

# 2012-14

HEALTHCARE FOUNDATION  
OF NORTHERN LAKE COUNTY

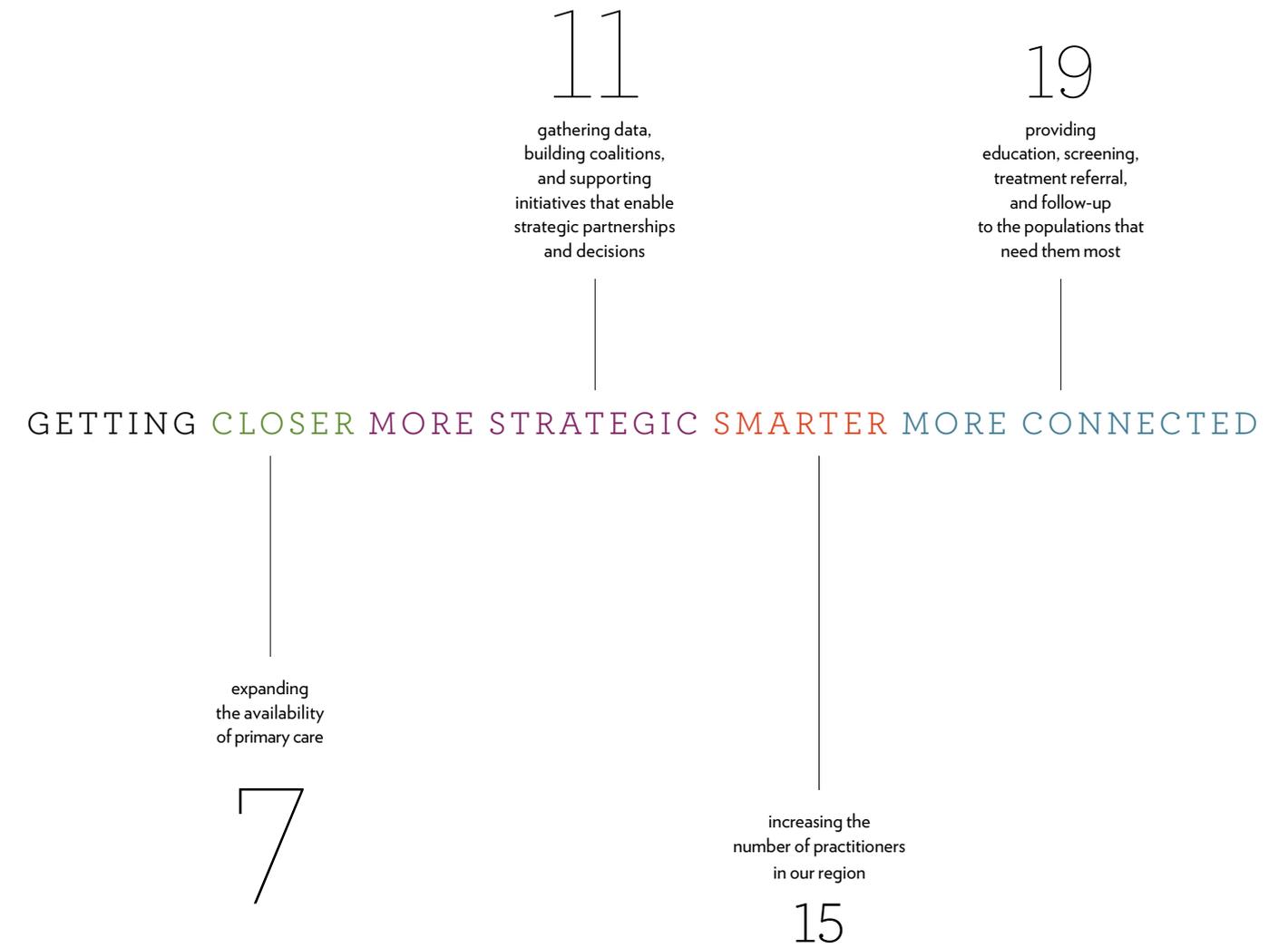
Biennial Report to the Community



HFNLC

GETTING BETTER AT DOING GOOD

The Healthcare Foundation of Northern Lake County supports efforts that improve access to health services for underserved northern Lake County, Illinois residents. We strive to improve the health status of uninsured, underinsured, and medically underserved residents. We are especially interested in addressing gaps in health services; increasing capacity of effective organizations and programs; and fostering innovative solutions to persistent healthcare access problems.



## DEAR COMMUNITY

All of us have felt the desire to get better at what we do. For nonprofit organizations working to improve the health of people who are underserved by the existing healthcare system—and for the foundations that support them—that desire can feel more like an imperative.

We know that health matters. Every additional patient or client served is a quantity of suffering relieved, a complication avoided, a present life and future prospects enhanced.

But seeing more patients or clients isn't the only way that health and human service nonprofits can improve health. Taking a hard look at programs to see if they're effective, and changing them if they're not, is another way. Devoting the time and resources to develop staff skills or agency leadership; improving efficiencies or critical infrastructure; looking to see what others are doing to learn or teach, adjust for overlaps, or integrate services; studying the landscape and planning ahead—in the long run, all result in more or better care.

Since its founding, the Healthcare Foundation of Northern Lake County has dedicated its resources to increasing access to healthcare through

- expanding the availability of primary care,
- providing education, screening, treatment referral, and follow-up to the populations that need them most,
- increasing the number of practitioners in our region, and
- gathering data, building coalitions, and supporting initiatives that enable strategic partnerships and decisions.

In terms of resource allocation, expanding or extending primary care services still accounts for the greatest percentage of our grant making dollars. As long as there are residents of northern Lake County who are not getting the primary care they need, our funding emphasis is not likely to change. We also remain committed to establishing linkages to care for populations that lack them and to providing scholarship support to students of the health professions who plan to practice in our community.

Yet as we think about how well we, as a Foundation, are doing at reaching our goals, one thing is clear. The funds we have invested in capacity building—that is, in improving the way programs, organizations, and systems work to make an impact—are also increasing access to healthcare here in Lake County. Capacity building will be an important strategic direction for the Foundation going forward.

In the two years since our last report to the community, the Foundation has supported dozens of projects. This report profiles just four.

Two projects demonstrate the power of effective networks to impact care, either directly—as when collaboration among educators and healthcare providers breaks ground for a new health and wellness center at Round Lake High School—or indirectly, as health and human services agencies combine their expertise to connect a hard-to-reach community to healthcare resources.

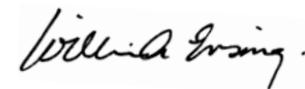
Another highlights strong organizational leadership, which is helping develop and execute strategies that ensure sustainability and expand service.

The final profile illustrates how big-picture data is being used to analyze operations and drive innovation across the education sector, to increase the number of healthcare providers in the county.

Together, these stories speak to the importance of capacity building, both as a funding strategy and as a task that heads the to-do lists of all of us who hope to get better at doing good.



ERNEST VASSEUR  
EXECUTIVE DIRECTOR



WILLIAM A. ENSING, ESQ.  
CHAIR, BOARD OF DIRECTORS

# 11,312,502

dollars awarded in  
northern Lake County

### GRANTS AWARDED BY CATEGORIES SINCE 2007

Primary Care: Mental Health	\$ 2,995,809
Community Health Education	\$ 2,835,093
Primary Care: Medical	\$ 2,816,000
Capacity Building	\$ 1,242,850
Scholarships	\$ 857,500
Primary Care: Dental	\$ 457,000
Special Opportunities	\$ 108,250
<b>Total</b>	<b>\$ 11,312,502</b>

# GETTING CLOSER



Kids have always come to school sick. They have fevers or stomachaches or the flu. Or they twist an ankle in gym or get a cut or bruise in class.

But schools today cope with much more than routine illnesses and accidents.

“A school nurse sees just about everything you can think of,” says Kerry Ramos, R.N., who coordinates health services for more than 7,300 students in Round Lake School District 116. “We have teens who are pregnant or struggling with depression. We see kids with chest pain, high and low blood pressure, chronic asthma, diabetes, seizure disorders, food allergies, cancer, sickle cell.”

For the roughly 2,300 students at Round Lake High School, getting care for whatever ails them got a little easier in October 2014, when the Round Lake High School Health and Wellness Center opened for business.

Operating just three days a week—at least for now—the center offers an impressively comprehensive menu of on-site services designed to keep kids healthy and in school, from immunizations and lab tests to behavioral health services and the management of chronic illnesses. Every student whose parents give permission can use the center, making it an important healthcare resource in an area that is chronically underserved.



“It’s a great reward at the end of four years of hard work, for all of us.”

JEANNE ANG LCHD DIRECTOR OF PRIMARY CARE SERVICES

Lake County Health Department and Community Health Center (LCHD), which built and equipped the center with a half-million dollar federal grant, is responsible for students' primary care. Other services, such as substance abuse counseling and an evidence-based asthma health education program for parents and students, are provided by center partners, including Nicasa, Rosalind Franklin University, Advocate Condell

**"If kids are not healthy, if they're not fed, if they're worried about things at home, it decreases the likelihood that they are going to be successful in school."**

**CONSTANCE COLLINS, PH.D. DISTRICT SUPERINTENDENT**

Medical Center, Mano a Mano, and the Respiratory Health Association.

Partnerships were central to the project's success. Key stakeholders—educators, healthcare providers, and community leaders—worked together to collect data, get public input, and prioritize needs. Widespread public support helped turn the planning into reality.

"It's a great reward at the end of four years of hard work, for all of us," says Jeanne Ang, LCHD's director of primary care services. "From the beginning, the project was a true collaboration, one to increase access to care and decrease the very apparent health disparities in this community. And most of us involved today have been there from day one, including the Healthcare Foundation. They started by funding the feasibility study that enabled us to say 'yes, we can and should do this,' and now they are underwriting our operating expenses as the project gets going."

From the perspective of healthcare providers, school-based health centers just make sense. Locate the care where the kids are, and you increase the odds that it will be accessed sooner, by more people, to greater effect.

To district superintendent Constance Collins, Ph.D, who, with Nanci Radford, president of the district's board of education, played a critical role on the project advisory committee, the academic benefits are equally clear. "Our focus is academic achievement. But if kids are not in their seats, they cannot learn," she says.

On-site immunizations and physicals mean more children can start school on time and participate in activities. On-site behavioral and medical care mean more and better use of instructional time, as fewer kids are sidelined by illness in class or sent home until their parents can get them to a doctor.

"If kids are not healthy, if they're not fed, if they're worried about things at home, it decreases the likelihood that they are going to be successful in school," says Collins. "So it's our responsibility, as educators, to help them overcome those barriers.

"It's been a long time coming, but it's definitely worth the wait."

**GRANTEE**

Lake County Health Department and Community Health Center Primary Care Services

**PROJECT AND FUNDING**

Round Lake High School Health and Wellness Center  
FY2014 \$80,000



the number of students at Round Lake High School with access to care for whatever ails them

A



B

“Do more with less” is the mantra of every nonprofit. But for Nicasa, which had been providing high-quality substance abuse prevention and treatment services in Lake County for nearly 50 years, the mantra just wasn’t enough.

State and federal funding—long the bedrock of the agency’s sustainability plan—was steadily decreasing. Finding mental health counseling for the estimated 20 to 50 percent of clients who need it was becoming increasingly difficult. Yet providing that counseling at Nicasa would be expensive, requiring new staff and training. And while reimbursement by public or private insurance would mean new revenues, it would also demand new accreditation and a new electronic health records system, not to mention new computers and in-house IT expertise.

“As an agency, we were working hard at lots and lots of things, but it felt like we were chasing our tails,” says Nicasa CEO Bruce Johnson. “I thought, ‘I need help. I can’t do this alone.’”

Ironically, the first help to arrive was an invitation from the Healthcare Foundation to do a little more work: complete a self-assessment of everything from leadership and operations to fund development

planning. The exercise pointed to two priority areas, diversification of funding and board governance.

“I’ve got a fabulous board—very intelligent, diverse people, with lots of experience and a tremendous skill set—but I wasn’t using them effectively,” says Johnson.

With a grant from the Foundation, Johnson began by tackling fund development, hiring a consultant to help hammer out a strategic plan for decreasing Nicasa’s reliance on public money. And with a 9-month training/workshop called Double Boost, offered by the Donor’s Forum



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BRUCE JOHNSON NICASA CEO

and the Foundation, Johnson and three key board members—president Jan Zobus, Valery Gallagher, and Ali O’Brien—set out to remake and recharge the energies of a neglected resource: the Nicasa board of directors.

“Double Boost was fantastic,” says O’Brien, who now chairs the resource development committee, one of three newly formed functional committees. (Fellow Double Booster Valery Gallagher chairs another, the board governance committee.)

“In the larger group of organizations, we’d discuss best practices for non-profits on specific topics, like fundraising and governance. And in between, we had organizational coaching sessions, specific to us. Melissa Davis, who ran the sessions, would say, ‘Okay, Nicasa is at point A. How are you going to get to point B? Let’s talk about the theory and how you’re actually going to apply it.’”

For his part, Johnson made sure that what they were learning at Double Boost made it back to the entire board and got implemented, ASAP. “I give my board a lot of credit,” he says. “It’s moving quantum leaps ahead.”

“It’s been a seismic shift. People were hungry to make a difference, and we hadn’t felt that collectively as a board before.” ALI O’BRIEN BOARD MEMBER

Those leaps include adopting a new governance structure, forming those functional committees, and passing a board giving statement along with new bylaws, including term limits.

“The culture of the board has changed,” Johnson says, “I feel like they are more available to me, that I can count on even more of their time and attention. I can go to them and get their expertise. They help me look at the bigger picture and see possible solutions.”

The board’s role has changed, as well, which has been paving the way for the agency to provide more and better care in the community. Board members have begun laying the groundwork for more effective fundraising, holding informational

events in their homes and using their personal and professional networks to increase the agency’s visibility county wide. And after weighing the risks and potential benefits, the board approved an expansion of Nicasa’s portfolio of services.

In September 2013, with start-up funding from the Healthcare Foundation, the agency began offering that much-needed mental health counseling to its clients. The following year, it began accepting outside referrals for those services, effectively doubling the number of affordable counseling options that exist in an area with high need and extremely limited resources. As of March 2014, Nicasa’s mental health counseling team had seen 78 clients. New data-tracking software is online, and accreditation is in the works.

“Making resource and expenditure decisions about an uncertain future isn’t easy,” says O’Brien. “But what’s great about this board now is that everyone seems to grasp their obligation to be informed and involved, whether it’s to ensure the financial health of the organization or to take on a challenging decision.

“It’s been a seismic shift. People were hungry to make a difference, and we hadn’t felt that collectively as a board before.”

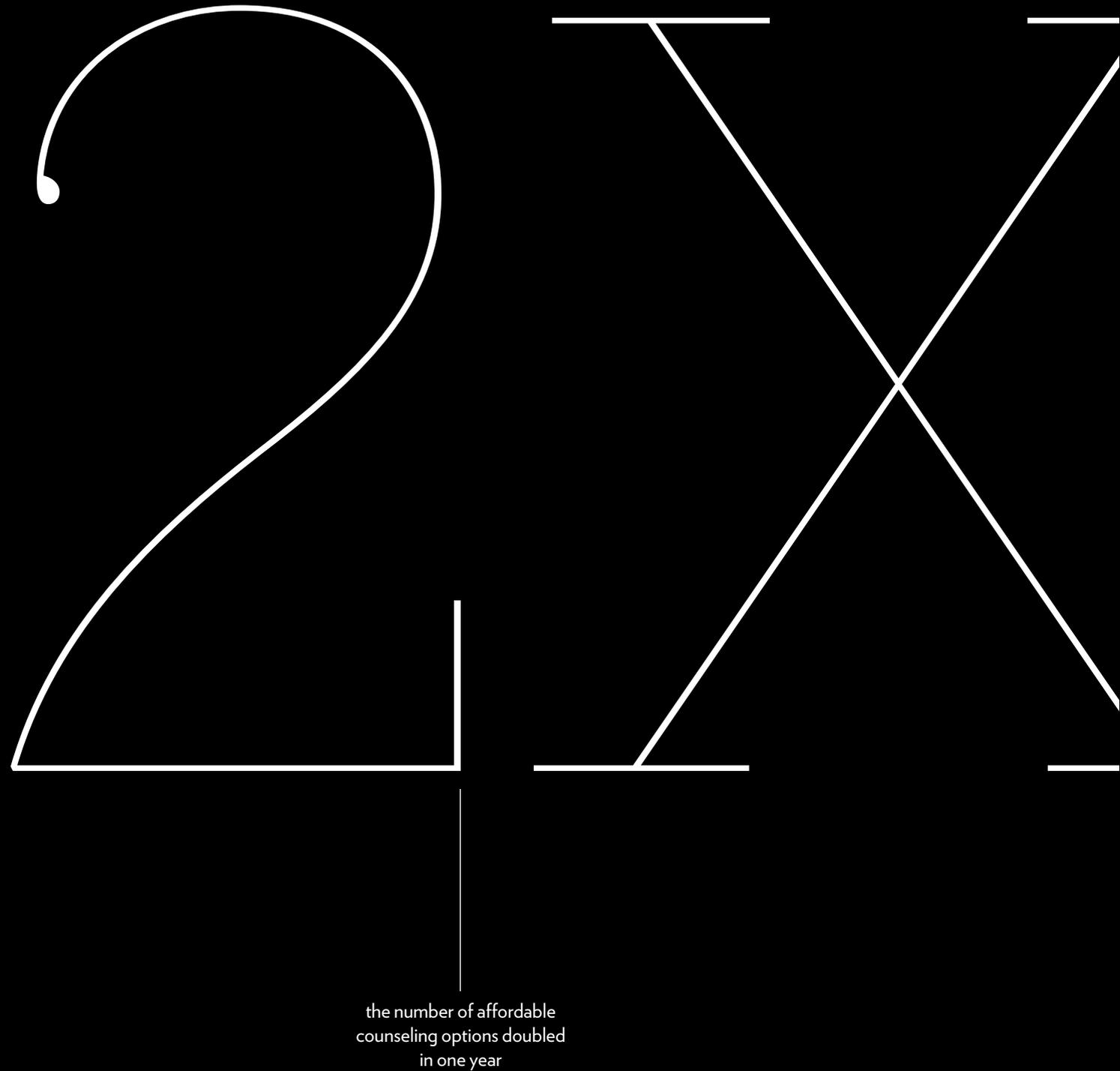
**GRANTEE**

Nicasa

**PROJECT AND FUNDING**

Capacity Development  
FY 2013 \$20,000

Mental Health Services  
FY 2013 \$100,000  
FY 2014 \$85,000



“As far back as I can remember, I knew I wanted to be a nurse.”

For LaShuan Davis, who graduated in May from College of Lake County (CLC) and now works as an acute dialysis registered nurse for DaVita Healthcare at Advocate Condell Medical Center and Captain James A. Lovell Federal Health Care Center, it was a dream that could just as easily have never come true.

First there was a baby and the need to find a job. Once in the workforce and anxious to improve her earning power, a degree in business looked like a smarter choice. But her heart was never in it, and eventually, the effort of juggling motherhood, work, and school took its toll, and she stopped taking classes all together.

The combination of tight finances, family commitments, and full- or part-time work derail many students’ plans to pursue a career in healthcare. And that’s bad news for northern Lake County, particularly in areas where residents who are newly eligible for insurance are seeking care. Waukegan, where Davis grew up, and Zion, where she currently lives, are federally designated as both healthcare provider shortage areas and medically underserved population areas.

“We are talking about two kinds of inequity,” says Christine M. López, M.Ed., executive director of community relations and stewardship at Rosalind Franklin University. “If we do not have enough providers of the same cultural background as the population, there is not only inequality of access to care, there is inequality of access to education. We’re working to address both.”

The vehicle for that work is the Educational Innovation Cluster: Health Professions Education Consortium, led by the university and comprising a total of nine local educational institutions—including College of Lake County—and three workforce development agencies. In May 2013 the consortium published a detailed healthcare industry and workforce analysis, the first step in its drive to increase the number of healthcare professionals in the county.

The report, funded by a grant from the Healthcare Foundation, examines three key factors: regional healthcare needs, existing educational programs, and workforce development. It pinpoints the occupations currently in short supply or likely to become so, and it includes hard data on employment, earnings, staffing patterns, and occupational characteristics. As important, it scans existing post-secondary healthcare education programs and evaluates the competencies that various healthcare occupations require.

“We are developing agreements that will make a seamless pipeline for students who matriculate through different institutions.” CHRISTINE M. LÓPEZ, M.ED., EXECUTIVE DIRECTOR OF COMMUNITY RELATIONS AND STEWARDSHIP AT ROSALIND FRANKLIN UNIVERSITY

the number of  
local educational institutions  
addressing inequality  
in access to  
care and education

Building on this data, the consortium is now working to develop strategies and best practices that will accomplish its goal: to turn regional need into regional employment opportunity for traditional and nontraditional students alike.

“The aim is to get students into these career paths more quickly and with less indebtedness,” says López. “Schools are sitting down together and writing joint curricula,

“This was my dream. And I wanted to be able to say to my children, ‘You know what? You can do whatever you set your mind to. It may not be easy, but you can do it.’” LASHUAN DAVIS REGISTERED NURSE

giving students earlier work exposure through internships, looking at stackable credentials and multiple points of entry. We are developing agreements that will make a seamless pipeline for students who matriculate through different institutions.”

System-wide modifications like these are essential to students’ success, as LaShuan Davis’s experience shows.

“I was very fortunate,” says the 38-year-old mother of two. “From day one, CLC made sure that we knew what opportunities were available to us and what schools they were partnering with. They would have schools come in and talk to us about what was available out there, what classes we needed as prerequisites, and which of those classes we could take at CLC versus at the university for four times the amount.”

Earning an associate’s degree first makes sense for many adult students, and not just from the perspective of total program cost. Those who don’t finish a four-year program or have to interrupt their studies at any point are left with nothing to show for their effort, no interim credential that might improve their earnings capacity or keep them on a career trajectory.

With an associate’s in nursing, Davis says, “I can apply what I’ve already learned, and I can work and make money while I continue to learn.

“Being able to go to school and get this degree means so much for my family, financially. It really is a huge increase in salary. But it also means so much to me,” she adds. “This was my dream. And I wanted to be able to say to my children, ‘You know what? You can do whatever you set your mind to. It may not be easy, but you can do it.’”

A practical academic program, a Foundation-funded scholarship, and a long-awaited career in nursing have all fueled Davis’s determination to go further. In August, she began working on her bachelor’s degree.

“After I finish this degree,” she says, “I plan to continue. My ultimate goal is to be a nurse practitioner, working in my community. There are so many disparities in this area, so many people that are disadvantaged because of who they are and where they live.”

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#### GRANTEE

Health Professions Education Consortium

Rosalind Franklin University of Medicine and Science,  
lead and fiscal agency

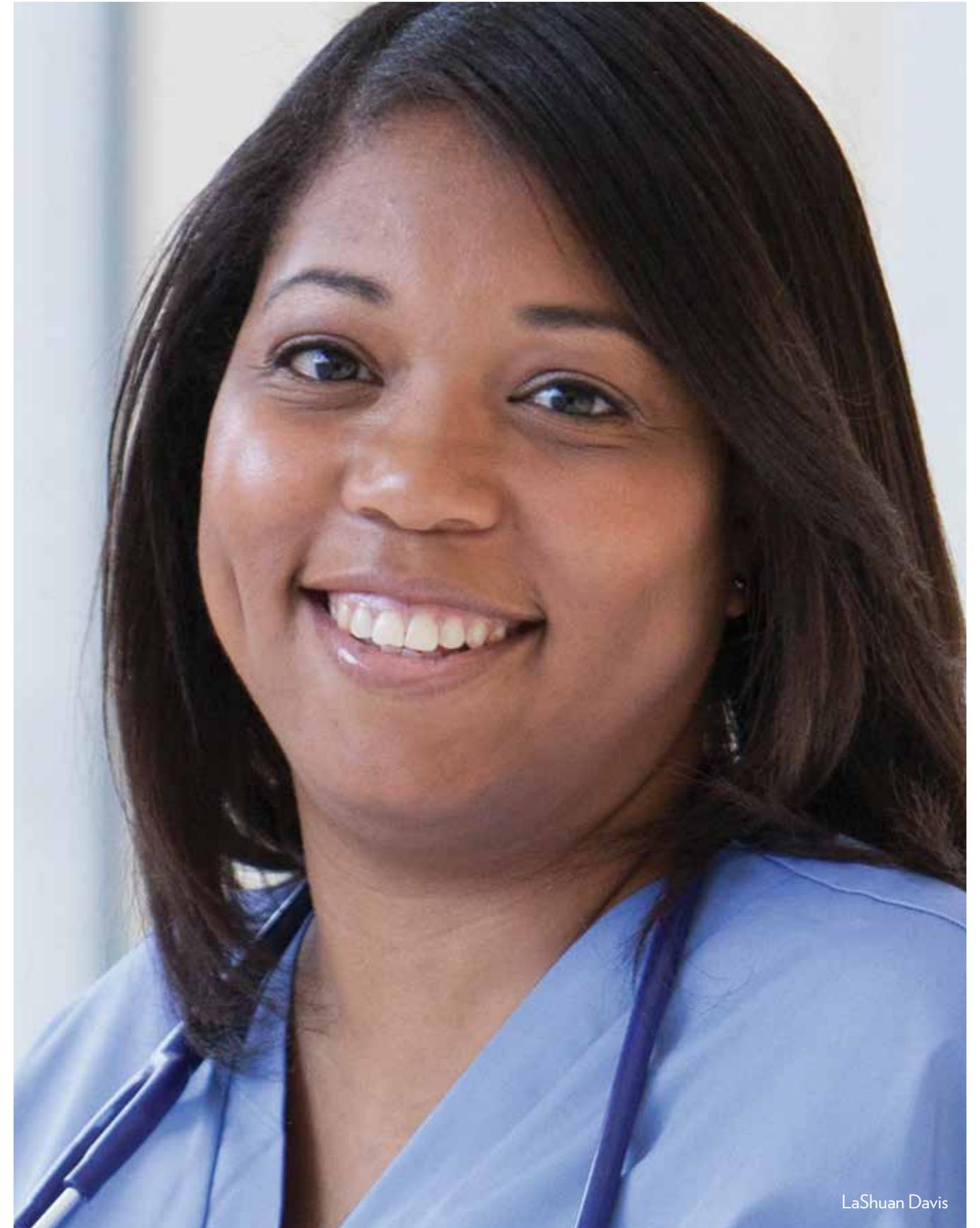
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#### PROJECT AND FUNDING

Innovation Cluster

FY 2013 \$45,000

FY 2014 \$20,000



LaShuan Davis



Marta Farias and her daughter Michelle Celis

3  
the number of  
health and human service  
organizations connected  
by the Alliance  
for Human Services

Marta Farias and her daughter were overweight. Unhappy with the extra pounds and worried about the implications of a family history of diabetes for her child, she signed up for Building Bridges at Waukegan Public Library. Today, Farias has changed her family's eating habits and lost 25 pounds. She has also become a volunteer *promotora* for Building Bridges, spreading the word about the four-week health education program to neighbors and friends.

Doña Alicia suffers from carpal tunnel in her wrists and arthritis in her hands, the legacy of a lifetime of factory work. At Building Bridges, she learned a few things she could do at home to increase her range of motion and relieve the pain, from a doctor who spoke Spanish and understood that sometimes an operation or prescription medication is out of reach. Grateful for the help and enthusiastic about her experience, she, like Marta, has become a *promotora*.

Both women are beneficiaries of the Alliance for Human Services, a two-year old network that connects 35 Lake County health and human services programs to each other and,

as in the case of Building Bridges, to funding support for projects that span multiple agencies.

"Our focus is really on making the Lake County community a healthier place, where there's greater communication and greater collaboration in the health and human services arena," says Alliance CEO John Shustitzky, Ph.D. "Our first project together was Building Bridges through Navigation of Health Services, which we launched in 2012 with a grant from the Healthcare Foundation."



"People would say, 'Well, how do I make an appointment? How do I fill out all those forms they give me?'" CARMEN PATLAN WAUKEGAN PUBLIC LIBRARY COMMUNITY ENGAGEMENT AND SPANISH LITERACY MANAGER

With a history of offering innovative programming, the Waukegan Public Library was chosen to lead the work. “They were already doing outreach; it was a natural extension to turn to them to help us recruit, train, and launch health ambassadors to take the curriculum out into the neighborhoods,” says Shustitzky.

Carmen Patlan, the library’s community engagement and Spanish literacy manager, had already noted

“If I had not come to Bridges, I would be dead right now. It helped me be brave and speak up on my own, and to learn what my options were.” TERESA COMMUNITY MEMBER

the need in the largely Latino community the library serves. “In our conversational ESL program, one of the subjects that consistently came up was health,” she says.

“People would say, ‘Well, how do I make an appointment? How do I fill out all those forms they give me?’ So we piloted a program that we call functional health literacy, trying to help people understand what they need to know to take care of themselves and use healthcare services.”

With the new funding, that pilot became the four-week Building Bridges program, and the *promotoras* that Patlan had been recruiting and training began the work of talking to the community.

“In the first week of Building Bridges, we cover a few basics,” says Patlan, “like making an appointment, filling out medical forms, talking with a doctor, and how and when to use 911 for emergencies.”

In the second week, participants learn what they can do to improve their health through diet and exercise. Week three features guest speakers—experts from Alliance members such as Lake County Health Department, Rosalind Franklin University, or Erie Family/HealthReach—who address specific topics ranging from asthma and diabetes to heart disease and breast cancer. During the final session, participants learn about the importance of having a medical home and

delve into the specifics of accessing primary care. After an explanation of insurance eligibility and the Affordable Care Act, they are referred to primary care providers.

Pre- and post-program testing measures participants’ knowledge; basic demographic information entered in ServicePoint enables staff to follow-up with and support those who have gone through the program and facilitates effective referrals.

“All ages and all sexes participate,” says Patlan of the classes. “It’s a welcoming environment, and students feel comfortable.” Still, she acknowledges, it’s not easy to engage people to take advantage of the resource. In 2014, just 280 students completed the class, compared to more than 1,000 for ESL.

“In our community, families are in economic survival mode, so health is definitely not a priority. That’s why the *promotoras* are so important. They’re out there every day, they see families and can say, for example, ‘Did you know this is how diabetes affects us Latinos?’”

For the coming year, Patlan has set her team a goal of 440 participants, and the library has applied directly to the Foundation for continued program support.

“Getting this kind of information out there is just so important,” Patlan says. “It’s an uphill battle sometimes, but I think about people like Teresa, who was struggling with breast cancer. She’s here in this country alone, and she told me, ‘If I had not come to this program, I would be dead right now. It helped me be brave and speak up on my own, and to learn what my options were.’”

**GRANTEE**

The Alliance for Human Services

**PROJECT AND FUNDING**

Building Bridges through Navigation of Health Services  
FY 2013 \$40,000  
FY 2014 \$45,000



goal for the number of program participants in 2015



Alicia Benitez

## BOARD MEMBERS AND STAFF

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At the core of our grant making are a few simple tenets. We encourage program designs based on best practices—models that not only provide healthcare but that gather data to measure program effectiveness and point the way to improvement. We believe in collaboration and promote strategic partnerships with public and private organizations, including public health departments, community organizations, and educational and healthcare institutions. We value linguistically and culturally appropriate models of service. We seek sound knowledge and information to improve access to health services.

We support programs and organizations that target uninsured or underinsured individuals and families, and underserved neighborhoods and communities of Antioch, Fox Lake, Grayslake—Third Lake, Great Lakes, Gurnee, Lake Villa—Lindenhurst, North Chicago, Round Lake, Wadsworth, Waukegan, and Zion.

Details regarding these and other grants can be found on our website, [www.hfnlc.org](http://www.hfnlc.org).

## GRANTEES

Advocate Charitable Foundation  
The Alliance for Human Services  
American Cancer Society/Illinois Division  
Antioch Area Healthcare Accessibility Alliance  
Arden Shore Children & Family Services  
Catholic Charities of the Archdiocese of Chicago  
ChildServ  
Christ Episcopal Church  
College of Lake County  
Community Health Workers Partnership of Lake County  
Community Resources for Education & Wellness  
Community Youth Network  
Dominican University  
Donors Forum  
Erie Family Health Center  
EverThrive Illinois  
Family First Center of Lake County  
Family Service: Prevention, Education and Counseling  
Health & Disability Advocates  
Health Professions Education Consortium  
HealthConnect One  
HealthReach  
Heartland Health Outreach  
Illinois Coalition for Immigrant & Refugee Rights  
Illinois State Dental Society Foundation  
JourneyCare Foundation  
Lake County Coalition for the Homeless

Lake County Crisis Center (also known as A Safe Place)  
Lake County Health Department and Community Health Center  
Lake County Mental Health Coalition  
Loyola University Chicago  
Mano a Mano Family Resource Center  
Mobile C.A.R.E. Foundation  
Most Blessed Trinity Parish  
Nicasa  
NorthPointe Resources  
OMNI Youth Services  
One Hope United - Northern Region  
PADS Lake County  
Pediatric AIDS Chicago Prevention Initiative  
Respiratory Health Association  
Rosalind Franklin University Health System  
Rosalind Franklin University of Medicine & Science  
The Josselyn Center  
Uhlich Children's Advantage Network  
United Way of Lake County  
University of Illinois at Chicago  
Veterans Assistance Commission of Lake County  
Waukegan Township  
YouthBuild Lake County  
YWCA Lake County  
Zacharias Sexual Abuse Center  
Zion Benton Children's Service

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