

•Ascension Resurrection•

**Implementation Strategy for the TY2021 CHNA
Cook County, Illinois**



Ascension

The purpose of this implementation strategy is to describe how the hospital plans to address prioritized health needs from its current Community Health Needs Assessment. The significant health needs that the hospital does not intend to address are identified and a rationale is provided. Special attention has been given to the needs of individuals and communities who are more vulnerable, unmet health needs or gaps in services, and input gathered from the community.

Ascension Resurrection
7435 W Talcott Ave, Chicago, IL 60631
healthcare.ascension.org
773-774-8000
36-2235165

The TY21 Implementation Strategy was approved by the Ascension Chicago Metro Hospitals Board of Directors on October 26, 2022 (2021 tax year), and applies to the following three-year cycle: July 2022 to June 2025 (FY 2023 - FY 2025). This report, as well as the previous report, can be found at our public website.

We value the community's voice and welcome feedback on this report. Please visit our public website (<https://healthcare.ascension.org/chna>) to submit your comments.

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Introduction

As one of the leading non-profit and Catholic health systems in the United States, Ascension is committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable.

Ascension Resurrection

As a Ministry of the Catholic Church, Ascension Resurrection is a non-profit hospital that provides medical care to Chicago and the surrounding communities. Ascension Resurrection is part of Ascension Illinois which operates 15 hospital campuses and 230 sites of care. The organization includes more than 600 providers as part of Ascension Medical Group, as well as 17,000 associates.

Serving Illinois since 1953, Ascension Resurrection is continuing the long and valued tradition of addressing the health of the people in our community, following in the footsteps of the legacy of the Sisters of the Resurrection. Resurrection is a 337-bed academic hospital located on the northwest side of Chicago and serves Chicago community areas as well as in Suburban Cook County areas.

For more information about Ascension Resurrection, visit healthcare.ascension.org.

Overview of the Implementation Strategy

Purpose

This implementation strategy (IS) is the hospital's response to the health needs prioritized from its current Community Health Needs Assessment (CHNA). It describes the actions the hospital will take to address prioritized needs, allocate resources, and mobilize hospital programs and community partners to work together. This approach aligns with Ascension Resurrection's commitment to offer programs designed to address the health needs of a community, with special attention to persons who are underserved and vulnerable.






IRS 501(r)(3) and Form 990, Schedule H Compliance

The CHNA and IS satisfy certain requirements of tax reporting, pursuant to provisions of the Patient Protection and Affordable Care Act of 2010, more commonly known as the Affordable Care Act (ACA). As part of the ACA, all not-for-profit hospitals are required to conduct a CHNA and adopt an implementation strategy every three years. Requirements for 501(c)(3) Hospitals Under the Affordable Care Act are described in Code Section 501(r)(3), and include making the CHNA report (current and previous) widely available to the public. In accordance with this requirement, electronic reports of both the CHNA and the current implementation strategy can be found at <https://healthcare.ascension.org/CHNA> and paper versions can be requested at Ascension Resurrection's Community Service Programming department by calling 773-990-5022.

Process to Prioritize Needs

Included in Code Section 501(r)(3) is the requirement that hospitals must provide a description of the process and criteria used to determine the most significant health needs of the community identified through the CHNA, along with a description of the process and criteria used to determine the prioritized needs to be addressed by the hospital. Accordingly, Ascension Resurrection used a phased prioritization approach to identify the needs with the hospital community. The first step was to determine the broader set of identified needs. Through the CHNA assessment, identified needs were then narrowed to a set of significant needs which were determined most crucial for community stakeholders to address.

Following the completion of the CHNA assessment, significant needs were further narrowed down to a set of prioritized needs that the hospital will address within the implementation strategy. To arrive at the prioritized needs, Ascension Resurrection used the following process and criteria: review of additional primary and secondary data collected during the CHNA assessments for the hospital's primary service area, followed by the use of the five criteria below to prioritize the significant needs:

	<p>Scope of Problem:</p> <ul style="list-style-type: none"> • How severe or prevalent is this issue in the community? • How many are impacted?
	<p>Disparities & Equity:</p> <ul style="list-style-type: none"> • Are there health disparities that exist? • Can we address those in an impactful way?
	<p>Feasibility:</p> <ul style="list-style-type: none"> • What is our capacity to make progress (staffing resources, financial resources, other support, etc.)? • Are there known interventions that exist?
	<p>Momentum:</p> <ul style="list-style-type: none"> • Is there community readiness and/or political will to address this issue?
	<p>Alignment:</p> <ul style="list-style-type: none"> • Do we have community partners that we can align with on this issue? • Do we need to build new relationships?

Preliminary community need prioritization recommendations were presented to a group of internal and external stakeholders for their review at meetings held in June 2022-August 2022. Recommendations were discussed and voted upon to determine the prioritized needs for the hospital community.

Needs That Will Be Addressed

Following the completion of the current CHNA, Ascension Resurrection has selected the prioritized needs outlined below for its TY21 implementation strategy. Ascension has defined “prioritized needs” as the significant needs which have been prioritized by the hospital to address through the three-year CHNA cycle:

- **Social and Structural Determinants of Health -**
 - **Food Access and Food Security (SDoH - Food Security):** This need was selected

- because access to healthy food was identified within the top six most important needed improvements on the community survey. From the Community Input Survey, 20% identified access to healthy food as a need to improve health. This need was voted the top need in this category in the prioritization process. The top five most common searches in the Community Resource Directory included food pantries, food assistance, and food delivery.
- **Transportation (SDoH - Housing & Transit):** This need was selected because lack of transportation creates additional barriers to access health care especially for the elderly, low-income, and disabled persons. From the Community Input Survey, 16% identified access to transportation as a need to improve health. The top three most common searches in the Community Resource Directory included transportation for healthcare and transportation in general.
 - **Economic Vitality and Workforce Development (SDoH - Education):** This need was selected as education is an important determinant of health because poverty, unemployment, and underemployment are highest among those with lower levels of educational attainment. Higher levels of poverty are primarily concentrated in the far Northwest, West, and South sides of the city and county. Additionally, workforce needs and challenges, specifically for healthcare, were listed as high priority in the CHNA stakeholder listening sessions.
 - **Access to Care and Community Resources -**
 - **Resources, Referrals, Coordination, and Connection to Community-Based Services (Access to Care):** This need was selected because in the CHNAs focus groups, access to needed healthcare and community resources are named as critical components to achieving the best health outcomes. This need was voted the number two need in this category in the Ascension Resurrection prioritization process.
 - **Timely Linkage to Quality Care, including Behavioral Health and Social Services (Access to Care):** This need was selected because Health insurance is the primary way that individuals access the healthcare system in the United States with 56% of Cook County residents receiving coverage through employer-based plans. Eleven percent of the population under age 65 are without health insurance in Cook County compared to 9% in Illinois. Eighteen percent (18%) of respondents to the community survey reported a loss of employment because of the pandemic, 6% reported a loss or reduction in insurance coverage, and 7% reported a lack of access to basic medical care. From the Community Input Survey, the most important needed improvements identified: access to mental health services (44%), access to health care (42%), and access to community services (42%). This need was voted the number one need in this category in the Ascension Resurrection prioritization process.
 - **Prevention and Treatment of Priority Health Conditions: Maternal and Child Health and Mental Health -**
 - **Maternal and Child Health (Maternal, Infant, Child Health):** This need was selected

- because maternal mortality rates in the United States have been increasing even though the global trend has been the opposite. In addition, vast maternal health inequities exist between racial and ethnic groups. Racial and ethnic disparities exist for preterm births, postpartum depression, violence, obesity and preventable complications. Nine percent (9%) of babies born in Cook County have a low birth rate compared to 8% for Illinois. There are 20 teen births per 1,000 female population ages 15-19 in Cook County compared to 18 for Illinois.
- **Mental Health (*Mental & Behavioral Health*)**: This need was selected because 36% of community survey respondents identified mental health as one of the most important health needs in their communities. In the Community Focus Groups, mental health and substance use (behavioral health) were two of the most discussed topics within focus groups. Forty-four percent (44%) of community survey respondents identified access to mental health services as being needed to support improvements in community health. The self-reported adult depression rates in Cook County are higher (17.3%) than national averages (10%). Similarly, youth depression has been on the rise. This need was voted in the top two of this category for the Ascension Resurrection prioritization process.

Ascension Resurrection understands the importance of all the health needs of the community and is committed to playing an active role in improving the health of the people in the communities it serves. For the purposes of this implementation strategy, Ascension Resurrection has chosen to focus its efforts on the priorities listed above.

Needs That Will Not Be Addressed

Based on the prioritization criteria, the health needs identified through the CHNA that Resurrection does not plan to address at this time include:

- **COVID-19**-This need will not be addressed in the Implementation Strategy, but we will continue to support through advocacy and community partnerships and public health collaboration as needed.
- **Injury including Violence-related Injury**-This need will not be addressed in the Implementation Strategy, but we will continue to support through advocacy, community partnerships and continued associate education..
- **Substance Use Disorders**- This need will not be addressed in the Implementation Strategy, but we will continue to support through advocacy and community partnerships.
- **Chronic Conditions**-This need will not be addressed in the Implementation Strategy, but we will continue to support through advocacy and community partnerships. Additionally, focusing on access to care services for the community will improve overall health including the prevention and management of chronic conditions.

While these needs are not the focus of this implementation strategy, Ascension Resurrection may consider investing resources in these areas as appropriate, depending on opportunities to leverage

organizational assets in partnership with local communities and organizations. Also, this report does not encompass a complete inventory of everything Ascension Resurrection does to support health within the community.

To find a list of resources for each need not being addressed, please refer to the Resurrection's TY2021 CHNA: <https://healthcare.ascension.org/CHNA>.

Acute Community Concern Acknowledgement

A CHNA and Implementation Strategies (IS) offer a construct for identifying and addressing needs within the community(s) it serves. However, unforeseen events or situations, which may be severe and sudden, may affect a community. At Ascension, this is referred to as an acute community concern. This could describe anything from a health crisis (e.g., COVID-19), water poisoning, environmental events (e.g., hurricane, flood) or other event that suddenly impacts a community. In which case, if adjustments to an IS are necessary, the hospital will develop documentation, in the form of a SBAR (Situation-Background-Assessment-Response) evaluation summary, to notify key internal and external stakeholders of those possible adjustments.

Written Comments

This IS has been made available to the public and is open for public comment. Questions or comments about this implementation strategy can be submitted via the website:

<https://healthcare.ascension.org/chna>.

Approval and Adoption by

To ensure the Ascension Resurrection's efforts meet the needs of the community and have a lasting and meaningful impact, the TY21 implementation strategy was presented and adopted by the Ascension Chicago Metro Hospitals Board of Directors on October 26, 2022. Although an authorized body of the hospital must adopt the IS to be compliant with the provisions in the Affordable Care Act, adoption of the IS also demonstrates that the board is aware of the IS, endorses the priorities identified, and supports the action plans that have been developed to address prioritized needs.

Action Plans

The IS below is based on prioritized needs from the hospital’s most recent CHNA. These strategies and action plans represent where the hospital will focus its community efforts over the next three years. While these remain a priority, the hospital will continue to offer additional programs and services to meet the needs of the community, with special attention to those who are poor and vulnerable.

STRATEGY #1: Food Access Assistance
Hospital(s) Name(s) Ascension Resurrection (AR)
Prioritized Health Need Social and Structural Determinants of Health (<i>SDoH: Food Security</i>)
Strategy Increase food access assistance for food insecure individuals for AR community residents.
Strategy Source <ul style="list-style-type: none"> ● Micro Pantry ● Community Garden ● Local Food Pantry Support and Partnerships
Objective By June 30, 2025, increase the number of individuals served annually by 10% from the Micro Pantry. By June 30, 2025, increase the pounds of produce grown in the Community Garden and donated annually by 5%
Target Population <ul style="list-style-type: none"> ● Target Population: AR community residents, including AR associates and patients ● Medically Underserved Population: Individuals experiencing food insecurity in AR community
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospitals: Ascension Mercy, Ascension Saint Joseph-Elgin, Ascension Saint Joseph-Joliet ● Joint Venture: “N/A” ● Collaborators: Ascension Illinois Food Access & Nutrition Workgroup; Greater Chicago Food Depository; New Hope Community Food Pantry; Boy Scouts of America; Faith Community Nursing; Norwood Park Senior Center; Resurrection College Prep ● Consultants: Touchpoint ● Other non-profit hospital - “N/A”
Resources Resources the collaborators plan to commit: <ul style="list-style-type: none"> ● Other Ascension hospital(s): staff time donated, funding/cash donations, materials to build and/or maintain community garden, education collateral, marketing resources, and others ● Joint Venture: “N/A” ● Collaborators: New Hope Community Food Pantry; Norwood Park Senior Center; Boy Scouts of America; Resurrection College Prep: staff/volunteer time donated ● Consultants: “N/A”

<ul style="list-style-type: none"> • Other non-profit hospital: "N/A" 	
ACTION STEPS: Micropantry	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Resurrection Community Health & Faith Community Nursing
Participate in Ascension Illinois Food Access & Nutrition Workgroup	Ascension Resurrection Community Health and Greater Chicago Food Depository
Identify internal resources for supporting food donations, food distribution, and food access program delivery	Ascension Resurrection
Establish food drive event dates	Ascension Resurrection
Identify potential community partners to support MicroPantry	Ascension Resurrection - Community Health
Provide funding support for local community food access programs and initiatives	Ascension Resurrection Community Support Review Committee; Ascension Illinois Community Benefit
Monitor work, evaluate progress, and report outcomes	Ascension Resurrection Implementation Strategy Workgroup and Community Health
ACTION STEPS: Community Garden	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Resurrection Community Health & Faith Community Nursing
Participate in Ascension Illinois Food Access & Nutrition Workgroup	Ascension Resurrection Community Health and Greater Chicago Food Depository
Maintain a community garden at Ascension Resurrection	Ascension Resurrection
Partner with the local food pantry, schools, and senior centers for assistance with annual planting, maintenance and watering	Ascension Resurrection - Community Health
Identify potential community partners to support the community garden	Ascension Resurrection - Community Health
Provide funding support for local community food access programs and initiatives	Ascension Resurrection Community Support Review Committee; Ascension Illinois Community Benefit
ACTION STEPS: Local Food Pantry Support and Partnerships	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Resurrection Community Health Director
Participate in Ascension Illinois Food Access and Nutrition Workgroup	Ascension Resurrection Community Health and Greater Chicago Food Depository
Identify local food pantries in need of financial support	Ascension Illinois Community Health Director

Provide funding support for local community food access programs and initiatives	Ascension Illinois Community Health Director
Monitor work, evaluate progress, report outcomes	Ascension Resurrection Implementation Strategy Workgroup and Community Health
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 data ● Target: Increase from baseline the following: Total number of meals/persons served; Total pounds of food provided; Total Cash Donations provided for Food Access to Community Partners ● Data Source; Data Owner: Feeding America; Greater Chicago Food Depository 	
ANTICIPATED IMPACT	
The anticipated impact of these actions is increased access to healthy food and reduced food insecurity.	

STRATEGY #2: Transportation Assistance
Hospital Name Ascension Resurrection (AR)
Prioritized Health Need Social and Structural Determinants of Health (<i>SDoH- Housing & Transit</i>)
Strategy Provide transportation services for patients and community residents.
Strategy Source <ul style="list-style-type: none"> ● Lyft Concierge Services ● Medi-Ride
Objective By June 30, 2025, increase the percentage of individuals that have been screened and connected to transportation assistance services.
Target Population <ul style="list-style-type: none"> ● Target Population: AR patients and community residents ● Medically Underserved Population: Individuals experiencing transportation barriers in the AR community especially the elderly, low-income, and disabled
Collaborators <ul style="list-style-type: none"> ● Other Ascension Hospitals: Ascension Mercy, Ascension Saint Alexius, Ascension Joseph-Elgin, Ascension Saint Joseph-Joliet, Ascension ● Joint Venture: N/A ● Collaborator: Lyft, Medi-Ride; Case Management - program collaborators ● Consultants: N/A ● Other Non-Profit Hospitals: N/A
Resources Resources the collaborators plan to commit:

<ul style="list-style-type: none"> Ascension Resurrection: staff time donated for program maintenance Ascension Resurrection: cash donations to community organizations in need of transportation assistance services Lyft Concierge Services, Medi-ride: Program Coordinator 	
ACTION STEPS: Transportation Services; Medi-Ride	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Resurrection Case Management, Cancer Center, Therapies
Identify patients (i.e. uninsured, underinsured, VA, Medicaid, Medicare, etc.) in need of transportation assistance	Ascension Resurrection Case Management, Cancer Center, Therapies
Establish eligibility criteria for patients in need of transportation assistance	Ascension Resurrection Case Management, Cancer Center, Therapies
Pay Medi-Ride; Lyft Concierge Services (LCS) monthly/annual service fees, if applicable	Ascension Resurrection
Provide funding support for local community based organizations (CBO) in need of transportation assistance	Ascension Resurrection Community Support Review Committee
Monitor work, evaluate progress, report outcomes	Ascension Resurrection Implementation Strategy Workgroup and Community Health
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> Baseline: FY22 data Target: <ul style="list-style-type: none"> Increase total of persons screened with transportation needs from baseline Increase total Number of rides provided from baseline Data Source; Data Owner: Medi-Ride; Lyft Concierge Services 	
ANTICIPATED IMPACT	
The anticipated impact of these actions is increased access to healthcare services by eliminating transportation barriers.	

STRATEGY #3: Workforce Development
Hospital(s) Name(s) Ascension Resurrection (AR)
Prioritized Health Need Social and Structural Determinants of Health (<i>SDoH- Education</i>)
Strategy Provide opportunities for students to engage with health care professionals.
Strategy Source <ul style="list-style-type: none"> High School Student Practicums/Internships College Student Workforce Pipelines
Objective By June 30, 2025, increase the number of students who participate in workforce development programs through AR.

Target Population <ul style="list-style-type: none"> ● Target Population: AR community residents, teen and college age students 	
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospitals: Ascension Saint Francis, Ascension Saint Joseph-Chicago, Ascension Saint Mary-Chicago ● Joint Venture: "N/A" ● Collaborators: Loyola University, Oak Point University, Resurrection College Prep, other area high schools, colleges, and universities. ● Consultants: "N/A" ● Other non-profit hospital: "N/A" 	
Resources Resources the collaborators plan to commit: <ul style="list-style-type: none"> ● Ascension Resurrection: staff time donated for program maintenance ● Local area high schools, colleges, universities: Program Coordinators 	
ACTION STEPS: Workforce Internships/Pipelines	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Resurrection Nursing; Community Health; Faith Community Nursing
Identify community partners for workforce development	Ascension Resurrection
Mentor high school students interested in healthcare careers	Ascension Resurrection - Community Health; Faith Community Nursing; Nursing; Radiology; Therapies
Support student clinicals who are entering healthcare careers	Ascension Resurrection - Community Health; Faith Community Nursing;; Nursing; Radiology Therapies
Partner with a local college or university to offer a career accelerated program	Ascension Resurrection - Nursing
Monitor work, evaluate progress, report outcomes	Ascension Resurrection Implementation Strategy Workgroup; Community Health
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 data ● Target: <ul style="list-style-type: none"> ○ Increase number of students participating in workforce development programs or partnerships from baseline. ● Data Source; Data Owner: Local area high schools, colleges, and universities 	
ANTICIPATED IMPACT	
The anticipated impact of these actions is increased workforce opportunities for youth in the hospital community.	

STRATEGY #4: Access to Community Resources

Hospital Name Ascension Resurrection (AR)	
Prioritized Health Need Access to Care and Community Resources (<i>Access to Care</i>)	
Strategy Increase access to community resources and community-based services for the AR community.	
Strategy Source <ul style="list-style-type: none"> • Neighborhood Resource Directory; Findhelp • Local Community Based Organization (CBO) Support and Partnerships 	
Objective By June 30, 2025, the number of searches in the directory will increase.	
Target Population <ul style="list-style-type: none"> • Target Population: AR community residents and patients. • Medically Underserved Population: AR community residents who are underinsured/uninsured. 	
Collaborators <ul style="list-style-type: none"> • Other Ascension hospital: Ascension Holy Family, Ascension Mercy, Ascension Alexian Brothers, Ascension Saint Alexius, Ascension Saint Francis, Ascension Saint Joseph-Chicago, Ascension Saint Joseph-Elgin, Ascension Saint Joseph-Joliet, Ascension Saints Mary-Kankakee, and Ascension Saints Mary and Elizabeth-Chicago • Joint Venture: "N/A" • Collaborators: Community-based organizations, Faith-based Institutions, Food Pantries • Consultants: Neighborhood Resources; Findhelp.org; United Way 2-1-1 • Other non-profit hospital: "N/A" 	
Resources Resources the collaborators plan to commit: <ul style="list-style-type: none"> • Other Ascension hospital(s): Strategy sources and funding • Joint Venture: "N/A" • Collaborators: Community-based organizations, Faith-based Institutions, Food Pantries • Consultants: Neighborhood Resources; Findhelp.org; United Way 2-1-1 - directory source • Other non-profit hospital: "N/A" 	
ACTION STEPS: Resource Directory	ROLE/OWNER
Appoint Associate Lead for this strategy	Ascension Resurrection Community Health; Faith Community Nursing
Promote awareness of the Community Resource Directory via flyers, social media, Ascension, Community Benefit & Community Partner newsletters	Ascension Resurrection Community Health; Faith Community Nursing
Identify internal staff that need Community Resource Directory training	Ascension Illinois: Population Health, Community Benefit, Community Health; Faith Community Nursing
Identify external partners for Community Resource Directory	Ascension Illinois Community Benefit, Community Health; Faith Community Nursing

Establish calendar of Community Resource Directory trainings for virtual and/or hybrid offerings	Ascension Illinois: Population Health; Community Health
Promote availability of training within target audiences	Ascension Illinois: Community Benefit, Community Health, Population Health, Marketing/Communications
Host Community Resource Directory training for internal and external partners	Ascension Illinois: Population Health and Community Benefit, Community Health
Monitor work, evaluate progress, and report outcomes	Ascension Resurrection Implementation Strategy Workgroup
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 Data ● Target: <ul style="list-style-type: none"> ○ Increase the number of searches within the directory from baseline. ○ Increase the number of persons trained on directory from baseline. ● Data Source; Data Owner: Neighborhood Resource; Findhelp.org 	
ANTICIPATED IMPACT	
The anticipated impact of these actions is increased access to community resources, services and referrals for individuals in need.	

STRATEGY #5: Medication Assistance
Hospital(s) Name(s) Ascension Resurrection (AR)
Prioritized Health Need Access to Care and Community Resources (<i>Access to Care</i>)
Strategy Provide free or low-cost prescriptions for qualifying underinsured and uninsured individuals through various medication assistance programs such as the Dispensary of Hope (DoH) program
Strategy Source Save the Day; Dispensary of Hope
Objective By June 30, 2025, there will be an increase of medication assistance from FY22 baseline.
Target Population <ul style="list-style-type: none"> ● Target Population: AR community residents and AR patients ● Medically Underserved Population: Uninsured and underinsured individuals
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Mercy, Ascension Saint Francis, Ascension Saint Joseph-Elgin ● Joint Venture: "N/A"

<ul style="list-style-type: none"> ● Collaborators: Ascension ministry pharmacies; Ascension Foundation; Community-based organizations; Faith-based Institutions; Case Management ● Consultants: Dispensary of Hope; Save the Day ● Other non-profit hospital: "N/A" 	
Resources Resources the collaborators plan to commit: <ul style="list-style-type: none"> ● Other Ascension hospital(s): Strategy sources and funding ● Joint Venture: "N/A" ● Collaborators: Ascension ministry pharmacies; Community-based organizations, Faith-based Institutions; Case Management - program collaborator ● Consultants: Dispensary of Hope; Save the Day ● Other non-profit hospital: "N/A" 	
ACTION STEPS: Medication Assistance	ROLE/OWNER
Appoint Associate Lead for this strategy	Ascension Resurrection Retail Pharmacy; Case Management
Pay annual DoH membership fee for participating pharmacy if applicable	Ascension Resurrection
Conduct initial application interview with the patient to determine eligibility	Ascension Resurrection Pharmacy; Case Management
Coordinate applications for manufacturers' Patient Assistance Programs	Ascension Resurrection Pharmacy; Case Management
Provide free or discounted medications and testing supplies to all uninsured and underinsured individuals who qualify	Ascension Resurrection Pharmacy; Case Management
Promote awareness of medication assistance programs in the AR communities	Ascension Illinois; Community Benefit; Community Health; Population Health; Marketing/Communications
Monitor work, evaluate progress, and report outcomes	Ascension Resurrection Implementation Strategy Workgroup
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 Data ● Target: Increase total number of individuals served; Increase number of prescriptions filled and received ● Data Source; Data Owner: Ascension ministry pharmacies; Dispensary of Hope; Case Management 	
ANTICIPATED IMPACT	
The anticipated impact of these actions is increased access to maintenance and preventive medication to people who otherwise may not be able to afford their medication.	

STRATEGY #6: Public Health Insurance Coverage Enrollment Services (PHICES)
Hospital(s) Name(s) Ascension Resurrection (AR)
Prioritized Health Need

Access to Care and Community Resources (<i>Access to Care</i>)	
Strategy Provide Public Health Insurance Coverage Enrollment Services (PHICES)	
Strategy Source Advocatia	
Objective By June 30, 2025, there will be an increase of enrollment services from FY22 baseline.	
Target Population <ul style="list-style-type: none"> ● Target Population: Adults, children, and immigrants ● Medically Underserved Population: Uninsured and underinsured individuals 	
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Holy Family, Ascension Mercy, Ascension Alexian Brothers, Ascension Saint Alexius, Ascension Saint Francis, Ascension Saint Joseph-Chicago, Ascension Saint Joseph-Elgin, Ascension Saint Joseph-Joliet, Ascension Saints Mary-Kankakee, and Ascension Saints Mary and Elizabeth-Chicago, ● Joint Venture: "N/A" ● Collaborators: Ascension Medical Group, Community-based organizations, Faith-based Institutions, Food Pantries ● Consultants: Advocatia ● Other non-profit hospital - "N/A" 	
Resources Resources the collaborators plan to commit: <ul style="list-style-type: none"> ● Other Ascension hospital(s): staff time donated, funding/cash donations to community organizations, education collateral, marketing resources, and others ● Joint Venture: "N/A" ● Collaborators: Ascension Medical Group, Community-based organizations, Faith-based Institutions, Food Pantries, program collaborators ● Consultants: ADVOCATIA - program consultant ● Other non-profit hospital: "N/A" 	
ACTION STEPS: PHICES	ROLE/OWNER
Appoint Associate Lead for this strategy	Ascension Resurrection Community Benefit; Community Health; Faith Community Nursing
Promote awareness of PHICES via flyers, social media, Ascension and Community partner newsletters	Ascension Resurrection Community Benefit; Community Health; Faith Community Nursing
Identify external partners that need public health PHICES information	Ascension Illinois Community Benefit; Community Health; Faith Community Nursing
Establish calendar of potential PHICES events in the community	Ascension Illinois Community Benefit; Community Health

Promote availability of PHICES services within target audiences	Ascension Illinois Community Benefit and Community Health; Marketing/ Communications
Monitor work, evaluate progress, report outcomes	Ascension Resurrection Implementation Strategy Workgroup
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 Data ● Target: <ul style="list-style-type: none"> ○ Increase persons enrolled in health care coverage from baseline ○ Increase persons educated on enrollment coverage from baseline ● Data Source; Data Owner: Advocata 	
ANTICIPATED IMPACT	
The anticipated impact of these actions is to increase access to healthcare services for individuals who are underinsured or uninsured.	

STRATEGY #7: Patient Navigator in the Emergency Department (ED)
Hospital(s) Name(s) Ascension Resurrection (AR)
Prioritized Health Need Access to Care and Community Resources (<i>Access to Care</i>)
Strategy Provide free navigation services for patients in need of follow up care, a medical provider, or other health related social needs
Strategy Source Healthful Care; Care Continuity; Vituity
Objective By June 30, 2025, there will be an increase of health services navigation from FY22 baseline.
Target Population <ul style="list-style-type: none"> ● Target Population: AR patients ● Medically Underserved Population: Uninsured and underinsured individuals
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Holy Family, Ascension Mercy, Ascension Alexian Brothers, Ascension Saint Alexius, Ascension Saint Francis, Ascension Saint Joseph-Chicago, Ascension Saint Joseph-Elgin, Ascension Saint Joseph-Joliet, Ascension Saints Mary-Kankakee, and Ascension Saints Mary and Elizabeth-Chicago ● Joint Venture: "N/A" ● Collaborators: "N/A" ● Consultants: Healthful Care; Care Continuity; Vituity ● Other non-profit hospital: "N/A"
Resources Resources the collaborators plan to commit:

<ul style="list-style-type: none"> • Other Ascension hospital(s): staff time donated • Joint Venture: "N/A" • Collaborators: "N/A" • Consultants: Healthful Care; Care Continuity; Vituity • Other non-profit hospital: "N/A" 	
ACTION STEPS: Patient Navigator in the ED	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Resurrection Emergency Department
Promote awareness of free navigation services available	Ascension Resurrection; Emergency Department
Train internal staff on the workflow and service coordination process	Ascension Resurrection; Emergency Department
Provide navigation services for patients in need of follow up care, a medical provider, or other health related social needs	Ascension Resurrection; Emergency Department
Monitor work, evaluate progress, report outcomes	Ascension Resurrection Implementation Strategy Workgroup
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> • Baseline: FY22 Data • Target: <ul style="list-style-type: none"> ○ Increase from baseline the # of Medicaid & Self Pay/Uninsured patients offered assistance ○ Increase from baseline the # or % Medicaid & Self Pay/Uninsured patients accepted assistance • Data Source; Data Owner: Healthful Care; Care Continuity; Vituity 	
ANTICIPATED IMPACT	
The anticipated impact of these actions will provide access to health services to people who otherwise might not be delaying or stopping care due to lack of an appropriate provider.	

STRATEGY 8 : Maternal and Child Health Resources and Services
Hospital(s) Name(s) Ascension Resurrection (AR)
Prioritized Health Need Priority Health Conditions: Maternal and Child Health (<i>Maternal, Infant, Child Health</i>)
Strategy Connect pregnant women to prenatal and postpartum care resources especially the uninsured and/or underinsured.
Strategy Source Illinois Department of Public Health (IDPH) Illinois Perinatal Quality Collaborative Ascension Illinois Prenatal Workgroup New Beginnings

PREM Tool Social Determinants of Health (SDoH) Screening
Objective By June 30, 2025, there will be a reduction in primary cesarean section (c-section) rates and an increase in birth equity education.

Target Population <ul style="list-style-type: none"> ● Target Population: Pregnant women in AR communities ● Medically Underserved Population: Un- &/or under-insured pregnant women; women of color
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Holy Family, Ascension Saint Mary-Chicago ● Joint Venture: "N/A" ● Collaborators: IL Perinatal Quality Collaborative, Ascension Illinois Medical Group; Obstetrical Healthcare Providers, FQHCs, New Beginnings, Ascension Women’s Health Service Line ● Consultants: "N/A" ● Other non-profit hospital: "N/A"
Resources List organization(s) and the resources that each organization will be committing to the (e.g., people, process, funding), delete if not applicable. <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Saint Mary-Chicago - financial and staff support ● Joint Venture: "N/A" ● Collaborators: IL Perinatal Quality Collaborative, Ascension Illinois Medical Group; Community-Based Organization Obstetrical Healthcare Providers, FQHCs, New Beginnings, Ascension Women’s Health Service Line ● Consultants: IL Perinatal Quality Collaborative, IL Department of Public Health, Perinatal Advisory Committee ● Other non-profit hospital: "N/A"

ACTION STEPS: Maternal and Child Health	ROLE/OWNER
Appoint Associate Lead for this strategy	AR Mother Baby Unit
Participate in the Ascension Illinois Women’s Health committee and the IL Perinatal Quality Collaborative	Ascension Illinois Women’s Health committee
Participate in the Ascension Resurrection prenatal workgroup	AR Prenatal Workgroup
Identify internal resources for supporting prenatal and postpartum care coordination	AR Prenatal Workgroup
Identify and educate community partners and healthcare providers to engage in prenatal and postpartum service coordination	AR Prenatal Workgroup
Train internal staff on the workflow and service coordination process of SDoH Screening and PREM Tool	AR Prenatal Workgroup
Monitor work, evaluate progress, and report outcomes	AR Prenatal Workgroup

Output(s) and/or Outcome(s)

<ul style="list-style-type: none"> ● Baseline: FY22 Data; TBD based on the preliminary PREM results ● Target: <ul style="list-style-type: none"> ○ From baseline, reduce primary c-section rates. ○ From baseline, increase Birth Equity Education opportunities. ○ Decrease disparity by race and/or ethnicity in maternal health outcomes from baseline. ● Data Source; Data Owner: Ascension Illinois, IL Perinatal Quality Collaborative, Ascension Resurrection Mother Baby Unit
ANTICIPATED IMPACT
The anticipated impact of these actions is improved health outcomes for mothers and babies.

STRATEGY #9: Access to Mental Health Education and Awareness
Hospital(s) Name(s) Ascension Resurrection (AR)
Prioritized Health Need Prevention and Treatment of Priority Health Conditions: Mental Health (<i>Mental & Behavioral Health</i>)
Strategy Provide Mental Health Education and Awareness
Strategy Source Mental Health First Aid (MHFA) Trainings
Objective By June 30, 2025, there will be an increase in the MHFA training participants.
Target Population <ul style="list-style-type: none"> ● Target Population: AR community residents, AR associates and patients, teen students in junior high and high school. ● Medically Underserved Population: Teen and Adult individuals experiencing mental health issues.
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Holy Family, Ascension Mercy, Ascension Alexian Brothers, Ascension Saint Alexius, Ascension Saint Francis, Ascension Saint Joseph-Chicago, Ascension Saint Joseph-Elgin, Ascension Saint Joseph-Joliet, Ascension Saints Mary-Kankakee, and Ascension Saints Mary and Elizabeth-Chicago ● Joint Venture: "N/A" ● Collaborators: Community-based organizations, Faith-based Institutions, Schools, Food Pantries ● Consultants: Americorps ● Other non-profit hospital - "N/A"

Resources Resources the collaborators plan to commit: <ul style="list-style-type: none"> ● Other Ascension hospital(s): Trainings and mental health education; funding for the consultants ● Joint Venture: "N/A" ● Collaborators: Community-based organizations, Faith-based Institutions, Schools, Food Pantries - program collaborators ● Consultants: Americorps - staff to provide the trainings ● Other non-profit hospital: "N/A" 	
ACTION STEPS: Mental Health First Aid Trainings	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Illinois Community Benefit; Community Health; Faith Community Nursing
Promote awareness of the Mental Health First Aid (MHFA) trainings via flyers, social media, Ascension and Community Partner newsletters	Ascension Resurrection Community Health; Faith Community Nursing
Identify internal staff that need MHFA training	Ascension Illinois: Community Benefit; Community Health
Identify external partners that need MHFA training	Ascension Illinois: Community Benefit; Community Health
Establish calendar of MHFA trainings for virtual and/or hybrid offerings including dates, times, and locations	Ascension Illinois: Community Benefit; Community Health
Promote availability of MHFA training within target audiences	Ascension Illinois: Community Benefit; Community Health, Marketing/ Communications
Host MHFA training for internal and external partners	Ascension Illinois: Community Benefit; Community Health; Faith Community Nursing
Monitor work, evaluate progress, and report outcomes	Ascension Resurrection Implementation Strategy Workgroup
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 Data ● Target: <ul style="list-style-type: none"> ○ Increase the total number of individuals that received MHFA training from baseline. ● Data Source; Data Owner: Mental Health First Aid; Americorp 	
ANTICIPATED IMPACT	
The anticipated impact of these actions is increased access to Mental Health education and resources.	

Evaluation

Ascension Resurrection will develop a comprehensive measurement and evaluation process for the implementation strategy. The Ministry will monitor and evaluate the action plans outlined in this plan for the purpose of reporting and documenting the impact these action plans have on the community. Ascension Resurrection uses a tracking system to capture community benefit activities and implementation. To ensure accountability, data will be aggregated into an annual Community Benefit report that will be made available to the community.