Roughly one out of every four people who need access to healthcare in northern Lake County face barriers of one kind or another: financial, systemic, geographic, cultural, linguistic, knowledge, provider shortage.

The solutions to these problems don’t begin with money.

They begin with care—the care of one person for the well-being of another and the care that each of us takes to understand the issues, search for answers, and work toward a better life for all of us.

There are thousands of people in northern Lake County who care.

This report introduces you to a few of them.
we were born to care.

It is the basis of our founding mission: to improve access to healthcare for underserved and uninsured residents of northern Lake County.

It is the source of our endowment, created with proceeds from the sales of Victory Memorial Hospital and St. Therese Medical Center.

It is implicit in the mandate we have to continue in perpetuity. That mandate calls on us to be stewards—caretakers—of the resources entrusted to us. While we must develop investment strategies that will “grow,” or replenish, those funds, we must also be careful of assuming too much risk. While we must be responsive to our community’s current needs, we must balance those needs—and our own—against future need, disbursing no more in any year than market conditions allow.

Taking care of an endowment that helps to fund healthcare in northern Lake County demands that we identify and prioritize our region’s most pressing needs. We do this most visibly through our triennial needs assessments. Less visibly, perhaps, we do this by developing productive relationships with others who care deeply about our community:

civic leaders and activists, health and social service providers, legislators and policymakers, members of law enforcement and the judiciary, educators, business people, the clergy.

Through these relationships, each of us deepens our knowledge of our community’s needs and resources. We expand our point of view. We build the common trust that makes collaboration and creative problem solving possible. We share our experience—including unforeseen problems or circumstances that force us to adjust processes, strategies, and even goals—and each of us comes away better prepared to do the work that we have set out to do.

Just as we have moved beyond defining healthcare as what happens in an examining room or hospital, together we are moving beyond defining ourselves as isolated actors, independent variables in separate experiments to improve health.

We know that while each of us may focus on one piece of the healthcare puzzle, each of our pieces affects the others.

We are in this together, and we are united in care.

MARY DOMINIAK  
Chair of the Board of Directors

ERNEST VASSEUR  
Executive Director
The Lake County Sheriff’s Department’s groundbreaking program—the first in Illinois—is designed for inmates who suffer from mental illness or substance abuse and who have been arrested three or more times in a year.

**GRANT:** $100,000 for Jail High Utilizer Diversion and Health Engagement Project

“We’ve been in corrections for 28 years. I’m a lock ‘em up guy. I think if you do a crime, you need to do the time.

“But sometimes you look at these inmates and wonder, ‘How the heck did you get locked up?’ You hear their stories and think, ‘Wow, if you could have just gotten some help before, you might not be here now.’

“People who come into the jail with mental health problems or substance abuse, they’re really not themselves. Once they get their proper medication and get stabilized, it’s amazing how different they are.

“The idea of this program is to start working with them while they’re here, to evaluate them and then connect them to the resources they’ll need when they get out, so maybe they can stay out. We don’t have the final data yet, but the early numbers are interesting.

“It looks like we may be making a difference, providing them with somebody who cares.”

**We’re getting people into treatment and keeping them out of jail**

The Lake County Sheriff’s Department’s groundbreaking program—the first in Illinois—is designed for inmates who suffer from mental illness or substance abuse and who have been arrested three or more times in a year.

William Kinville
Deputy Chief, Lake County Sheriff’s Department
“There is no ‘typical’ client. They’re any nationality, any age, from anywhere in northern Lake County. They might be struggling with domestic violence, abuse, trauma. For adolescents, it might be suicidal behavior, anxiety, depression. They’re experiencing serious symptoms, and they need treatment.

“The one thing they have in common is the inability to pay. Maybe they don’t have insurance or can’t afford the copay. Or they have Medicaid, but the health department waiting list is three to six months, and they can’t wait that long.

“There aren’t any options for these people. It is just crushing. Despite all its wealth, Lake County is a provider shortage area in places like Waukegan, North Chicago, Round Lake, Antioch. So we look for dollars to provide short- or long-term therapy on a free or reduced-cost basis. We’re still not reaching everyone—the need is huge, and we just don’t have the bandwidth—but it’s a start.”

The Connect Program provides comprehensive assessments and ongoing therapy for individuals, couples, and families in their homes or schools. Clients may continue therapy until they reach their treatment goals, their symptoms have lessened, or they feel they no longer need it.

GRANT: $150,000 for the Connect Program
“I came to this work because I’m an immigrant myself—I know how challenging it is for this community to be healthy and successful—and because to me, healthcare is everything. I was born and raised in the Dominican Republic, where I got a medical degree. Diana, our project coordinator, was a doctor in Mexico working in public health. We see things from both perspectives.

“Medicine is about diagnosis and treatment. Community health workers (CHWs) focus on prevention. When you create a program for the community, you really have to have the experience. It’s not about language, it’s about culture and the ability to work with that community.

“Currently, what CHWs do and how they think about their role can vary depending on the organization. We want everyone to have the same training and understanding and to work in the same direction for the community. We want them to see themselves as part of a larger healthcare system and to be valued by that system.”

We’re building the expertise of our health workers

Mano a Mano is training a growing team of skilled community health workers who can enhance prevention and management of chronic diseases in their community, improving population health and reducing healthcare costs.

GRANT: $51,000 for the Lake County Community Health Worker Partnership
In 2017 we did 1,476 trips, a 20 percent increase over 2016. This year, we’re up 118 percent in Fox Lake/Antioch alone. Baby boomers are getting older, and seniors with multiple health problems who can no longer drive because of their eyes or something else need transportation. Cab fare can be as much as $60 for longer trips.

“But honestly, this program isn’t just about solving a logistic problem. It’s about care—a volunteer going with a person, helping them get into the car, staying in the waiting room, taking them back home.

“Isolation is a big health factor, and volunteers provide some support, a friendly visit. They call us and say, ‘I’m here taking so-and-so, but I just want you to know, I talked with him and I think he is having some problems.’ Then we can call a family member and say, ‘Have you checked on him in a while?’”

Now an independent 501(c)3, ElderCARE recruits, insures, and schedules volunteer drivers so that seniors can make and keep their medical appointments.

**GRANT:** $21,000 for Overcoming Transportation Barriers to Healthcare
“In times of uncertainty and change, there is a tremendous need for actionable, timely information. I mean, the day after the 2016 election, people were calling Illinois’ ACA hotline asking, ‘What do I do now that Obamacare is gone?’

“Since 2017 in Illinois, we’ve gone from having 13 Medicaid Managed Care plans to having 7. Then the state launched phase two of the Integrated Eligibility System for Medicaid. Providers need to know what’s happening in DC or Springfield, what it might mean for their work, and how to help patients and clients retain their insurance eligibility, if they can.

“My parents were 17 and 19 when I was born. I guess you could say I grew up with an acute understanding of how the social safety net, especially programs like Medicaid, can have a very real impact on a family’s ability not just to be healthy but to have financial security and stability, to have the kind of family and life they want.”

We’re minding the safety net

EverThrive’s educational outreach helps healthcare providers navigate changes in policies, systems, and regulations that affect their business model and their core mission: providing care to people who need it.

GRANT: $40,000 for Connecting Communities to Care
“My mother was severely abused by my father when I was a kid, so I became passionate about the work of domestic violence.

“The people we serve at A Safe Place are not only homeless: they’ve been stripped of their humanity. Their power and control—their sense of self-worth and self-efficacy—have been taken away from them. So we have a crisis line, emergency shelter, and emergency counseling, yes, but we also provide care throughout the healing journey, including long-term counseling. As a result, 91 percent of the people we serve do not go back to their abusers.

“The cost of that care, combined with state cuts, leave us with a budget gap to fill. Getting Medicaid reimbursement for counseling services is a beginning. First, we assessed how many people we serve, what services they get, and what that would mean in Medicaid dollars. Now we’re doing the work of getting certified. It’s been a major undertaking, but the alternative—cutting critical services—would be worse.”

In healthcare, treatment models matter. So do financial models. By making changes to the second, A Safe Place can continue to provide the services and supports its clients need to improve their own and their families’ health.

**Grant**: $20,000 for Organizational Readiness and Application for Medicaid Certification

Pat Davenport
Executive Director, A Safe Place
Grantees, Fiscal years 2016–18

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.
Grant totals, Fiscal years 2016–18

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental Health</td>
<td>$1,168,000</td>
<td>30%</td>
</tr>
<tr>
<td>Medical</td>
<td>$375,000</td>
<td>10%</td>
</tr>
<tr>
<td>Dental</td>
<td>$42,000</td>
<td>1%</td>
</tr>
<tr>
<td>Case Management</td>
<td>$540,000</td>
<td>14%</td>
</tr>
<tr>
<td>Linkage to Care</td>
<td>$728,000</td>
<td>19%</td>
</tr>
<tr>
<td>Capacity Building</td>
<td>$644,000</td>
<td>17%</td>
</tr>
<tr>
<td>Scholarships</td>
<td>$75,000</td>
<td>2%</td>
</tr>
<tr>
<td>Special Opportunities</td>
<td>$270,000</td>
<td>7%</td>
</tr>
<tr>
<td>Total</td>
<td>$3,842,000</td>
<td>100%</td>
</tr>
</tbody>
</table>

- Medical: 10%
- Mental Health: 30%
- Dental: 14%
- Case Management: 14%
- Linkage to Care: 19%
- Scholarships: 2%
- Special Opportunities: 7%
- Total: 100%

- Clinical Care: $3,842,000
- Mental Health: $1,168,000
- Medical: $375,000
- Dental: $42,000
- Case Management: $540,000
- Linkage to Care: $728,000
- Capacity Building: $644,000
- Scholarships: $75,000
- Special Opportunities: $270,000

100% Total
Board members and staff  
Fiscal years 2016–18

Frances Baxley, M.D.  
Medical Director  
Erie HealthReach Waukegan Health Center

Luis A. Berrones (Vice Chair)  
Associate Judge  
Nineteenth Judicial Circuit Court of Illinois

Mark A. Dennis, Jr. (Former Vice Chair)  
President and CEO  
McGaw YMCA

Mary Dominak, Ph.D., M.B.A., RN (Chair)  
Trustee  
Village of Antioch

Carolina Duque, M.A.  
Civic Leader

William Ensing, Esq. (Former Chair)  
Ensing Law Firm, LTD

Gerard Goshgarian, M.D.  
Civic Leader

David Hatton, CFP (Treasurer)  
Senior Financial Consultant  
First Midwest Financial Network

John L. Joanem, Esq. (Former Vice Chair)  
John L. Joanem & Associates P.C.

Nadine A. Johnson, CTP (Former Treasurer)  
Vice President/Treasury Management  
First Midwest Bank

Jacquelyn Kendall  
Civic Leader

Diane F. Klotnia, Esq. (Former Secretary)  
Miller Shakman & Beem LLP

Magdalena McElroy, R.N., LCSW  
Psychiatric Nurse and Clinical Social Worker  
Lake County Health Department, Behavioral Services

Jorge L. Ortiz (Former Vice Chair)  
Chief Judge  
Nineteenth Judicial Circuit Court of Illinois

Gust Petropoulos  
Civic Leader

Laura Ramirez, B.A.  
Grant Portfolio Manager  
Lake County Crisis Center (known as A Safe Place)

Wendy Rheault, Ph.D., PT  
Provost  
Rosalind Franklin University of Medicine and Science

Maria C. Schwartz, M.S., BSN, RN (Secretary)  
Civic Leader

Casandra D. Slade  
Senior Vice President, CRA/Community Development  
Wintrust Financial

Carol Sonnenschein, M.A., Ph.D.  
Consultant

Ernest Vasseur, M.T.S.  
Executive Director

Angela Baran, M.S.  
Program Officer

Meredith Polirer  
Office Administrator