Village of Schaumburg

Community Health Needs Assessment
Phase II: Community Health Improvement Plan

Established March 2025

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I. Executive Summary

During 2023 and 2024, the Village of Schaumburg conducted a Community Health Needs Assessment (CHNA). The aim of that assessment was to identify and enhance the understanding of the community's health needs, as well as assess the existing services and infrastructure available to fulfill these needs, in the Village of Schaumburg and for its residents. Findings from the CHNA pointed to a number of cross-cutting strengths, assets, and areas for improvement, such as collaboration between agencies, transportation, and demand for mental health services.

Based on these findings, the Health and Human Services Committee and Village Board moved forward with a subsequent phase of work, which included drafting a Community Health Improvement Plan (CHIP) to prioritize these gaps and collaborate with partner agencies to address them. The CHIP process was led by a project team from the Village of Schaumburg with support from consultant Leading Healthy Futures (LHF) and was conducted in keeping with the Illinois Project for Local Assessment of Needs (IPLAN) requirements for local health departments certified by the Illinois Department of Public Health. Although the Village of Schaumburg is not a certified local health department, it chose to conduct an assessment consistent with IPLAN requirements to better understand and improve the health of its residents. The CHIP used the Mobilizing for Action Through Planning and Partnerships 2.0 (MAPP 2.0) process as its framework.

In September 2024, the village's project team convened with partner agencies, including nonprofit organizations that serve Schaumburg residents and other government entities, to review the findings of the CHNA and develop three key priorities to shape the CHIP and guide the development of specific action items. Using a structured prioritization process, three areas were chosen as strategic priorities to improve the community's health:

- ***Collaboration and Communication between Organizations***
- ***Mental Health and Substance Use Disorder Services***
- ***Access to Care***

For each priority, the project team collaborated with a working group composed of stakeholders who had relevant experience and the capability to help address service gaps. Together, they developed a more concrete plan of action, outlining one or more overall objectives, long-term and medium-term objectives, key activities and intervention strategies, and identifying lead organizations or coalitions that could drive progress over the next five years.

This report represents the culmination of this planning process, but it is only the beginning of the implementation process. It is important to emphasize that the responsibility for the CHIP's successful implementation will not rest solely with the village. Instead, each partner agency will play a crucial role in executing action items where appropriate, ensuring a collaborative and shared approach to achieving the plan's goals.

The Village of Schaumburg project team and its many partners look forward to working proactively on community health improvement over the next five years to fulfill the vision of this plan and advance collaboration, mental health and substance use disorder services, and access to care. Doing so will ultimately promote equitable health outcomes for all who live, work, shop, and play in the village.

II. Introduction and Process

A. The Village of Schaumburg

The Village of Schaumburg is a full-service home rule municipality located in the northwest corner of suburban Cook County, with a small portion in DuPage County. It is bordered by the municipalities of Elk Grove Village, Rolling Meadows, Palatine, Hoffman Estates, Streamwood, Hanover Park, and Roselle.

Since its incorporation in 1956, the Village of Schaumburg has grown from a population of 130 to what is now the 12th largest community in Illinois, with more than 79,498 residents as of 2017-2021 ACS five-year estimates. Outside the City of Chicago, Schaumburg is the largest center of economic development in the State of Illinois. In addition to the 9.5 million square feet of retail and restaurant space, the village has over 12 million square feet of office space and 13.5 million square feet of industrial space. With a daytime population of 150,000, thousands of businesses, 30 hotels, over 200 restaurants, a highly educated workforce, superb location and high quality of life, Schaumburg is 'The Place for Business'.

Schaumburg is one of 125 municipalities and 30 townships that are under the jurisdiction of the Cook County Department of Public Health (CCDPH). CCDPH provides services related to communicable disease prevention and control, community epidemiology, emergency preparedness, environmental health, and integrated health support services.

Beyond those services provided by CCDPH, Schaumburg residents and businesses have access to a wide variety of local health services provided by the Village of Schaumburg, Schaumburg Township, other government agencies such as the Schaumburg Park District and Schaumburg Library, as well as several local private and non-profit service providers. Examples of these services include the following:

- Health inspection programs and services
- Emergency preparedness and response
- Senior services
- General/financial assistance programs
- Nursing services
- Behavioral health services
- Domestic violence services
- Youth and young adult services
- Transportation

B. Illinois Project for Local Assessment of Needs (IPLAN)

Illinois law requires that every five years, each local health department completes an Illinois Project for Local Assessment of Needs (IPLAN), which is a community health assessment and health improvement process. This fulfills the requirements of the Illinois Administrative Code, Title 77, Subsection 600.410 for certification for local public health departments by the Illinois Department of Public Health (IDPH). Although the Village of Schaumburg is not a certified local health department, it chose to conduct a community health needs assessment consistent with IPLAN requirements to better understand and improve the health of its residents.

The IPLAN process is grounded in the core functions of public health and incorporates robust participation of community stakeholders. The essential elements of an IPLAN are an organizational capacity assessment, a community health needs assessment, and a community health improvement plan.

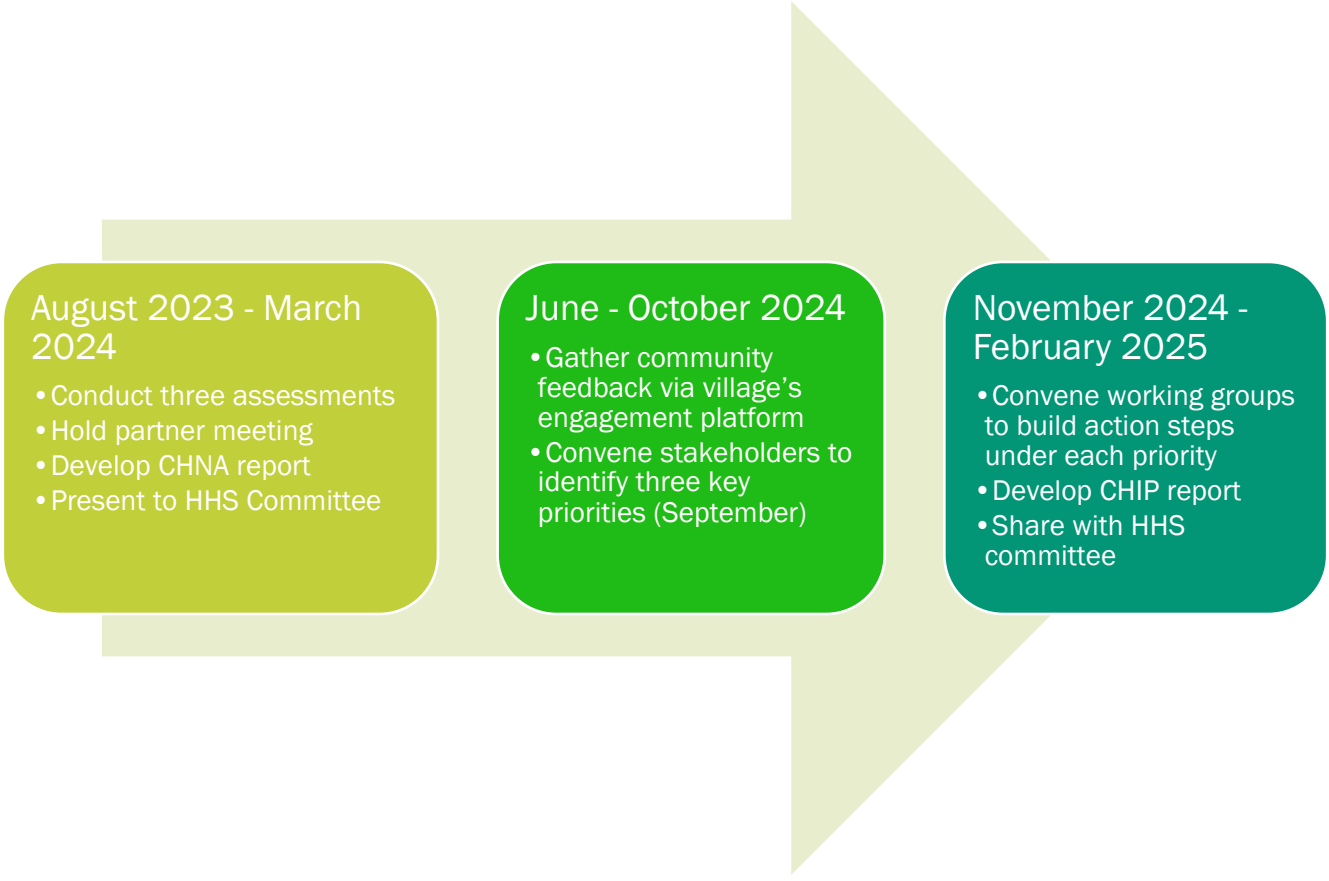
C. Village of Schaumburg Community Health Improvement Plan Process and Timeline

The proposed CHIP is a continuation of the Village of Schaumburg's Community Health Needs Assessment (CHNA) completed in 2024. In that first phase, the village, its partners, and consultant used an adapted version of the nationally recognized model Mobilizing for Action through Planning and Partnerships (MAPP). Developed by the National Association of County and City Health Officials (NACCHO), MAPP is a Centers for Disease Control and Prevention approved planning process and one which IDPH considers to be an equivalent process for completing a certified local health department's IPLAN.

MAPP 2.0, the current version of MAPP that was released in 2023, includes three phases:

- **Phase One:** Build the Community Health Improvement Foundation
- **Phase Two:** Tell the Community Story
- **Phase Three:** Continuously Improve the Community

In summer 2024, the village began Phase Three: Continuously Improve the Community. This involved gathering additional community feedback on the top emergent priorities from the community health needs assessment report, preparing for a meeting with community stakeholders and partners, and convening these stakeholders and partners to identify key priorities. Following the affirmation of the priorities by the village's Health and Human Services (HHS) Committee, partners met in virtual working groups to build out action steps and strategies under each priority. The working group discussions form the backbone of the CHIP presented in this report, which summarizes Phase Three of the MAPP process completed by the village in January 2025.



III. MAPP 2.0 Phase Three: Continuously Improve the Community

PURPOSE

Phase Three of the MAPP 2.0 process focuses on developing a CHIP to systematically address public health issues based on the results of the CHNA. It involves prioritizing issues with community partners, working together to develop shared goals, strategies, and measures, and envisioning action steps and strategic partnerships for sustainable impact.

PROCESS

Beginning in mid-2024, the Village of Schaumburg's project team shared the CHNA findings with the public and sought additional community feedback. The project team used the village's public engagement platform (Engage Schaumburg) to solicit perspectives from the general public on the top health priorities based on the results of the needs assessment.

In September 2024, the village held a meeting with community stakeholders and partners from other governmental and social services organizations to identify key priorities. Participants went over the findings from the CHNA, reviewed the general public's feedback, and identified potential strategic priorities based on common emergent themes.

A total of 13 cross-cutting potential strategic issues were identified:

- Mental health services
- Substance use disorder services
- Services for older adults
- Services for adults with disabilities
- Services for people with developmental disabilities
- Services for young people
- Locations of/proximity of health service facilities and preventive services
- Transportation to and from health service providers
- Housing challenges
- Language barriers
- Accessing, affording, and understanding health insurance
- Health care workforce challenges
- Communication, outreach, and collaboration between health organizations

To prioritize these issues, meeting participants went through a structured voting process. Each participant voted for their top issues through three different lenses, using three questions:

1. Which of these will have the greatest positive impact on the health and well-being of Schaumburg residents?
2. Which of these are most feasible to address?
3. Which of these could my organization help address/play a role in?

After all participants voted on their top three issues, the group discussed the areas that received the most votes and combined or reworked each area until consensus was achieved. Through this facilitated process, three areas were chosen as strategic priorities:

- ***Collaboration and Communication between Organizations***
- ***Mental Health and Substance Use Disorder Services***
- ***Access to Care***

Following the affirmation of these three priorities by the HHS committee, partners met in virtual working groups to build out action steps and strategies under each priority. For each priority, the working group and project team developed one or more overall objectives, outcome and impact objectives, key activities/intervention strategies, and lead organizations or coalitions to advance that work.

THREE STRATEGIC PRIORITIES

This section summarizes each strategic priority, why it is a priority for the Village of Schaumburg, and how focusing on this issue is important to advancing the overall vision that community partners have for health and health equity in Schaumburg. It also describes how each priority connects to the findings of the three assessments in the CHNA report: the Community Status Assessment, which collects quantitative data on the status of the community; the Community Context Assessment, which uses qualitative data to gather community insights and perspectives; and the Community Partner Assessment, which looks at the individual and collective capacity of community partners. Results of each assessment are available on the village's website.

A. Collaboration and Communications between Organizations

The CHNA highlighted collaboration as one of the village's key strengths, with the village, government agencies, and nonprofits praised for their teamwork in addressing the needs of underserved populations. However, collaboration, communication, and outreach across organizations also emerged as a major area for improvement. Most nonprofit partners (70%) reported lacking sufficient resources or capacity within their own organizations, and many were unaware of the full range of services provided by other agencies, limiting their ability to refer clients effectively. This gap is particularly challenging for individuals with co-occurring needs such as those requiring health, behavioral health, housing, or food assistance who may not receive the integrated care necessary to support their well-being.

To strengthen collaboration among partner agencies, the CHIP prioritizes information sharing to address these concerns. By increasing awareness of each organization's services, agencies can more effectively connect residents with the appropriate resources. Furthermore, collaboration may open joint funding opportunities, enabling agencies to tackle larger community challenges such as supportive housing and workforce development.

B. Mental Health and Substance Use Disorder Services

Mental health and substance use disorder services emerged as top priorities across all three assessments in the CHNA. Data revealed high rates of stress, anxiety, and depression among local adolescents, while many adults reported poor mental health for more than half of the previous month. Significant barriers to accessing these services were identified, including cost, lack of knowledge about available resources, lack of health insurance, and concerns around fear, stigma, or trust. Among local partners, 95% cited mental health care access as a major challenge, and 54% of public respondents ranked mental health services as one of their top three priorities.

As Schaumburg's population changes, the growing demand for mental health and substance use disorder services should be considered. As a result, the CHIP will focus on ensuring these services meet the unique needs of specific groups such as older adults, individuals with disabilities, individuals experiencing homelessness, and youth. Additionally, the CHIP will ensure these services are culturally responsive to the increasing number of residents who speak languages other than English. By prioritizing mental health and substance use disorder services, Schaumburg can reduce these barriers, expand access to the full range of behavioral health services, and improve overall mental health in the community.

C. Access to Care

Access to health care, one of the five core social determinants of health identified by Healthy People 2030, was highlighted as a key issue in the three assessments in the CHNA. Transportation is a major barrier, despite Schaumburg offering stronger public transit and individualized services than other nearby suburbs. However, these options remain limited in terms of coverage and availability. While many health facilities are located near Schaumburg, few are within the village limits, and transit or shuttle options for seniors, low-income residents, and those without personal vehicles are insufficient. Approximately one-third of public respondents identified transportation to and from providers as a top concern, while over one-quarter prioritized the location of health facilities. Other barriers include health insurance coverage (6% of residents are uninsured), challenges with using insurance (e.g., copays or coverage issues), and a lack of services in languages other than English.

To improve access, the village's CHIP will explore ways to bring residents closer to health care services and bring services closer to residents. This could involve expanding transit options, introducing mobile services, or establishing co-located and satellite health sites. Additionally, addressing challenges related to insurance and language barriers will help ensure equitable access to care for seniors, people with disabilities, non-English speakers, uninsured individuals, and other underserved populations. These considerations will also be included under this priority in the CHIP.

PLAN FOR EACH STRATEGIC PRIORITY

For each priority, the working group and project team developed one or more overall objectives, outcome and impact objectives, key activities/intervention strategies, and lead organizations or coalitions to advance that work.

This section that follows includes a table describing the following for each of the three priority areas:

- One to three high-level overall objectives
- One or more outcome (long term) or impact (medium term) objectives under each overall objective, which define the results seen if successful
- Key activities or intervention strategies, which are concrete activities planned to advance the objectives
- Lead coalitions, which are the entities or partners who can take the lead on implementation

The village has allocated $200,000 in the FY 25/26 budget to support the implementation of CHIP initiatives. These funds will be used to advance activities and strategies within each priority area as determined by the working groups. Any expenditure of village funds will require prior approval from staff to ensure alignment with project goals and fiscal responsibility. Additionally, staff will evaluate whether Community Development Block Grant (CDBG) funds designated for service agencies can be reallocated or prioritized to further support CHIP initiatives. This strategic funding approach will help drive progress while leveraging external contributions as needed.

PRIORITY AREA: ***Collaboration and Communication between Organizations***

Overall Objective: Improve collaboration and communication across health and human services sector.

OUTCOME (LONG TERM) OBJECTIVE	IMPACT (MEDIUM TERM) OBJECTIVE	KEY ACTIVITIES/INTERVENTION STRATEGIES	LEAD COALITION(S)	TIMELINE
By the end of 2029, develop an ongoing health and human services collaborative group with at least 10 member organizations that meets quarterly.	By end of 2026, form a group of at least 5 diverse, relevant organizations representing, at minimum, mental, physical, and environmental health.	Research models for collaboratives, such as the Human Services Coordinating Council (Hanover Township Mental Health Board), McHenry County Mental Health Board, MAPP collaboratives, and others.	Village, Township, and Mental Health Board	2025
		Identify existing organizations in the community who could potentially participate and different sectors (mental health, physical health, environmental health, senior services, disability services, housing, for-profit/business, and others).	Village, Township, Library, Mental Health Board, and National India Hub	2025
		Establish and define collaborative's leadership structure, membership, and roles/positions (e.g., chair, membership chair).	Village, Township, and Mental Health Board	2026
	By the end of 2027, create directory of organizations and annual calendar of meetings to support communications and information-sharing across agencies within collaborative.	Define annual calendar of quarterly meeting topics that help members share information on different needed areas of collaboration and does not duplicate meetings of other groups.	Village, Township, Library, and Mental Health Board	2027
		Create directory of contacts and organizations and the services that they provide (building upon directory from Schaumburg Business Association), in order to support interagency communications and referrals. Include languages in which services are offered.	Village, Township, Library, and Mental Health Board	2027
		Explore availability of navigation services to support residents being directed to appropriate organization for their needs, language, insurance, etc.	Cook County Health, Village	2026
	By the end of 2028, develop ongoing plan for longevity of agency participation.	Annual update of directory and members to help address turnover in contacts (including addition of new organizations).	Collaborative leadership	2028
		Ongoing recruitment of new member agencies.	Collaborative leadership	2028

PRIORITY AREA: Mental Health and Substance Use Disorder Services

Overall Objective: Increase availability and accessibility of mental health and substance use disorder services.

OUTCOME (LONG TERM) OBJECTIVE	IMPACT (MEDIUM TERM) OBJECTIVE	KEY ACTIVITIES/INTERVENTION STRATEGIES	LEAD COALITION(S)	TIMELINE
By 2028, increase the number of access points for mental health intake by 3.	By 2027, 10 organizations will participate in the coordinated referral process.	Define the number of existing access points and potential resources for new access points, such as mobile vans, drop-in centers, library events.	Village, Library	2025
		Add new points of access, such as pop-up clinics, mobile vans, partnerships/co-locations and integrated care sites.	Village, Library, Mental Health Board	2026
		Survey providers/agencies around barriers in intake process.	Mental Health Board	2025
		Develop a coordinated referral process for all mental health agencies across the village	Mental Health Board	2026
Enhance accessibility and awareness of prevention and education programs by creating a centralized online directory.	By 2027, 10 organizations will contribute to an online directory of resources and existing programs.	Increase awareness of existing support groups, services, and respite programs for family members.	NAMI, KYC	2026
		Develop and maintain online directory of resources	Village, Mental Health Board	2027

Overall Objective: Increase education and awareness around mental health and substance use.

OUTCOME (LONG TERM) OBJECTIVE	KEY ACTIVITIES/INTERVENTION STRATEGIES	LEAD COALITION(S)	TIMELINE
By 2029, increase the number of established prevention/education programs by at least 3.	Collaborate on social media campaigns on vaping, drinking, and other topics.	KYC, Mental Health Board	2025
	Expand existing mental health first aid and other trainings to schools, colleges, and community members in English and Spanish.	KYC, Ascension	2026
	Assess current state of prevention programming in schools and evaluate prevention education in the schools (after school or during school day).	Mental Health Board, Schaumburg Township Children's Network	2029

PRIORITY AREA: Access to Care

Overall Objective: Increase residents' ability to access services via transportation.

OUTCOME (LONG TERM) OBJECTIVE	IMPACT (MEDIUM TERM) OBJECTIVE	KEY ACTIVITIES/INTERVENTION STRATEGIES	LEAD COALITION(S)	TIMELINE
By the end of 2029, based on results of assessment, develop a plan to address identified transportation gaps or barriers.	By 2026, assess the current state of transit to care in Schaumburg.	Survey transit dependent residents about their needs and gaps (DART, senior taxi services) and encourage survey participation via social media, direct service providers, current riders.	Village	2025
		CMAP conducts transit survey of four townships (Schaumburg, Hanover, Palatine, and Barrington).	CMAP, four townships	2025
		PACE conducts ReVision assessment/survey.	PACE	2026
		Research different existing transportation models (ride share, volunteer models like Connections to Care, providers that offer their own transit).	Village, Village Committee on Aging	2025
	By 2027, ensure at least 8 organizations publicize online directory of transit options.	Distribute Village Committee on Aging resource guide for seniors, including transportation option.	Village, Village Committee on Aging	2025
		Create an online directory of existing transit options, where they go, and who is eligible and make it available to organizations.	Village	2026
		Communicate transportation options on social media, via QR code business cards, etc.	Village, Collaborative	2027

Overall Objective: Increase access points of care that are close to Schaumburg residents.

OUTCOME (LONG TERM) OBJECTIVE	KEY ACTIVITIES/INTERVENTION STRATEGIES	LEAD COALITION(S)	TIMELINE
By the end of 2029, add 3 new access points for health services within the village (that have sufficient capacity to serve underserved populations).	Research options for expanding use of Endeavor mobile vans around the village.	Endeavor, Village, Township	2026
	Explore pop-up sites, co-locations, and shared service arrangements (potentially explore Partners for Our Communities rotating model in Palatine/Hanover Park).	Village	2027
	Explore collaboration with one or more Federally Qualified Health Centers.	Village	2028

IV. Appendices

A. Participating Partners

The Village of Schaumburg project team would like to thank all the partners who participated in community meetings and virtual working groups around the three prioritized strategic issues.

Ascension
Boys & Girls Club of North Central Illinois
Bridge Youth & Family Services
Children's Advocacy Center
Clearbrook
JOURNEYS The Road Home
Kenneth Young Center
Life Span
Meet Chicago Northwest
National India Hub Foundation
Northwest CASA
Schaumburg High School (TSD211)
Schaumburg Park District
Schaumburg Township District Library
Schaumburg Township Mental Health Board
Village of Schaumburg

B. Partner and Working Group Meetings

The following is a list of key meetings held over the course of the CHIP process.

Community Strategic Priorities Meeting

September 9, 2024 — Prairie Center for the Arts, Schaumburg

Collaboration and Communication between Organizations Working Group Meeting

Monday, November 18, 2024 — Virtual

Mental Health and Substance Use Disorder Services Working Group Meeting

Tuesday, November 19, 2024 — Virtual

Access to Care Working Group Meeting

Thursday, November 20, 2024 — Virtual