



A Member of Trinity Health

**FISCAL YEAR 2025**  
(JULY 1, 2024 - JUNE 30, 2025)

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# Community Impact Report

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## OUR MISSION

We, Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

## OUR CORE VALUES

Reverence

Commitment to Those Experiencing Poverty

Safety

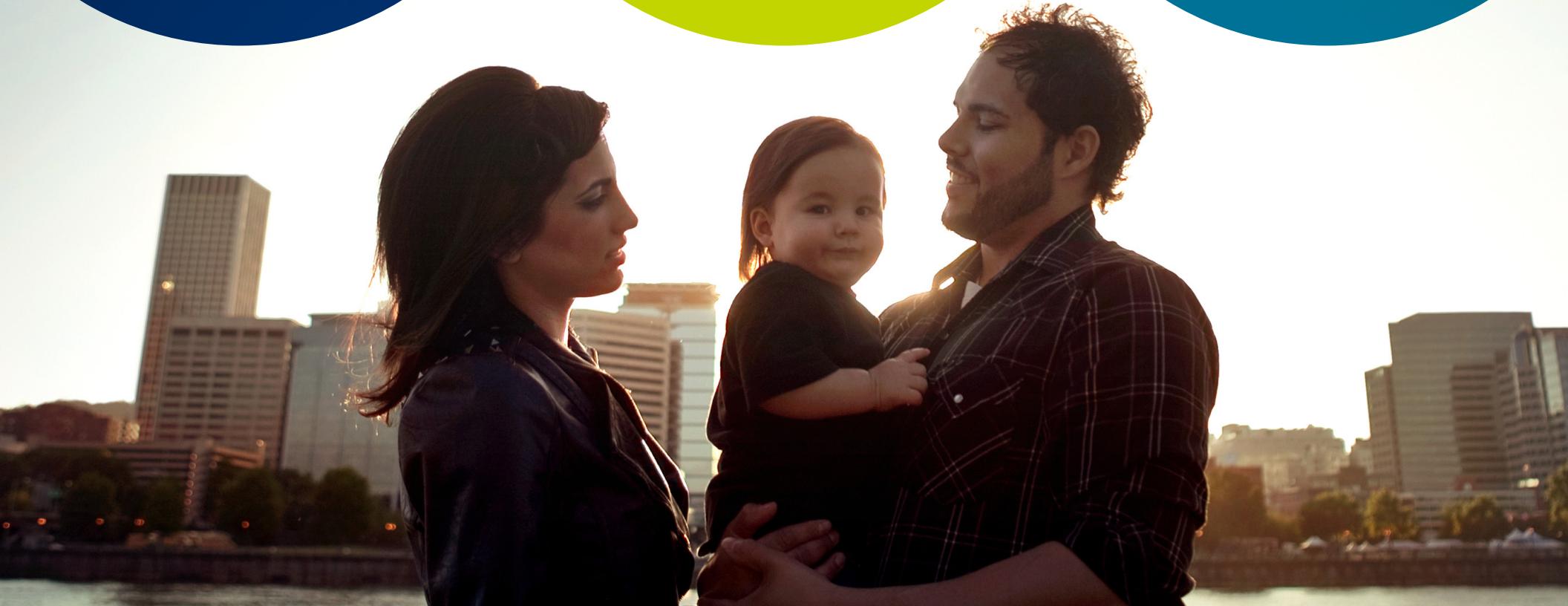
Justice

Stewardship

Integrity

## OUR VISION

As a mission-driven innovative health organization, we will become the national leader in improving the health of our communities and each person we serve. We will be the most trusted health partner for life.



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# Our Commitments

The Mission of Saint Joseph Health System is to "serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities." We strive to be a leader in optimizing wellness and equity and eliminating disparities in our communities identified in our Community Health Needs Assessment. We do this by leveraging resources and partnerships; focusing on those who are experiencing poverty and addressing the social influencers of health.

Saint Joe's invested over 51.8 million dollars in our community, with our community health and patient financial assistance programs providing health improvement services, community education and direct care to those who are uninsured, low income and are facing other vulnerabilities. Additionally, we invested over 40.3 million dollars in supportive programs that provided food assistance, tobacco advocacy and cessation education, Diabetes Prevention Programs, and maternal and infant health. Our Social Care Hub addressed the mental, physical, and emotional needs of patients and community members and continues to provide needed connections to services.

From our safety net clinics to mobile food pantries and crockpot cooking classes to Diabetes Prevention Programs and free flu vaccinations Saint Joe's is making a difference in the lives of our community.

Saint Joseph Health System has been here and will continue to be here to serve our patients, and our community. We are grateful for the opportunities we have , providing compassionate care and dedicated stewardship to the region and beyond.

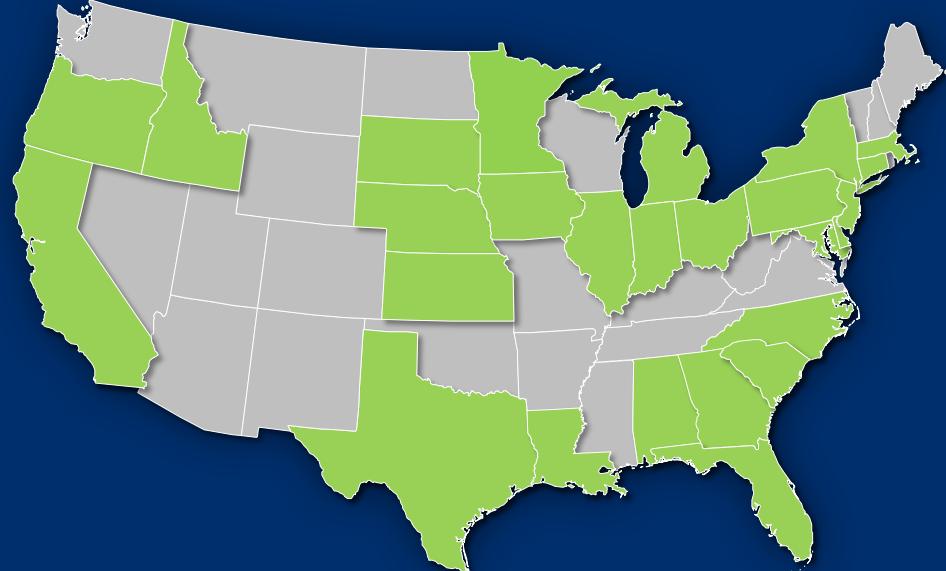


**Chris Karam,**  
*President*  
Saint Joseph Health System



**Michelle Peters,**  
*Regional Vice President*  
Saint Joseph Health System and Loyola Medicine  
Community Health & Well-being

# TRINITY HEALTH ONE OF THE LARGEST CATHOLIC HEALTH SYSTEMS IN THE NATION



**25** States



**1.1M** Attributed Lives



**\$2.9B** in Community Impact<sup>\*\*</sup>



**162** Community Health Workers



**92** Hospitals\*



**12** Clinically Integrated Networks



**41** Safety Net Health Centers



**12** Diabetes Prevention Programs

# SAINT JOSEPH HEALTH SYSTEM

## AT A GLANCE



 **2,679** Colleagues

 **2** Hospitals\*

 **30** Medical Practices

 **3** Safety Net Health Centers

 **2** Mobile Health

 **140,524** Outpatients Visits

 **61,755** Emergency Visits

 **12,804** Inpatient Discharges

 **5** Resident Clinics

 **15,277** Specialty Services

*# Deliveries, NICU, Cardiovascular, Oncology, etc.*



## Community Impact

Our Community Impact includes both our investments in serving patients experiencing poverty and investing in our communities that have been, and continue to be, disinvested.



Saint Joseph Health System (Saint Joe's) recognizes that achieving improvements in health outcomes (individually or as a community) is not possible until the conditions in the communities we serve are safe and all community members have access to high-quality education, health care, affordable food and housing. This is why Saint Joe's prioritizes integrating clinical and social care and investing in the social influencers of health.

Our goal is to achieve health equity. Saint Joe's is committed to applying a health equity lens to our interventions and decision making to ensure we are promoting health and healing.

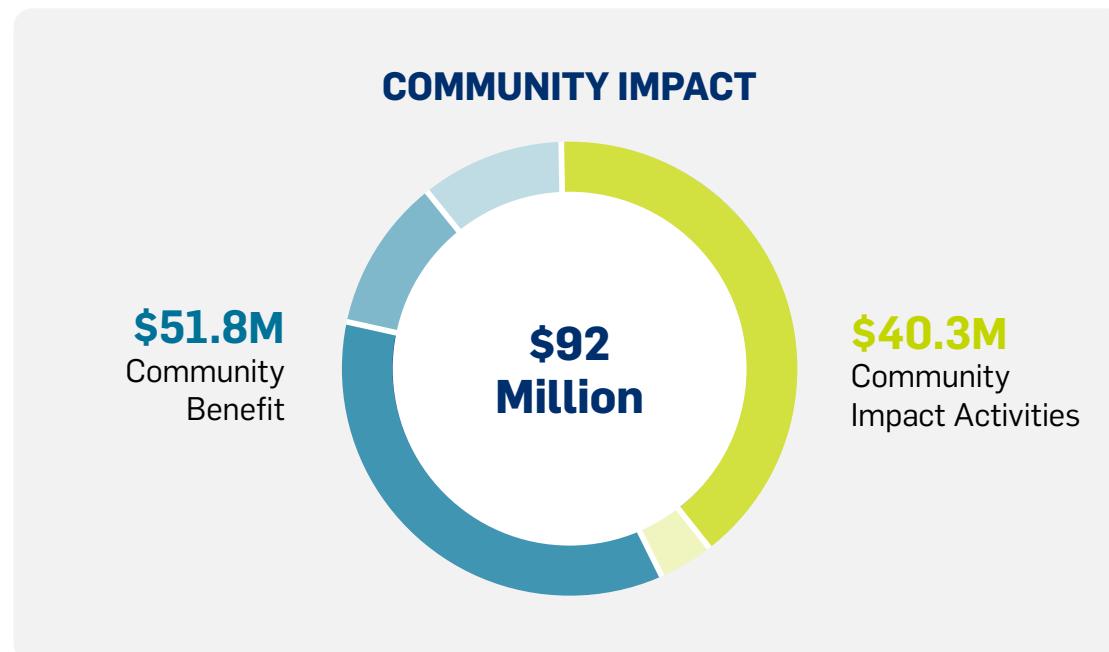
# Our Community Impact

## is more than Community Benefit

Saint Joe's is committed to ensuring we consistently report all the IRS-defined community benefit across our system, as well as our total Community Impact to fully demonstrate the services and supports we provide in our communities.

Our Community Impact demonstrates the commitments we are making in the communities we serve – focusing on impacting people experiencing poverty and other vulnerabilities- through our financial investments.

In Fiscal Year 2025, Saint Joseph Health System invested \$92 million in Community Impact.



### \$51.8M in Community Benefit\*

Defined by the IRS, Community Benefit includes:

**\$32.2M**  
Unpaid Cost of Medicaid

**\$10.4M**  
Community Benefit Programs

**\$9.1M**  
Financial Assistance at Cost

*In FY25, 10,540 patients received financial assistance.*

### \$40.3M in Community Impact Activities

**\$36.2M**  
Unpaid Cost of Medicare

**\$4M**  
Workforce development, social impact, local purchasing, capital investments, and other health and well-being investments

\* Community benefit data per audited financial statements



# Integrating Clinical and Social Care



Last year, 73% of patients seen across both primary and acute care settings were screened for social needs. 33% of those screened identified at least one need. Top needs include:



Food access



Financial insecurity



Social isolation

Each year we ask our patients about their health-related social needs. Questions include things that make it hard to be healthy like problems with work, housing, food, safety, and transportation.

This information helps us:

- Understand our patients' needs and their barriers to care
- Connect patients to helpful resources and services specific to their needs

# Integrating Clinical and Social Care

## COMMUNITY HEALTH WORKERS

Community Health Workers (CHWs) are frontline health professionals who are trusted members of and/or have a deep understanding of the community served. By combining their lived experience and connections to the community with effective training, CHWs provide patient-centered and culturally responsive interventions.

CHWs fulfill many skills and functions including patient outreach and engagement, conducting assessments, resource connection, health and social services system navigation, goal-setting and problem-solving through ongoing education, advocacy and support. When these skills are put into practice, it may look like a CHW helping a patient connect with their primary care doctor, assisting with a Medicaid insurance application, understanding their basic insurance benefits, or empowering a patient to ask clarifying questions about their medications or plan of care at their next doctor's appointment.

8 CHWs successfully engaged with 1,113 new patients and completed 2,230 encounters. One social need (such as housing or food needs) can often take months, or longer to successfully address, which means the need has been fully met and is no longer identified as a need.

## SUCCESS STORY

An Amish mother, pregnant with twins, living in a rural community over an hour from our hospital was referred to our Community Health Worker Program for assistance. The patient and her husband faced significant barriers to accessing prenatal care due to the distance from their home to the hospital and the high costs of transportation. This created stress and uncertainty about how they would consistently attend appointments for a healthy pregnancy.

Her community health worker identified transportation as a key barrier to care; coordinated and personally provided transportation, driving over an hour each way, to ensure the patient could attend her prenatal appointment; and, also, followed up with the family afterward to check on their experience and address additional needs.

The patient shared that she was very happy and satisfied with the transportation support. She expressed that the process was easier than she had expected, and both she and her husband were grateful for the follow-up after the visit. With reliable transportation in place, she felt more confident in her ability to continue her prenatal care journey.

By ensuring she can attend regular prenatal appointments, the likelihood of healthier outcomes for both the mother and her twins increases. The patient and her family felt supported and reassured that they could navigate the healthcare system despite financial and logistical challenges, and a major barrier to healthcare access was removed.

# Integrating Clinical and Social Care

## COMMUNITY RESOURCE DIRECTORY

The Community Resource Directory helps people find free or low-cost resources in their community.

In Fiscal Year 2025, the Community Resource Directory yielded 2,150 searches, over 500 more searches than in FY24. Top needs searched for:

 **30%**  
Food Access

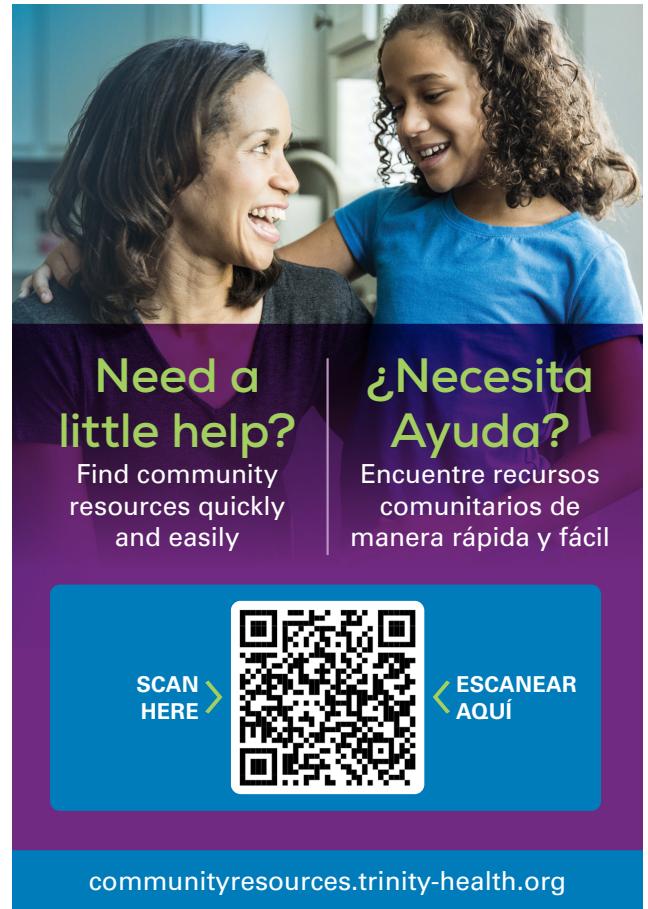
 **32%**  
Housing

Visit the Community Resource Directory at [communityresources.trinity-health.org](https://communityresources.trinity-health.org).

## SAFETY NET HEALTH CENTERS

Safety Net Health Centers provide wellness education, prevention, and comprehensive primary care services.

More than 15,500 individuals received care at one of our three safety net health centers during Fiscal Year 2025. These centers were established to serve those who are uninsured, underinsured, or have Medicaid. The centers also include medication assistance programs for patients who qualify and operate internal small scale food pantries to meet the immediate needs of those they serve. Saint Joe's wrap-around care also embeds community health workers into the on-site care teams, providing much needed same day resources.



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## Investing in Our Communities



Saint Joe's Top Needs are:



Access to  
Healthcare



Access to  
Wellness  
Resources

### Community Health Needs Assessment and Implementation Strategy Update

To further our commitment to achieving equity, we engage authentically with community members, organizations, and leaders. Every three years, Saint Joe's conducts a Community Health Needs Assessment (CHNA) to identify community assets, needs, and the current state of health and social well-being. This process involves input from those who live in the community to identify and prioritize needs addressed in the three-year Implementation Strategy. The CHNA and Implementation Strategies foster collective action to equitably allocate resources from the hospital and other sources to address these needs in communities most impacted.

# Investing in Our Communities

## ACCESS TO HEALTHCARE

Health screenings and services were administered for vulnerable members of our community. All patients served completed social assessments and were provided assistance with identified needs.

Screenings included:



**1,037**

mammograms via our mobile medical unit



**106**

free flu shots



**53**

blood pressure readings



**2500+**

individuals seeking services at our facilities were assisted in enrolling for Medicaid

Specific outreach to those experiencing homelessness began in FY25, and a full-time nurse and Community health worker (CHW) were hired to increase outreach initiatives to those most at risk for chronic disease in our service area..



# Investing in Our Communities

## ACCESS TO WELLNESS RESOURCES

Food insecurity was combated in our communities. Nutrition and eating habits were improved:



**2,300+**

individuals from 678 households in our service area received fresh produce, whole grains, and reduced sodium food choices via our mobile food pantries, provided in collaboration with the Food Bank of Northern Indiana.



**1,800**

meals were provided to those experiencing homelessness at Hope Ministries in FY25.



**37**

individuals, including youth, mothers and case managers, learned about cooking safely with a slow cooker, sampled recipes and received a slow cooker and recipe ingredients upon class completion.

Additional opportunities for wellness included:



**100+**

opportunities for seniors to be active were created in St. Joseph County through the provision of Senior Fit, a cardio and balance exercise class held twice per week by Saint Joe's.



**40+**

at-risk youth learned about the dangers of tobacco, the benefits of eating well, the importance of positivity, and how to have fun while moving their body during Saint Joe's Youth Enrichment Day.





## Community Grants and Collaborations

In Fiscal Year 2025, Saint Joe's invested \$1.1M supporting the following needs:



Chronic  
Disease  
Prevention



Tobacco  
Prevention and  
Cessation



Maternal and  
Infant Health



### Saint Joe's Invests \$1.1M in Our Local Communities

As part of demonstrating our Community Impact, Saint Joe's annually commits grant funding and in-kind support to accelerate community health improvements, especially toward community-based initiatives that address the prioritized needs in the CHNA Implementation Strategy.

# Community Grants and Collaborations

## NATIONAL DIABETES PREVENTION PROGRAM

More than 1 in 3 American adults have prediabetes and 80% of these adults are unaware they have it. Prediabetes is a condition where blood sugar levels are higher than normal, but not enough for a type 2 diabetes diagnosis. Making lifestyle changes can cut the risk of type 2 diabetes in half.

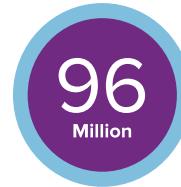
Saint Joe's delivers an evidence-based, 12-month lifestyle change program. The goal of the program is to lose a percentage of baseline weight, attend sessions regularly and engage in 150 minutes of physical activity minutes a week. The group sessions are facilitated by a Centers for Disease Control & Prevention (CDC) certified lifestyle coach and are offered in-person, remotely through a web-based meeting platform or virtually (asynchronous) at a self-paced rate. All participants are screened for health-related social needs (such as transportation, housing, or food insecurities) multiple times during the intervention and are referred to a Community Health Worker (CHW) to address any positive screenings. The CHW works with participants to address these needs, eliminate barriers to full participation, and promote successful outcomes.

### Scale and Impact

In FY25, Saint Joe's delivered four new cohorts both in-person and online and enrolled 53 new participants into the lifestyle change program. This program was made possible through funding from Trinity Health through a cooperative agreement with the CDC to prevent or delay the onset of type 2 diabetes in communities served.

ARE YOU  
AT RISK OF  
PREDIABETES?

¿ESTA EN  
RIESGO DE  
PREDIABETES?



96 million American adults -  
**more than 1 in 3** - have  
prediabetes

96 millones de adultos  
estadounidenses - **más de 1  
en 3** - tienen prediabetes



**More than 8 in 10** adults with  
prediabetes don't know they  
have it

**Más de 8 en 10** adultos con  
prediabetes no saben que  
la tiene

YOU CAN REDUCE YOUR  
RISK AND PREVENT  
TYPE 2 DIABETES

PUEDE REDUCIR SU  
RIESGO Y PREVENIR  
DIABETES TIPO 2



Find out if you  
have prediabetes -  
See your doctor  
to get your blood  
sugar tested

Averigüe si tiene  
prediabetes:  
consulte a su  
médico para  
que le haga una  
prueba de azúcar  
en la sangre



Join a CDC  
recognized  
diabetes  
prevention  
program

Participe en un  
programa de  
prevención de  
diabetes reconocido  
por el centro  
de control de  
enfermedades (CDC)



Learn more and take the Prediabetes Risk Test  
at [trinity-health.org/diabetesprevention](https://trinity-health.org/diabetesprevention)

Sepa más y tome la prueba de riesgo de  
Prediabetes en  
[trinity-health.org/diabetesprevention](https://trinity-health.org/diabetesprevention)



ar العربية

vi Tiếng Việt

de Deutsch

zh 繁體中文

fr Français

ru Русский

tl Tagalog

ko 한국어

ht Kreyòl Ayisyen

Source:

<https://www.cdc.gov/diabetes/library/socialmedia/infographics/prediabetes.html>

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# Community Grants and Collaborations

## TOBACCO CESSATION INITIATIVES

Both Saint Joseph Health System campuses, located in Mishawaka and Plymouth, are the lead agencies for local tobacco control in their respective counties.

In St. Joseph County, the Smoke Free St. Joe coalition is comprised of a variety of professionals and community members. We have representation from the African American, Latino and Caucasian communities. Formal coalition positions are held by members of the following agencies: Healthlinc, Anthem, and the University of Notre Dame.

We currently have 140 coalition partners and 2,000+ community supporters. Smoke Free St. Joe coalition meetings are held every month and include an educational component pertaining to coalition needs and input from coalition partners. Advocacy efforts for FY25 continued to include smoke-free workplaces, tobacco-free schools, and tobacco/vaping education and cessation, especially among the youth population.

In FY25, the coalition conducted outreach to 14,144 individuals at local community events, provided tobacco/vaping prevention education to 4,880 youth and adults at local organizations, and received 66 tobacco cessation referrals through Saint Joe's's electronic medical record, Epic, for courage to quit and the Indiana Tobacco Quitline. 12 participants attended Courage to Quit tobacco cessation program sessions. This program offered free via in-person and virtual sessions.



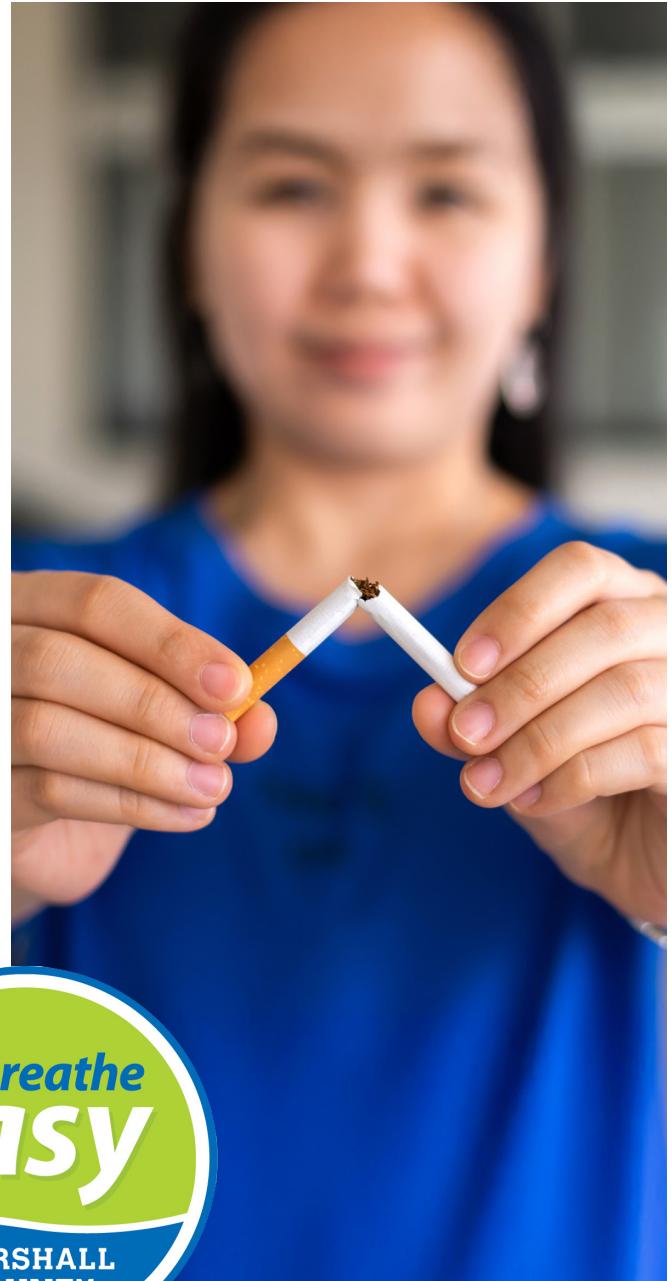
# Community Grants and Collaborations

## TOBACCO CESSATION INITIATIVES

In Marshall County, the Breathe Easy Marshall County Alliance (Breathe Easy) is comprised of a variety of professionals and community members and includes representation from the community. In FY25, Breathe Easy successfully grew their supporter database to include 50 partner organizations. The organizations represented by the core members are the following: United Way of Marshall County, MC Hope, Chamber of Commerce for Plymouth, In., Indiana Youth Institute, Bowen Health, and Marshall County Community Foundation.

The Breathe Easy Marshall County Alliance works to address initiatives like smoke/vape-free schools and businesses, smoke-free multi-unit housing, and increase access to free tobacco cessation resources. During FY25, tobacco risk assessments were administered along with the quit line information to increase access at multiple health and resource fairs. Additionally, Saint Joe's Plymouth's tobacco education coordinator collaborated with the Marshall County Health Department for an educational mock bedroom cargo trailer, "Stash Uncovered", which seeks to help parents, guardians, and other adults to know what substances Indiana teens are using and where they are hiding them in their bedrooms.

In FY25, the coalition conducted outreach to 9,299 individuals at local community events, provided tobacco/vaping prevention education to 6,872 youth and adults at local organizations.



# Community Grants and Collaborations

## MATERNAL AND INFANT HEALTH

Reduction in health disparities and inequities experienced by pregnant and post-partum moms happened through 2,300 encounters (phone call, clinic visits, house visits, etc.) by a community health worker (CHW) to high-risk patients in FY25. To meet the increased need, an additional CHW was hired to address the social needs of this population.

In FY25, Saint Joe's was awarded a grant from the Indiana Department of Health to coordinate perinatal care throughout the state by affiliating with delivering facilities. Key activities that arose from this grant included the provision of safety supplies for distribution in our service area to parents in need (including cribs and car seats), training for our nursing staff and staff of other affiliate hospitals on improving birth outcomes for mother and baby; equipment for safe transport of neonates by ambulance to a perinatal center; and participation in community awareness and education events in our surrounding counties.

Saint Joe's joined forces with other community collaborators, led by Dr. Joyce Adams of Notre Dame's Eck Institute for Global Health, to begin offering quarterly Pop-Up Pregnancy & Family Village events. The goal of the events is to be a one-stop shop for women and families offering care, resources, and support for health and well-being during pregnancy and after childbirth to those living in St. Joseph County. Saint Joe's was proud to support the work of Notre Dame's innovation as an Anchor Partner in the Pop-Up Village events which impacted 245 individuals in FY25. Teams from Saint Joe's were on-site at the quarterly events to provide education on safe sleep, breastfeeding, and tobacco use/exposure, as well as conduct social needs screenings and provide associated resources.



# Community Grants and Collaborations

## IMPROVED PUBLIC HEALTH INFRASTRUCTURE

Saint Joe's advocates for various health-related issues including improved public health infrastructure, expanded access to care, protected access to pharmaceuticals for low-income individuals, and increasing the cigarette tax to reduce smoking rates and support healthcare for low-income individuals in Indiana.

Saint Joe's also continues to be a leader in founding and funding programs that impact the health of its communities, such as providing local schools with nurses and health aides. Contracted with five public school corporations, two colleges/universities and K-8 schools of the Catholic Diocese of Fort Wayne/South Bend, Saint Joe's school health services team attended to the needs of students in St. Joseph and Marshall Counties through 323,548 health office visits in FY25.



## IMPACT STORY

Saint Joe's Abby Ennis, RN, gave a hygiene chat to middle school students in the district she serves prior to Christmas break. During the presentation, nurse Abby highlighted the school's hygiene closet, which is accessible to students who need hygiene products but don't have them at home.

One of the students came to see Abby with significant issues and shared the family did not have a washer or dryer at home. Abby quickly connected with a local not for profit agency who was able to provide a washer and dryer for the student and their family.



Not all communities have equal opportunities to be healthy. That's where Saint Joe's steps in and steps up. We do what is necessary to promote good health for everyone.



## Support Your Local Community Health & Well-Being Fund

Community Health & Well-Being teams listen, partner, and make it easy to identify and meet patients' health-related social needs, and collaborates with local organizations to address community needs and demonstrate community impact.

When you donate to the Community Health & Well-Being Fund, you are directly supporting services to patients experiencing poverty and other vulnerabilities and investments in communities to improve community access to healthcare and other wellness resources (fresh foods, nutrition classes, gyms, etc.).

To make a donation, visit [sjmed.com/foundation](http://sjmed.com/foundation) by scanning the QR code or by calling 574.335.1012.

FISCAL YEAR 2025

# **Community Health & Well-Being Impact Report**



A Member of Trinity Health