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Your Feedback Makes Us Better

We welcome your comments, ideas and questions about this report, and all Community Health Needs Assessment and Community Health Implementation Plan documents at Northwestern Medicine.

Please share your feedback by calling the Northwestern Medicine Community Affairs Department at 312.926.2301 (TTY: 711) or by emailing communityhealth@nm.org.

Please include your name, organization (if applicable) and any questions or feedback you have about the report content.

Public availability

This report and all Northwestern Medicine Community Health Needs Assessment and Community Health Implementation Plan documents are public information. You can access them at [nm.org/about-us/nm-community-impact/reports](https://www.nm.org/about-us/nm-community-impact/reports).

You can also request reports at no cost by calling the Northwestern Medicine Community Affairs Department at 312.926.2301 (TTY: 711) or by emailing communityhealth@nm.org.



Introduction

Northwestern Medicine is committed to:

- Delivering world-class care and experience regardless of the patient’s ability to pay
- Deepening our relationships with our community to improve health equity
- Advancing discovery and medical knowledge

We are a nonprofit, integrated academic health system committed to serving a broad community. We provide world-class care at 11 hospitals and more than 200 diagnostic and ambulatory locations in communities throughout Chicago and the surrounding suburbs.

Our hospitals are pillars in their respective communities and lead efforts to positively impact the health of the populations they serve. From collaborating with community organizations to serving as a major economic driver, Northwestern Medicine helps make communities stronger.

Northwestern Medicine is a strategic partnership between Northwestern Memorial HealthCare and Northwestern University Feinberg School of Medicine.



11
hospitals



200+
locations

Northwestern Medicine Valley West Hospital

Located in Sandwich, Illinois, Northwestern Medicine Valley West Hospital is a 19-bed critical access hospital that has served residents of DeKalb County and the Fox Valley region for more than 70 years. Critical access hospital is a designation given to eligible rural hospitals by the Centers for Medicare & Medicaid Services. As a critical access hospital in a service area that encompasses parts of DeKalb County, with its federally designated medically underserved areas, Valley West Hospital provides essential services to its rural community and acts as a seamless pathway from critical access to specialty care across the health system. More than 160 physicians are on the hospital medical staff, representing a wide range of specialties. In fiscal year 2024, Valley West Hospital had more than 560 inpatient admissions and nearly 9,000 emergency department visits.



Community Benefits Plan

Northwestern Memorial HealthCare and Northwestern Medicine Valley West Hospital are guided by a Community Benefits Plan. The Community Benefits Plan includes comprehensive financial assistance and presumptive eligibility policies, as well as vast research, education and other community benefit activities. This Community Health Implementation Plan (CHIP) is aligned and coordinated with the Community Benefits Plan. Together, these strategies help to improve the health of the communities we serve.

About the Community Health Implementation Plan

In alignment with our mission and in accordance with the requirements of the Patient Protection and Affordable Care Act, Northwestern Medicine Valley West Hospital works with community organizations every three years to complete a comprehensive Community Health Needs Assessment (CHNA) that identifies the significant health needs of residents of the community it serves.

This CHIP is a companion document to the Valley West Hospital 2024 CHNA, which can be accessed at nm.org/about-us/nm-community-impact/reports. The goal of the CHIP is to use CHNA data to guide initiatives that improve the health of our community.

In this report, we summarize the significant health needs identified in the 2024 CHNA. We identify which of these needs we will prioritize over the next three years and explain why we will not be addressing other significant health needs identified in the 2024 CHNA.

In addition, for each priority health need, we will explain:

- Actions or strategies planned to address the need
- Anticipated impact of those strategies
- Resources we intend to commit to those strategies
- Planned collaborations between Valley West Hospital and other organizations to address the need

We rely on help from our community

Valley West Hospital values input from local community members and uses their insights during development of the CHIP. One way we gather feedback is through our Community Engagement Council.

The Community Engagement Council is a diverse group of representatives from community-based organizations and Northwestern Medicine staff. Council members are people who have expertise in a broad range of areas and have demonstrated a strong, ongoing commitment to improving the health of the communities we serve. Council members were invited to participate based on their role within their respective organizations and their commitment to improving the health of the community.

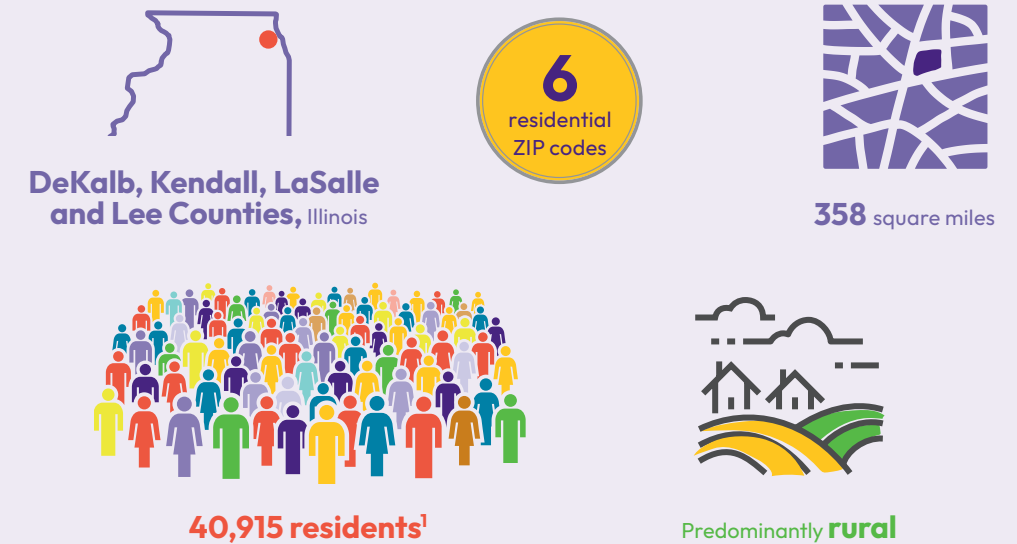


Community Served by Northwestern Medicine Valley West Hospital

The Northwestern Medicine Valley West Hospital Community Service Area (CSA) covers six ZIP codes in and around DeKalb County, Illinois.

Valley West Hospital CSA Cities and ZIP Codes			
City	ZIP Code	City	ZIP Code
Earlville	60518	Sandwich	60548
Leland	60531	Sheridan	60551
Plano	60545	Somonauk	60552

How the Community Service Area is defined



The Valley West Hospital CSA was determined by:

- Geographic area served by the hospital
- Main functions of the hospital
- Areas that have been historically under-resourced
- Areas where we are currently working to address priority health needs, including work with community organizations

The defined CSA takes into account populations that are:

- Medically underserved
- Low income
- Historically underrepresented, minority populations

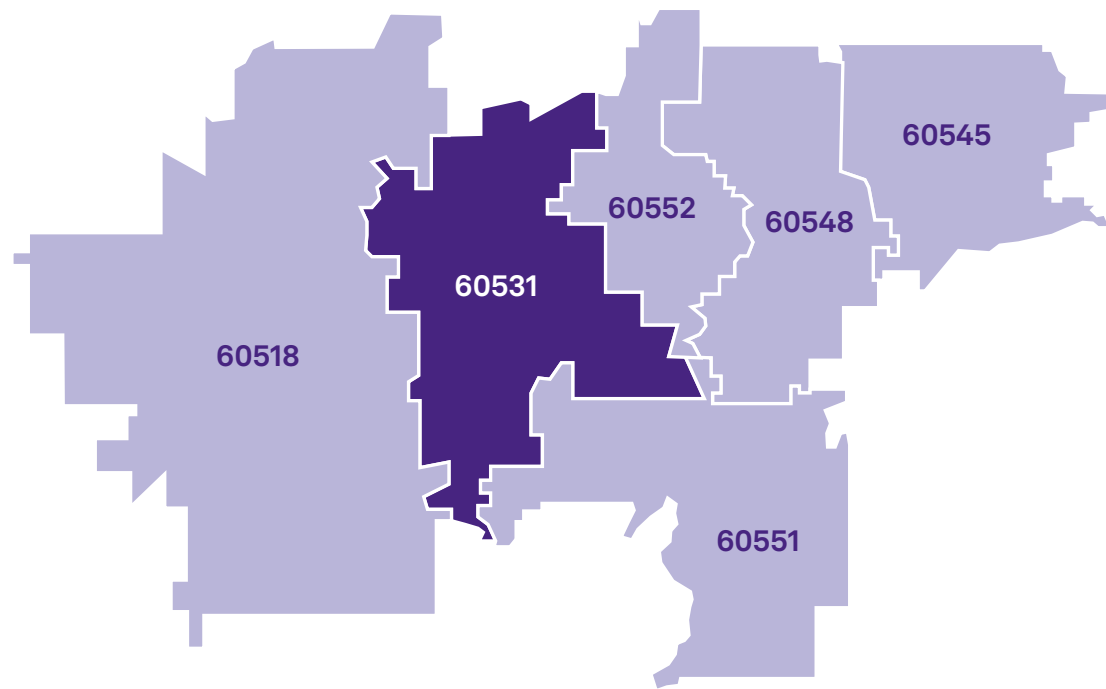
Our CSA definition does not consider how much patients or their insurers pay for care or whether patients are eligible for financial assistance through Northwestern Medicine.

Identifying communities with economic hardship

Once the CSA has been defined, Northwestern Medicine uses the Socioeconomic Resource Index (SERI) to identify areas experiencing economic hardship. Under-resourced areas are identified based on multiple indicators, including:

- Unemployment (for individuals older than 16 years)
- Education (those older than 25 years without a high school diploma)
- Per capita income level
- Crowded housing (more than one person per room)
- Dependents (younger than 18 years or older than 64 years)
- Poverty (income below 200% of the federal poverty level)

The strategies identified in this report focus on these under-resourced areas in an effort to address health disparities within the CSA.



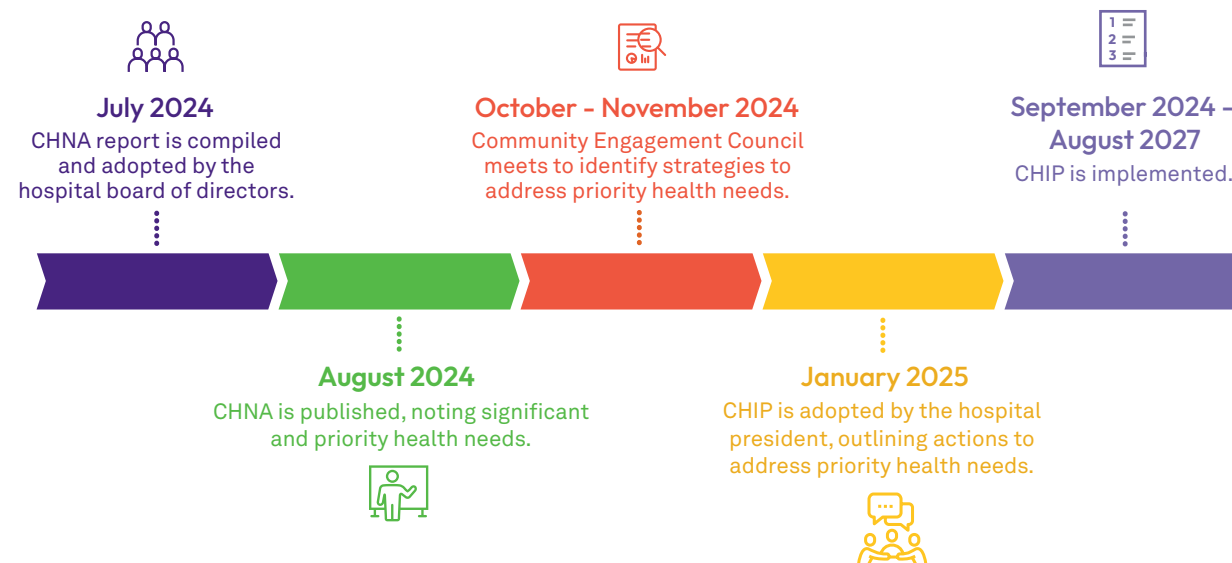
Northwestern Medicine Valley West Hospital Community Service Area. The location in dark purple (ZIP code 60531, Leland) has been identified as an under-resourced community by SERI.





Community Health Implementation Plan Overview

CHIP Timeline



CHIP Development Process

CHNA: Identify significant health needs



Northwestern Medicine Valley West Hospital collaborated with Metopio to create the 2024 CHNA. Together, we completed a comprehensive analysis of the collected data. Analysis included getting input from people in targeted under-resourced populations.

Prioritization: Select priority health needs



Once the CHNA data analysis was complete, we convened the Community Engagement Council to help identify the highest-priority health needs.

To help us prioritize, council members reviewed guiding principles and CHNA data findings and participated in robust conversations regarding community health needs for the CSA.

Strategy development: Identify actions to address priority health needs



Following the prioritization process, we had conversations with community organizations and internal teams to identify potential strategies. We then worked with the Community Engagement Council to identify actions, resources, anticipated impacts and planned collaborations to address selected priority health needs over the next three years. In developing these strategies, we were mindful of our own strengths and those of other organizations in our CSA.

This work is the basis for the CHIP.

Adoption: Three-year plan



This CHIP was adopted in January 2025 by the hospital president and will be active until August 31, 2027, in alignment with our fiscal year calendar.

Implementation: Implement strategies to address priority health needs



As we work to address priority health needs over the three-year CHIP span, the report will be reviewed and updated as needed to ensure it remains viable and to maximize our impact. We will regularly share our efforts with reporting agencies and our community.



Significant Health Needs for Northwestern Medicine Valley West Hospital

The following significant health needs were identified through the Northwestern Medicine Valley West Hospital 2024 CHNA. Of these, three (highlighted in orange) were selected as priority health needs.

Among the significant health needs not identified as priority health needs, many are being addressed through the ongoing, comprehensive services and programs at Valley West Hospital, in collaboration with our community allies and across Northwestern Medicine.

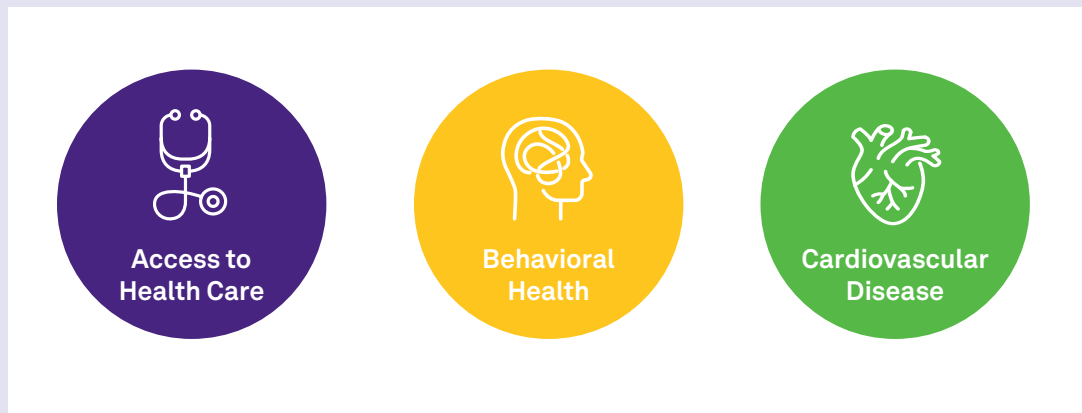
Health Need Identified in the 2024 CHNA	Our Response
▶ Access to Health Care	This need has been identified as a priority health need. See pages 14-16 for our plan to address it.
▶ Behavioral Health	This need has been identified as a priority health need. See pages 18-20 for our plan to address it.
Cancer	This need is addressed through the hospital care delivery system.
▶ Cardiovascular Disease	This need has been identified as a priority health need. See pages 22-23 for our plan to address it.
Diabetes	This need is addressed through the hospital care delivery system.
Food Access	This need is better addressed by community organizations specializing in this field.
Homelessness and Housing	This need is better addressed by community organizations specializing in this field.
Obesity	This need is addressed through the hospital care delivery system.
Substance Use Disorders	This need is addressed through the hospital care delivery system.
Transportation	This need is better addressed by community organizations specializing in this field.

▶ Indicates priority health need



Priority Health Needs for Northwestern Medicine Valley West Hospital

The following were identified as the priority health needs to be addressed by Northwestern Medicine Valley West Hospital over the next three years.

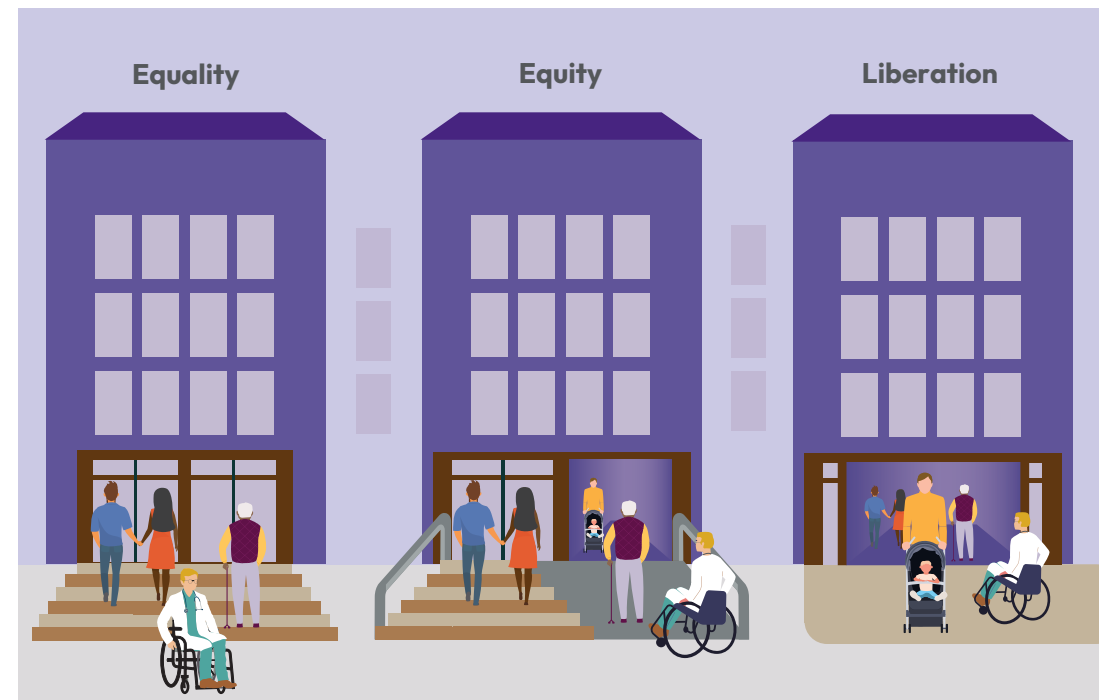


Our commitment to health equity

To achieve equity for those we serve, Northwestern Medicine continually works to:

- Overcome structural inequities and bias
- Improve coordination and connection to community resources
- Provide culturally and linguistically appropriate care

These three areas are integrated in every strategy we have for addressing the priority health needs of our community. These are foundational issues that Northwestern Medicine is addressing both within the organization and across our communities. The long-standing resolve to address them is embedded throughout the work of Northwestern Medicine.



Community Health Implementation Plan



Priority Health Need: Access to Health Care

Goal: Increase access to comprehensive, high-quality healthcare services.

Access to Health Care was identified as a priority health need in the 2024 CHNA. From survey results to in-depth interviews with persons who represent the broad interests of the community, the need for access to health care continuously emerged in our findings. It was elevated in conversations as a concern that impacts individual health and significantly influences the overall health and well-being of the community.

Specific themes emerged related to healthcare professional availability, cost and health insurance availability.

Transportation was one major theme of discussion in focus groups. Residents must travel long distances to reach services because of the rural landscape, and walking is not feasible. There are few affordable transportation options. Focus group participants emphasized that transportation barriers particularly affected older adults, families with young children, pregnant individuals and individuals with disabilities.

We heard you

“Valley West not having a surgeon on staff plays a role in the community because people still don’t know where to go.”

– Focus group participant⁴

Survey respondents identified these important community issues as factors that impact access to health care:

43.0%
Access to health care



44.8%
Medication affordability



Focus group participants identified these challenges as factors that impact access to health care:



Culturally and linguistically appropriate care



Access to primary health care



Affordable health care and medications

Action 1: Grants and Donations

Provide funding to community organizations and programs that provide healthcare services and resources to populations that have historically had limited access to these resources.

Anticipated Impact

- Increased funding to organizations that provide access to healthcare services for underserved populations
- Increased collaboration with community-based organizations that align with the Northwestern Medicine vision

Resources

- Funding

Collaborations

- Community organizations
-

Action 2: Community Education and Programs

Deliver community-based screening and education programs.

Anticipated Impact

- Increased number of community-based programs
- Increased number of participants using available programs

Resources

- Staff time
- Educational materials

Collaborations

- Community organizations
-

Action 3: Social Determinants of Health

Collaborate with community organizations to help remove barriers to care.

Anticipated Impact

- Increased funding for programs
- Socioeconomic needs addressed for more community members

Resources

- Funding
- Public support and advocacy

Collaborations

- Community organizations





Priority Health Need: Behavioral Health

Goal: Improve access to and increase use of services that address behavioral health.

Behavioral Health was identified as a priority health need in the 2024 CHNA. Mental health disorders are common and affect people of all demographics. Conditions like depression and anxiety can affect people's ability to take part in healthy behaviors. Similarly, physical health problems can make it harder for people to get treatment for mental disorders.

Within the CSA, adult and adolescent mental health were two of the top health-related challenges in the community according to survey respondents.

We heard you

“We continue to be challenged in addressing the behavioral health issues that we have in the community. The needs around behavioral and mental health services are real. We still haven't effectively met the need locally.”

“Behavioral health care and physical health care really need to pay attention. A lot of the people we work with come in looking one way, and it turns out that it's a result of trauma in their life. And we're at a point now where a lot of people have had that experience of trauma. So I think trauma-informed [care] or at least trauma awareness always needs to be a part of what we're talking about.”

– Focus group participants⁴

Focus group participants identified these needs as factors that impact behavioral health:



Improved access to treatment, including more mental health workers and adequate emergency department care for mental health crises



Improved continuity of care for individuals transitioning from hospital to home



Increased mental health services for youth



Behavioral Health in the CSA²

20.7%

Diagnosed with depression

15.6%

Poor self-reported mental health

17.0%

Low social-emotional support

Action 1: Community Education and Programs

Provide a calm and safe environment through The Living Room at Ben Gordon Center, where guests can resolve crises without intensive intervention.

Anticipated Impact

- Increased assistance and support to community members in crisis
- Increased linkage to community resources and referrals

Resources

- Staff time
- Educational materials

Collaborations

- Community organizations

Action 2: Community Education and Programs

Expand community-based behavioral health preventive and educational programs.

Anticipated Impact

- Increased number of community-based behavioral health educational programs
- Increased number of participants using available programs

Resources

- Staff time
- Educational materials

Collaborations

- Community organizations

Action 3: Capacity

Collaborate with community organizations to improve access to behavioral health services.

Anticipated Impact

- Increased funding for community behavioral health professionals
- Increased number of community members receiving behavioral health care close to where they live or work

Resources

- Funding
- Public support and advocacy

Collaborations

- Community organizations



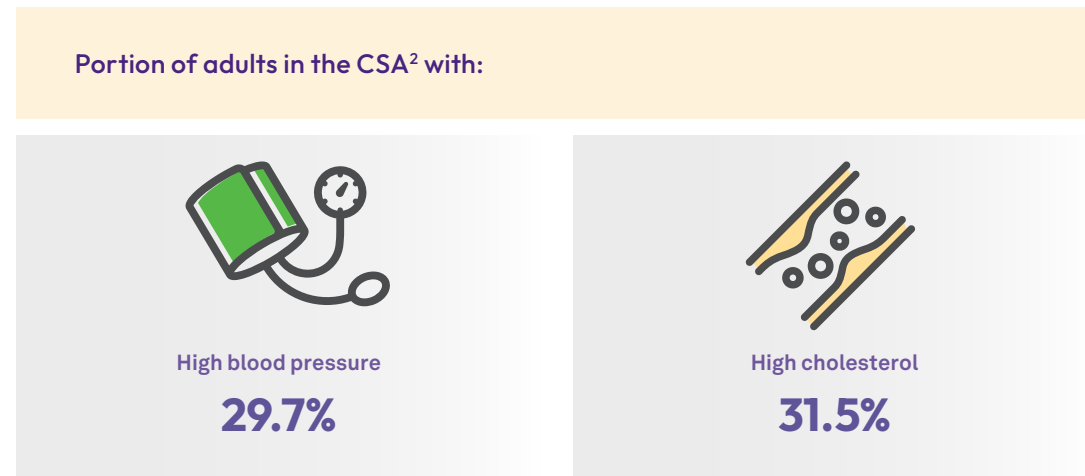


Priority Health Need: Cardiovascular Disease

Goal: Increase access to cardiovascular disease prevention education and support services.

Cardiovascular Disease was identified as a priority health need in the 2024 CHNA. Heart disease represents the leading cause of morbidity and mortality in the CSA.³

Heart disease and stroke can result in poor quality of life, disability and death. Although both diseases are common, they can often be prevented by controlling risk factors like high blood pressure and high cholesterol through treatment.



Action 1: Community Education and Programs

Deliver community-based cardiovascular disease screening, education and programs.

Anticipated Impact

- Increased number of community-based programs
- Increased number of participants using available programs

Resources

- Staff time
- Educational materials

Collaborations

- Community organizations

Action 2: Capacity

Expand community-based programs that provide cardiovascular disease education, programs and services.

Anticipated Impact

- Increased funding for community healthcare professionals
- Increased number of community members receiving cardiovascular disease care close to where they live or work
- Increased collaboration with community-based organizations that align with the Northwestern Medicine vision

Resources

- Funding

Collaborations

- Community organizations

Community Health Implementation Plan Adoption

The adoption of this plan was authorized through a board resolution at the July 30, 2024, meeting of the Valley West Community Hospital Board of Directors.

The Northwestern Medicine Valley West Hospital 2025 – 2027 Community Health Implementation Plan was adopted by the president of Northwestern Medicine Valley West Hospital by January 15, 2025.

Appendix: References

1. U.S. Department of Commerce. (2022). *U.S. Census Bureau 2018-2022 American Community Survey 5-year Estimates*. U.S. Department of Commerce. <https://www.census.gov/newsroom/press-kits/2022/acs-5-year.html>.
2. Centers for Disease Control and Prevention. (2021). *PLACES*. Accessed through Metopio.
3. Centers for Disease Control and Prevention. (2022). *Mortality Statistics*. National Vital Statistics System–Mortality. Accessed through Metopio.
4. Community input represents information and beliefs obtained from CHNA focus groups and from persons representing the broad interests of the community, including people who are uninsured, have low incomes and belong to certain minority groups.



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