



HFNLC

# Celebrating 10 years

HEALTHCARE FOUNDATION OF NORTHERN LAKE COUNTY | 2014-16 REPORT TO THE COMMUNITY



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A foundation is a curious enterprise. The activity that defines us in the public eye—writing checks—is actually just a final task, the last in a long list of commitments that together comprise our work.

At the Healthcare Foundation of Northern Lake County, those commitments can be summarized as follows:

**EXPLORE** our community’s needs and resources deeply;

**ENGAGE** and learn from local stakeholders;

**IDENTIFY** potential intervention opportunities;

**ENCOURAGE** community partners to think outside the box and take informed risks;

**PROMOTE** quality and performance improvement in the organizations and programs we fund;

**EMPHASIZE** the importance of learning from individual and collective experiences and sharing those experiences to contribute to best practices;

**FOCUS** on building sustainable organizations and replicable programs;

**ADAPT** our funding strategies to the changing healthcare environment;

**BALANCE** responding to immediate financial needs with a mandate to live on in perpetuity; and

**CELEBRATE** the great work of our grantees.

Our goal is to improve access to healthcare in northern Lake County, and we believe that fulfilling each of these responsibilities is necessary to achieving that goal. Yet we know it is not sufficient. Our success, like the success of any foundation, ultimately depends on others.


In our case, those others are the many organizations, large and small, that actually do the work of improving health and healthcare access in the communities we serve.

Over the last 10 years, we have come to know these organizations well and to respect them deeply. They have dedicated themselves to solving complex problems with multiple determinants in an environment that is constantly changing. It’s work that demands more than effort and compassion. It demands knowledge, creative thinking, a collaborative spirit, and a sound business model.

Their work leads to better health outcomes for the people of Lake County. And it makes our work—investing the Foundation’s resources for maximum return—possible. We are both honored and deeply grateful to share in their success.

This year marks the Foundation’s 10th anniversary. In the pages of this report, we celebrate 10 years of progress, acknowledge 10 outstanding community partners, and—through the lens of our most recent community needs assessment—propose a plan of work for the decade ahead.

That plan will undoubtedly change with circumstance—thoughtful, responsive investment requires it. But one thing will not change: our ongoing commitment to our community and to our partners. We are proud to be a part of both.



**WILLIAM ENSING**  
Chairman of the Board of Directors



**ERNEST VASSEUR**  
Executive Director







Established—2006



Grantees to date—74



Communities targeted—12



Population served—373,763



Patients/clients seen—178,371



Dollars invested—\$16,000,000





## 10 years of Progress

In the ongoing struggle to make healthcare work in communities that face multiple challenges, it's easy to lose sight of progress. For this biennial report, we permitted ourselves the luxury of the 30,000-foot view, and what we see is encouraging.

By any measure, the many organizations working to improve healthcare access and outcomes in northern Lake County are succeeding.

## The ACA: Halving the number of uninsured

During the bumpy rollout of the Affordable Care Act, Lake County navigators helping clients sign up online ran into a problem. It happened so often, it got a name: "Yellow Screen." It stopped registrations dead. National administrators thought it was a local issue and gave it another name: "the Illinois problem."

They were wrong, and thanks to local navigators' persistent alerts, a national problem got fixed, according to Kathy Waligora, director of the Health Reform Initiative. The initiative, operated by EverThrive, provided expertise on the ACA and the enrollment process, as well as ongoing technical assistance to navigators fielded by such agencies as Lake County Health Department, Mano a Mano, Nicasa

Behavioral Health Services, and the Waukegan Public Library. "The navigators became these incredible experts," Waligora says. "We were able to identify a host of barriers, a host of challenges, and we were able to jump on it."

The navigators came through, signing up more than 27,000 people in northern Lake County alone. "Lake County was one of the areas where we had near 100 percent enrollment in the Medicaid-eligible population," says Waligora.





# Jail diversion: Getting the mentally ill the treatment they need

People with serious mental illnesses don't belong in jail, where treatment is frequently inadequate and far more expensive than it need be. Worse, with inadequate treatment, the mentally ill often end up cycling in and out of jail, driving up both healthcare and law enforcement costs while doing little to improve public safety.

With a grant from the Foundation, the Lake County Health Department is now studying the feasibility of diverting people with severe mental health illnesses or addiction away from jail and into treatment.

Jail diversion programs, as they are called, have become part of the national criminal justice dialogue, says Mark Pfister, interim executive director of the Lake County Health

Department and Community Health Center. Typically, such programs train law enforcement officers to identify when the better course of action would be to take the person to a mental health crisis clinic instead of the jail. Successful diversion relies on information sharing among primary care providers, those caring for mental health, and law enforcement to better treat patients who often fall through the cracks.

"The way it stands now, a provider might not know a patient is in jail until they're missing appointments," says Pfister. Yet privacy protections and other legal issues make the interagency cooperation required to successfully implement a jail diversion program difficult. "This is a multi-faceted problem," says Pfister. "Unless we develop a sustainable solution, once the initial enthusiasm departs, we'll be back where we started."

# Erie HealthReach: Expanding medical and dental care

When Erie HealthReach Waukegan Health Center opened its doors in July 2014, it was the culmination of a multi-year effort and the beginning of another, even more vital.

"Our focus is on providing preventative care," says Melissa Hilton, vice president of development and communications at Erie. "We're trying to reduce the disparities that exist in our communities. For those most in need, we want to give them very high quality care."

The big, beautiful center was born of a partnership between HealthReach, a free clinic that served uninsured adults, Northwestern Lake Forest Hospital, and Erie Family Health Center after the Affordable Care Act turned the healthcare industry on its head.

In its first six months, the center saw nearly 3,000 patients. The number rose to more than 5,000 the following year. When fully operational, Erie HealthReach expects to serve 10,000 individuals with 40,000 medical and dental visits annually. Erie benefited immensely from the support of the Foundation, Hilton says. On top of the financial support that, among other things, let Erie buy key equipment so it could open the doors on time, the Foundation played a big role introducing the Erie family to the Lake County community.

Since opening the Waukegan clinic, Erie has found itself filling a new role as one of the biggest healthcare providers in the area.

"That is unique for us, and I think we definitely realize that gives us an opportunity and a responsibility for planning what future role we should play in the county," says Hilton. "We know there's an enormous need."







## Round Lake High School: Putting care where the kids are

Placing a health clinic inside a high school makes sense. By bringing the treatment to the prospective patients, it removes one more barrier to getting care—a high one for working parents and dependent children—while minimizing lost class time.

With the help of a federal grant, plus Foundation and other funding, the Lake County Health Department opened the county’s first school-based health center at Round Lake High School in October 2014. Primary care services are provided by the Health Department, while Nicasa provides behavioral health services and Mano a Mano handles outreach.

All of the school’s roughly 2,300 students can use the facility with parental permission, necessary except in the case of specific medical treatments allowed by the Consent by Minors to Medical Procedures Act. In its first year, the center had 568 visits. This school year, the center had already handled 437 visits by mid September.

Mark Pfister, interim executive director of the Lake County Health Department and Community Health Center, says that based on an assessment of community needs, there’s still a gap between the number of students who need the services and the number actually using the center.

“One of the things we’re working on is to get the consent-for-treatment forms included in students’ early registration packet,” says Pfister. “The key is education. It all comes down to the parents.”



# The Mental Health Collaborative: Launching coordinated care

Having to get treatment for multiple conditions from multiple providers at multiple locations isn't easy for anyone who is seriously ill. For those whose illness includes substance abuse and mental health issues, it's a disaster.

The Mental Health Collaborative was formed to avert that disaster.

Collaborative partners—including Arden Shore Child and Family Services, Nicasa Behavioral Health Services, YWCA, Lake County Health Department, and Lake County Housing Authority—share treatment information, jointly follow clients' progress, and work together to spot potential relapses and quickly get clients back on track.

"With this type of client, it is easy for them to get lost in the system," says Dora Maya, Ph.D., president and CEO of Arden Shore. "With the collaboration, we can wrap our services around the client to ensure they have a chance at success."

With persistent effort and steady funding from the Foundation, the size of the collaboration has doubled in five years; its services now include substance abuse and addiction counseling, psychiatric care, housing, job training, and other life skills.

"We have been able to take a focused look and make a real difference," says Maya. "One person at a time."

Arden Shore Child and Family Services


Nicasa Behavioral Health Services

YWCA

Lake County Health Department

Lake County Housing Authority





## Nicasa's mental health expansion: Spotting a critical gap in care— and taking steps to fill it

A 2011 Lake County Leadership Task Force study of mental health services in northern Lake County confirmed what the people running the substance abuse programs at Nicasa Behavioral Health Services saw every day. The outlook for getting their clients necessary mental health counseling was bleak.

"The western part of county was almost what I would call a desert for mental health services, especially culturally competent mental health services," says Bruce Johnson, CEO of Nicasa.

Nicasa had talked for years about expanding its services to include mental health counseling, Johnson says, but the study's data hammered home the need. With a grant from HFNLC, Nicasa set about bringing water to that desert.

The response has been overwhelming. When Nicasa launched its mental health services in September 2013, its goal was to serve 75 youth and adults. They served 300 that first year and 500 more in the past year.

"What is particularly gratifying to us is the number of minorities that now have access to quality, affordable mental health services," says Lorrie George-Baskin, Nicasa's director of development. "Last year, Latinos made up 40 percent of those seeking treatment, and African Americans made up 21 percent."



## Community Health Workers: Adopting national models to improve local health

Imagine what it must be like for a recent immigrant trying to see a doctor for herself or her children: cultural and language barriers, financial and legal concerns, and byzantine healthcare and insurance systems that intimidate even native speakers.

"Trust is everything," says Megan McKenna, executive director of Mano a Mano Family Resource Center. The first step in helping that woman and others like her to access the healthcare they need is being part of the community and building relationships. Community health workers do just that. Recruited from the communities they serve, they are trained to provide peer-to-peer counseling, improve health literacy, and help a significantly underserved population navigate the system.

It's working: Such programs at Mano a Mano and the Waukegan Public Library—funded by the HFNLC—have already helped more than 4,000 people. With nearly one in five residents in Lake County facing cultural, linguistic, and access barriers, the success of the program is welcome.

But McKenna sees even greater potential. She envisions the community health workers, in partnership with the Lake County Health Department, playing a patient advocacy role, "fully integrated into the medical team, just like a nurse or a physician's assistant" to provide moral support and help ensure continuity of care, a common problem.



## Research: Building knowledge and consensus

Information gathering can be expensive and tedious, but it pays off. The hundreds of hours the Foundation has spent in meetings with stakeholders, and the thousands of dollars it has invested in research to identify community needs, are helping build a knowledge network that is powering significant improvements in access to care.

“We have a lot of good people doing good work, but they can’t always tell if they’re moving the needle,” says Ernest Vasseur, the Foundation’s executive director. “They don’t always know how prevalent a particular problem is, or what resources actually exist to address it.”

By providing both hard data and regular opportunities for organizations to meet and share information, the Foundation aims to build a basis for better—and more collaborative—decision making across the board.

Over ten years, the return on those investments has been remarkable. Reviewing the Foundation-funded behavioral healthcare needs assessment of 2014, for example, a group of community organizations were able to identify four priorities they thought were actionable. “That original study became a rallying call,” Vasseur says. “Groups could say, ‘We can work together on these.’”

## The theory of change: Improving decision making

Increase access to healthcare: Four simple words express the mission of the Healthcare Foundation of Northern Lake County. But hewing to that mission in a complex environment where outsized needs butt up against limited resources isn’t so clear-cut.

“How do we know that giving a grant is in the end achieving the mission?” says Foundation program officer Angela Baran. “Are there other areas we should be funding? Or is one of the areas we are funding not effective?”

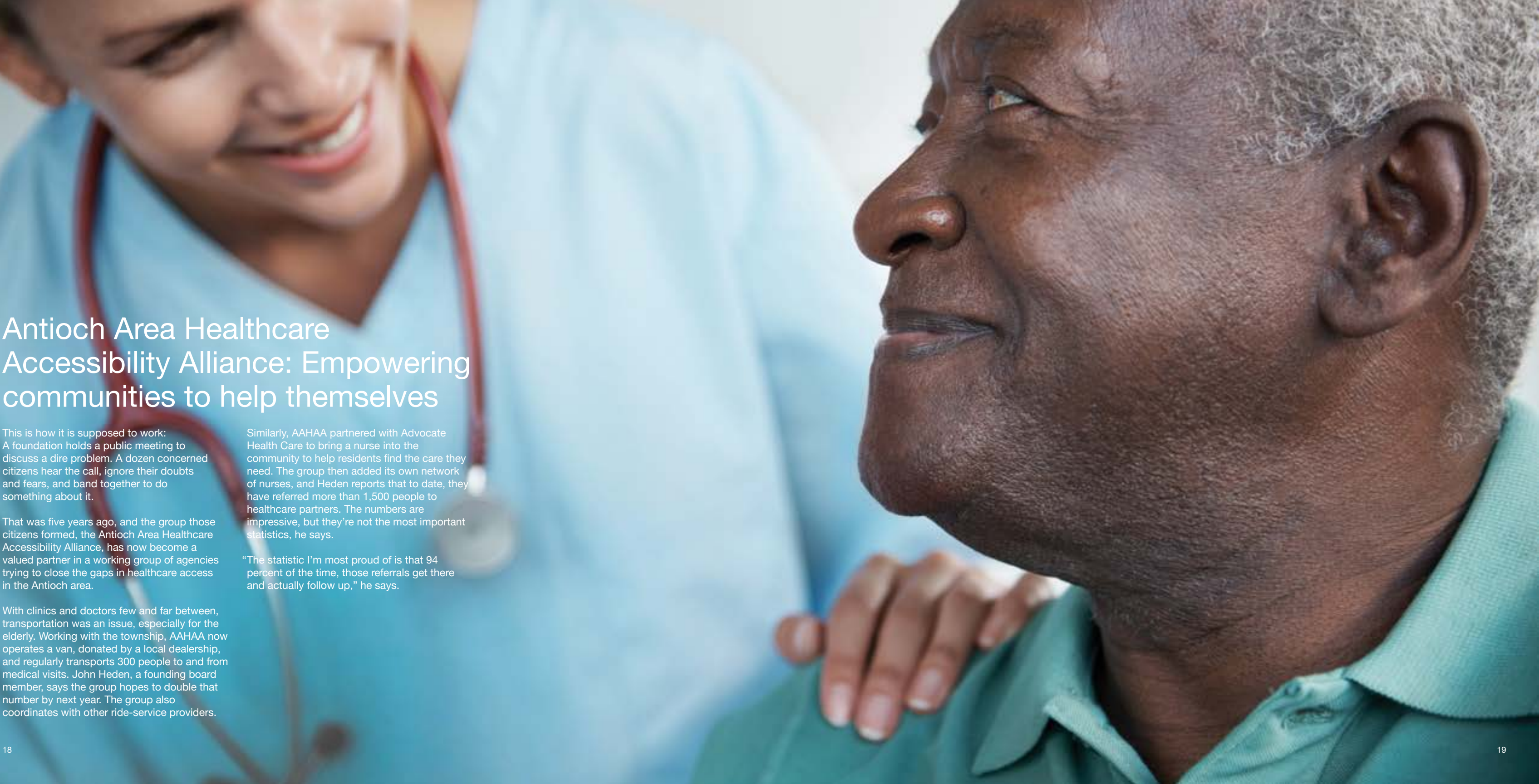
In 2014, those questions led the Foundation to develop a theory of change, a decision-making process that maps grantmaking to desired outcomes and helps evaluate progress. The model was developed with the help of the Pratt Richards Group and in consultation with grantees.

“The theory of change helps us be able to say enthusiastically yes to some things and absolutely no to other things,” says Ernest Vasseur, executive director of the Foundation.

The process also helped the Foundation better define a key funding strategy it now regularly employs: capacity building. On paper, paying for improvements to back-office functions such as board governance or development doesn’t increase healthcare access. In practice, these grants can deliver a big impact in how much care is provided.

“I can’t tell you how important it was,” says Nicasa Behavioral Health Services CEO Bruce Johnson, who used capacity building funds to extend his organization’s reach and impact. “Without a doubt, the Foundation put us in a position and enabled us to do that.”





# Antioch Area Healthcare Accessibility Alliance: Empowering communities to help themselves

This is how it is supposed to work: A foundation holds a public meeting to discuss a dire problem. A dozen concerned citizens hear the call, ignore their doubts and fears, and band together to do something about it.

That was five years ago, and the group those citizens formed, the Antioch Area Healthcare Accessibility Alliance, has now become a valued partner in a working group of agencies trying to close the gaps in healthcare access in the Antioch area.

With clinics and doctors few and far between, transportation was an issue, especially for the elderly. Working with the township, AAHAA now operates a van, donated by a local dealership, and regularly transports 300 people to and from medical visits. John Heden, a founding board member, says the group hopes to double that number by next year. The group also coordinates with other ride-service providers.

Similarly, AAHAA partnered with Advocate Health Care to bring a nurse into the community to help residents find the care they need. The group then added its own network of nurses, and Heden reports that to date, they have referred more than 1,500 people to healthcare partners. The numbers are impressive, but they're not the most important statistics, he says.

“The statistic I’m most proud of is that 94 percent of the time, those referrals get there and actually follow up,” he says.



# 10 Partners making a difference

In September 2016, the Foundation announced the recipients of its first Excellence in Service Awards.

The 2016 awards honor locally based organizations that are actively building both the capacity of the healthcare system of northern Lake County and the effectiveness of their programs.



**NICASA BEHAVIORAL HEALTH SERVICES  
ROUND LAKE**

“With the state budget situation, this last year was probably one of the most challenging for agencies like Nicasa. In our case, we faced not being paid for more than a year for contracted services.

“That has a huge impact. But here’s the thing: we were able to overcome it. Our board was positioned to look at the environment and respond. Our staff was positioned, resilient, and strengthened. We certainly were bleeding, but we were able to work together to meet the challenges. In one instance, we were even able to exceed our development goal by nearly three times the amount.

“That wouldn’t have happened without the preparedness that the Foundation has helped us to achieve. We’ve also exceeded expectations in terms of extending services to certain underserved populations—the Latino community, the LGBTQ community, the veteran community. We’re reaching people that ordinarily would not try to access mental health services.

“The Foundation helped us build something, and the dividends that are paying off are going to human lives—individuals and families. People literally say to us, ‘You saved my marriage,’ ‘You saved my family,’ ‘You saved my life.’ I think those thanks need to go to the Healthcare Foundation, as well; they enabled so much of this to happen.”

—BRUCE N. JOHNSON, CEO



**COMMUNITY YOUTH NETWORK  
GRAYSLAKE**

“We’re trying to reach more underserved people in northern Lake County, people who have transportation or language barriers, or who are uninsured or underinsured. Last year, we saw more than 350 new clients, and 290 of them were youth.

“Kids are at the mercy of their parents. If those parents are themselves dysfunctional, or don’t see any benefit to counseling, or are just stretched too thin, school-based services can ensure kids get the counseling they need.

“We’d been sending therapists to schools on an informal basis for the last couple of years. Then we applied for a grant from the Healthcare Foundation of Northern Lake County to increase services. Last year we were in Waukegan, North Chicago, and Grayslake Central; this year we’re going to be in Antioch, as well. I’m trying to put a therapist in every school in those areas at least one day a week. The demand is very high.

“Angela Baran and I are co-chairs of the school-based behavioral health subcommittee of the Lake County Community Action Plan, trying to provide services in a larger, more systemic way. These kids really need that help, and if together we can provide more of it, that would be excellent.”

—GAIL WEIL, LCSW, CADC, EXECUTIVE DIRECTOR





**ZACHARIAS SEXUAL ABUSE CENTER  
GURNEE**

“All of the Zacharias Sexual Abuse Center’s client services are free and always have been—I think we’re the only rape crisis center in Lake County Illinois that doesn’t charge. From time to time, we’ve talked about maybe asking for a minimal donation or setting up a sliding scale. In the end, we come back to our core belief: You shouldn’t have to pay for these services.

“Sexual assault is different compared to other crimes. It’s so incredibly hard to come forward at all. There’s such a stigma attached to it. There are so many barriers to people walking through that door, from their emotions to victim blaming or family and friends not believing them. For as long as we can, we want to at least remove the financial barrier to people getting the help they need.

“The funding we get from the Healthcare Foundation is critical to us as an organization; it supports essential counseling services here. But it’s also critical in another sense. In Lake County, we are the only rape crisis center. So many of us in the area provide a specialized service that would not otherwise be available. Without Foundation funding, there would be a lot of gaps in services to our community.”  
—JENNIFER YONAN, CEO

**ANTIOCH AREA HEALTHCARE ACCESSIBILITY ALLIANCE (AAHAA)  
ANTIOCH**

“When our community team first had the idea that became AAHAA, even before applying for a grant, we met with HFNLC and described what we were trying to do. They told us, ‘Your idea is definitely out of the box and a unique approach,’ but they also gave us guidance. They said, ‘Here’s how we see it, and we’re happy to help you any time.’ They listened.

“When you’re a small start-up—four people with little experience in not-for-profit development—having someone who is always there to answer whatever questions you have, whether they’re related to a grant or not, is invaluable.

“I think the unique thing about HFNLC is that while their grants are focused, they have a vision that encompasses Lake County health in total. They work to understand what you’re trying to do and your commitment. They try to match that up to their commitment to Lake County to find a way to support you. It may not always be financially but may be with advice, or with education.

“Has AAHAA made an impact in our area? Yes, we have. Are we there yet? Absolutely not. But we would not be where we are today if HFNLC had not provided the startup guidance and ongoing educational support for us. Our feeling is that regardless of our status as a grant recipient, HFNLC’s holistic view of supporting not-for-profits in Lake County assures that they are always there for us as a significant resource in our efforts to serve our community.”  
—JOHN HEDEN, FOUNDING BOARD MEMBER

**MANO A MANO FAMILY RESOURCE CENTER  
ROUND LAKE PARK**

“I’ve been a funder and also a recipient of funds, so I know both sides. I feel like with the Healthcare Foundation, we’re partners. They truly believe in and support our work, and there is a foundation of mutual respect and confidence that underscores our relationship, our communications, and our work together.

“Their strategic interests and priorities are so focused and so closely aligned with our own, and that’s rare for us, because of who we serve. At the same time, they’re very sophisticated, both operationally and in terms of their level of expertise. So while they understand our work—they get what we’re doing and why—they also offer us fresh insights and technical, evidence-based approaches. Their work pushes us to be a better organization.

“It’s easy for nonprofits to get silo-ed, internally focused. And in this environment, in Lake County, there are so few resources and so few inputs, so to speak, to the system. But as an organization, our objective is to serve the people we work for in the best, most impactful, most efficient way possible, and to do that, we need to see the big picture and connect with other organizations. We can’t afford *not* to all be on the same team, working from the same page to move all of our objectives forward. The Foundation understands that.”  
—MEGAN MCKENNA, EXECUTIVE DIRECTOR

**WAUKEGAN PUBLIC LIBRARY  
WAUKEGAN**

“We don’t create programs that people might need and then hope they come. We pay attention to the actual needs of our community, and then create the programs. Obviously there’s only so much money to go around, but if we can swing it and make a difference, we’ll do it.

“With the Affordable Care Act and providing navigation, initially I think people thought, ‘What’s the library got to do with this?’ Well, a lot of people turn to the library for information. Where else would they go? I think we signed up more people than the health department.

“Now we’re working a lot more with Rosalind Franklin University, to provide information on obesity and diabetes, and we just signed an agreement with Mano a Mano. They’re placing a social worker and navigator at the library one day a week. We’ve got the space, and about 1,000 people a day come in here, so I think it will work out well.

“The need is great in our community, and all of us are out there trying to do what we can do. Where the Foundation has really been a leader is in saying, ‘Let’s see if we can get this organized a little better,’ connecting us up and helping us better meet that need.”  
—RICHARD LEE, EXECUTIVE DIRECTOR



**YWCA LAKE COUNTY  
GURNEE**

“I was on the board for four years, and we had noticed the increased emphasis on healthcare programming. In fact, we were expecting the new CEO to incorporate ‘family’ health services into our core mission, as a permanent part of the YWCA Lake County footprint.

“Well, the newly appointed CEO happens to be me.

“What started as the Women and Girl’s Health initiative has transitioned into something much more. The Healthcare Foundation played a vital role in that. They provided the funding that enabled us to do the screenings, and inspired us to create the database that enables us to track and connect with other organizations and providers, so we can now complete the cycle. Instead of saying, ‘Okay, you have high blood pressure, you should do something,’ we can help that person take the next steps, in terms of care. We now have relationships with 16 local clinics, and we can call and get that person seen.

“When I came onboard as CEO, I attended a Foundation-sponsored fund development workshop and now, a couple staff members are attending another Foundation-sponsored workshop on human resources. I’m amazed! The Foundation doesn’t just care about community health and wellness; they also care about the overall health of your organization. They understand that overall support will allow organizations to continue to provide services for the community.”  
—**TREOPIA CANNON, PRESIDENT/CEO**



**PADS LAKE COUNTY  
WAUKEGAN**

“We used to focus exclusively on the lack of affordable housing as the cause of homelessness. That’s certainly a big one. The lack of good paying low-skilled jobs is another. But all sorts of interrelated and complex challenges contribute to homelessness, including lack of access to mental health services.

“The study the Foundation commissioned showing the gaps that exist in mental health services in the county was really eye opening, but it didn’t end there. They actually began working with providers and partners to do something about it, to find a solution. At PADS, we’ve been able to implement a program to help people access mental health services while they’re here, and then keep them well once they leave, so they don’t fall back into homelessness.

“We’ve also been able to make new connections with other organizations in the community, and that’s critical. At the most basic level, it helps us know where we can refer people. But it also lets us explore potential partnerships that increase our impact, like our partnership with Rosalind Franklin University to get some of our staff certified as mental health first aid trainers.

“There’s still a lot of work to do, obviously, but it’s been a good shift for us, and for the people we serve.”  
— **JOEL WILLIAMS, EXECUTIVE DIRECTOR**



**LAKE COUNTY HEALTH DEPARTMENT  
AND COMMUNITY HEALTH CENTER  
WAUKEGAN**

“The great success of Live Well Lake County is that we’ve been able to sustain long-term conversations about how to address health outcomes in the county, and we’ve sustained the work around identified community needs.

“The Healthcare Foundation’s executive director, Ernest, and I co-chair the steering committee, and I think it’s been effective. Our organizations tend to be like Switzerland; we’re neutral parties, so we are great conveners. And we both care about prevention. Hospitals are for when you’re sick; as a health department, we want to prevent you from having to go into the hospital.

“It helps that the Foundation has been willing to invest in what we call primary and secondary prevention: helping people make changes to their lives that contribute to wellness, and making sure people can access diagnostic care, so we can determine if they need treatment.

“A hospital may say, ‘We might be willing to invest our community-benefit dollars on a project that would keep people from coming to our emergency room for non-emergency care.’ It makes financial sense for them. But a hospital may not say, ‘We want to invest to make sure that people who need mental health services aren’t going to jail.’ The Foundation is helping with these stickier public health issues that nobody really wants to fund.”  
—**MARK PFISTER, MS, LEHP, INTERIM EXECUTIVE DIRECTOR  
AND DIRECTOR OF PREVENTION**



**A SAFE PLACE  
ZION**

“What people don’t realize is that those who have experienced domestic violence usually experience PTSD, just like veterans do. So you can provide crisis services—help in getting someone to safety, provide a place to stay, help them figure out their options—but until you address the deeper issues, that person really can’t move on. They’re stuck.

“The funding the foundation has given us enables us to provide those critical counseling services. It’s not enough to meet the entire need—we’re the only agency in Lake County dedicated to this work, and there are wait lists for many of our services—but without their funding we would need to decrease our services substantially

“Funding is a real challenge. We have to raise 50 percent of our budget. Right now I’m working on ways to generate more revenue, from turning more of our apartments into Section 8 housing to exploring and researching being certified for Medicaid. We actually submitted an application to the Foundation to fund a readiness assessment for this purpose. In this kind of environment, I really appreciate that when I have concerns or issues, I can call on the Foundation. They really care, and listen.”

— **PAT DAVENPORT, EXECUTIVE DIRECTOR**



## 10 Directions for the future

Healthcare is an ecosystem, a network of relationships and interactions among people, institutions, and processes. Change in one part of the system generates change in the others, and the greater the change, the more dramatic its effects. From 2006 to 2016, consequential changes in the area of government, technology, business, finance, and demographics have required the county's healthcare and social service providers—along with the Foundation itself—to redefine roles, rethink models, and rewrite strategies.

The Foundation's recently completed 2016 Community Needs Assessment offers a detailed picture of the current healthcare ecosystem and the needs of those who live in the 12 communities we serve.

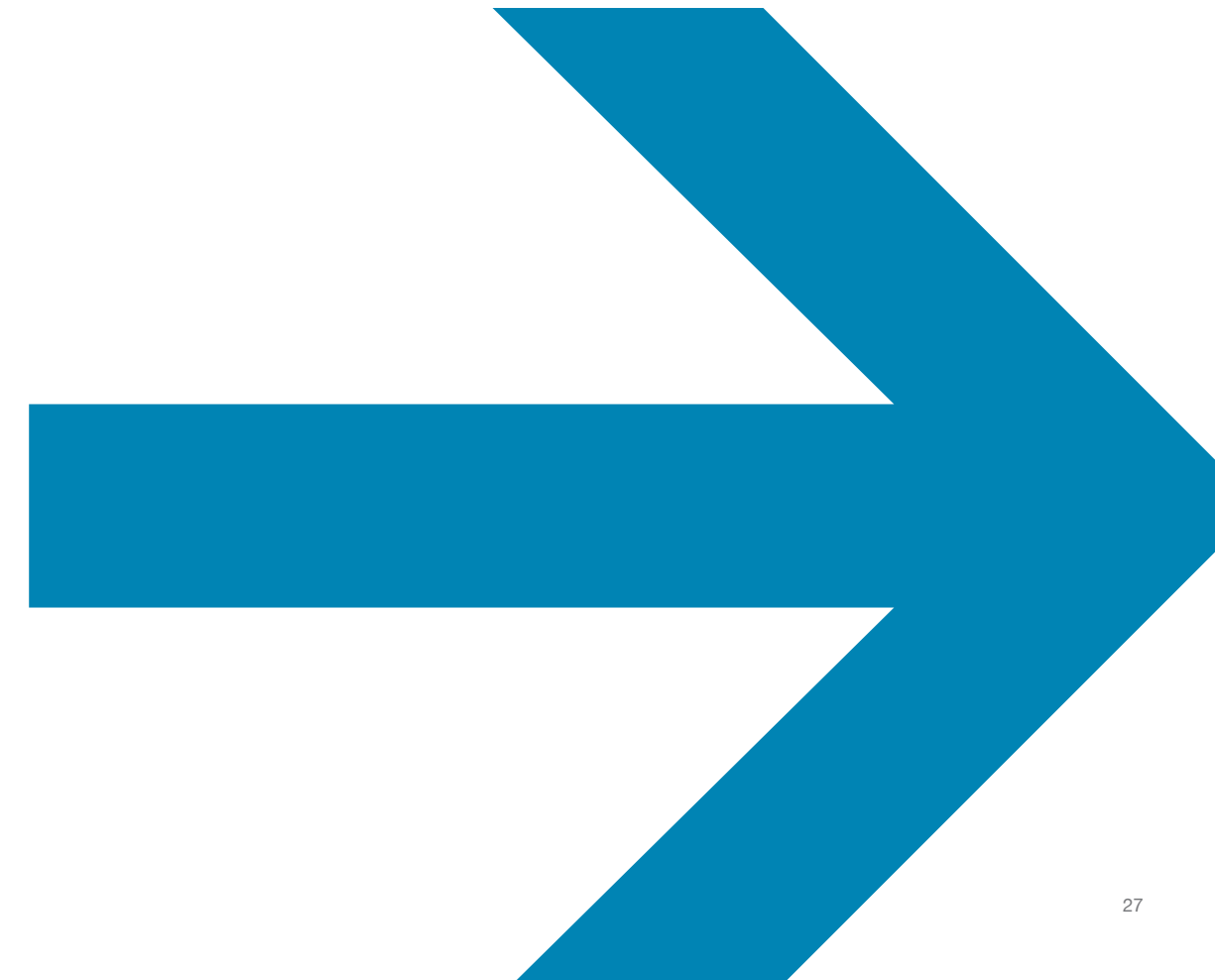
Part of that picture is created from data, facts and figures drawn from a variety of sources. Part is drawn from perspectives gathered from members of the community itself, both those who affect and those who are affected by the healthcare ecosystem.

The questions researchers asked were straightforward. What are the key health issues you face, and is the current system equipped to handle them? In your experience, are the barriers to healthcare access systemic or organizational? What institutional collaborations or partnerships might help increase access? Do you know what medical resources are available to you, and where do you get information? Do you have insurance, and can you afford medical care? If you could make one significant change to increase access, what would it be?

The answers reflected in the full report, available at [hfnlc.org](http://hfnlc.org), confirm both the general validity of our theory of change and the strategic focus that we and our community partners have been pursuing. The quick takeaway is this:

The organizations large and small that work every day to improve health in northern Lake County are more or less on the right track. Yet the report also underscores the continued relevance of the Foundation's core mission. Ten years on, the communities we serve continue to face the greatest barriers to healthcare access and to be among the most vulnerable with regard to health outcomes.

What does all this mean for the future? A renewed commitment to work that is getting results, to continuously improving processes and refining strategies, to critical thinking and problem solving, to exploring new ideas. The directions we present here are not radical departures from the past. They are affirmations of our longstanding goals and promises for the future.



1

**IMPROVE PATIENT HEALTH AND HEALTH INSURANCE LITERACY.**

Understanding the basic determinants of health, the healthcare system and how it works, and how to use health insurance to access care has always been fundamental to wellness. In a rapidly changing healthcare marketplace, increasing this understanding is critical.

2

**FOCUS ON CHRONIC HEALTH ISSUES.**

Making headway against the most prevalent chronic diseases and health issues in our community—diabetes, obesity, hypertension and cardiovascular disease, behavioral health—is slow work. The potential gains, whether measured in quality and length of life or dollars saved, more than justify the effort.

3

**ADDRESS PERSISTENT CULTURAL AND LANGUAGE BARRIERS.**

From 2000 to 2014, the number of Latino residents in Lake County increased by 55.1 percent; the number of households that speak a language other than English rose by 4.9 percent. Our communities are linguistically and culturally diverse. Healthcare providers must increase their cultural competence and linguistic skill to meet community need.

4

**STRENGTHEN ESSENTIAL PROVIDERS MOST AT RISK.**

The network of care in northern Lake County is fragile; many organizations in that network provide essential services that are not duplicated elsewhere. To the extent that we can, we must ensure that such network-critical organizations are able to continue to serve our community.

5

**INCREASE PROVIDERS' ABILITY TO WORK EFFECTIVELY IN THE ENVIRONMENT OF MANAGED CARE.**

Government interest in managed care systems that bridge health and social services continues to grow. To be able to participate in such systems, however, providers must overcome a host of challenges, from increasing their visibility as potential partners to developing new administrative expertise and information technology to ensuring that payments cover costs. Improving integration of care for patients is worthwhile goal, one the Foundation stands ready to help providers achieve in the years ahead.

6

**DEEPEN INNOVATIVE AND EFFECTIVE COLLABORATIONS.**

The number of existing collaborations among area providers is encouraging. The next step is to increase the quality of those collaborations, moving from mutual referral and information sharing to joint problem solving and program partnerships.

7

**IMPROVE PROGRAM, ORGANIZATIONAL, AND SYSTEMS CAPACITY.**

Capacity building in the broadest sense and at every level will remain a priority for the foreseeable future.

8

**WORK TO CLOSE THE BEHAVIORAL HEALTH SERVICE GAP.**

In 2015 in northern Lake County, 21,700 individuals reported needing but not receiving treatment for alcohol use; more than 12,000 adults reported having experienced severe mental illness; about 6 percent of adults and nearly 8 percent of 18- to 25-year-olds had at least one major depressive episode. The enormity of the need outstrips the availability of services in all the communities we serve. It's a gap we are committed to closing.

9

**INCREASE CARE OPTIONS FOR THE UNINSURED AND UNDERSERVED.**

While insurance enrollment has grown thanks to the Affordable Care Act, more than 14 percent of northern Lake County residents remain uninsured, not including those who are undocumented. Many low-wage residents who have insurance can't use it, unable to afford deductibles and copays. Working to improve the insurance knowledge of the newly insured is not sufficient; we must also develop affordable care options for all those who need them.

10

**EXPLORE TECHNOLOGY SOLUTIONS.**

Even if money were no object, not all problems of access can be solved with addition. The lack of transportation and scarcity of local providers is a case in point. Adding public transport services or the number of specialists or physicians who accept Medicaid in our area is possible but unlikely in the near term. A better approach may be to exploit the problem-solving potential of technology, piloting a program of telemedicine, for example, to extend the reach of the area's few psychiatrists.



# Board members and staff

## Fiscal years 2014–16

**Rev. Reginald Blount, PH.D.**  
Senior Pastor  
Arnett Chapel African Methodist  
Episcopal Church  
Assistant Professor of Formation,  
Youth, and Culture  
Garrett-Evangelical Theological Seminary

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Adjunct Faculty  
Undergraduate Health Systems  
Management Program  
Loyola University Chicago Marcella  
Niehoff School of Nursing

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Civic Leader

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Ensing Law Firm, LTD

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Miller Shakman & Beem LLP

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& Community Health Center

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Psychiatric Nurse and Clinical Social Worker  
Lake County Behavioral Services

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Director, Latino and Youth Services  
Family Service of Lake County

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**Ernest Vasseur, M.T.S.**  
Executive Director

**Angela Baran, M.S.**  
Program Officer

**Meredith Polirer**  
Office Administrator



# Grantees, Fiscal years 2014–16

The Healthcare Foundation of Northern Lake County supports 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).

Advocate Charitable Foundation  
American Cancer Society Illinois Division  
Antioch Area Healthcare Accessibility Alliance  
Arden Shore Child and Family Services  
Asian Health Coalition  
Catholic Charities of the Archdiocese of Chicago  
ChildServ  
Christ Episcopal Church  
College of Lake County  
Community Youth network  
Dominican University  
Erie Family Health Center  
EverThrive Illinois  
Family First Center  
Family Focus  
Family Service  
Health & Disability Advocates  
Hispanic American Community Education and Services  
Lake County Coalition for the Homeless  
Lake County Crisis Center (A Safe Place)  
Lake County Health Department  
Loyola University  
Mano a Mano Family Resource Center  
Mercy Housing Lakefront  
Metropolitan Chicago Breast Cancer Task Force  
Most Blessed Trinity Church  
Nicasa Behavioral Health Services  
OMNI Youth Services  
One Hope United  
PADS Lake County  
Pediatric AIDS Chicago Prevention Initiative  
Respiratory Health Association  
Rosalind Franklin University Health System

Rosalind Franklin University of Medicine and Science  
Treatment Alternatives for Safe Communities (TASC)  
Uhlich Children’s Advantage Network (UCAN)  
United Way of Lake County  
Veterans Assistance Commission of Lake County  
Waukegan Public Library  
Waukegan Township  
YouthBuild Lake County  
YWCA Lake County  
Zacharias Sexual Abuse Center  
Zion Benton Children’s Service  
Zion Elementary School District 6





**HFNLC**

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