reductions in low birth weight, improved weight for age and reduction in child health problems.

### **Strategy 3: Continue to Support Nurse-Family Partnership®**

The Nurse-Family Partnership® (NFP) is a national, evidence-based program that transforms the lives of families in Springfield. First-time moms are eligible for free help from a home-visiting nurse. The home-visiting nurses offer moms advice, support and the resources needed to have a healthy pregnancy, a healthy baby and be a great mom. St. John's joined others in the community to provide monetary support to bring the NFP to Springfield. The hospital will continue to support the NFP program, led by SIU Center for Family Medicine, by committing a physician liaison to serve on the local NFP Community Advisory Board. The board provides advice and support on decisions affecting the implementation, program growth and sustainability of the local NFP.

Community Resources:

- SIU Center for Family Medicine
- HSHS St. John's Hospital Neonatal Intensive Care Unit
- NFP Community Advisory Board
- Memorial Medical Center

Hospital Resources:

- Monetary support already provided for program start-up
- Colleague time

Supporting Information:

- Target population: First-time mothers in Sangamon County.
- Evidence base: NFP is an evidence-based, community health program that serves low-income women pregnant with their first child. Each vulnerable new mom is partnered with a registered nurse early in her pregnancy and receives ongoing nurse home visits. It is a life-transforming partnership, for the mom and her child. NFP helps families, and the communities they live in, become stronger while saving money for state, local and federal governments.
  - <https://www.siumed.edu/fcm/nurse-family-partnership.html>
  - <https://www.nursefamilypartnership.org>

## Substance Abuse - Drugs

Fatal and non-fatal drug overdose has increased significantly in Sangamon County since 2014. While the recent trend shows an increase in opioid and heroin use, officials report the use of methamphetamine is on the rise. Emphasis is needed on both prevention and treatment moving forward.

**Goal:** Work with community stakeholders to prevent opioid-related deaths and other non-fatal opioid overdoses through prevention, treatment and recovery, and response.

### Long Term Performance Indicators:

- By June 30, 2021, the opioid overdose rate in Sangamon County will not trend upward.

### Strategy 1: Sangamon County Opioid Task Force

St. John's Hospital will identify a hospital liaison to serve on the Sangamon County Opioid Task Force (SCOT) led by the Sangamon County Department of Public Health.

### Mid Term Performance Indicators:

- By June 30, 2019, St. John's will actively participate on the SCOT and will use community-based strategies to address the opioid crisis in Springfield and Sangamon County.

#### Community Resources:

- SCOT members
- Health care organizations
- Other community stakeholders

#### Hospital Resources:

- Colleague time
- Other resources as identified

#### Supporting Information:

- Target population: Broader community.
- Evidence base: The State of Illinois Opioid Action Plan reports that just last year, nearly 1,900 people died of overdoses in Illinois, almost twice the number of fatal car accidents. Illinois is one of 16 states that annually reports more opioid-related deaths than fatal car accidents. Beyond these deaths there are thousands of emergency department visits, hospital stays, as well as the pain suffered by individuals, families and communities. The opioid epidemic is the most significant public health and public safety crisis facing Illinois.

### Strategy 2: Opioid Education Event

St. John's Hospital will help plan and implement an interprofessional opioid education event led by the St. John's College of Nursing. The event will provide education on the care, treatment and management of patients with opioid use disorder.

### Mid Term Indicator

- By June 30, 2019, hold an event to encourage best practices on treating individuals with opioid use disorder.

#### Community Resources:

- Sangamon County Department of Public Health
- SIU Healthcare
- St. John's College of Nursing
- Lincoln Land Community College
- Gateway Foundation Alcohol and Drug Treatment Center

Hospital Resources:

- Colleague time
- Trauma-informed care trainer
- Additional resources as identified

Supporting Information:

- Target population: health care students and residents.
- Evidence base: The Substance Abuse and Mental Health Service Administration says an individual's ability to recover from substance abuse and misuse increases when systems are embedded in a broader community.

## Next Steps

The implementation plan outlines a three-year community health improvement process. Annually, the hospital will:

- Review the implementation plan and update strategies for the following fiscal year.
- Set and track annual performance indicators for each implementation strategy.
- Track progress toward mid-term performance indicators.
- Report progress toward the performance indicators to the hospital board, senior leadership team and Central Illinois Division and system leaders.
- Share actions taken and outcomes achieved to address priority health needs with the community at large.

## Approval

The implementation plan was adopted by the hospital's board on July 11, 2018.

