



2020 Community Health Implementation Strategy

Northwest Region: Northwestern Medicine McHenry Hospital, Northwestern Medicine Huntley Hospital and Northwestern Medicine Woodstock Hospital



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Introduction

Northwestern Memorial HealthCare (NMHC) is committed to our mission to provide quality medical care regardless of the patient's ability to pay; to transform medical care through clinical innovation, breakthrough research and academic excellence; and to improve the health of the communities we serve. NMHC is a not-for-profit, integrated academic health system committed to serving a broad community. NMHC provides world-class care at 10 hospitals, three medical groups and more than 200 diagnostic and ambulatory locations in communities throughout Chicago and the north and west suburbs.

Working together as Northwestern Medicine® (NM), NMHC and Northwestern University Feinberg School of Medicine (Feinberg)¹ share a vision to transform medical care through clinical innovation, breakthrough research and academic excellence to make a positive difference in people's lives and the health of our communities.

The health system's mission sets forth our commitment to improve the health of the communities we serve and to advance medical research and education one patient at a time. The Community Benefits Plan describes the broad-reaching goals that support this commitment and address our responsibility as a tax-exempt organization. The Department of External Affairs develops and maintains a Community Benefits Plan for the health system, which is executed at the hospital level to best meet the needs of our local communities.

Reviewed annually and revised as needed, the objectives of the Community Benefits Plan are to

1. Provide quality medical care regardless of the patient's ability to pay.
2. Honor Northwestern Medicine's mission and commitment to the community.
3. Be responsive to the assessed needs of the local community served by each hospital.
4. Forge relationships with local community organizations to help address social determinants of health.
5. Evaluate the public health impact of Northwestern Medicine programming and replicate by geography and/or disease state with sensitivity to the individual needs of our patients, their families and the communities we serve.

¹ Northwestern Medicine® is a trademark of NMHC and is also used by Feinberg. While NMHC and Feinberg share a mission and work together to provide world-class medical care to our patients, Feinberg is not a member of NMHC.

6. Leverage our strengths as a premier academic health system to train the next generation of caregivers and use evidence-based models for community health engagement.
 7. Leverage our bond with Northwestern University Feinberg School of Medicine to be leaders in quality, academic excellence, scientific discovery, patient safety and research-informed treatment.
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NMHC is the nonprofit corporate parent of Northern Illinois Medical Center, d/b/a Northwestern Medicine McHenry Hospital; Northwestern Medicine Huntley Hospital; and Memorial Medical Center, d/b/a Northwestern Medicine Woodstock Hospital. Together, the three hospitals compose the Northwestern Medicine Northwest Region (NM NWR) and serve the residents of McHenry County, Illinois. Since joining the health system in 2018, NM NWR provides a seamless pathway to specialty care and access to world-class academic medicine for its patients. In addition to working with NMHC institutions, NM NWR collaborates with local health and social service providers to improve the health of their patients and the community it serves.

Northwestern Medicine McHenry Hospital (NMMH), part of NMHC, is a nationally recognized, 179-bed acute care teaching hospital providing comprehensive, leading-edge health care to residents in McHenry, Illinois, and surrounding communities. Serving as a regional healthcare destination, NMMH provides emergency services and inpatient, outpatient and specialty care.

Northwestern Medicine Huntley Hospital (NMHH) is an extension of NMMH and part of NMHC. The 128-bed hospital opened in 2016. NMHH offers comprehensive care to residents of Huntley, Illinois, and the surrounding communities, including a large senior community within its service area. The hospital offers emergency, inpatient and outpatient health care, as well as community health and wellness services.

Northwestern Medicine Woodstock Hospital (NMWH) is also an extension of NMMH and part of NMHC. Located in Woodstock, Illinois, the hospital has served the community for more than 100 years. NMWH is a regional destination for behavioral health and outpatient care. The 56-bed hospital provides inpatient behavioral health services, emergency services and outpatient care.

According to *U.S. News & World Report*, Northwestern Medicine McHenry, Huntley and Woodstock Hospitals are ranked No. 19 in the Chicago Metro Area and ranked No. 23 in Illinois.²

Aligned with our mission and Community Benefits Plan, and in accordance with the requirements of the Patient Protection and Affordable Care Act, NM NWR works with community and health system partners 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 implementation strategy is a complement document to the 2020 NM NWR CHNA. NM NWR worked collaboratively with Northern Illinois University Center for Governmental Studies to complete its 2020 CHNA. The NM NWR CHNA—as well as CHNAs for all NMHC facilities—can be accessed at <https://www.nm.org/about-us/community-initiatives/community-health-needs-assessment>.

2 2020-2021 Best Hospitals, *U.S. News & World Report*, <https://health.usnews.com/best-hospitals/area/il/centegra-hospital-mchenry-6432127#rankings>

In this document, NM NWR responds to the significant health needs identified in its 2020 CHNA. NM NWR explains which significant health needs it will prioritize in accordance with IRS regulations, as well as explain why it will not be addressing other identified significant health needs; outline the actions NM NWR intends to take to address those prioritized significant health needs (commonly referred to as strategies); detail the anticipated impact of those strategies; outline the resources NM NWR intends to commit to those strategies; and discuss any planned collaborations between NM NWR and other organizations.

This implementation strategy is aligned with and coordinated with the broad Community Benefits Plan and ongoing operations of NM NWR and NMHC. The implementation strategy described in this document has been developed to specifically respond to the significant health needs identified in NM NWR's 2020 CHNA. The strategies outlined in this document are supplementary to NMHC's comprehensive Financial Assistance and Presumptive Eligibility policies,³ as well as the vast research, education, and other Community Benefits activities conducted across the health system under our Community Benefits Plan. Together, our Community Benefits activities help improve the health of the communities we serve.

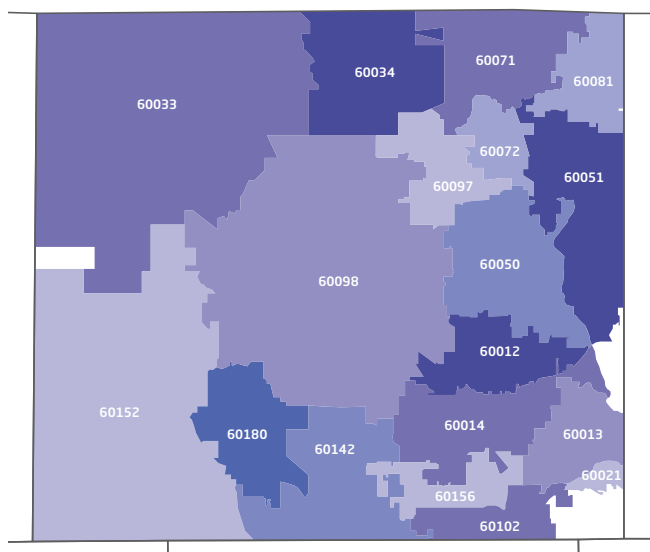
³ For more information about financial assistance at Northwestern Medicine visit <https://www.nm.org/patients-and-visitors/billing-and-insurance/financial-assistance>.

Community served by NM NWR

The three hospitals of the NM NWR—NMMH, NMHH and NMWH—serve the residents of McHenry County. Together, their primary service areas serve the majority of McHenry County, with 84% of all hospital admissions within the county originating at one of the three NM NWR hospitals.⁴ To define the NM NWR community for the 2020 CHNA, the following factors were considered: (1) geographic area served by NM NWR; (2) principal functions of NM NWR; (3) areas of high hardship (for example, differences in unmet socioeconomic needs across McHenry County, such as education, housing, income, poverty, unemployment and dependents); (4) location of existing NM NWR assets (such as NM-supported clinics and programs) that serve McHenry County; (5) hospital service areas of other healthcare providers in McHenry County; and (6) existing initiatives addressing community needs in McHenry County. NM NWR does not exclude medically underserved, low-income or minority populations who live in its geographical area when defining its community. For data collection and assessment purposes, McHenry County, comprising the 18 ZIP codes listed below, has been used as the proxy for the NM NWR Community Service Area (CSA).

NM NWR CSA ZIP Codes

60012 Crystal Lake	60072 Ringwood
60013 Cary	60081 Spring Grove
60014 Crystal Lake	60097 Wonder Lake
60021 Fox River Grove	60098 Woodstock
60033 Harvard	60102 Algonquin
60034 Hebron	60142 Huntley
60050 McHenry	60152 Marengo
60051 McHenry	60156 Lake in The Hills
60071 Richmond	60180 Union



⁴ Percentage was calculated for McHenry County residents' hospital admissions for NM NWR hospitals from September 2019 through June 2020.

Implementation Strategy overview

This implementation strategy was developed in collaboration with the McHenry County Department of Health, McHenry County Mental Health Board and Advocate Aurora Health. Together we completed a comprehensive analysis of the data gathered through the NM NWR 2020 CHNA and solicited input from members of the community representing target populations, such as medically underserved, low-income and minority populations, and governmental agencies. The health system commissioned Northern Illinois University Center for Governmental Studies to conduct a comprehensive CHNA. The Center for Governmental Studies CHNA framework consisted of a systematic, data-driven approach to determine the health status, behaviors and healthcare needs of residents in McHenry County. The assessment provided information to enable NMHC hospital leadership and key community stakeholders to identify health issues of greatest concern among all residents and decide how best to commit the hospitals' resources to those areas, thereby achieving the greatest possible impact on the community's health status. The Center for Governmental Studies' assessment incorporated data from both quantitative and qualitative sources and was conducted from September 2019 through April 2020.

After prioritizing the significant health needs, NM NWR applied a systematic approach to develop strategies to address certain significant health needs (enumerated below), identified resources it intends to commit to those strategies, and used collaborations with community organizations where such collaborations can positively affect the health of the communities we serve. In developing these strategies, NM NWR was mindful of its own strengths and those of other organizations in our community, areas of need in our community, and ways in which NM NWR could have the greatest possible impact. These strategies supplement, and work in tandem with, existing strategies and operations under the Community Benefits Plan for NM NWR and NMHC.

This implementation strategy will be reviewed annually and updated as needed to ensure viability and impact. NM NWR's impact will be communicated regularly to both reporting agencies and our community.

Identified significant health needs

The following significant health needs were identified through the NM NWR 2020 CHNA and represented potential areas to consider for prioritization and action.

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|---|--|
| Access to care (delayed care due to cost) | Food security and food access |
| Access to health care (no available appointments) | Mental health (anxiety) |
| Affordable housing | Mental health (depression) |
| Caregiver support | Racial and ethnic disparities (communication difficulties, cultural barriers, lack of access to providers) |
| Chronic disease (arthritis) | Substance use disorders (alcohol) |
| Chronic disease (asthma) | Substance use disorders (drugs) |
| Chronic disease (cardiovascular disease) | Substance use disorders (e-cigarettes) |
| Chronic disease (diabetes) | Substance use disorders (tobacco) |
| Chronic disease (hypertension) | Transportation |
| Chronic disease (obesity) | |
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Significant health needs addressed by NM NWR

Through a systematic, data-driven approach, NM NWR has prioritized the following identified significant health needs to address over the next three years. These needs will be referred to as the priority health needs throughout the remainder of the document. NM NWR worked collaboratively with community partners to develop strategies, and to identify resources and areas for collaboration, where applicable, to address each priority health need.

1. Access to care
 2. Behavioral health
 3. Social determinants of health
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Priority health needs addressed by NM NWR

Priority health need: Access to care

Access to comprehensive, quality healthcare services is important in achieving health equity and increasing the quality of life for everyone. It affects overall physical, social and mental health status; prevention of disease and disability; detection and treatment of health conditions; and preventable death and life expectancy.

According to Healthy People 2030 at [health.gov](https://www.health.gov), about one in 10 people in the United States do not have health insurance. People without insurance are less likely to have a primary care provider, and they may not be able to afford the healthcare services and medications they need. Interventions to increase access to healthcare professionals and improve communication can help more people get the care they need.

Improving healthcare services depends in part on ensuring that people have a usual and ongoing source of care. This is also known as having a medical home. People with a medical home have better health outcomes, and fewer disparities and costs. Having a primary care provider (PCP) as the usual source of care is especially important, because PCPs can develop meaningful and sustained relationships with patients.

Improving healthcare services includes increasing access to and use of evidence-based preventive services. Clinical preventive services are services that prevent illness by detecting early-warning signs or symptoms before they develop into a disease (primary prevention) or detect a disease at an earlier, and often more treatable, stage (secondary prevention).

About two in five adults and one in five children and adolescents in the United States are obese, and many others are overweight. Healthy People 2030 focuses on helping people eat healthy and get enough physical activity to reach and maintain a healthy weight.

More than 30 million people in the United States have diabetes, which is the seventh leading cause of death. Most racial/ethnic minorities are more likely to have diabetes, and many people with diabetes do not know they have it.

Heart disease is the leading cause of death in the United States. Healthy People 2030 focuses on preventing and treating heart disease and improving overall cardiovascular health.

Benchmarks

National: Healthy People 2030 Objectives

Healthcare Access and Quality

- AHS-01: Increase the proportion of people with health insurance
- AHS-08: Increase the proportion of adults who get recommended evidence-based preventative health care
- AHS-07: Increase the proportion of people with a usual primary care provider
- AHS-04: Reduce the proportion of people who can't get medical care when they need it
- AHS-06: Reduce the proportion of people who can't get prescription medicines when they need them

Overweight and Obesity

- NWS-04: Reduce the proportion of children and adolescents with obesity
- NWS-03: Reduce the proportion of adults with obesity
- NWS-05: Increase the proportion of healthcare visits by adults with obesity that include counseling on weight loss, nutrition or physical activity

Diabetes

- D-01: Reduce the number of diabetes cases diagnosed yearly
- D-06: Increase the proportion of people with diabetes who get formal diabetes education
- D-09: Reduce the rate of death from any cause among adults with diabetes

Heart Disease

- HDS-01: Improve cardiovascular health in adults
- HDS-02: Reduce coronary heart disease deaths
- HDS-04: Reduce the proportion of adults with high blood pressure
- HDS-09: Reduce heart failure hospitalizations among adults

Goal

Increase access to comprehensive, high-quality healthcare services

Action	Anticipated Impact	Resources	Collaboration
<p>NMMH, NMHH and NMWH will adapt a health system-level approach to better serve uninsured and underinsured patients through clinical community relationships.</p> <p>NMMH, NMHH and NMWH will pilot new opportunities and enhance current relationships in the service area.</p>	<p>Increased number of NMMH, NMHH and NMWH patients with medical homes</p> <p>Increased capacity among existing partnerships</p>	<p>Operating and grant funding</p> <p>Staff members from NM RMG</p> <p>Staff members from NMMH, NMHH and NMWH</p>	<p>Aunt Martha's Health and Wellness</p> <p>Family Health Partnership Clinic</p>
<p>The Regional Medical Group (RMG) Residency Clinic will expand with Rosalind Franklin University to increase access to follow-up care for patients who are discharged from NMMH, NMHH and NMWH.</p>	<p>Increased number of NMMH, NMHH and NMWH patients with medical homes</p>		<p>Rosalind Franklin University Residency Clinic</p>
<p>NMMH, NMHH and NMWH will provide information sessions on healthy weight and nutrition through community lectures and programs.</p>	<p>Increased knowledge of healthy weight and nutrition</p>		<p>Community-based organizations</p>
<p>NMMH, NMHH and NMWH will provide information and education on diabetes through community lectures and screenings and diabetes support groups.</p>	<p>Increased knowledge of diabetes and self-management skills</p>	<p>Staff members from NMMH, NMHH and NMWH</p>	<p>Community-based organizations</p>
<p>NMMH, NMHH and NMWH will provide information on cardiovascular disease and hypertension through community lectures, screenings and individual training.</p>	<p>Increased knowledge of cardiovascular disease and hypertension</p>	<p>Staff members from NMMH, NMHH and NMWH</p>	<p>Community-based organizations</p>

Priority health need: Behavioral health

Mental Health

According to [health.gov](https://www.health.gov), about half of all people in the United States will be diagnosed with a mental health disorder at some point in their lifetime. Healthy People 2030 focuses on the prevention, screening, assessment and treatment of mental disorders and behavioral conditions.

Mental disorders affect people of all ages and racial/ethnic groups, but some populations are disproportionately affected. Mental disorders like depression and anxiety can affect a person's ability to take part in healthy behaviors, and physical health problems can make it harder to get treatment for mental disorders. Increasing screening assessments for mental disorders can result in people accessing the help they need.

Substance Use Disorders

According to [health.gov](https://www.health.gov), more than 20 million adults and adolescents in the United States had a substance use disorder in the past year. Healthy People 2030 focuses on preventing drug and alcohol misuse and helping people with substance use disorders get the treatment they need.

Substance use disorders are linked to many health problems, and overdoses can lead to emergency department visits and deaths. Strategies to prevent substance use and helping people get treatment can reduce drug and alcohol misuse, related health problems and deaths.

Benchmarks

National: Healthy People 2030 Objectives

Mental Health and Mental Disorders

- MHMD-04: Increase the proportion of adults with serious mental illness who get treatment
- MHMD-08: Increase the proportion of primary care visits where adolescents and adults are screened for depression
- MHMD-07: Increase the proportion of people with substance use and mental health disorders who get treatment for both
- MHMD-01: Reduce the suicide rate

Drug and Alcohol Use

- MPS-02: Reduce emergency department visits related to nonmedical use of prescription opioids
- SU-07: Reduce the proportion of adults who used drugs in the past month
- SU-05: Reduce the proportion of adolescents who used drugs in the past month
- SU-04: Reduce the proportion of adolescents who drank alcohol in the past month
- SU-13: Reduce the proportion of people who had alcohol use disorder in the past year
- SU-15: Reduce the proportion of people who had a drug disorder in the past year
- SU-12: Reduce the proportion of people who misused prescription drugs in the past year

Goals

- Improve mental health
- Reduce misuse of drugs and alcohol

Action	Anticipated Impact	Resources	Collaboration
NMMH, NMHH and NMWH will address and integrate trauma-informed care into practice, including providing employee resources for coping with trauma or vicarious trauma.	Increased number of people who have an understanding of trauma and its impact on behavioral health	Health education tools and materials for program training and education	Community-based organizations
NMMH, NMHH and NMWH will improve access to mental health resources through patient care programs, support groups and community lectures. NMMH, NMHH and NMWH will promote behavioral health partnerships with high-quality community-based organizations and providers.	Increased awareness of mental health and coping skills	Health education tools and materials for program training and education Operating and grant funding	Community-based organizations
NMMH, NMHH and NMWH will improve access to substance use treatment resources through patient care programs, support groups and community lectures. NMMH, NMHH and NMWH will promote behavioral health and substance use partnerships with high-quality community-based organizations and providers.	Increased awareness of mental health, substance use and coping skills	Health education tools and materials for program training and education Operating and grant funding	Community-based organizations

Priority health need: Social determinants of health

Health starts in our homes, schools, workplaces, neighborhoods and communities. We know that taking care of ourselves (including eating well, staying active, not smoking and making regular visits to the doctor) influences our health. Our health is also determined in part by access to social and economic opportunities, community resources, quality education, workplace safety, environmental factors and our relationships. The conditions in which we live explain in part why some people in the U.S. are healthier than others. Disparities in community conditions, including income, poverty, unemployment and housing—also known as social determinants of health (SDOH)—are consistently identified as health concerns in McHenry County.

According to health.gov, one in 10 people in the U.S. live in poverty, and many cannot afford healthy foods, health care and housing. Healthy People 2030 focuses on helping more people achieve economic stability.

When families have to spend a large part of their income on housing, they may not have enough money to pay for such things as healthy food or health care. This lack of money is linked to increased stress, more mental health problems and an increased risk of disease.

Food insecurity is linked to negative health outcomes in children and adults, and it may cause children to have trouble in school. Giving more people benefits through nutrition assistance programs, increasing benefit amounts, and addressing unemployment may help reduce food insecurity and hunger.

Many people face challenges and dangers they cannot control, such as unsafe neighborhoods or discrimination, and these factors can have a negative impact on health and safety throughout life. Healthy People 2030 focuses on helping people get the social support they need in the places where they live, work, learn and play.

Benchmarks

National: Healthy People 2030 Objectives

Employment

- AH-09: Reduce the proportion of adolescents and young adults who aren't in school or working
- SDOH-02: Increase employment in working-age people
- SDOH-03: Increase the proportion of children living with at least one parent who works full time

Housing

- SDOH-01: Reduce the proportion of people living in poverty
- SDOH-04: Reduce the proportion of families who spend more than 30% of their income on housing

Food Security and Food Access

- NWS-01: Reduce household food insecurity and hunger
- NWS-02: Eliminate very low food security in children

Racial and Ethnic Disparities

- HC/HIT-R01: Increase the health literacy of the population
- EMC-D07: Increase the proportion of children and adolescents who show resilience to challenges and stress

Goals

- Help people earn steady incomes that allow them to meet their health needs
- Reduce the proportion of families who spend more than 30% of their income on housing
- Reduce household food insecurity and in doing so reduce hunger
- Increase social and community support

Action	Anticipated Impact	Resources	Collaboration
<p>NMMH, NMHH and NMWH will implement an electronic tool that is integrated with NM's electronic medical record (EMR) system to capture SDOH for patients, train staff members and advocates to screen and use SDOH data, and refer patients to appropriate services to address SDOH.</p> <p>NMMH, NMHH and NMWH will partner with community-based organizations that are able to screen individuals for SDOH.</p>	<p>Increased number of patients accurately screened for SDOH in the EMR</p> <p>Increased number of patients receiving referrals to social service resources</p> <p>Increased number of collaborations with community-based organizations that have capacity to address SDOH</p>	<p>Electronic SDOH screening tool</p> <p>Operating and grant funding</p>	<p>Community-based organizations</p>
<p>NMMH, NMHH and NMWH will increase youth pipeline opportunities by introducing students to healthcare-related careers through presentations and internship experiences.</p> <p>NMMH, NMHH and NMWH will create hiring pipelines for youth and adults in hardship communities to connect to jobs through training programs, targeted outreach and partnerships, and inclusive, local hiring practices.</p> <p>NM will work with internal and external stakeholders and community partners to advocate for reduced barriers to educational attainment and for support to fill workforce gaps.</p>	<p>Increased number of high school students and young adults who learn about career opportunities with NM</p> <p>Increased number of pipeline programs</p> <p>Increased number of community pipeline partnerships</p> <p>Increased percentage of staff members hired from hardship communities</p>	<p>Support or oversight to programs for young adults related to healthcare career awareness and workforce development</p> <p>Operating and grant funding</p> <p>Expanded capacity to train the next generation of healthcare and hospital workers</p>	<p>McHenry County area schools</p> <p>Project SEARCH</p> <p>McHenry County partners</p> <p>McHenry County College</p> <p>McHenry County Workforce Development</p> <p>Community-based organizations</p>

Action	Anticipated Impact	Resources	Collaboration
<p>NMMH, NMHH and NMWH will establish a diversity and inclusion (D&I) infrastructure with partnerships across the organization to promote, support, and activate inclusive strategy, culture and behavior that differentiates NM as an inclusive values-driven organization.</p>	<p>Increased sense of belonging from employees</p> <p>Improvement in employee engagement</p> <p>More strategies that address leadership engagement in D&I</p>	<p>Education and resources</p>	<p>Community-based organizations</p> <p>Advocacy groups</p> <p>Community, patient and employee focus groups</p>
<p>NMMH, NMHH and NMWH will foster collaborations with community-based organizations. Individuals interacting with these agencies will be screened for income-based programs or food insecurity and, when positively identified, will receive vouchers to purchase fresh fruits and vegetables at area farmers' markets.</p>	<p>Increased access to fresh fruits and vegetables for individuals who are identified through SDOH screening as positive for food insecurity</p> <p>Encouragement of healthy food options among McHenry County adults</p>	<p>Funding for vouchers to be used at area farmers' markets</p>	<p>McHenry County Department of Health</p> <p>Family Health Partnership Clinic</p> <p>Aunt Martha's Health and Wellness</p> <p>McHenry County Housing Authority</p> <p>Farmers' market vendors</p>
<p>NMMH, NMHH and NMWH will foster collaborations with community-based organizations that address housing instability.</p>	<p>Increased access to community-based programs and services that address housing instability</p>	<p>Funding support</p>	<p>Community-based organizations</p>

Significant health needs not addressed by NM NWR

Through a systematic, data-driven approach, NM NWR has determined that it will not address the following identified significant health needs over the next three years. Many of these needs are being addressed through the comprehensive services and Community Benefits operations offered at the three NM NWR hospitals and throughout NMHC. Specific reasons explaining why an identified significant health need will not be prioritized are outlined below.

Significant health needs not addressed	Rationale for not addressing them
Arthritis	Condition is addressed through the NM NWR care delivery system.
Asthma	Condition is addressed through the NM NWR care delivery system.
Caregiver support	Need was assessed by community as a relatively low priority and is better addressed through external community agencies who provide these services.
e-Cigarette and tobacco use	Need was assessed by community as a relatively low priority and is addressed through the NM NWR care delivery system.
Transportation	Need was assessed by community as a relatively low priority and is addressed through the NM NWR care delivery system along with other community agencies.

Implementation Strategy adoption

This implementation strategy was adopted through a board resolution at the NM NWR board meeting of the Northern Illinois Medical Center, d/b/a Northwestern Medicine McHenry Hospital; Northwestern Medicine Huntley Hospital; and Memorial Medical Center, d/b/a Northwestern Medicine Woodstock Hospital.

The NM NWR 2020 implementation strategy was reviewed and adopted by Thomas J. McAfee, senior vice president, NMHC and president, NIMC, on January 4, 2021.

Feedback

The community is encouraged to provide feedback on this implementation strategy and all NMHC Community Benefits documents by calling 312.926.2301, TTY 312.926.6363, or emailing communityhealth@nm.org.

Public availability

This implementation strategy and all NMHC Community Benefits documents are public information and can be accessed free of charge by visiting <https://www.nm.org/about-us/community-initiatives/community-health-needs-assessment>. Reports can also be requested, free of charge, by calling 312.926.2301 or by [emailing communityhealth@nm.org](mailto:communityhealth@nm.org).

Please contact Community Affairs with any questions by calling 312.926.2301, TTY 312.926.6363, or emailing communityhealth@nm.org.



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