

Fiscal Years FY26-28



MacNeal Hospital completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Board of Directors on May 30th, 2025. MacNeal Hospital performed the CHNA in adherence with applicable federal requirements for not-for-profit hospitals set forth in the Affordable Care Act (ACA) and by the Internal Revenue Service (IRS). The assessment considered a comprehensive review of secondary data analysis of patient outcomes, community health status, and social influencers of health, as well as primary data collection, including input from representatives of the community, community members and various community organizations.

The complete CHNA report is available electronically at <u>Community Benefit | About | Loyola Medicine</u> or printed copies are available at 3249 S. Oak Park Avenue, Berwyn, IL 60402.

Our Mission

As members of Trinity Health, Loyola University Medical Center and Gottlieb Memorial Hospital are committed to Trinity Health's mission: We, Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities. Additionally, Loyola Medicine's core values are; Reverence, Commitment to Those Who are Poor, Safety, Justice, Stewardship, and Integrity.

Our Hospitals

Loyola Medicine is a not-for-profit, mission-based, Catholic organization consisting of three hospitals located in the western suburbs of Chicago: Loyola University Medical Center (LUMC) in Maywood, Gottlieb Memorial Hospital (GMH) in Melrose Park, and MacNeal Hospital in Berwyn. All three hospitals are members of Trinity Health. Trinity Health is one of the largest not-for-profit, faith-based health care systems in the nation. It is a family of 127,000 colleagues and more than 38,300 physicians and clinicians caring for diverse communities across 26 states. Nationally recognized for care and experience, the Trinity Health system includes 93 hospitals, 107 continuing care locations, the second largest PACE program in the country, 142 urgent care locations and many other health and well-being services. In fiscal year 2024, the Livonia, Michigan-based health system invested \$1.3 billion in its communities in the form of charity care and other community benefit programs.

MacNeal Hospital provides quality healthcare in the near western suburbs and the City of Chicago. In 1919, Dr. Arthur MacNeal opened his Berwyn home to serve the pioneer community's health care needs. His legacy lives on as a 362 -bed fully accredited teaching hospital in Berwyn, IL. MacNeal Hospital has consistently expanded its scope of care to meet the needs of patients of every age. In fiscal year 2024, MacNeal discharged 9,666 patients and received 51,035 emergency room visits. Comprehensive services provided by MacNeal Hospital include obstetrics, orthopedics, cardiology, cardiac rehabilitation, sports medicine, rehabilitation services, oncology, and emergency care services. MacNeal Hospital offers one of the largest behavioral health services programs in the Chicago area. MacNeal Hospital also provides medical education programs, including the first family medicine residency established in Illinois, which remains one of the largest and most dynamic of its kind.



Our Community Based Services

Loyola Medicine provides primary care and specialty care to over 15 Chicago-area locations; and a large ambulatory network of clinics throughout Cook, Will, and DuPage counties. In addition, Loyola Medicine provides Home Health, Pediatric Mobile Health Unit, Diabetes Prevention Program, Support Services and Community Health Workers are imbedded in our safety net clinics/ambulatory sites screening patients for social needs while connecting them with resources.

Our Community

MacNeal Hospital serves a CHNA community service area that includes 23 zip codes in west suburban Cook County and the southwest side of Chicago. Loyola Medicine defines the CHNA service area as the primary service areas for both hospitals and making sure to include any nearby communities of highest need. The MacNeal Hospital service area is home to 827,195 community members. Fifty-seven percent (57%) of the population identified as Hispanic/Latinx, 26% Non-Hispanic White, 12% Black, 3% Asian, and 1.3% two or more races (US Census Bureau, 2024). Twenty four percent (24%) of the population is children and youth under 18, 61% are 18-64, and 14% are older adults over 65. The MacNeal Hospital service area has a greater percentage of community members that identify as Hispanic/Latinx compared to the county, state, and US. In the MacNeal Hospital service area, nearly 12% of households are limited English proficient, compared to only 4% statewide.

Our Approach to Health Equity

While community health needs assessments (CHNA) and Implementation Strategies are required by the IRS, Trinity Health ministries have historically conducted CHNAs and developed Implementation Strategies as a way to meaningfully engage our communities and plan our Community Health & Well-Being work. Community Health & Well-Being promotes optimal health for people experiencing poverty or other vulnerabilities in the communities we serve by addressing patient social needs and investing in our communities through dismantling oppressive systems, including racism, and building community capacity. Trinity Health has adopted the Robert Wood Johnson Foundation's definition of Health Equity - "Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care."

This implementation strategy was developed in partnership with community and will focus on specific populations and geographies most impacted by the needs being addressed. Racial equity principles were used throughout the development of this plan and will continue to be used during the implementation. The strategies implemented will mostly focus on policy, systems and environmental change as these systems changes are needed to dismantle racism and promote health and wellbeing for all members of the communities we serve.

Health and Social Needs of the Community

The CHNA conducted from June 2023 and December 2024 identified the significant needs for health and social drivers of health within the MacNeal Hospital community. Community stakeholders then prioritized those needs during a facilitated review and analysis of the CHNA findings. The significant health needs identified, in order of priority include:

| 1. Mental Health and Substance- | Adult/youth/adolescent mental health |
|---------------------------------|--|
| Use | Substance use challenges |
| | Activities for teens and youth |
| | Positive health behaviors |
| | Social support systems |
| | Day-to-day stressors |
| 2. Access to Community | Resources for housing and food |
| Resources | Positive health behaviors |
| | Workforce training and employment opportunities |
| | Outdoor spaces |
| | Activities for teens and youth |
| 3. Access to Healthcare | Lack of Healthcare Access |
| | Women's health disparities |
| | Child and Adolescent health |
| | Access to mental health care |
| 4. Chronic Conditions | • Diabetes |
| | Obesity |
| | Age-related Physical Illness |
| 5. Child and Adolescent Health | Activities for teens and youth |
| | Women's health disparities |
| | Child and adolescent health |
| | Access to mental health care |
| 6. Community safety | Infrastructure and environmental concerns |
| | Outdoor spaces |
| | Activities for teens and youth |
| | |

Hospital Implementation Strategy

Significant health and social needs to be addressed

MacNeal Hospital, in collaboration with community partners, will focus on developing and/or supporting initiatives and measure their effectiveness to improve the following needs:

- 1 Access to Community Resources CHNA pages 40 46
- 2 Access to Healthcare CHNA pages 49 51

Significant health and social needs that will not be addressed

MacNeal Hospital acknowledges the wide range of priority health and social issues that emerged from the CHNA process and determined that it could effectively focus on only those needs which are the most pressing, under- addressed and within its ability to influence. MacNeal Hospital does not intend to address the following needs:

- Mental Health and Substance Use Disorder (SUD)— MacNeal Hospital does not plan to directly
 address this need because we will continue to utilize our strong referral programs with mental health
 and SUD providers to connect patients to resources and treatment.
- Chronic Conditions MacNeal Hospital does not plan to directly address this need because these efforts
 are currently being addressed and provided through our Diabetes Prevention Program and other chronic
 disease screenings and management.
- Child and Adolescent Health -Childhood and adolescent health is not a direct focus in this CHNA cycle, but we are making an impact by improving youth access to healthcare and education through workforce development initiatives
- **Community safety** Community safety is not a direct focus in this CHNA cycle, but elements of safety can be addressed through our chosen priority areas and implementation strategies, based on community input and existing program alignment.

This implementation strategy specifies community health needs that the hospital, in collaboration with community partners, has determined to address. The hospital reserves the right to amend this implementation strategy if circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During these three years, other organizations in the community may decide to address certain needs, indicating that the hospital should refocus its limited resources to best serve the community.

1

Access to Community Resources



Goal: Enhance access to wellness resources in the MacNeal Hospital service area by empowering vulnerable populations through economic opportunities, improving resource navigation, and promoting active living.

| CHNA Impact Measures | FY2026 Baseline | FY2028 Target | | | | | | |
|--|--------------------|------------------|--|--|--|--|--|--|
| | Daseille | laiget | | | | | | |
| Support economic growth and professional development in identified vulnerable populations in the MacNeal service area through living wage job fairs. | | | | | | | | |
| # of job fairs | 2 | 6 | | | | | | |
| % of CHNA respondents reporting 'Workforce training and employment opportunities' as an economic challenge | 16.4%* | 15.4% | | | | | | |
| Expand the utilization of the Community Resource Directory (CRD) by community partners and staff aimed at reducing barriers to resources for the most vulnerable | | | | | | | | |
| # of CRD trainings to community partners 0 12 | | | | | | | | |
| % of CHNA reporting food and housing resources as a health need 36.6%* 35% | | | | | | | | |
| Reduce sedentary behavior by increasing awareness and providing opportunities for physical activity in our service area | | | | | | | | |
| # of participants in Walk with a Doc (WWAD) | 67 | 300 | | | | | | |
| # of community partners established 2 | | | | | | | | |
| * Retrieved from 2025 CHNA (Alliance for Health Equity, 2025) | | | | | | | | |

| Stratomy | | melii | ne | Hospital and Committed Partners | Committed Resources |
|--|-----------|-------|-----------|--|---|
| Strategy | Y1 | Y2 | Y3 | (align to indicate committed resource) | (align by hospital/committed partner) |
| Coordinate and actively | Х | Х | Х | MacNeal Hospital | Staff, time, outreach |
| participate in two community- based job fairs each year to | Х | Х | | Quinn Center | Staff, time, outreach |
| promote living wage | | | | Focus location(s) | Focus Population(s) |
| employment opportunities, including but not limited to careers available at Lovola | | | | ervice Area | Past Community Partners, under or unemployed residents (including youths) |

| Churchami | Timeline | | ne | Hospital and Committed Partners | Committed Resources |
|---|----------------------|----------------------|-----------|--|--|
| Strategy | Y1 | Y2 | Y3 | | (align by hospital/committed partner) |
| Increase awareness and utilization | Х | Χ | Х | MacNeal Hospital | Staff, time, outreach |
| of the Community Resource Directory (CRD) among | хх | | | Quinn Center | Staff, time, outreach |
| community-based organizations | | | | Focus location(s) | Focus Population(s) |
| (CBOs) by conducting four targeted trainings and supporting at least four CBOs in activating and maintaining their CRD profiles each year. | M | acNe | al S | ervice Area | Community partners not active on CRD, local CBOs |
| Strategy | Timeline Y1 Y2 Y3 | | | Hospital and Committed Partners (align to indicate committed resource) | Committed Resources (align by hospital/committed partner) |
| Increase average monthly | Х | Х | Х | MacNeal Hospital | Staff, time, outreach, materials |
| participation in the MacNeal Hospital Walk With a Doc | Х | Х | Χ | Walk With a Doc (WWAD) | Staff, time, materials |
| (WWAD) program by 50% | | | | Focus location(s) | Focus Population(s) |
| annually through enhanced outreach, increased community awareness, and strengthened partnerships that promote health and social benefits. | M | acNe | al S | ervice Area, health fair/engagements | Residents within MacNeal service area, Patients of MacNeal Hospital, local community organizations |
| Strategy | Tiı Y1 | Timeline Y1 Y2 Y3 | | Hospital and Committed Partners (align to indicate committed resource) | Committed Resources (align by hospital/committed partner) |
| Strengthen and establish | Х | Х | Х | MacNeal Hospital | Staff, time, outreach, materials |
| pathways that link patients enrolled in Loyola Medicine's | Х | Х | Χ | PAV YMCA | Staff, time, materials |
| chronic health programs to | | | • | Focus location(s) | Focus Population(s) |
| physical exercise opportunities by enhancing partnerships with at least four community organizations and increasing patient education around insurance benefits, program eligibility, and available physical activity resources. | M | acNe | al H | lospital service area | Residents that are seniors, youth, pre- diabetic, Loyola patients |

2

Access to Healthcare



Goal: Improve access to preventive and follow-up healthcare services in the MacNeal service area by increasing utilization of free health screenings, enhancing health literacy, and reducing disparities in care among underserved populations.

| CHNA Impact Measures | FY2026 Baseline | FY2028 Target | | | | | | |
|--|--------------------|------------------|--|--|--|--|--|--|
| 1. Increase free preventative health services received (i.e. flu shots, BP readings, etc.) among resident in the MacNeal primary service area and connect them to providers for follow-up care | | | | | | | | |
| Free health services provided per year | 25 | 250 | | | | | | |
| % of CHNA respondents reporting an overall health status of good or better | 47.3%* | 48.3% | | | | | | |
| Reduce health disparities and inequities among residents in the MacNeal primary service area by enhancing health literacy and promoting access to appropriate care. | | | | | | | | |
| % of participants in chronic health programs enrolled in MyLoyola 91% 93% | | | | | | | | |
| Number of health events allowing direct enrollment for MyLoyola | 0 | 6 | | | | | | |
| 3. Expand the "Health and Medical Careers Program" for local youth by increasing access to health professions and information in the MacNeal service area. | | | | | | | | |
| Implement program in the MacNeal service area 0 1 | | | | | | | | |
| # of student participants | 0 | 10 | | | | | | |
| * Retrieved from 2025 CHNA (Alliance for Health Equity, 2025) | | | | | | | | |

| Shuchagu | Timeline | | | Hospital and Committed Partners | Committed Resources |
|---|-----------|-----------|-----------|--|---|
| Strategy | Y1 | Y2 | Y3 | (align to indicate committed resource) | (align by hospital/committed partner) |
| By the end of Year 2 (FY2027), expand outreach to vulnerable | x x x | | Х | MacNeal Hospital | Staff time and supplies, printing. FTE (Wage/benefits). |
| populations in Loyola | , | | | Focus location(s) | Focus Population(s) |
| Medicine's primary service area by providing free health services and education opportunities through the hiring of a Registered Nurse and the strategic utilization of existing Community Health Workers, resulting in increased utilization | Ma | acNe | al Se | ervice Area, health fair/engagements | Uninsured, low-income, seniors, those in recovery, priority populations, and broader community. |

| of preventative care services and strengthened connections to ongoing primary and specialty care. | | | | | | |
|--|----------------------|-------------|-----------|--|---|--|
| Strategy | Timeline Y1 Y2 Y3 | | | Hospital and Committed Partners (align to indicate committed resource) | Committed Resources (align by hospital/committed partner) | |
| Strengthen patient navigation | Х | Х | Χ | MacNeal Hospital | Staff time and supplies, printing | |
| by leveraging MyLoyola and other engagement tools and | | | | Focus location(s) | Focus Population(s) | |
| outreach strategies to enhance awareness and understanding of how and when to access appropriate levels of care within the Loyola system—including primary care, urgent care, and emergency services—through integrated education, digital prompts, and resource visibility. | Mi | acNe | al S | ervice Area, health fairs/engagements | Uninsured, low-income, seniors, those in recovery, priority populations, and broader community. | |
| Strategy | Tiı Y1 | nelii Y2 | ne Y3 | Hospital and Committed Partners (align to indicate committed resource) | Committed Resources (align by hospital/committed partner) | |
| Increase access to digital health | Х | Х | Х | MacNeal Hospital | Staff, time, materials, outreach | |
| tools and improve health literacy among underserved residents in | | | • | Focus location(s) | Focus Population(s) | |
| Loyola Medicine's primary service area by leveraging CHWs to provide awareness, education, and direct enrollment support for MyLoyola— enhancing patient access to health information, provider communication, and continuity of care. | | | | ervice Area, OP clinics, health gements | Uninsured, low-income, seniors, those in recovery, priority populations, chronic disease program participants, and broader community. | |
| | Tiı | Timeline | | Hospital and Committed Partners | Committed Resources | |
| Strategy | Y1 | Y2 | Y3 | (align to indicate committed resource) | (align by hospital/committed partner) | |
| Strengthen and establish pathways that connect high school students | Х | Х | Х | MacNeal Hospital | Staff, time, materials, facility, outreach | |
| in the MacNeal Hospital service area to careers in health and | Χ | Х | Х | J. Sterling Morton High School District 201 | Staff, time, outreach | |
| medicine by expanding Loyola Medicine's Health and Medical | Χ | Х | Х | Riverside-Brookfield High School District 208 | Staff, time, outreach | |
| Careers Program to at least four local high schools. This will be achieved through strategic | Х | Χ | Х | Argo Community High School District 217 | Staff, time, outreach | |
| partnership development, collaborative planning, and phased | Χ | Х | Х | Lyons Township High School District 204 | Staff, time, outreach | |
| implementation, with full program | | | | Focus location(s) | Focus Population(s) | |
| launch targeted by Year 3 (FY2028). | | | | ervice area, I districts | High school students (11 th + 12 th grades) | |

On October 25th, 2025, the Board of Directors for MacNeal Hospital met to discuss the 2026-2028 Implementation Strategy for addressing the community health and social needs identified in the 2025 Community Health Needs Assessment. Upon review, the Board approved this implementation Strategy and the related budget.

Shawn P. Vincent, Regional President and CEO

25 October 2025

Date

