Advocate Sherman Hospital
Community Health Implementation Strategy

January 1, 2026 - December 31, 2028

Community health improvement is an effective tool for creating a shared vision and supporting a planned and integrated approach to improving health outcomes. The basic premise of community health improvement is that entities identify community health issues, prioritize those that can be addressed, and then develop, implement, and evaluate strategies to address those issues. Tax-exempt hospitals are required to conduct a community health needs assessment (CHNA) and develop an implementation strategy to document how the hospital will address prioritized community health needs. The following outlines a summary of the CHNA process and provides details on how Advocate Sherman Hospital plans to address their prioritized community health needs.

SUMMARY OF CHNA PROCESS

Every three years, Advocate Good Sherman Hospital conducts a Community Health Needs Assessment (CHNA) by collecting and analyzing a wide range of primary and secondary data since the hospital's previous CHNA. The Advocate Sherman Community Health staff presented extensive findings to the Community Health Council (CHC). Since the Advocate Sherman Hospital primary service area (PSA) includes both Kane County and McHenry County, the hospital collaborated with both county health departments to conduct a comprehensive CHNA.

The Advocate Sherman CHNA relies on both Kane and McHenry County's Assessments:

McHenry County Community Assessment, 2025: This Community Health Assessment report focuses on McHenry County, IL, and was developed in collaboration with various community partners. The primary data used in this report includes surveys, focus groups, interviews, claims data, and Metopio. This report consists of primary and secondary data used to evaluate health and wellness in McHenry County. The primary data was collected via the McHenry County Healthy Community Study.

Kane County Community Assessment, 2024: The 2024 Community Health Assessment (CHA) was completed using the Mobilizing for Action through Planning and Partnership 2.0 (MAPP 2.0) framework to complete a community driven, collaborative process to improve community health and work towards health equity. MAPP 2.0 is widely used by local health departments to conduct Community Health Assessments (CHA). MAPP 2.0 is a three-phrase process that includes a Community Partner Assessment, Community Status Assessment, and Community Context Assessment. These quantitative and qualitative data collection tools help identify the community's strengths and needs, what issues to prioritize, and how to address them.

Additionally, Advocate Health Care analyzes secondary data, or existing information gathered from various sources, to provide valuable insights and context from the following sources:

Metopio: Advocate Health Care has a contract with Metopio to provide an internet-based data resource for their hospitals. This robust platform offers curated data from public and proprietary sources for information on health behaviors and health risks, health outcomes, health care utilization, demographic, and community-level drivers of health like economic, housing, employment, and environmental conditions. Data for each indicator is presented by race, ethnicity, and gender when the data is available. All data collected through Metopio was quantitative and included data comparisons between county, state and United States data.

County Health Rankings & Roadmaps: A program of the University of Wisconsin Population Health Institute and supported by the Robert Wood Johnson Foundation, the County Health Rankings & Roadmaps (CHR&R) provides a snapshot of health for nearly every county in the nation, based on a variety of public health data. CHR&R advocates for an understanding of data and evidence to develop methods to improve health and equity. (County Health Rankings & Roadmaps, About Us, 2024)

The top health issues identified in the Sherman Hospital Community Health Needs Assessment were:

- Access to Care
- Behavioral Health
- Chronic Disease and Prevention
- Maternal, Child and Reproductive Health
- Obesity, Physical Activity and Access to Healthy Foods
- Social Drivers of Health

The top health issues identified were presented to the Sherman Hospital's team, and members were asked to rank the issues based on the following criteria: size and seriousness of the problem; effectiveness of available interventions; available resources to address the health issue; whether the health care system is adequately positioned to address the issue; alignment with a defined community need identified through data; potential for the issue to impact other health and social issues; and the ability to effectively address or impact the issue through collaboration.

Using these criteria, Advocate Sherman Hospital has prioritized the significant health needs to address in 2026-2028:

Significant Need	Implementation Strategy Selection Reasoning
Access to Care	This need was selected because of notable disparities within the population, along with widespread reports of long wait times and difficulty securing appointments. These barriers hinder timely and equitable access to health care services to the residents in the Sherman community.
Behavioral Health	This need was selected because of the rising suicide rates and increasing prevalence of depression, particularly among Medicare beneficiaries. Additionally, ongoing challenges related to substance use were observed across the community and disproportionately higher in some areas. These trends were consistent in the community health assessments conducted in McHenry and Kane Counties, where mental health and substance use were also highlighted as leading community concerns.
Social Drivers of Health	Social drivers of health such as housing, food security, and economic stability are embedded with individual and community well-being. Sherman Hospital is actively engaged in supporting efforts to address these social drivers, including initiatives around healthcare workforce development and resource referrals during patient care. The rising cost of living, particularly in relation to housing and food, played a significant role in the Council's decision to prioritize this area.

For each prioritized health need, the hospital plans to commit resources, which may include staff time, information technology systems, outreach, promotions and educational materials, funding, medical supplies, and other resources as available.

PRIORITY: Access to Care

IMPACT: Increase the access to care for community members in the Advocate Sherman Hospital PSA.

DESCRIPTION OF HEALTH NEED DATA:

- In the PSA, the percent of adults with no health insurance peaked in 2019 at 17.7 percent, declined to 11.3 percent in 2021, then began rising again in 2022.
- Approximately one quarter of adults in the Sherman PSA haven't visited a doctor for a routine visit in the past year.
- The communities of Elgin (60120), Carpentersville (60110) and Elgin (60123) have the highest rates of adults with no health insurance in the Sherman PSA.

ALIGNMENT WITH EXISTING STRATEGIES

LOCAL:

- Improve Access to Care - **Advocate Health Care**
- Improve equitable access to quality and affordable health services - **Kane County Health Department (KCHD)**
- Increase the proportion of McHenry County adults under 65 years of age with medical insurance - **McHenry County Health Department (MCDH)**

STATE: Illinois State Health Improvement Plan

- Increase community-clinical linkages to reduce the incidence and burden of chronic diseases

NATIONAL: Healthy People 2030

- Increase the proportion of adults who get recommended evidence-based preventive health care

STRATEGY #1: Strengthen care coordination and resource navigation

Planned Interventions	Collaborative Partners	Intended Outcomes
• Provide patients with local health care resources • Expand referral process of patients to Primary Care Physicians (PCP) • Expand referrals to the Warm Hand Off Program to ensure connection to substance use treatment services • Expand Community Health Worker (CHW) engagement to assist with patients being connected to follow up care • Utilize the FindHelp platform to connect patients with community-based organizations	• Gateway Foundation • Advocate Sherman Community Health Worker • VNA Foundation • Advocate Medical Health (AMG)	• Reduced gaps in follow-up care for uninsured and underinsured patients and those at an increased risk for poor outcomes • Increased number of patients given community-based resources • Improved care transitions from emergency and inpatient hospital setting to community-based care • Increased number of patients referred to substance use treatment programs • Improved awareness of resources available in Epic through FindHelp platform

Measures

- Number of referrals completed by Community Health Workers
- Number of Community Health Worker encounters
- Number of patients referred to and engaged to the Warm Hand Off Program
- Number of patients entering substance use treatment programs
- Number of referrals for FindHelp

**Impact measures are subject to change depending on the direction of each intervention.*

PRIORITY: Access to Care (CONTINUED)

STRATEGY #2: Expand community based screening, follow up care and health services

Planned Interventions	Collaborative Partners	Intended Outcomes
• Expand referrals to the Mobile Integrated Health (MIH) Program throughout the hospital • Educate Sherman Hospital teammates on Mobile Integrated Health (MIH) Program • Expand utilization of the Advocate Mobile Health Team to deliver preventive screenings and follow up care in the community • Identify individuals at an increased risk for poor health outcomes through the ED and inpatient to connect them to mobile and community-based services • Provide follow-up care to patients at an increased risk for poor health outcomes after ED and inpatient discharge	• Illinois Department of Public Health • Advocate Sherman Mobile Integrated Health Program (MIH) • Advocate Health Care Mobile Health Team • Community based organizations • Food for Greater Elgin Food Pantry • Association of Individual Development (AID)	• Increased preventive health screenings in communities that are medically underserved in the Sherman PSA • Reduced barriers to follow up care after hospital discharge • Reduced ED visits and hospital readmissions for patients at an increased risk for poor health outcomes

Measures

- Number of referrals to the MIH Program
- Number of MIH appointments completed
- Number of patients seen by MIH Team
- Number of patients seen by the Mobile Health Team in the Sherman PSA
- Number of screening performed by the Mobile Health Team
- Percentage change in ED and hospital readmissions

**Impact measures are subject to change depending on the direction of each intervention.*

PRIORITY: Behavioral Health

IMPACT: Reduce mental health and substance use rates in Advocate Sherman Hospital PSA.

DESCRIPTION OF HEALTH NEED DATA:

- Suicide mortality rates are rising in McHenry County, Kane County, and across Illinois.
- Drug overdose mortality continues to steadily increase in Kane County.
- The rate of poor self-reported mental health is increasing within Sherman PSA.

ALIGNMENT WITH EXISTING STRATEGIES

LOCAL:

- Access to Behavioral Health Services - **Advocate Health Care**
- Improve Behavioral Health System in Kane County - **KCHD**
- Enhance and expand local suicide prevention and overdose prevention activities - **McHenry County Mental Health Board**

STATE: Illinois State Health Improvement Plan

- Reduce mortality due to mental health conditions and substance use disorders through harm reduction and preventative care strategies (IDPH)

NATIONAL: Healthy People 2030

- Reduce misuse of drugs and alcohol
- Improve mental health

STRATEGY #1: Reduce overdoses through education and harm reduction

Planned Interventions	Collaborative Partners	Intended Outcomes
• Implement education on overdose prevention and awareness of fentanyl, xylazine and other substances • Conduct Narcan training sessions for community members and Advocate teammates • Expand the Sherman Narcan Training Crew through a "Train the Trainer" process • Collaborate with community organizations and coalitions serving populations with an increased risk of substance misuse • Provide the Advocate Mobile Team with Narcan and wound care supplies • Implement distribution of wound care kits to individuals at risk of substance use related complications • Expand access to Narcan in community-based locations • Provide awareness of Narcan Dispenser in the Sherman ED	• McHenry County Health Department • Kane County Health Department • Ecker Center for Behavioral Health • Live 4 Lali • Advocate Mobile Health Team • Additional community coalitions serving populations with an increased risk of substance misuse	• Increased number of teammates on the Narcan Training Crew • Improved awareness and understanding of substance use disorder and overdose prevention in the community • Increased onsite Narcan availability at community partner locations • Increased distribution of wound care kits to individuals at risk of substance use related complications • Reduced Sherman ED rate due to substance use and opioid use

Measures

- Number of collaborative partners implementing education
- Increase in knowledge related to Fentanyl and Xylazine (based on pre- and post-test results)
- Number of Narcan trainings completed
- Number of boxes of Narcan given from on-site Narcan dispenser in the Emergency Department
- Number of Narcan boxes distributed in community spaces
- Number of community locations where Narcan is available
- Number of Wound Care Kits given to patients in the community
- Percentage change in Advocate Sherman ED rate due to substance use
- Percentage change in Advocate Sherman ED rate due to opioid use

**Impact measures are subject to change depending on the direction of each intervention.*

PRIORITY: Behavioral Health (CONTINUED)

STRATEGY #2: Improve mental health through community collaborations and services

Planned Interventions	Collaborative Partners	Intended Outcomes
• Partner with local mental health organizations to implement awareness and education campaigns on mental health suicide prevention • Support prevention and early intervention through collaboration with the Kane County Health Department and McHenry County Mental Health Board • Explore targeted interventions addressing mental health concerns among high need populations in partnership with NAMI McHenry • Expand coordination and referral pathways to community-based mental health services for youth and other populations at an increased risk for poor outcomes	• Kane County Health Department • McHenry County Mental Health Board • NAMI McHenry County • Ecker Center for Behavioral Health • VNA Healthcare	• Increased awareness of mental health services available to youth and populations at an increased risk for poor outcomes • Strengthened referral coordination between Advocate Sherman Hospital and community organizations • Reduced stigma toward mental health • Increased community-based initiatives focused on suicide prevention • Reduced number of suicides in Lake and McHenry Counties • Reduced ED and Hospitalization rates for mental health

Measures

- Number of individuals served through awareness and education initiatives
- Number of individuals served through collaborative programs
- Number of referrals made to community-based organizations for support programs
- Percentage change in Emergency Department visit rates related to mental health conditions

**Impact measures are subject to change depending on the direction of each intervention.*

PRIORITY: Social Drivers of Health

IMPACT: Address social drivers of health needs in the Sherman Hospital PSA.

DESCRIPTION OF HEALTH NEED DATA:

- In the Sherman PSA, the percentage of households spending more than 30 percent of their income on rent has increased steadily over recent years. This rate now exceeds the state average in Illinois, indicating a growing local housing affordability crisis.
- The Sherman PSA food insecurity rate increased by over three percent from 2018 to 2022.

ALIGNMENT WITH EXISTING STRATEGIES

LOCAL: Advocate Sherman Hospital Strategy

- Food Security - **Advocate Health Care**
- Improve access to nutritious, local, affordable food - **KCHD**

STATE: Illinois State Health Improvement Plan

- Decrease preventable chronic diseases through nutrition

NATIONAL: Healthy People 2030

- Improve health by promoting healthy eating and making nutritious foods available
- Promote healthy and safe home

STRATEGY #1: Increase access to healthy food choices at food pantries

Planned Interventions	Collaborative Partners	Intended Outcomes
• Expand implementation of the Nutrition Environment Food Pantry Assessment Tool (NEFPAT) assessment tool to identify barriers and needs for the food pantry • Evaluate the policies, systems and environment of the food pantries • Implement signage in food pantries to identify healthy food choices for individuals with various chronic diseases • Implement nutrition education programs at food pantries • Continue to collaborate with food pantries to expand additional supportive resources available to community members • Increase the amount of fresh food donated to local food pantries from the Sherman Hospital Community Garden	• McHenry County Health Department • Kane County Health Department • Food For Greater Elgin Food Pantry • Lake in the Hills and Algonquin Food Pantry • Other local food pantries • Advocate Health Care Mobile Health Van	• Increased number of food pantries in the Sherman PSA that completed the NEFPAT assessment • Increased number of food pantries that completed action plans to identity and address barriers to increase food access • Improved policies, systems and environment of the food pantries to better serve the community • Strengthened partnerships between Sherman Hospital and food access organizations • Increased donated produce from the Advocate Sherman Community Garden to local food pantries • Expanded healthy food options at local pantries to better support healthy outcomes of participants

Measures

- Number of food pantries that complete the NEFPAT Assessment Tool
- Number of Food Pantry patrons affected by changes at the food pantry
- Number of food pantries that develop action plans to address policy and guidelines changes
- Number of policy, system and environment changes at the food pantries based on NEFPAT assessment results
- Number of food pantry nutrition education programs held and number of attendees
- Pounds of produce donated from the Sherman Hospital Community Garden

**Impact measures are subject to change depending on the direction of each intervention.*

PRIORITY: Social Drivers of Health (CONTINUED)

STRATEGY #2: Improve awareness of local resources for housing

Planned Interventions	Collaborative Partners	Intended Outcomes
• Support local coalitions and community-based organizations working to improve awareness on housing needs and access to resources • Explore opportunities to advocate for housing that supports all community members • Collaborate with community leaders to address housing needs in community • Mobilize system resources through investments and community service with affordable housing-focused organizations	• Housing Authority of Elgin • The Kane County Continuum of Care • PADS of Elgin • Pioneer Center • McHenry County Housing Authority	• Improved engagement with community leaders to address housing needs in community • Increased awareness of housing support resources available in the community • Increased number of individuals referred to housing programs or services

Measures

- Number of individuals served
- Number of patients referred to housing programs or services
- Progress updates

**Impact measures are subject to change depending on the direction of each intervention.*

Needs Not Addressed

This Community Health Implementation Strategy focuses on the above priority health needs selected by the hospital based on community input, available resources, and alignment with organizational and community partner capacity. The Community Health Needs Assessment (CHNA) also identified additional significant health needs, including chronic disease and prevention, maternal, child and reproductive health, and obesity, physical activity and access to healthy foods. These needs, while also important, are not addressed in this CHIS due to factors including limited hospital resources, the presence of existing initiatives, or a determination that the hospital is not best positioned to lead efforts in these areas at this time. Advocate Health will continue to collaborate with community partners and share resources, when appropriate, to support progress on these needs within the community.

Adoption of the Implementation Strategy

The Community Health Implementation Strategy report was adopted by the governing council on April 27, 2026, and additionally approved by the Advocate Health Care Network Board on May 5, 2026.

Note: Plans to address selected CHNA priorities are dependent upon resources and may be adjusted on an annual basis to best address the health needs of our community.