



Rooted in Community, Growing Toward Equity

2022-2026

Quadrennial Impact Report



Healthcare Foundation of Northern Lake County
Celebrates Twenty-Year Anniversary in 2026

A MESSAGE FROM LEADERSHIP

Rooted in Community in a Time of Change

Greetings,

Thank you for taking the time to explore the Healthcare Foundation of Northern Lake County's (HFNLC) multiannual report (20th Anniversary edition). Wow, can you believe that HFNLC has been funding, convening, and collaborating with nonprofits serving northern Lake county for 20 years? How time flies, I am humbled and blessed to be a part of HFNLC's leadership story for the past four years (a fifth of its organizational life). We are rooted in community, we learn from those with lived expertise and are committed to equity.

The past four years have been very turbulent for our county, nation, and world, fraught with impactful socio-cultural and political transitions affecting our holistic health and well-being (physical, mental, social, spiritual, economic, and environmental). As a county we experienced an unprecedented mass shooting in Highland Park, alongside the gun violence that frequently impacts other areas of Lake county, lived through a devastating pandemic, and witnessed the effects of questionable federal policies on our immigrant and LGBTQ+ communities, low-income individuals and families, nonprofit partners, and public health infrastructure. As a nation we have had a front row seat to attacks on our democracy and the erosion of societal norms, making us feel more polarized than any time in recent history. Collectively Lake County has navigated this volatility and uncertainty with intentionality, resilience, and strength by strategizing, advocating, planning, and implementing aid to neighbors in need who are disproportionately impacted by the Social Drivers of Health (SDOH). HFNLC collaborates on co-investment with foundation partners to address critical community needs. Through the tragedies and triumphs, HFNLC stands on the ready with support, rooted in health and guided by community voice.

The principles of Trust-Based Philanthropy (TBP), Justice, Equity, Diversity, and Inclusion with a focus on Health Equity (JEDI-HE) and Belonging are a throughline at HFNLC resulting in a deliberate shift in our organizational policies, practices, and procedures which enables us to show up meaningfully, as a funder, convener, and community partner. As a continuously growing and learning organization we are dedicated to strengthening our ability to evolve to meet new opportunities, challenges, and needs. Highlights of the past four years include leading the organization through changes in our bylaws to allow new grantmaking opportunities to meet evolving community needs, employing Culturally Relevant and Equitable Evaluation (CREE) tools, instituting a paid summer internship program, engaging in our Summer Community Listening Initiative in (2024-2025), and disseminating findings in report form and in interactive data walk experiences.

Additionally, we have cultivated new knowledge from annual retreats on JEDI-HE Leadership (2023), Best Practices in Board Governance (2024), and Leading with Love, Leveraging Our Power: A Day to

Reimagine Impact (2025) and attending multiple conferences including the American Public Health Association (HFNLC co-presenter), Grantmakers in Health, Hispanics in Philanthropy, and the Association of Black Foundation Executives (ABFE), among others. Locally we have participated in shared leadership the Lake County Funders Collaborative, Live Well Lake County, the Alliance for Human Services, and participated in multiple work groups, coalitions, advisories and Community Health Needs Assessment focus groups for City of Hope, Northwestern Medicine Lake Forest Hospital, and Advocate Condell Medical Center. Moreover, we have hosted multiple community convenings, provided various community partner trainings on topics such as Giving Tuesday, implicit bias, JEDI-HE, Social Drivers of Health, Medical-Legal Partnerships, and Community Health Workers. We have also participated in several community partner health equity and workforce panels and attended a variety of community partner events. Collectively these learning experiences have moved us from the status quo to exploring new opportunities for community investments and authentic partnerships.

Changes in our bylaws prompted the development of new grantmaking strategies to streamline processes for HFNLC, current grantee partners, and prospective grantee partners alike via new and improved funding pillars. Also, we have expanded grantmaking priorities to include the Social Drivers of Health allowing HFNLC to address the root causes of unhealth and disease in our communities rather than primarily focusing on symptom management and healthcare delivery. This shift represents a deliberate move toward funding strategies that address systemic barriers to health and well-being, informed by community and partner engagement. One example of this new grantmaking approach is our support of the Lake County Community Health Worker (CHW) Learning Collaborative and Medicaid Assessment Initiative, a funding partnership between the Hunter Family Foundation, the Steans Family Foundation, and HFNLC with the HAP Foundation as the lead implementation partner. This partnership reflects a shared commitment to strengthening the CHW workforce, advancing sustainable financing approaches that support long-term community health and well-being, and to root the work in the CHW lived expertise necessary to cultivate community trust and improve health equity.

Rooted in community and guided by equity, we enter the next twenty years with humility, curiosity, and a continued commitment to collective impact. We are grateful for your partnership over the past twenty years and are looking forward to the next twenty years and beyond!

In solidarity,



Venoncia M. Baté-Ambrus, Ph.D., MS, MA, MJ
EXECUTIVE DIRECTOR

LETTER FROM OUR BOARD CHAIR

10 Years of Service

As I reflect on 10 years service on the Board of Directors for HFNLC, I feel grateful for the opportunity to work alongside inspiring individuals who commit their time and expertise to improving the quality of life of their neighbors in Northern Lake County. As a group that spans political, demographic, age, and professional spectrums, we bring our hearts to the table, allow our understanding of health equity and health justice to be nurtured by the Foundation's talented staff, and direct resources to those most vulnerable in our community.

A key inflection point during my time on the Board was the Foundation's expansion of its funding pillars to include initiatives that address social determinants of health.

"Social determinant" wasn't in my vocabulary when I trained in Family and Community Medicine at San Francisco's county hospital 20 years ago. Yes, my fellow residents and I knew that social factors contributed to health outcomes. We knew that poverty shortens life expectancy and that stress makes people sick. For the interns and residents handling the end stages of disease in San Francisco General Hospital, social determinants were the firmament we worked in. They sometimes led to our sense of powerlessness, confronting us with the truth that no prescription could fix diseases of poverty.

Now social determinants are part of the mainstream vocabulary in health care. Physicians are less likely to assign blame with the label "non-compliance", and more likely to recognize that lack of transportation, low health literacy and poor finances make adherence to a treatment plan difficult.

Building more clinics and recruiting more doctors would go a long way toward improving health equity if we could write the following prescriptions from our exam rooms:

- Procure quality child care
- Get a high paying job with benefits
- Withdraw money from the ATM
- Buy fresh produce instead of the more affordable ultraprocessed foods
- Avoid being exposed to violence

Philanthropists are joining a movement calling for health justice to become reality. While we cannot do the work of politicians and elected officials to change the larger systems driving unequal health outcomes, locally we can expand our definition of "clinic" and "prescription".

A clinic should reach into neighborhoods and be staffed by peer educators—community health workers—who provide frontline guidance to their neighbors.

A clinic could be a community garden that provides fresh produce, a neighborhood grocery store that organizes running clubs, or a community house that welcomes young people struggling academically to learn a trade. A prescription could be a letter from a legal-aid clinic that prevents eviction, a healing circle that supports trauma recovery, or a Living Room Wellness Center that keeps people in crisis out of jail.

When I think about the network of the Foundation's grantee partners bringing these initiatives to life, the image of a quilt comes to mind. The squares are not uniform—each one has different texture and color, and is gathered from what is available locally, rather than shipped from far away. Stitched together with care, they create something beautiful and durable that can last generations.

I will term off the board this September, having served my 10 years. I feel deeply grateful to have been part of the Foundation's work, and optimistic that under the continued leadership of its inspired staff, philanthropy in Northern Lake County will be creative, nuanced, true to place, and ultimately, beautiful.

Thank you,



A handwritten signature in dark ink that reads "F Baxley".

Frances Baxley, MD, CP
HFNLC Board Chair



OUR PEOPLE

The Healthcare Foundation of Northern Lake County supports efforts to improve access to health services for underserved residents in Lake County, Illinois. We focus on addressing gaps in care, strengthening effective organizations and programs, and fostering innovative healthcare solutions.



Venoncia M. Bate'-Ambrus, PhD, MS, MA, MJ
Executive Director

Dr. Venoncia M. Baté-Ambrus has more than 20 years of experience in nonprofit health, human services, and academia. A community health psychologist and pastoral counselor, her work centers on equity, integrated care, and the social drivers of health. She has served on national committees with the American Public Health Association and American Psychological Association and joined HFNLC in 2022.



Meredith Polirer
Director of Operations (Retired)

Meredith Polirer has held office administration and accounting roles at a variety of corporations and nonprofit organizations, including P.M. Haeger & Associates, Delicious Cookie Company, the American Academy of Pediatrics, and Michaels Arts & Crafts. She studied administrative office systems at the College of Lake County and joined the Foundation in 2012.



Michael Darling, MA
Director of Operations and Finance

Michael holds a B.S. in Finance and Economics and an M.A. in Computer Resources and Information Management. As the Healthcare Foundation of Northern Lake County's new Director of Operations and Finance, he brings deep expertise from leadership roles at Morgan Stanley, Discover Financial Services, the U.S. Department of Labor, and the Small Business Development Center at College of Lake County—where he guided entrepreneurs in scaling operations and strengthening financial models. Michael joined the Healthcare Foundation of Northern Lake County in 2026.

INTERNS

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|-------------------------|-------------------------|-------------------------|-------------------------|
| Abby Roman (2023) | Gisela Contreras (2024) | Stone Yan (2024) | Isabella Guzman (2025) |
| Kerrisa Beauplan (2025) | Gabrielle Lafser (2025) | Gabrielle Morgan (2026) | Katherine Torres (2026) |
| LaTasha Smith (2026) | | | |

Angela Baran, MS
Senior Director of Community Impact Programs

Angela Baran holds a master's from DePaul University's School of Public Service and brings extensive healthcare grants and development experience from her work with the Lake County Health Department and Community Health Center. A lifelong resident of northeastern Lake County, she has been a driving force at HFNLC since 2011.



Elvira Barragan-Lopez, MPP
Program Associate

Elvira Barragan-Lopez holds a Master of Public Policy degree from Loyola University Chicago and has experience in community-centered work focused on equity and underserved communities. A bilingual professional, she is passionate about improving access to information and resources through collaborative, community-informed approaches. She joined the Healthcare Foundation of Northern Lake County in 2026.



Thank you, Meredith.

For nearly fifteen years, Meredith brought steadiness, structure, and heart to the daily work of HFNLC.

On May 31, 2026, Meredith retired from her role as Director of Operations. She joined the Foundation as our Office Administrator and, over time, grew alongside the organization—taking on increasing responsibility as our work expanded and matured. As her role evolved, so did the strength of our internal systems. Meredith helped build the operational backbone that ensured our grantmaking, partnerships, and commitments to community were supported with rigor, care, and consistency.

Much of her leadership happened behind the scenes. It showed up in the steadiness of our processes, the thoughtfulness of our documentation, and the quiet reliability that allowed new ideas to take root. As responsibilities grew, so did her influence—reflecting both her dedication and the trust placed in her leadership.

Meredith also brought humanity to the work. Known for her “mom jokes”—never quite as dramatic as dad jokes, but always delivered with the intention of making someone smile—she reminded us that professionalism and warmth can coexist. When she once joked that she deserved a trophy, we presented her with a tiny plastic one—now a small but fitting symbol of her humor and humility.

As Meredith enters retirement, we celebrate not only her professional contributions, but the fullness of her life beyond the office—with her husband Howard, her adult children Mandi and Molly, and Oliver, her loyal canine companion.

We are deeply grateful for Meredith’s steady stewardship and the lasting imprint she leaves on HFNLC. Her leadership strengthened this organization in ways that will continue to shape our work for years to come.

20 YEARS

20 VOICES



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“HFNLC has been a valued thought partner, convener, and advisor—helping shape services and strengthen community connections as we’ve **grown**.”

MELISSA HILTON
Erie Family Health Center

“Partnership with HFNLC signals that this work is valued—opening doors to resources, relationships, and opportunities that strengthen our impact.”
—Yvette Ewing, The Community Works

“Lake County communities are healthier because of HFNLC’s 20 years of leadership and collaboration.”
—Bethany Williams, Scheiber Philanthropy

“What stands out most is the relationship itself. We’re not just recipients of funding... we’re collaborators working toward the same goal.”
—Sarah Armstrong, Youth & Family Counseling

“HFNLC helped build something transformative bringing care closer to communities where access once felt out of reach.”
—Colleen Lennon, Antioch Area Healthcare Accessibility Alliance



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“Long-term investment from HFNLC has made wellness and mental health support a consistent part of programming—helping young people build resilience and **healthier futures**.”

DAVID MANGUS
YouthBuild Lake County



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“Because of this partnership, we’ve been able to support students not just academically, but through mental health and wellness—recognizing education as a **key driver of health**.”

AARON ARNOLD
Waukegan to College

“HFNLC is more than a funder—we are partners bringing healthcare to older adults and strengthening connections across the community.”
—Jackie Lynn, ElderCARE Lake County

“HFNLC has served as a committed leader—bringing partners together and advancing health equity through collaboration across the region.”
—Maggie Morales, Lake County Community Foundation

“HFNLC’s investment has strengthened not only services, but the capacity to reach families earlier—before challenges escalate into crisis.”
—Maria Velasquez, Arden Shore Child and Family Services

“HFNLC has been instrumental in helping us grow from a small program into a countywide effort—supporting families so children can thrive and succeed.”
—Bobbie Hinden, Family Focus



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“From the very beginning, HFNLC showed up as a **partner**—not someone we had to prove ourselves to. That approach has made all the difference.”

GAIL WEIL
CYN Counseling Center

“HFNLC has been a true partner in advancing health equity—helping us move beyond traditional care models and reach people where they are. The trust built through this work is the foundation for lasting health outcomes.”
—Jeff Espina, Rosalind Franklin University Health Clinics

“Together, we are building the next generation of healthcare social workers—creating pathways for students to enter and remain in the Lake County workforce.”
—Pamela Nigh & Terry Northcut, Loyola University Chicago School of Social Work

“Because of this partnership, nearly 4,000 additional residents now have access to quality mental health care in communities with significant need.”
—Susan Resko, The Josselyn Center

“This partnership has been transformational—strengthening trust within immigrant communities and creating pathways to care for families who would otherwise remain disconnected.”
—Dulce Ortiz, Mano a Mano Family Resource Center



BUILDING AN ORGANIZATION FOR THE FUTURE

Over the past four years, HFNLC has taken intentional steps to strengthen the internal structures that support our work—ensuring that we are not only responsive to community needs today, but positioned to lead with clarity, accountability, and equity into the future.

This period of growth has been grounded in reflection, learning, and a willingness to evolve. Through a series of Board retreats, governance updates, and the creation of new structures, we have worked to better align how we operate with what we value—recognizing that strong, equity-centered organizations are built over time through intention, shared learning, and thoughtful change.

Our Board retreats have been central to this work, creating dedicated space each year to step back, reflect, and focus on the areas that matter most to our evolution as an organization.



Social Drivers of Health (SDOH)

In 2023, the Board came together to deepen our understanding of the Social Drivers of Health (SDOH), strengthen our commitment to equity, and examine how these priorities should be reflected in our governance. This retreat

marked an important moment of grounding—helping to connect our mission more explicitly to the broader conditions that shape health and well-being and prompting meaningful questions about how our structures support that work.



Justice, Equity, Diversity, and Inclusion (JEDI)

One reflection from the board's 2023 retreat entitled Justice, Equity, Diversity, and Inclusion (JEDI): The Human Side involved a shifting power exercise led by facilitator Deanna Singh of Uplifting Impact. This exercise empowered participants to learn about the tools needed to view common challenges through a JEDI lens. Participants left with a clearer understanding that JEDI and Health Equity (JEDI-HE) are fundamental components to the mission and vision, the business operations, and the community impact of HFNLC. We also learned from peer foundations how they integrated the Social Drivers of Health (SDOH) into their work, which provided a roadmap for HFNLC as we embarked upon our own JEDI-HE journey. This board retreat imparted critical lessons which informed the board's decision to change HFNLC's bylaws so that funding the root causes that influence health and wellbeing, commonly referred to as SDOH, would be possible.

This was a significant milestone—moving beyond intention to formalize our focus within the Foundation's governing framework. By embedding this commitment into our bylaws, we ensured that our approach to health equity is not only a priority in practice, but a sustained and accountable part of how we define our purpose and direction.

This change was imperative for HFNLC's organizational growth, agility, and ability to be responsive to emerging community needs. It signals that we are in transformation from an organization that focused primarily on funding traditional healthcare and ancillary services (symptom management via philanthropy), to one that not only funds these critical programs but also invests in prevention and early intervention initiatives which address key SDOH.

This shift is not unique to HFNLC but is aligned with the trajectory of healthcare and health philanthropy which incorporates public health principles to address root causes of poor health and upstream approaches to improving community health and wellbeing.

We aim to be a foundation that not only funds healthcare solutions but also advances health justice.

This comports with the American Hospital Association's vision of "a just society of healthy communities, where all individuals reach their highest potential for health" and that of Grantmakers in Health "Better health for all through better philanthropy."



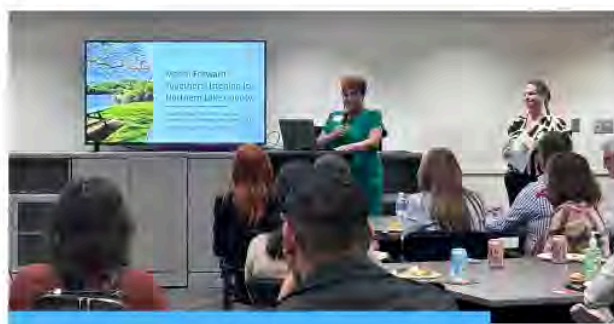
In 2024, our focus turned inward to board governance and foundation operations. We examined how we show up as a Board and Staff—clarifying roles and responsibilities, strengthening decision-making practices, and ensuring that our governance structures support both accountability and shared leadership. This work reinforced the importance of not only what we do, but how we lead together. Following this retreat, and based on guidance from legal counsel, the Board established an ad hoc policy committee to conduct a comprehensive review of existing policies and develop new policies where needed. This effort reflects a commitment to ensuring that our policies are clear, current, and aligned with both best practices and the Foundation's evolving work.

Building on lessons learned from the 2023 board retreat on the importance of centering JEDI-HE as an organizational throughline, Alison Upton Lopez and Ricky Benavidez of Ktisis Capital facilitated the 2024 board retreat explicating the differing roles of board, staff, and area of overlap. While the organization was functioning well, we identified opportunities to improve efficiencies, standardize policies and procedures, enhance communications, and maintain clearer boundaries between board and staff functions.

BUILDING AN ORGANIZATION FOR THE FUTURE

Continued

Key takeaways included clarity on roles and responsibilities, the need for a comprehensive policy review, allowing the mission to set the agenda, collaborative problem-solving, understanding (and sometimes upending) power dynamics as espoused by Trust-Based Philanthropy, and leading from abundance. Gaining a better understanding led to better practices, resulting in improved governance.



By 2025, the Board centered its attention on financial stewardship and long-term sustainability. As the Foundation continues to grow and adapt, this retreat created space to align our financial strategies with our values, ensuring that our resources are positioned to support both immediate community needs and long-term impact. Building on this conversation, the Board committed to expanding staff capacity to better support the Foundation's growing body of work and to more closely align with peer organizations of similar size. At the same time, the Board charged the Finance and Investment Committee with reviewing the Foundation's investments to ensure alignment with our values, including exploring additional strategies to advance equity through our financial practices.



Environment, Social, and Governance (ESG)

As a learning organization, HFNLC builds on lessons learned from past board retreats, while simultaneously considering new educational opportunities to foster continued growth. The desire to learn about best practices in mission-aligned and Environment, Social, and Governance (ESG) investing, and innovative funding partnerships such as Community Development Financial Institutions (CDFIs) shaped the focus of HFNLC's 2025 Board Retreat entitled "Leading with Love, Leveraging Our Power: A Day to Reimagine Impact" facilitated by Dr. Lisa Merchant. This retreat stimulated the curiosity, self-reflection, and thought necessary to begin our consideration of new investment strategies. We learned from local and national foundation peers who were already using some of these strategies, CDFI subject matter experts, and local stakeholders who shared their stories on growing up in Lake County and how these types of investments had been or could be transformational in their lives and in northern Lake County communities. Key themes from this retreat included Reimagining Philanthropy as Power for Justice, Expanding Tools, and Talent to Sustain Impact, Centering Collaboration and Peer Learning, Advocacy and Voice as Core Responsibilities, and Acting from Abundance, Not Scarcity. Collectively, these themes will guide how HFNLC operationalizes and aligns its mission and investments for greater community impact.

Together, these retreats reflect a Board committed not only to oversight, but to continuous learning, reflection, and growth.

Alongside this governance work, HFNLC took a significant step forward in embedding equity more deeply into our internal structures through the creation of the JEDI-HE (Justice, Equity, Diversity, Inclusion & Health Equity) Committee. This committee plays a critical role in ensuring that equity is not a standalone value, but a guiding principle that shapes how we make decisions, build relationships, and invest resources. Through its leadership, we have developed and begun implementing an internal audit tool to assess how our practices align with our commitments, created space for ongoing reflection and accountability, and strengthened our ability to identify and address gaps in our work.

In order to embed JEDI-HE in HFNLC's framework, an action team comprised of staff, board and committee members was assembled in 2022 to begin contemplating integral organizational issues, opportunities, and impacts; an effort to better promote health equity in programs, policies, and practices. This action team has been instrumental in advising the board on JEDI-HE concepts, and their alignment with other best practices such as Trust-Based Philanthropy, and Culturally Responsive and Equitable Evaluation (CREE). They have also advanced the use of a JEDI-HE lens when considering decisions that impact the organization and community.

Building an organization for the future requires both discipline and humility—the discipline to put strong structures in place,

and the humility to continue learning, listening, and adapting. This work reflects our commitment to staying rooted in community—grounded in the voices, experiences, and realities that shape our understanding of health—while continuing to grow toward equity through stronger governance, clearer alignment of resources, and deeper accountability to our values. By investing in how we operate, not just what we fund, we are building a foundation that can evolve alongside the community and contribute to more equitable outcomes over time.



Taken together, these efforts give us confidence in the direction HFNLC is heading. By strengthening our governance, aligning our resources with our values, and embedding equity more deeply into how we operate, we are building an organization that is both responsive and resilient. As a learning organization we are committed to evolving alongside the communities we serve - meeting today's needs while staying open to new challenges and opportunities. We continue to value the wisdom of our grantee partners and the lived expertise of community members, recognizing that lasting impact is built through collaboration and shared understanding. As we reflect on twenty years of progress, we look ahead with purpose - grounded in what we have learned and committed to what is still possible.

LISTENING TO LEAD: COMMUNITY VOICES IN ACTION

Before listening became a formal initiative, it was simply how we showed up.

Conversations happened in offices, community rooms, libraries, clinics, and sometimes in parking lots after events. Nonprofit leaders spoke candidly about workforce strain. Community Health Workers described the realities of navigating fragmented systems. Residents shared what it feels like to search for care, manage multiple jobs, stretch grocery budgets, support aging parents or to ensure their children's access to quality education and extra-curricular programs.

These conversations were not initially labeled as strategy. They were relationship-building. However, over time, a pattern emerged. The most important insights about health in our region were not found only in reports or metrics—they were spoken in lived experience!



What began organically evolved into an intentional strategy.

As the Foundation deepened its commitment to trust-based philanthropy, we recognized that listening could not remain informal or incidental. If we were serious about advancing health equity, then community voice had to inform direction at the outset—not simply react to decisions already made. Listening needed structure. It needed rhythm. It needed reciprocity.

As new leadership asked deeper questions about how equity showed up in our structures, it became clear that community voice had to shape direction from the outset—not simply respond to decisions already made.

As we deepened our commitment to trust-based philanthropy and JEDI-HE, we recognized that expanding our focus to include the Social Drivers of Health was not simply a matter of adjusting language or policy. It required a shift in mindset—one grounded in humility, partnership, and shared leadership.



BUILDING THROUGH LISTENING: THE CHW LEARNING COLLABORATIVE

The Community Health Worker (CHW) Learning Collaborative reflects this evolution.

Rather than launching a fully formed initiative, we began with questions. CHWs spoke openly about burnout, financing instability, and the emotional labor of serving as trusted bridges between institutions and community while personally facing many of the challenges experienced by their clients. They described what sustainability would require—not in theory, but in practice.

Those insights shaped the Collaborative itself.

What topics were prioritized.
How convenings were structured.
What supports were emphasized.

Listening informed design. Partnership informed pacing. Learning informed adaptation.

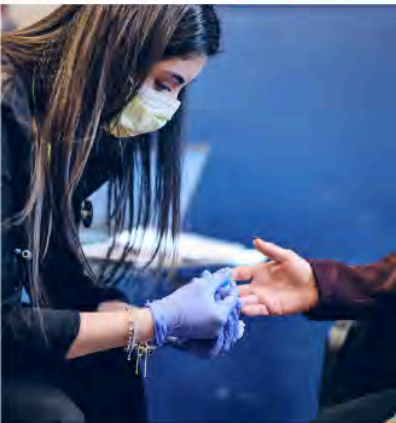
The Collaborative became an example of what is possible when initiatives are built through dialogue rather than delivered as predetermined programs.

One clear example of this shift came in selecting the backbone organization to continue convening Lake County CHWs and preparing community-based organizations to bill Medicaid for CHW services when the time is opportune.

In the spirit of “nothing about us without us”—a rallying cry of the African disabilities movement—we were intentional about sharing decision-making power. Six Lake County CHWs served as reviewers alongside external subject matter experts and funding partners.. Their reviews of finalist proposals were weighted equally.

This was not symbolic participation. CHW rankings aligned closely with other reviewers, reinforcing what we already knew: lived expertise is expertise. By embedding CHW voices directly into the selection process, we made the process itself more diverse, equitable, and inclusive—values embraced by HFNLC and our funding partners.

In this moment, listening moved beyond dialogue. It became shared authority.



FROM CONVERSATION TO COMMITMENT: SCLI 2024 & 2025

By 2024, listening had become more than relationship—it became discipline.

The Summer Community Listening Initiatives in 2024 and again in 2025 marked a clear commitment to structured, intentional listening, for HFNLC. Tables were set not for presentations, but for conversation. Residents, nonprofit leaders, partners, and cross-sector voices gathered to talk honestly about navigating care, income instability, food access, misinformation, and workforce strain.

Themes surfaced repeatedly. The interconnectedness of social drivers of health. The strain of shifting eligibility systems. The importance of trusted, local anchors. The need for flexibility in funding and partnership.

What stood out most was the way participants built on one another's stories. Listening allowed individual narratives to be interwoven into a tapestry of community voices.

One insight that became especially clear was the interconnectedness of the Social Drivers of Health and their impact on holistic health, wellbeing, and daily functioning. An inability to address one driver often created a cycle of access challenges across others.

For example, participants who were unemployed or underemployed struggled to access healthy food. Those working multiple jobs or participating in the gig economy often lacked the time to shop for or

prepare nutritious meals—or lived in communities without convenient access to healthy options. These challenges were compounded when individuals were not connected to community networks or programs that could offer support and resource navigation.

The lesson was unmistakable: health justice and economic justice are inseparable being two sides of the same coin.



Closing the Loop: Listening and Learning Together

Listening is incomplete without reciprocity.

The Data Walk & Holiday Open House and March Forward gatherings were intentional efforts to bring insights back to community—not as finished conclusions, but as shared reflections. Participants reviewed what was heard. They refined language. They added context. They connected with others experiencing similar challenges.

In those rooms, listening became reciprocal.

Sharing data back to community signaled something essential: stories shared in trust would not disappear into internal strategy discussions. Learning belongs to all of us.

From the outset, the Summer Community Listening Initiative (SCLI) was designed to genuinely engage communities, amplify their voices, and return the data that they gave back to them. HFNLC does not own this data—the community does.

We were honored and privileged to be able to listen to community members, collect and analyze the data, and to package and deliver it to the community in ways that were culturally appropriate free of jargon and academic language. This approach to community engagement decreases silos, increases accountability, and fosters trust across sectors and communities.

Listening as Leadership

Looking back, there is a clear progression.

Relationship-building created trust.
Trust encouraged openness.
Openness revealed patterns.
Patterns demanded intention.
Intention created structure.
Structure reinforced trust.

**Listening is no longer simply
how we gather insight. It is
how we share leadership.**

In complex and changing times, leadership rooted in listening allows us to remain adaptable without losing grounding. It enables us to grow toward equity while staying deeply connected to the communities we serve.

Listening remains both practice and promise—the root system beneath everything we build next.

Building on the Summer Community Listening Initiatives of 2024 and 2025, we will move into our Summer Community Learning Initiative 2026 phase—convening community stakeholders to learn from and with subject matter experts and policymakers on the Social Drivers of Health that matter most to them.



This collaborative learning will continue to shape HFNLC's organizational practices, how we show up in communities, and how we make strategic investments across northern Lake County—particularly in communities that have been under-resourced and experience the greatest health inequities.

Growing together through continuous listening and shared action will remain central to advancing health equity. This is HFNLC's ongoing commitment to improving the health of our communities—in partnership with **you**.



We firmly believe that those most affected by health inequities must be part of creating solutions.

-HFNLC Team



WHAT IMPACTS YOUR HEALTH THE MOST?

Health is shaped by far more than clinical care alone. Stable employment, access to care, social connection, and the ability to prepare healthy meals all influence whether individuals and families can thrive. These social drivers of health are powerful predictors of long-term wellbeing—and persistent barriers to health equity when they are out of reach.

Across northern Lake County, our grantee partners address these drivers not as abstract concepts, but as lived realities. Through workforce development, mobile and community-based healthcare, relationship-centered engagement, and skills-based food access, they meet community members where they are and respond to the conditions that shape daily life.





INVESTING IN SOCIAL DRIVERS OF HEALTH

Grantees Advancing Health Equity

1. EMPLOYMENT & INCOME:

YouthBuild Lake County

Economic Stability as an Upstream Driver of Health

For many young people entering YouthBuild Lake County (YBLC), the goal is simple: earn a diploma, secure a job, and move forward. But the pathway is rarely straightforward. Participants often arrive to YBLC carrying responsibilities and stressors that extend far beyond the classroom—unstable housing, caregiving for siblings or children, justice system involvement, and the daily strain of living at or near poverty.

“Young people come to us because what they’ve done before hasn’t worked,” shared Executive Director Tameka Wilson. “But it’s not just the lack of a diploma—it’s the stressors of life that put them in a constant state of fight or flight.”

YouthBuild’s workforce model is intentionally designed to address these realities. Alongside vocational training and academic support, the program offers individualized case management, trauma-informed instruction, and consistent, predictable structures that rebuild trust in systems many participants have been let down by before. Instructors act as mentors and advocates, asking why when behavior shifts, rather than making assumptions—an approach that directly supports mental and emotional wellbeing.

For Angel, a former participant navigating housing instability, family caregiving, and grief after the loss of his father, that consistency mattered.

Over time, YouthBuild became a stable anchor—one that helped him build trust, show up reliably, and envision a future beyond survival mode. Today, he is employed full-time in facilities work after being recruited through a volunteer project, a shift that reflects more than job placement—it signals growing confidence, stability, and agency.

That stability has had a profound impact on Angel’s life. As he shared: “It has been an amazing opportunity to have stable employment compared to in the past, when I couldn’t get a real job because I didn’t have any experience or credentials. Before YouthBuild, I was moving from part-time job to part-time job as an entry-level employee.”

“Being employed gives me a sense of purpose—knowing that I’m able to provide for myself, my family, and others. From purchasing a vehicle and paying for insurance to getting an apartment and having a stable living situation, even being able to buy clothes and essentials when needed—it would be impossible without stable income. It honestly feels great.”

Economic security is one of the strongest predictors of long-term health. As Wilson put it, “The more we move the needle away from the cycle of poverty for this next generation, the greater the health impact.”

2. HEALTHCARE ACCESSIBILITY & AVAILABILITY:

Rosalind Franklin University – Community Care Connection’s Mobile Clinic

Bringing Care to the Community

For many residents across northern Lake County, accessing healthcare is shaped as much by barriers as by need—transportation challenges, language differences, limited time off work, and fear rooted in past experiences with complex systems. The Care Connection mobile health model responds by bringing care directly into neighborhoods, meeting people where they are and building trust one interaction at a time.

“We’d rather see someone come back to us many times than avoid care altogether,” said Aurora Rios, RN, reflecting on how trust drives utilization. “Once people understand that we’re here for them, they keep coming back—and they bring their families.”



That trust is deeply felt by community members. As Maria, a regular visitor, shared, “I trust the Care Coach because of how comfortable they make me feel and really seem to care about my concerns. They welcome me to keep coming back with questions. I love that the team comes to where I already frequent.”

Trust can also be lifesaving. During a community job fair, a man seeking employment stopped by the mobile Care Coach and was screened by Mayra Trujillos, Program Coordinator, and the CareCoach team. His blood sugar was dangerously high, and his blood pressure was severely elevated. He was immediately referred to the emergency room and, following discharge, connected to ongoing primary care, medication

access, transportation support, food resources, housing assistance, and job opportunities—ensuring he did not fall through the cracks.

“We’re kind of there in between,” Mayra explained. “People might hear a diagnosis, but not really understand what it means. We take the time to sit with them, explain their numbers, and help them prepare for their next appointment.”

This education-focused, relationship-centered approach is a defining feature of the program. Care coaches provide follow-up calls, health literacy support, and warm handoffs to trusted partners, ensuring community members are not navigating care alone. Even patients who are already established with a primary care provider often return to the mobile clinic for guidance, reassurance, and clarity.

For others, the program removes a financial barrier at a critical moment. After losing his job and health insurance, David turned to the Care Coach for help. “I was quoted over \$200 for my vaccine,” he said. “Being able to receive it for free through the mobile clinic really helps, because I can now use that money for my other bills while still taking care of my health.”

From a systems perspective, Jeff Espina, Rosalind Franklin University Vice President of Clinical Services, has seen how this consistency changes behavior. “Our goal is always to steer the patients to brick-and-mortar care,” he noted, “but because of the trust and comfort the Care Coach team provides, patients continue to engage instead of falling out of care entirely.”

Despite heightened fear related to immigration enforcement and insurance instability, demand for the mobile clinic continues to grow. Community members refer friends and family, signaling confidence not only in the care provided, but in the partnerships that make continuity, dignity, and access possible.

3. COMMUNITY ENGAGEMENT & SOCIAL SUPPORT: Antioch Area Healthcare Accessibility Alliance (AAHAA)

Relationship-based Support as a Pathway to Health

In communities where health systems feel distant—or inaccessible altogether—relationships often determine whether care is sought at all. In the Antioch area, where limited transportation and a lack of nearby providers create a healthcare desert, the Antioch Area Healthcare Accessibility Alliance (AAHAA) has become a trusted local anchor by doing something simple and powerful: staying with people.

“Trust determines whether people seek care at all,” said Executive Director Colleen Lennon. “We remember their story so they don’t have to repeat it.” That trust extends beyond navigating systems—it builds community.



For caregivers, isolation can arrive quickly. A loved one’s diagnosis changes daily life overnight. Round-the-clock care becomes the norm. Plans shift. Friendships strain. Routines disappear. As caregivers begin searching for solutions—medical appointments, benefits, housing adjustments—they are also quietly adjusting to a new version of their own lives.

What many discover is that they need more than resources. They need someone to talk to. They need a space to share frustrations without judgment. They need reassurance that the range of emotions they feel—anger, grief, exhaustion, guilt—are normal. They need community. AAHAA’s caregiver support groups provide that space.

In these gatherings, younger caregivers caring for a disabled child sit beside spouses caring for partners

with dementia. Parents caring for adult children share the circle with siblings navigating new responsibilities. What begins as resource-sharing often becomes something deeper: mutual recognition.

One caregiver frequently expressed frustration about her circumstances. During one session, she listened quietly as a younger mother described the daily realities of caring for her young child with significant disabilities. As she listened, her demeanor softened. She began offering ideas and encouragement. By the end of the session, she embraced the young mother and shared that she was going home feeling better about herself that day.

In these moments, social connection itself becomes a health intervention. Caregivers leave not only with information, but with perspective, encouragement, and a renewed sense of belonging. They recharge. They feel less alone. They build relationships that extend beyond the meeting room.

AAHAA’s work extends beyond caregiver groups. Through network nurse visits, transportation support, benefits navigation, and health literacy programming, staff provide steady reassurance during moments of confusion and stress. Whether helping families navigate shifting SNAP regulations, secure asthma medication after insurance changes, or connect to pediatric appointments and basic necessities, AAHAA remains a consistent presence. But at its core, the model is relational.

In a healthcare desert, information alone is not enough. Community is infrastructure. Trust is prevention. Shared space reduces isolation before it becomes crisis. By creating places where people can exchange ideas, offer support, and feel understood, AAHAA demonstrates that community engagement and social support are not secondary to health—they are central to advancing health equity.

4. HEALTHY, ACCESSIBLE FOOD: YWCA Metropolitan Chicago

Food Security as Skills, Dignity, and Connection

For many families balancing work schedules, childcare, and tight budgets, healthy eating often comes second to convenience. The YWCA’s food and nutrition programming reframes food access not as restriction, but as empowerment—building skills, confidence, and community around everyday meals.

“Oftentimes, it’s easier to go through the drive-through than get home and cook,” said Andrea Whitsitt, Coordinator of Health Promotion Navigation, reflecting the reality many participants face. “Schedules, transportation, and access to fresh food all shape what people are actually able to do.”

Through hands-on cooking demonstrations led by a chef and supported by education from a registered dietitian, participants learn how to prepare affordable, culturally responsive meals using accessible ingredients. Recipes are paired with grocery price comparisons, SNAP eligibility guidance, and practical strategies like meal prepping and batch cooking—small shifts that make healthier choices realistic rather than aspirational.

For one participant, the experience quickly became more than just a class. “I started coming because my friends invited me, but I continued to come because we talked about food and I was able to try something new. I liked the brussel sprout recipe.” (Translated from Spanish.) What began as a social invitation became an opportunity to expand her skills and confidence in the kitchen—trying ingredients she had never prepared before and discovering new flavors in the process.

The program has intentionally evolved to meet participants where they are. This year, classes shifted from spotlighting a single ingredient to focusing on sustainable lifestyle changes—planning meals ahead, cooking in batches, and modifying familiar foods to be healthier. “We’re looking at how small changes can fit into real life,” Andrea explained, “especially for parents who are constantly on the go.”



As another community member shared, “It’s different reading a recipe than seeing it be made. I was able to ask questions about how this helps my health and get actual information.” (*translated from Spanish*). That opportunity to connect food choices directly to health outcomes—while asking questions in a trusted, supportive environment—builds understanding that lasts beyond the classroom.

One participant, previously managing prediabetes, high cholesterol, and high blood pressure, began incorporating class recipes alongside daily walking. Today, she is no longer prediabetic and reports having more energy to care for her grandchildren—an outcome that reflects both improved health and quality of life.

According to Stephanie Reynaga, Community Health Navigator, the classes often grow beyond the individual. “We started mostly with moms,” she shared, “and now we’re seeing them bring their husbands, their kids. It becomes a family-centered experience, not just one person trying to make changes alone.”

The program also creates moments of unexpected connection. During one class, a woman who had been attending while supporting a loved one in treatment learned she was in remission from cancer the day before. The group paused to celebrate together—turning a cooking demonstration into a moment of shared joy.

By centering skills, dignity, and belonging, the YWCA’s approach demonstrates how access to healthy food strengthens not only physical health, but resilience and connection—key building blocks of health equity.

BUILDING A HEALTHIER WORKFORCE FOR LAKE COUNTY

According to Lake County Workforce Development (LCWD), our healthcare workforce faces a rising demand and constrained supply of healthcare workers. Their data indicate a high need for nurses, allied health workers, and primary care and behavioral health providers, in addition to non-clinical workers. Moreover, they contend, “the strongest opportunities for philanthropy appear to be expanding behavioral health pathways, strengthening entry-to-mid-skill healthcare ladders, and supporting recruitment/retention strategies tied to underserved communities.” The Healthcare Foundation of Northern Lake County (HFNLC) heeds this call as demonstrated by supporting scholarships totaling \$2,212,750 across seven organizations and thirty-five grants, system capacity initiatives focused on workforce totaling \$808,445 across five organizations and fourteen grants, organizational capacity grants focused on workforce development totaling \$57,750 across three organizations and three grants, and grants to organizations with workforce missions and healthcare and capacity-building programs totaling \$1,146,750 across three organizations and forty grants. We will continue to support workforce initiatives because we understand that employment and income are important Social Drivers of Health, and that without a robust, sustainable, and thriving Lake County healthcare workforce, we will also suffer, but those disproportionately impacted will be low-income and under-resourced communities.

Access to quality healthcare requires significant workforce investment, innovative pipelines and pathways, and collaborative partnerships. Philanthropy cannot do this work alone. HFNLC values the voices of healthcare, public health, and academic leaders who are educating the next generation of medical providers. **Here is what they say:**



I believe a strong healthcare workforce begins with opportunity—opportunity that reflects our community and opens doors for families across Lake County. When we invest in expanding access to healthcare roles and meaningful employment, we’re doing more than filling jobs—we’re strengthening economic stability, improving health outcomes, and supporting the overall wellbeing of our families. Work, income, and health are deeply connected, and a strong, inclusive workforce is essential to a healthier community.

-Iliana A. Mora, President, Advocate Condell Hospital

Strengthening our healthcare workforce starts with investing in people from our own communities in Lake County. By expanding career pathways and providing meaningful training opportunities, we build a resilient workforce that improves patient experience and outcomes and contributes to economic vibrancy in our region.

-Seamus Collins, President, Northwestern Medicine Catherine Gratz Griffin Lake Forest Hospital



At City of Hope, I believe strengthening healthcare in Lake County starts with people. Our vision for strengthening the healthcare workforce in Lake County is grounded in access, equity, and long-term sustainability. A diverse, well-prepared workforce not only improves patient outcomes, but also strengthens families and the local economy by creating stable jobs with living wages. By investing in people, we are investing in the health, wellbeing, and future of our entire region.

-Pete Govorchin, President, City of Hope

The availability of a skilled healthcare workforce is fundamental to delivering essential healthcare services, especially in a safety-net setting where patients face multiple barriers to health. At Erie HealthReach Waukegan Health Center, we continue to invest in training programs for medical providers, medical assistants, and other key roles while undertaking initiatives to ensure our staff feel engaged and valued. We are committed to recruiting, growing, and retaining healthcare professionals at Erie HealthReach Waukegan who can provide the affordable, holistic, and high-quality healthcare that our patients need and deserve.

-Lee Francis, MD, MPH, President and CEO, Erie Family Health Centers



The Lake County Health Department and Community Health Center is grateful for the opportunity to enhance leadership development for future public health leaders in Lake County. Supporting the professional development and leadership capacity of public health and healthcare leaders is essential to building effective and sustainable organizations that work for the betterment of everyone in Lake County!

-Christopher Hoff, Executive Director, Lake County Health Department and Community Health Center

Rosalind Franklin University of Medicine and Science is dedicated to improving our community by educating a diverse work force prepared to improve the wellness of all our neighbors in Lake County. We do that by educating health care providers from Lake County who remain in Lake County's most underserved communities. When we conduct research, train researchers, or educate health providers we create good jobs, new companies, and economic opportunities for our neighbors.

-Dr. Aron Sousa, President & CEO, Rosalind Franklin University



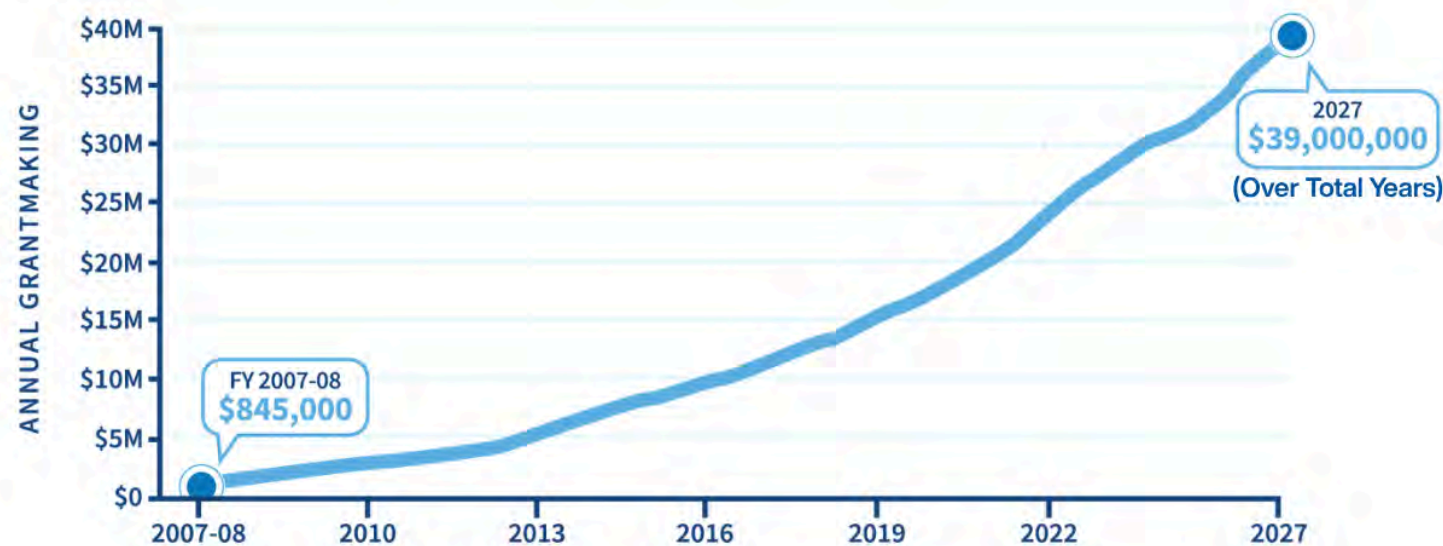
PLACE MATTERS.

For twenty years, HFNLC's grantmaking has remained rooted in northern Lake County communities. While the Foundation's grantmaking has grown significantly over time, our commitment to investing in communities experiencing the greatest health inequities has remained constant.

CUMMULATIVE GRANTMAKING

\$845K → \$39M

ANNUAL GRANTMAKING INCREASED MORE THAN 314%



890+
GRANTS AWARDED

\$39M
AWARDED SINCE 2007-08

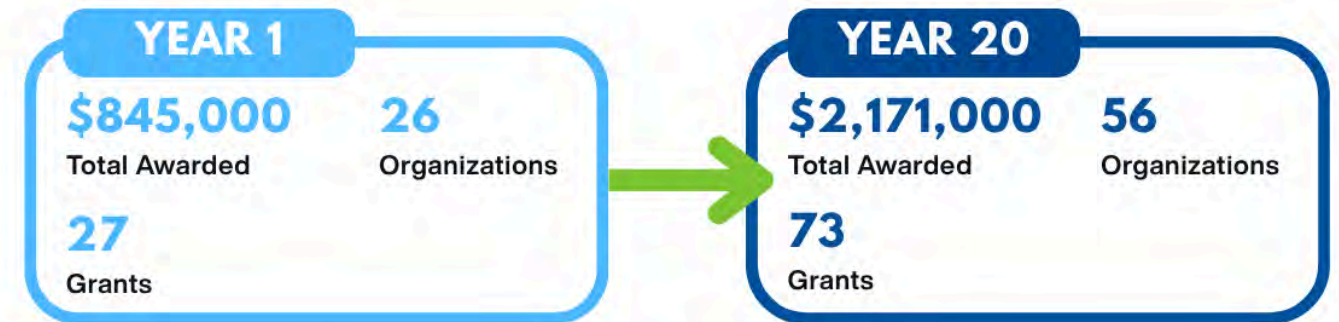
56
ORGANIZATIONS
SUPPORTED IN 2027

Since its first grant cycle in FY 2007–08, HFNLC has awarded nearly **\$39 million** through more than 890 grants supporting organizations across northern Lake County. During this time, annual grantmaking grew from \$845,000 in Year 1 to more than **\$2 million** in 2025, reflecting both the expansion of the Foundation's resources and a deepening investment in community health, prevention, and systems-level change.

20 YEARS OF INVESTMENT

HFNLC Grantmaking Reach Across the Years

From a small cluster of early investments to a connected regional network of partnerships, HFNLC's grantmaking footprint has grown alongside the communities it serves. What began in Year 1 with a limited number of grants concentrated in a handful of locations evolved over two decades into sustained investments reaching communities across northern Lake County.



OUR INVESTMENTS SUPPORT:

- HEALTHCARE ACCESS & PREVENTION
- FOOD ACCESS & NUTRITION
- YOUTH & FAMILY WELLBEING
- WORKFORCE DEVELOPMENT
- MENTAL HEALTH & BEHAVIORAL HEALTH
- TRANSPORTATION & OTHER SUPPORTS
- SYSTEMS CHANGE & COMMUNITY PARTNERSHIPS

The map reflects more than growth in funding—it illustrates enduring relationships, expanding collaboration, and a continued commitment to communities too often overlooked or under-resourced. Across healthcare access, food systems, youth wellbeing, workforce development, mental health, and community partnerships, HFNLC's investments have remained rooted in place while growing in scale, reach, and collective impact.



THIS WORK BELONGS TO ALL OF US

Reflections From Our Board and Staff on What it Means to Be Rooted in Community and Growing Toward Equity

Being rooted in community means starting with listening—and continuing to listen, even when the answers are complex or still unfolding. As one board member shared, “the best ideas can come from those closest to the work... by prioritizing community voices, we’ve learned to look past the surface and start addressing the underlying reasons why health disparities exist in the first place” (Sam Johnson, Board Member, Chair of Nominating and Governance Committee). This commitment shows up in how we engage with partners every day. “When we keep things simple, communicate clearly, and stay responsive, we show respect for our partners’ time, knowledge, and the work they’re doing in their communities... leading with trust helps move relationships beyond transactions and toward real partnership” (Meredith Polirer, Staff, Director of Operations).

Trust-based philanthropy is how we carry that commitment forward. It means “leaning into our grantees as partners—sharing space with them in community, listening before deciding, and designing systems that reduce administrative burden rather than add to it... using power to support rather than control” (Angela Baran, Staff, Senior Director of Community Impact Programs). In a time of uncertainty and strain, this approach is not optional—it is essential. As one board member noted, “we are in a unique position to allow our grantees the flexibility to adapt quickly... These may be the times that put our trust-based philanthropy to the test” (Mike Duffy, Board Member, Secretary).

Being rooted in community also means recognizing that each of us contributes in different ways. Every board member, staff member, grantee, and community partner brings unique expertise, perspectives, and experiences that strengthen our collective work. Whether through governance, stewardship, relationship-building, strategy, or direct engagement with the community, these complementary roles help ensure that our decisions are informed, our resources are used thoughtfully, and our work remains both grounded and sustainable. This shared responsibility—across staff, board, and partners—reflects our belief that lasting change is built through collaboration rather than any one individual or organization.

But listening and partnership must lead to action. Being rooted in community means “moving beyond intentions and into action... shifting from high-level goals to measurable, equitable outcomes,” ensuring that our commitments to equity are reflected in how we operate and where we invest (Dr. Melissa Chen, Board Member). Through efforts like our Summer Community Listening Initiatives, we continue to create space for shared dialogue—spaces that serve as “a crucible of dreaming and planning... part of the work we all have to do to hold ourselves accountable to a vision where everyone in Lake County prospers” (Dr. Frances Baxley, Board Member, Chair).

These experiences continue to shape how we see our role. “Listening to the community has reminded me that the right level of support is

not always the most obvious... what people need often sits between traditional models,” requiring us to remain flexible and willing to meet people where they are (Myleene Bosch, Board Member). They also reinforce the importance of deep relationships and local knowledge. As one board member reflected, “we listen, we respond, we serve, and we fund... being rooted in community, we are always adapting as the needs of the community change,” grounding our work in responsiveness and trust (Gary Potter, Board Member).

At the same time, we recognize that advancing health equity requires more than individual programs. As one board member shared, “it’s imperative that foundations’ work be centered in the real-world experience of communities... there is a role to play not only in funding programming, but in being in community—listening, observing, convening—with those doing the work on the ground.” This includes “aligning funding opportunities with organizations that can create lasting impact” and building “deeply rooted relationships with grantees... that ensure investments lead to lasting change” (Adam Carson, Board Member, Chair of Beneficiary Selection Committee). This work is complex, especially in a shifting social and political climate, but it is necessary if we are to address the root causes of inequity.

As we look ahead, we do so grounded in the understanding that we are not separate from the communities we serve—we are part of them. “We live here. We work here. We raise our families here... we have a personal stake in the health outcomes of our neighbors and colleagues,” reinforcing that this work is both professional and deeply personal (Megan Brady, Board Member, Vice-Chair). This sense of shared

responsibility strengthens our commitment to listening, learning, and responding in ways that build trust and advance meaningful change.

The Healthcare Foundation of Northern Lake County will continue to play “a unique role as a leader in progressive solutions towards closing the gap in health disparities... leaving a positive track record with documented outcomes into the future” (Casandra Slade, Board Member). We believe that trust, collaboration, and sustained investment in community leadership will continue to strengthen not only programs, but the collective power of communities to create change. As one board member shared, “our emphasis on trust and collaboration will lead to a greater sense of community members’ own power to create change... support for networking and coalition-building... can make a real difference” (Sunny Sonnenschein, Board Member, Member-at-Large).

In this moment, we are reminded of both the challenges ahead and the strength within our community. As Dr. Venoncia Baté-Ambrus shared, “these are trying times for our community, but what gives me confidence about our ability to navigate uncertainty and change is our shared commitment to improving community health and wellbeing, addressing the Social Drivers of Health, and decreasing silos across systems for better communication, coordination, and patient-provider experiences” (Dr. Venoncia Baté-Ambrus, Executive Director).

**This work belongs to all of us.
And together, we will continue
growing toward equity.**



BOARD OF DIRECTORS

Executive Committee Members

Frances Baxley, MD
BOARD CHAIR
Family Physician, Department
of Integrative Medicine
Northshore University Health System

Megan Brady, Esq
VICE CHAIR
Family Physician
Managing Attorney
Prairie State Legal Services, Inc.

Michael Duffy
SECRETARY
Attorney
Law Office of Michael Duffy, LLC

John Reakes, CFP
TREASURER (RETIRED)
Financial Advisor
Old National Bank Investments

Sunny Sonnenschein
OFFICER AT LARGE
Consultant

Board Members

Gary Potter, CPA
Director of Finance
Heart of the City

Igaël Hamburg
Director of Sales and Marketing
Solstice Senior Living

Myleene Bosch, MSN, RN
Civic Leader

Casandra Slade
Former Secretary and Former
Treasurer Senior Vice President,
CRA/Community Development
Wintrust Financial

Adam Carson
Business Owner
Drip & Culture

Melissa Chen, MD
Internal Medicine Physician/
Clinical Director
*Rosalind Franklin University/
Interprofessional Community Clinic*

Sam Johnson, MBA, LCPC, RDDP
Director, Behavioral Health
*Lake County Health Department
and Community Health Center*

Recent Retired Board Members

Scott McLellan
Retired Board Member (2024)
Executive Director
Julian Grace Foundation

Nancy Waites
Retired Board Member (2023)
Attorney/Retired Judge

Magdalena McElroy, RN, LCSW
Retired Board Member (2025)
Civic Leader

Laura Ramirez
Retired Board Member (2025)
Associate Director
Highwood Public Library

Dave Hatton, CFP, EA
Retired Board Member (2025)
Former Treasurer Wealth Advisor, VP
Old National Bank

Non-Board Committee Members

Gabe Conroe, Esq.
Associate Judge
Lake County 19th Judicial Court

Tulio Rodriguez, MD
Director of Bone Marrow
Transplant, and Cellular Therapy
City of Hope Chicago

Nadine Johnson, MBA, CTP
Senior Vice President
Old National Bank

LEADERS WHO HAVE GUIDED THE WAY



Over the past two decades, HFNLC has been shaped by steady and dedicated board leadership. We are especially grateful to the individuals who have served as Board Chair—guiding the Foundation through moments of growth, transition, and renewed commitment to community.



Suzanne McWilliams
2006–2010



William A. Ensing, Esq.
2010–2016



Mary C. Dominiak
PhD, MBA, RN
2016–2018



Lou Berrones, Esq.
2018–2023



Frances Baxley, MD
2023–2026

Each Chair brought thoughtful stewardship and distinct perspective to their tenure, helping to strengthen governance, deepen partnerships, and ensure that HFNLC remained rooted in service to northern Lake County. Their leadership has helped build the strong foundation on which we continue to grow toward equity.

Ernest Vasseur (2006-2022)

FOUNDING EXECUTIVE DIRECTOR



We also extend our deep gratitude to Ernest Vasseur, Founding Executive Director of HFNLC, whose vision and leadership helped establish the Foundation's enduring commitment to improving community health and wellbeing in northern Lake County.

His guidance during the Foundation's formative years helped shape HFNLC's values, relationships, and long-term dedication to community-centered philanthropy.



In our first year of funding, HFNLC partnered with organizations that helped lay the foundation for our work. Nearly all those inaugural grantees remain partners today—a testament to the strength of long-standing community relationships.

Organizations marked with ❤️ were among our initial grantees.
Organizations marked with a ★ are new grantees this past year.

- | | |
|---|--|
| Advocate Charitable Foundation | Family First Center of Lake County |
| Antioch Area Healthcare Accessibility Alliance | Family Focus |
| Arden Shore Child and Family Services ❤️ | Friends of the Highwood Public Library |
| Art Impact Project NFP | Gateway Charitable Foundation ★ |
| Boys and Girls Club of Lake County | Heart of the City |
| Brushwood Center at Ryerson Woods | Hispanic American Community Education and Services |
| Cancer Wellness Center | Independence Center ❤️ |
| Catholic Charities of the Archdiocese of Chicago ❤️ | Kids Above All Illinois ❤️ |
| Center for Immigrant Progress ★ | Kids Rank |
| Chicago Workers Collaborative | Lake County Community Foundation |
| City of Hope Chicago ★ | Lake County Crisis Center (Known as A Safe Place) |
| Coalition for Health Communities | Lake County Health Department and Community Health Center ❤️ |
| College of Lake County | LGBTQ+ Center Lake County ★ |
| Community Youth Network ❤️ | Loyola University Chicago |
| Cristo Rey St. Martin College Prep ❤️ | Mano a Mano Family Resource Center ❤️ |
| ElderCARE Lake County ❤️ | Mobile C.A.R.E Foundation |
| Equal Hope | Nature's Emporium Community Outreach ★ |
| Erie Family Health Center | Nicasa Behavioral Health Services |

- | | |
|---|-------------------------------------|
| Northwestern Memorial Foundation ❤️ | The Josselyn Center |
| One Hope United ❤️ | Transitional Living Services ★ |
| PADS Lake County ❤️ | United Way of Lake County |
| Planned Parenthood of Illinois | University Center of Lake County ❤️ |
| Prairie State Legal Service ★ | Wauconda Fire Protection District |
| Roberti Community House | Waukegan to College |
| Rosalind Franklin University Health System | Willow House |
| Rosalind Franklin University of Medicine and Science ❤️ | Youth & Family Counseling |
| TASC, Inc. | Youth Conservation Corps |
| The Allendale Association | YouthBuild Lake County ❤️ |
| The Community Works | YWCA Metropolitan Chicago |
| The Cradle ★ | Zacharias Sexual Abuse Center ❤️ |
| The HAP Foundation | Zion Benton Children's Service ❤️ |

We also honor our additional inaugural partners whose early collaboration helped establish the Foundation's work.

- HealthReach*
- NorthShore University Health System Foundation*
- Thresholds*
- Waukegan Public Schools*
- American Cancer Society – Illinois Division*
- Lake County Sponsors*
- NorthPointe Resources (now known as Aspire)*
- Waukegan Township*

**THANK YOU FOR SUPPORTING
WHOLE HEALTH**



Those who have health,
have hope; Those who have
hope, have everything.

-Arabian Proverb



OUR MISSION

The Healthcare Foundation of Northern Lake County supports efforts that improve access to health services for underserved 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 the capacity of effective organizations and programs; and **fostering innovative solutions** to persistent healthcare access problems.

OUR HISTORY

The Healthcare Foundation of Northern Lake County was incorporated on June 6, 2006. It was funded with the proceeds of the sale of two institutions that for much of the 20th century provided a range of compassionate and innovative healthcare services to Waukegan and surrounding communities: Saint Therese Medical Center and Victory Memorial Hospital. Through its work, the Foundation **continues their legacy**.



CONTACT US

1200 UNIVERSITY CENTER DR SUITE #333
GRAYSLAKE, IL 60030, USA
(847) 377-0525 | WWW.HFNLC.ORG

