

# Community Health Improvement Plan

FY 2026-2028



## UChicago Medicine

Northwest Indiana



## Introduction

This Community Health Improvement Plan (CHIP) outlines how UChicago Medicine Northwest Indiana will respond to the findings of its 2026 Community Health Needs Assessment (CHNA) for Northwest Indiana. It is intended to accompany the 2026 CHNA and provide a clear public summary of the selected health priorities, the strategies that will guide action, and how progress will be tracked over time.

A CHNA identifies significant health needs in a defined community using quantitative and qualitative data. A CHIP builds on that assessment by describing how the organization intends to address selected needs in partnership with community stakeholders. Together, the CHNA and CHIP support a transparent, community-informed approach to improving health.

### **This plan is designed to advance three broad aims:**

- Improve health outcomes
- Reduce health disparities
- Strengthen access to prevention, education and supportive services for residents in the UChicago Medicine NWI service area.

## Who We Are

UChicago Medicine Northwest Indiana (UChicago Medicine NWI) brings academic medicine to Northwest Indiana, providing world-class care for adults and children close to home. As the health system's largest offsite facility, the Crown Point multispecialty care center is staffed by many of the same faculty physicians who practice at UChicago Medicine's flagship campus in Chicago.

The center's services include primary and specialty care, an ambulatory surgery center, a 24-hour emergency department, an eight-bed inpatient hospital, and comprehensive cancer care, including infusion therapy, radiation oncology, imaging, and access to the clinical trials at UChicago Medicine's NCI-designated Comprehensive Cancer Center in Chicago.

UChicago Medicine NWI is an active community partner, working with local organizations including the Boys & Girls Clubs of Greater Northwest Indiana, the Northwest Indiana Food Bank, Valparaiso University Athletics and the Lake County Corn Dogs baseball team. For more information, visit [uchicagomedicine.org](http://uchicagomedicine.org).



## The Community We Serve

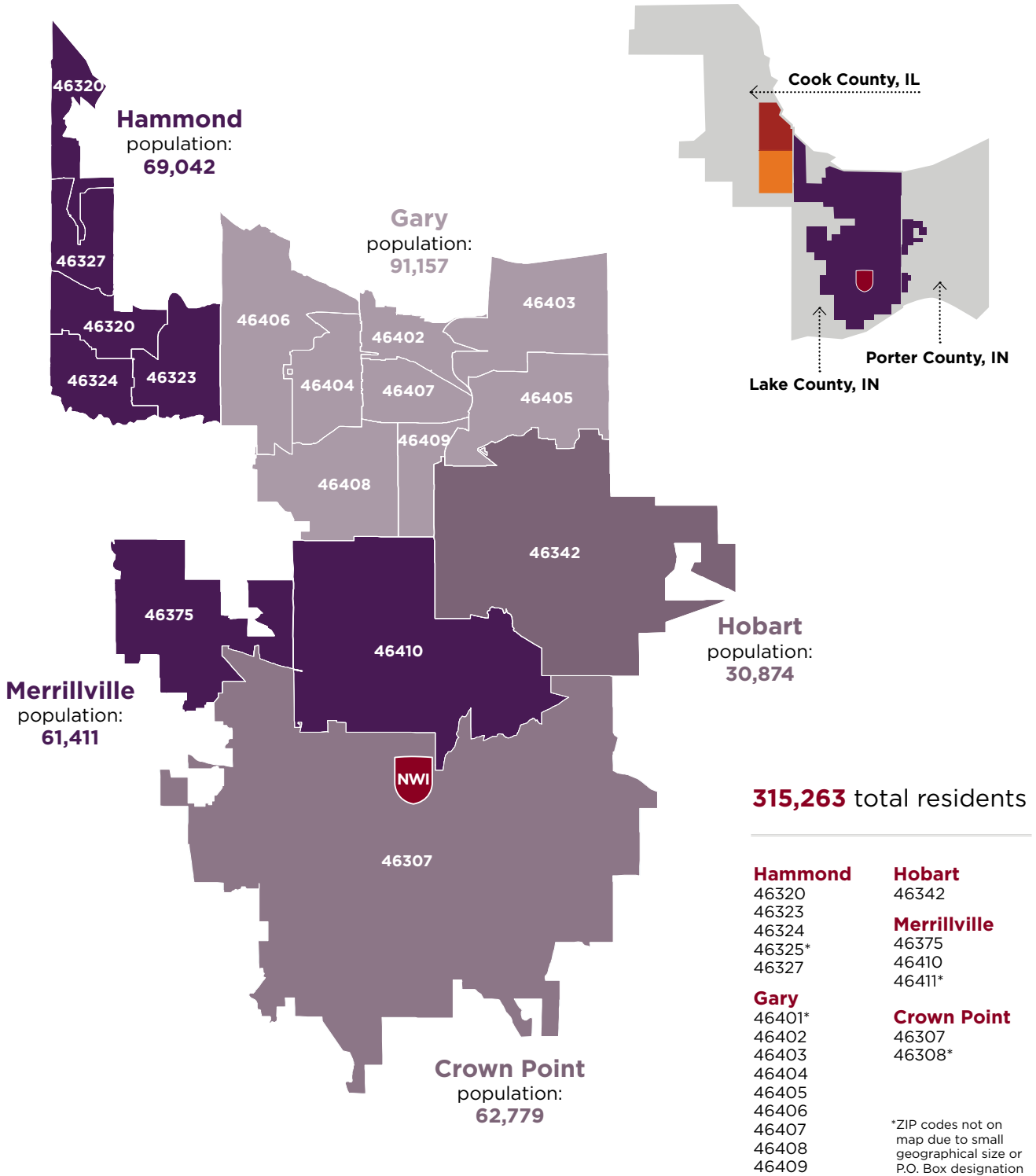
For purposes of the CHNA and this CHIP, the UChicago Medicine NWI primary service area includes Crown Point, Gary, Hammond, Hobart, and Merrillville. The combined population of the defined service area is 315,263 residents.

The service area, primarily located in Lake County, IN, comprises diverse communities with varying demographic profiles, economic conditions, and health experiences. The CHNA found meaningful variation across the service area related to race, ethnicity, income, educational attainment, and access to resources. As a new provider in this region, UChicago Medicine NWI recognizes the importance of listening, building relationships, and responding to needs in ways that are both data-informed and community-informed.

COMMUNITY POPULATIONS	
Gary	91,157
Hammond	69,042
Crown Point	62,779
Merrillville	61,411
Hobart	30,874

**UCHICAGO MEDICINE NORTHWEST INDIANA  
PRIMARY SERVICE AREA**

ZIP Codes and Community Areas



 UChicago Medicine NWI

## How the CHNA Was Conducted

The CHNA was conducted on behalf of UChicago Medicine NWI by Professional Research Consultants, Inc. (PRC), a national healthcare consulting firm with extensive experience in community health assessments.

The assessment used both primary and secondary data. Primary data included the PRC Community Health Survey and PRC Online Key Informant Survey. Secondary data sources included a variety of health-related datasets (e.g., American Community Survey data, Decennial Census data, National Cancer Institute State Cancer Profiles, local health department data, etc.) that allow comparison to county, state, and national benchmarks.

The PRC Community Health Survey used a mixed-mode methodology, including telephone and online survey administration. Using a stratified random sampling method, 703 adults age 18 and

older were surveyed across the defined service area between September and November 2025.

Results were weighted by geography and key demographic characteristics to appropriately reflect the service area as a whole. The maximum margin of error for the survey sample is +/- 3.7% at the 95% confidence level.

In addition, 12 community representatives participated in the PRC Online Key Informant Survey. Participants included public health representatives, healthcare providers, social service providers, and a community leader. Their perspectives helped add context to the quantitative findings and identify issues affecting residents' health, access to services, and quality of life.

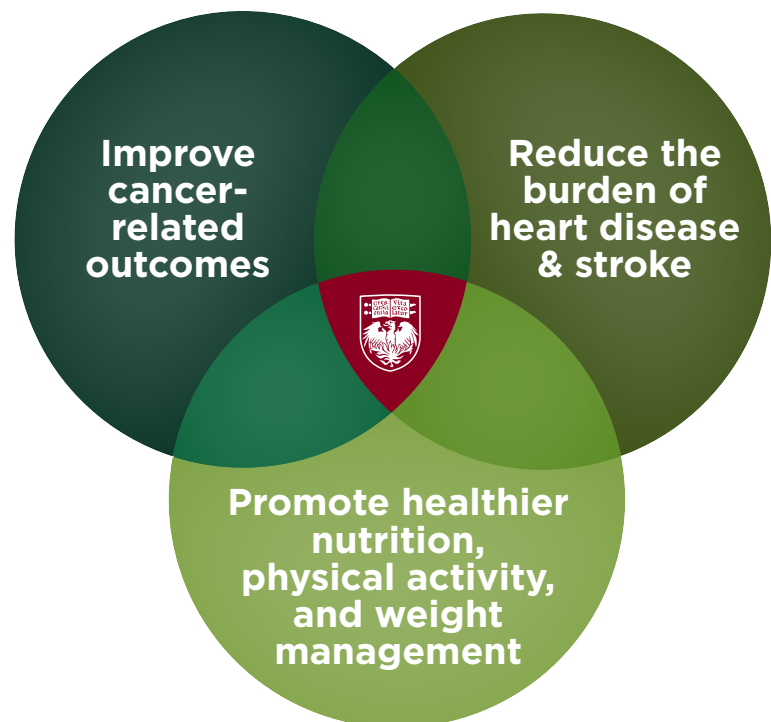
Taken together, these data sources provide a strong foundation for identifying community health priorities and informing the CHIP.

## Priority Community Health Needs

Based on the CHNA findings and the prioritization process, UChicago Medicine NWI selected the following priority community health needs for focused action:

- Cancers
- Heart Disease and Stroke
- Nutrition, Physical Activity, and Weight Management

These priorities reflect the primary concerns of the community as contributors to illness and death, have clear opportunities for prevention and early intervention, and are strongly aligned with the health system's capabilities to provide interventions and support.



## Community Benefit Priority

### Goal:

**Improve cancer-related outcomes by strengthening prevention, increasing awareness, supporting early detection, and reducing barriers to screening, follow-up, and treatment.**

Cancer remains a leading cause of death nationally and in Lake County, Indiana. The CHNA notes that, between 2021 and 2023, Lake County recorded an annual average cancer mortality rate of 198.9 deaths per 100,000 population.

The CHNA also notes that lung cancer is the leading cause of cancer deaths in Lake County, followed by female breast cancer, prostate cancer, and colorectal cancer. These patterns reinforce the importance of prevention, early detection, education, navigation, and access to timely care.

### STRATEGIES

**Promote evidence-based screening and education related to breast, cervical, colorectal, and lung cancer, as appropriate.**

**Increase awareness of risk factors and prevention strategies, including tobacco cessation, vaccination where appropriate, nutrition, and physical activity.**

**Support linkage to care, follow-up, and navigation for community members who face barriers related to cost, transportation, insurance, language, or health literacy.**

**Partner with community organizations, public health agencies, and local stakeholders to expand outreach in areas with greater burden or lower access.**

**Align community-facing work with relevant clinical programs and service lines when there is a natural connection to community need.**

### MEASURES OF PROGRESS:

- Community outreach and education activities related to cancer prevention and screening
- Participation in screening, referral, or navigation efforts
- Tobacco cessation education or referral activities
- Partnership initiatives with community-based or public health organizations focused on cancer prevention, early detection, and/or improving linkage to care
- Review of selected county or regional cancer indicators over time, where available

## Community Benefit Priority

### Goal:

**Reduce the burden of heart disease and stroke by supporting prevention, risk reduction, education, and connection to care.**

Heart disease and stroke are major contributors to illness, disability, and death. Between 2021 and 2023, Lake County reported an annual average heart disease mortality rate of 252.5 deaths per 100,000 population and an annual average stroke mortality rate of 53.0 deaths per 100,000 population.

The CHNA also found that 10.7% of surveyed adults reported having been diagnosed with heart disease, 4.7% reported a history of stroke, and 89.5% reported one or more cardiovascular risk factors such as being overweight, smoking, physical inactivity, high blood pressure, or high cholesterol.

### STRATEGIES

**Increase community awareness of cardiovascular risk factors and the importance of prevention and routine care.**

**Support education related to blood pressure control, cholesterol management, smoking cessation, nutrition, physical activity, and symptom recognition for heart attack and stroke.**

**Advance outreach, referral, and community-based engagement strategies that promote earlier detection and follow-up care.**

**Partner with community organizations and public health partners to reach residents who experience barriers to care or who are at higher risk of poor outcomes.**

**Coordinate community benefit efforts with relevant clinical and operational teams to strengthen consistency between community-facing work and care delivery.**

### MEASURES OF PROGRESS:

- Community education and outreach activities related to cardiovascular health and stroke awareness
- Participation in prevention, screening, referral, or risk-reduction activities
- Engagement with community or public health partners focused on cardiovascular health
- Internal tracking of selected community benefit programs and outputs
- Review of selected heart disease and stroke indicators over time using public data sources, where available

## Community Benefit Priority

### Goal:

**Promote healthier eating, increased physical activity, and a healthier weight across the community through education, partnership, and supportive community-based strategies.**

Nutrition, physical activity, and healthy weight are foundational to chronic disease prevention. The CHNA found that 1 in 4 adults in the service area reported no leisure-time physical activity in the past month, and only 27.9% reported meeting recommended levels of both aerobic and strengthening activity.

The CHNA also found that 71.5% of adults in the service area were overweight, including 40.9% who were obese. Among children ages 5 to 17, 43.2% were reported to be overweight or obese, including 29.3% who were obese.

Although most adults reported little or no difficulty buying fresh produce at an affordable price, the overall findings suggest an ongoing need for education, supportive environments, and strategies that make healthy choices easier.

### STRATEGIES

**Support community education related to healthy eating, active living, and the prevention of chronic disease.**

**Partner with schools, community organizations, health educators, and other stakeholders to promote access to physical activity and healthy choices across the lifespan.**

**Advance strategies that help residents connect nutrition, physical activity, and weight management to overall health and chronic disease prevention.**

**Focus on practical, culturally responsive, and community-based approaches that can reach residents where they live, learn, work, and seek care.**

**Identify opportunities to align community benefit programming with existing initiatives, clinical expertise, and local partnerships.**

### MEASURES OF PROGRESS:

- Community education, outreach, or program participation related to nutrition and physical activity
- Partnerships that support healthy eating, active living, or chronic disease prevention
- Tracking of selected outputs and outcomes through community benefit reporting processes
- Review of relevant adult and child physical activity and weight indicators over time
- Ongoing assessment of community needs, partnership opportunities, and implementation learning

## How UChicago Medicine Northwest Indiana Will Respond

As a new provider in Northwest Indiana, UChicago Medicine NWI approaches this work with the understanding that meaningful community health improvement takes time, partnership, and sustained attention. This CHIP is not intended to suggest that one organization can solve complex health challenges alone. Rather, it describes how UChicago Medicine NWI will contribute to broader community efforts in a focused and accountable way.

Implementation will emphasize several principles:

- **Community-informed action.** Efforts will be guided by CHNA findings, community voice, and partnership.
- **Equity-minded implementation.** Attention will be given to disparities and barriers that shape who benefits from prevention, outreach, and care.

- **Practical alignment.** Whenever possible, community benefit work will connect to existing system capabilities, service lines, and strategic priorities.
- **Relationship building.** As a newer presence in the area, UChicago Medicine NWI will continue building trust and identifying where it can add value alongside existing organizations.
- **Continuous learning.** Implementation may evolve over time based on community input, partnership opportunities, available resources, and lessons learned.

## Community Health Improvement Framework

Over the implementation period, UChicago Medicine NWI will pursue a variety of direct activities, partnerships, education, referral support, and coordination with clinical and operational teams. Specific initiatives may vary by year, but the overall framework will include:

- **Community education and outreach.** Health education, awareness campaigns, events, and engagement activities designed to improve knowledge, support prevention, and connect residents to services.
- **Partnership development.** Collaboration with public health agencies, community-based organizations, schools, social service providers, and other local stakeholders working on related issues.
- **Screening, referral, and navigation support.** Activities that help residents identify needs earlier and connect to services, follow-up care, or supportive resources when appropriate.
- **Alignment with clinical expertise.** Use of relevant service lines and subject-matter expertise to strengthen the quality and relevance of community-facing work.
- **Evaluation and reporting.** Tracking progress through community benefit reporting systems, internal review, and public documentation where appropriate.

## Measurement and Accountability

UChicago Medicine NWI will monitor implementation of this CHIP through internal tracking and periodic review. Because community health outcomes are influenced by many factors beyond the control of any single institution, this plan includes both process measures and longer-term outcome indicators.

Examples of process measures may include the number and type of outreach activities, partnerships developed or maintained, education sessions delivered, referrals supported, and populations reached. Longer-term indicators may include selected public health measures from county, state, or other available data sources related to the three priority areas.

Community benefit activities and related investments may be tracked through internal reporting tools, as well as other internal dashboards or reporting mechanisms used by the health system. Progress may also inform annual community benefit reporting, internal leadership review, board reporting, and IRS Schedule H documentation, as applicable.

This plan will remain a living document. UChicago Medicine NWI may refine strategies during the implementation period in response to community input, partnership opportunities, operational realities, emerging data, or lessons learned through practice.

## Community and Partner Engagement

Community health improvement depends on strong relationships. UChicago Medicine NWI intends to engage community stakeholders throughout the implementation period, not only at the point of assessment. This includes listening to community perspectives, identifying shared priorities, seeking opportunities for collaboration, and learning from organizations already working in the community.

Potential partners may include local public health agencies, schools, community-based organizations, social service providers, healthcare providers, faith-based organizations, and other civic or neighborhood stakeholders. The exact mix of partners may evolve over time based on community need and implementation opportunities.

## Looking Ahead:

This CHIP represents an early step in UChicago Medicine NWI's long-term commitment to Northwest Indiana. As a newer presence in the region, the organization recognizes both the opportunity and the responsibility that come with entering a new service area.

The priority areas identified in the CHNA reflect real and ongoing

health challenges. This CHIP outlines a practical path for contributing to improvement through prevention, education, partnership, coordination, and accountability.

UChicago Medicine NWI is committed to using this plan as a foundation for action, learning, and continued engagement with the communities it serves.

# Appendix 1

## CHNA Summary Data Referenced in this CHIP

- Defined service area population: 315,263
- Survey sample: 703 adults age 18 and older
- Survey administration period: September to November 2025
- Margin of error: +/- 3.7% at the 95% confidence level
- Key informant participants: 12 community representatives
- Lake County annual average cancer mortality rate (2021-2023): 198.9 deaths per 100,000 population
- Lake County annual average heart disease mortality rate (2021-2023): 252.5 deaths per 100,000 population
- Lake County annual average stroke mortality rate (2021-2023): 53.0 deaths per 100,000 population
- Adults reporting diagnosed heart disease: 10.7%
- Adults reporting diagnosed stroke: 4.7%
- Adults reporting one or more cardiovascular risk factors: 89.5%
- Adults reporting no leisure-time physical activity in the past month: 25.5%
- Adults meeting recommended aerobic and strengthening activity levels: 27.9%
- Adults who are overweight: 71.5%
- Adults who are obese: 40.9%
- Children ages 5 to 17 who are overweight or obese: 43.2%
- Children ages 5 to 17 who are obese: 29.3%



## Contact for Feedback

Questions or comments regarding the Community Health Needs Assessment (CHNA) or Community Health Improvement Plan (CHIP) can be sent via email to [communitybenefit@uchicagomedicine.org](mailto:communitybenefit@uchicagomedicine.org).

For more information on the CHNA or Community Benefit at UChicago Medicine, please scan the QR code to the right or visit [www.uchicagomedicine.org/about-us/community/benefit](http://www.uchicagomedicine.org/about-us/community/benefit).

