

•Ascension Saints Mary & Elizabeth•

**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 Saints Mary & Elizabeth
2233 W Division St, Chicago, IL 60622
healthcare.ascension.org
331-770-2000
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 Saints Mary & Elizabeth

As a Ministry of the Catholic Church, Ascension Saints Mary & Elizabeth is a non-profit hospital that provides medical care to Chicago and the surrounding communities. Ascension Saints Mary & Elizabeth 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 1894, Ascension Saints Mary & Elizabeth 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 Holy Family of Nazareth and was the first Polish hospital in Chicago and continues to serve the diverse communities on Chicago's west side and north side.

For more information about Ascension Saints Mary & Elizabeth, 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 Saints Mary & Elizabeth'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 Saints Mary & Elizabeth Community Service Programming department at 312-770-2391.

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 Saints Mary & Elizabeth 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 Saints Mary & Elizabeth 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:

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|  | <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 Saints Mary & Elizabeth 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. In focus groups, the communities highlighted access to healthy foods. Low food access (availability & affordability of food retailers) and food insecurity (limited or uncertain access to adequate food) continues to be a key Social Determinant of Health (SDoH). The top five most common searches in the Community Resource Directory included food pantries and food assistance.
- **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.
 - **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 one need in this category in the Ascension Saints Mary & Elizabeth 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. This need was voted the number two need in this category in the Ascension Saints Mary & Elizabeth prioritization process.
 - **Prevention and Treatment of Priority Health Conditions: Maternal and Child Health, Mental Health and Substance Use Disorders -**
 - **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 Saint Marys & Elizabeth prioritization process.
 - **Substance Use Disorders (*Mental & Behavioral Health*)**: This need was selected because mental health and substance use (behavioral health) were two of the most discussed topics within the CHNAs focus groups and community input surveys. There were 4,467 drug induced overdose deaths in Cook County between 2018-2020.

Ascension Saints Mary & Elizabeth 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 Saints Mary & Elizabeth 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 Saints Mary & Elizabeth 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.
- **Injury including Violence-related Injury**-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 Saints Mary & Elizabeth 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 Saints Mary & Elizabeth does to support health within the community.

To find a list of resources for each need not being addressed, please refer to the Saints Mary and Elizabeth'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 Saints Mary & Elizabeth'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 Saints Mary & Elizabeth (ASME) | |
| Prioritized Health Need Social and Structural Determinants of Health (<i>SDoH -Food Security</i>) | |
| Strategy Increase food access assistance for food insecure individuals for ASME community residents. | |
| Strategy Source Local Food Pantry Support and Partnerships | |
| Objective By June 30, 2025, the number of food pantry support and partnerships will increase. | |
| Target Population <ul style="list-style-type: none"> ● Target Population: ASME community residents, including ASME associates and patients ● Medically Underserved Population: Individuals experiencing food insecurity in ASME community | |
| Collaborators <ul style="list-style-type: none"> ● Other Ascension hospitals: Ascension Mercy, Ascension Resurrection, Ascension Saint Joseph-Elgin, Ascension Saint Joseph-Joliet ● Joint Venture: “N/A” ● Collaborators: Population Health; Local food pantry; Greater Chicago Food Depository; West Side United; Ascension Illinois Food Access & Nutrition Workgroup ● Consultants: “N/A” ● 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, education collateral, marketing resources, and others ● Joint Venture: “N/A” ● Collaborators: Local food pantry; West Side United: staff/volunteer time donated ● Consultants: “N/A” ● Other non-profit hospital: “N/A” | |
| ACTION STEPS: Local Food Pantry Support and Partnerships | ROLE/OWNER |

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| Appoint an Associate Lead for this strategy | Ascension Saints Mary & Elizabeth Community Health |
| Participate in Ascension Illinois Food Access & Nutrition Workgroup | Ascension Saints Mary & Elizabeth Community Health and Greater Chicago Food Depository |
| Identify potential food pantry partnerships to support | Ascension Saints Mary & Elizabeth Community Health; West Side United |
| Provide funding support for local community food access programs and initiatives | Ascension Saints Mary & Elizabeth Community Support Review Committee; Ascension Illinois Community Benefit |
| Monitor work, evaluate progress, and report outcomes | Ascension Saints Mary & Elizabeth 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: <ul style="list-style-type: none"> ○ Total number of meals/persons served ○ Total pounds of food provided ○ Total Food Access Community Partner Cash Donations Provided ● Data Source; Data Owner: Feeding America; Greater Chicago Food Depository; West Side United | |
| ANTICIPATED IMPACT | |
| The anticipated impact of these actions is increased access to healthy food and reduced food insecurity. | |

| STRATEGY #2: Transportation Assistance |
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| Hospital Name Ascension Saints Mary & Elizabeth (ASME) |
| 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 Lyft Concierge Services Security Transportation |
| 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: ASME patients and community residents. . |

| <ul style="list-style-type: none"> ● Medically Underserved Population: Individuals experiencing transportation barriers in the ASME community. | |
|---|---|
| Collaborators <ul style="list-style-type: none"> ● Other Ascension Hospitals: Ascension Mercy, Ascension Resurrection, Ascension Saint Joseph-Chicago, Ascension Saint Alexius, Ascension Joseph-Elgin, Ascension Saint Joseph-Joliet, Ascension ● Joint Venture: N/A ● Collaborator: Lyft, Security, 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 Saints Mary & Elizabeth: staff time and donations for program maintenance ● Ascension Saints Mary & Elizabeth: cash donations to community organizations in need of transportation assistance services ● Lyft Concierge Services: Program Coordinator ● Partners for Our Communities: Program Coordinator | |
| ACTION STEPS: Transportation Services | ROLE/OWNER |
| Appoint an Associate Lead for this strategy | Ascension Saints Mary & Elizabeth Case Management |
| Identify patients (i.e. uninsured, underinsured, VA, Medicaid, Medicare, etc.) in need of transportation assistance | Ascension Saints Mary & Elizabeth - Case Management; Cancer Center; Security |
| Establish eligibility criteria for patients in need of transportation assistance | Ascension Saints Mary & Elizabeth-Case Management; Cancer Center; Security |
| Pay Lyft Concierge Services (LCS) monthly/annual service fees, if applicable | Ascension Saints Mary & Elizabeth |
| Provide funding support for local community based organizations (CBO) in need of transportation assistance | Ascension Saints Mary & Elizabeth Community Support Review Committee |
| Monitor work, evaluate progress, report outcomes | Ascension Saints Mary & Elizabeth Implementation Strategy Workgroup and Community Service |
| 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: Security; 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 |
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| Hospital(s) Name(s) Ascension Saints Mary & Elizabeth (ASME) |
| Prioritized Health Need SDoH: Economic Vitality and Workforce Development <i>(SDoH - Education)</i> |
| Strategy Provide opportunities for students to engage with health care professionals. |
| Strategy Source 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 ASME. |
| Target Population <ul style="list-style-type: none"> ● Target Population: ASME community residents, teen and college age students |
| Collaborators <ul style="list-style-type: none"> ● Other Ascension hospitals: Ascension Resurrection, Ascension Saint Francis, Ascension Saint Joseph-Chicago, Ascension Saint Mary-Chicago ● Joint Venture: "N/A" ● Collaborators: Local area high schools, Chicago Public Schools (CPS), colleges, and universities. ● Consultants: "N/A" ● Other non-profit hospital: "N/A" |

| ACTION STEPS: Workforce Internships/Pipelines | ROLE/OWNER |
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| Appoint an Associate Lead for this strategy | Ascension Saints Mary & Elizabeth Nursing, Community Education, Volunteer Services |
| Identify community partners for workforce development | Ascension Saints Mary & Elizabeth Nursing, Community Education, Volunteer Services |
| Mentor high school students interested in healthcare careers | Ascension Saints Mary & Elizabeth; Community Education; Nursing |
| Support student clinicals who are entering healthcare careers | Ascension Saints Mary & Elizabeth; Community Education; Nursing, Radiology; Therapies |
| Partner with a local college or university to offer a career accelerated program | Ascension Saints Mary & Elizabeth; Nursing |
| Monitor work, evaluate progress, report outcomes | Ascension Saints Mary & Elizabeth Implementation Strategy Workgroup and Community Service |

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| Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 data ● Target: 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. |

ACCESS TO CARE AND COMMUNITY RESOURCES

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| STRATEGY #4: Access to Community Resources |
| Hospital Name Ascension Saints Mary & Elizabeth (ASME) |
| 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 ASME community residents. |
| Strategy Source Neighborhood Resource Directory; Findhelp |
| Objective By June 30, 2025, the number of searches in the directory will increase. |
| Target Population <ul style="list-style-type: none"> ● Target Population: ASME community residents, including ASME patients. ● Medically Underserved Population: ASME community residents who are underinsured/uninsured. |
| Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Holy Family, Ascension Mercy, Ascension Resurrection, 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 ● 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 - program collaborator |

| <ul style="list-style-type: none"> ● 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 an Associate Lead for this strategy | Ascension Saints Mary & Elizabeth Community Health |
| Promote awareness of the Community Resource Directory via flyers, social media, Ascension Community Benefit and Community Partner newsletters | Ascension Saints Mary & Elizabeth; Community Benefit, Community Health |
| Identify internal staff that need Community Resource Directory training | Ascension Illinois: Population Health, Community Benefit, Community Health |
| Identify external partners that need Community Resource Directory | Ascension Illinois Community Benefit, Community Health |
| Establish calendar of Community Resource Directory trainings for virtual and/or hybrid offerings | Ascension Illinois: Population 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, Community Benefit, Community Health |
| Monitor work, evaluate progress, and report outcomes | Ascension Saints Mary & Elizabeth 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 |
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| Hospital(s) Name(s) Ascension Saints Mary & Elizabeth (ASME) |
| 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; Pharmacotherapy Clinic | |
|---|--|
| 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: ASME community residents, including ASME patients. ● Medically Underserved Population: ASME community residents who are underinsured and uninsured individuals. | |
| Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Mercy, Ascension Resurrection, Ascension Saint Francis, Ascension Saint Joseph-Elgin ● Joint Venture: "N/A" ● Collaborators: Ascension ministry pharmacies; Case Management; Ascension Foundation; Community-based organizations; Faith-based Institutions ● Consultants: Dispensary of Hope; Save the Day; Pharmacotherapy Clinic ● 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; Case Management; Community-based organizations, Faith-based Institutions - program collaborator ● Consultants: Dispensary of Hope; Save the Day ● Other non-profit hospital: "N/A" | |
| ACTION STEPS: Medication Assistance | ROLE/OWNER |
| Appoint an Associate Lead for this strategy | Ascension Saint Mary & Elizabeth Case Management and Pharmacy |
| Conduct initial application interview with the patient to determine eligibility | Ascension Saint Mary & Elizabeth Pharmacy |
| Coordinate applications for manufacturers' Patient Assistance Programs | Ascension Saint Mary & Elizabeth Pharmacy |
| Provide free or discounted medications and testing supplies to all uninsured and underinsured individuals who qualify | Ascension Saint Mary & Elizabeth Pharmacy |
| Promote awareness of DoH in the community the Ascension Resurrection serves. | Ascension Illinois: Community Benefit, Community Health, Population Health, Marketing/Communications |
| Monitor work, evaluate progress, and report outcomes | Ascension Saint Mary & Elizabeth 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; 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) | |
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| Hospital(s) Name(s) Ascension Saints Mary & Elizabeth (ASME) | |
| 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 Resurrection, Ascension Alexian Brothers, Ascension Saint Alexius, Ascension Saint Joseph-Chicago, Ascension Saint Joseph-Elgin, Ascension Saint Joseph-Joliet, Ascension Saints Mary-Kankakee ● Joint Venture: "N/A" ● Collaborators: 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: "NA" ● Collaborators: Community-based organizations, Faith-based Institutions, Food Pantries - program collaborators ● Consultants: program collaborator ● Other non-profit hospital: "N/A" | |
| ACTION STEPS | ROLE/OWNER |
| Appoint an Associate Lead for this strategy | Ascension Saints Mary & Elizabeth Community Health |
| Promote awareness of public health insurance coverage enrollment services (PHICES) via flyers, social media, Ascension and Community partner newsletters | Ascension Saints Mary & Elizabeth; Community Benefit; Community Health |

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| Identify external partners that need public health insurance coverage enrollment services (PHICES) information | Ascension Illinois Community Benefit; Community Health |
| 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; Community Health; Marketing/ Communications |
| Monitor work, evaluate progress, report outcomes | Ascension Saints Mary & Elizabeth 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: ADVOCATIA | |
| ANTICIPATED IMPACT | |
| The anticipated impact of these actions is to increase access to healthcare services for individuals who are underinsured or uninsured. | |

| STRATEGY 7: Maternal and Child Health |
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| Hospital(s) Name(s) Ascension Saints Mary & Elizabeth (ASME) |
| Prioritized Health Need #3 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 Social Determinants of Health (SDoH) Screening PREM Tool |
| 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 of color in ASME community ● Medically Underserved Population: un-and /or under-insured pregnant women |

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| Collaborators <ul style="list-style-type: none"> • Other Ascension hospital: Ascension Resurrection • Joint Venture: "N/A" • Collaborators: Ascension Illinois Medical Group; Obstetrical Healthcare Providers, FQHCs, Ascension Illinois Women's Health Service Line; Population Health • Consultants: "N/A" • Other non-profit hospital: "N/A" | |
| Resources List organization(s) and the resources that each organization will be committing to: <ul style="list-style-type: none"> • Other Ascension hospital: Ascension Resurrection - financial and staff support • Joint Venture: "N/A" • Collaborators: Ascension Illinois Medical Group; Obstetrical Healthcare Providers, FQHCs, Ascension Illinois Women's Health Service Line • Consultants: "N/A" • Other non-profit hospital: "N/A" | |
| ACTION STEPS | ROLE/OWNER |
| Appoint Associate Lead for this strategy | Ascension Saints Mary & Elizabeth Women's Health |
| Participate in the Ascension Illinois Women's Health committee | Ascension Illinois Women's Health committee |
| Participate in the Ascension prenatal workgroup | Ascension Prenatal Workgroup |
| Identify internal resources for supporting prenatal and postpartum care coordination | Ascension Prenatal Workgroup |
| Identify community partners and healthcare providers to engage in prenatal and postpartum service coordination | Ascension Prenatal Workgroup |
| Train internal staff on the workflow and service coordination process | Ascension Prenatal Workgroup |
| Monitor work, evaluate progress, and report outcomes | Ascension Saints Mary & Elizabeth Implementation Strategy 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, Ascension Saints Mary & Elizabeth; Women's Health Service Line | |
| ANTICIPATED IMPACT | |
| The anticipated impact of these actions is improved health outcomes for mothers and babies. | |

STRATEGY #8: Mental Health Education and Awareness

| Hospital(s) Name(s) Ascension Saints Mary & Elizabeth (ASME) | |
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| Prioritized Health Need Prevention and Treatment of Priority Health Conditions: Mental Health (<i>Mental & Behavioral Health</i>) | |
| Strategy 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: ASME community residents, including ASME 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 Resurrection, 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 ● 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 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 | ROLE/OWNER |
| Appoint an Associate Lead for this strategy | Ascension Saints Mary & Elizabeth, Ascension Illinois, Community Benefit, Community Health |
| Promote awareness of the MHFA trainings via flyers, social media, Ascension Community Benefits and Community Partner newsletters | Ascension Saints Mary & Elizabeth, Ascension Illinois, Community Benefit, Community Health |
| Identify internal staff that need MHFA training | Ascension Illinois, Community Benefit, Community Service |

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| Identify external partners that need MHFA training | Ascension Illinois, Community Benefit, Community Service |
| 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 |
| Monitor work, evaluate progress, and report outcomes | Ascension Saints Mary & Elizabeth Implementation Strategy Workgroup |
| Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY22 Data ● Target: Increase the total number of individuals that received MHFA training from baseline. ● Data Source; Data Owner: Mental Health First Aid; Americorps | |
| ANTICIPATED IMPACT | |
| The anticipated impact of these actions is increased access to Mental Health education and resources. | |

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| STRATEGY #9: Access to Substance Use Disorder Resources and Services |
| Hospital(s) Name(s) Ascension Saints Mary & Elizabeth (ASME) |
| Prioritized Health Need Prevention and Treatment of Priority Health Conditions: Substance Use Disorders (<i>Mental & Behavioral Health</i>) |
| Strategy Provide a warm hand-off program for patients in need of access to SUD treatment. |
| Strategy Source <ul style="list-style-type: none"> ● Warm Hand-off Program ● SBIRT Model (Screening, Brief Intervention, Refer to Treatment) |
| Objective By June 30, 2025, provide warm hand-off services for SUD patients that present in the ED and medical floors. |
| Target Population <ul style="list-style-type: none"> ● Target Population: Patients that present to emergency department or medical floors with a substance use disorder in need of substance use disorder services and resources. ● Medically Underserved Population: Individuals experiencing mental health issues. |
| Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Holy Family, Ascension Mercy, Ascension Resurrection, Ascension Alexian Brothers, Ascension Saint Alexius, Ascension Saint Francis, Ascension Saint |

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| Joseph-Chicago, Ascension Saint Joseph-Elgin, Ascension Saint Joseph-Joliet, Ascension Saints Mary-Kankakee <ul style="list-style-type: none"> ● Joint Venture: "N/A" ● Collaborators: Vituity, Healthful Care or Care Continuity ● Consultants: "N/A" ● 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 consultants ● Joint Venture: "N/A" ● Collaborators: Vituity, Healthful Care or Care Continuity - program collaborators ● Consultants: "N/A" ● Other non-profit hospital: "N/A" | |
| ACTION STEPS: Warm Hand-Off Program | ROLE/OWNER |
| Appoint an Associate Lead for this strategy | Ascension Saint Mary & Elizabeth, Emergency Department, and Nursing |
| Participate in Ascension Illinois Warm-Handoff workgroup | Ascension Illinois, Ascension Saint Mary & Elizabeth, Emergency Department, Nursing, Ascension Illinois Behavioral Health Service Line |
| Identify internal resources for supporting substance use disorder services and care coordination | Ascension Saint Mary & Elizabeth, Ascension Illinois Behavioral Health Service Line |
| Identify community partners and health care providers to engage in substance use disorder care coordination | Ascension Saint Mary & Elizabeth, Ascension Illinois Behavioral Health Service Line |
| Review implementation workflows that allow for warm-handoffs | Ascension Saint Mary & Elizabeth, Emergency Department, Ascension Illinois Behavioral Health Service Line |
| Train internal team members on warm-handoff program and workflow | Ascension Saint Mary & Elizabeth, Emergency Department, Ascension Illinois Behavioral Health Service Line |
| Educate patients, families, and the community of warm handoffs | Ascension Saint Mary & Elizabeth, Emergency Department, Community Health, Ascension Illinois Behavioral Health Service Line |
| Monitor work, evaluate progress, and report outcomes | Ascension Saint Mary & Elizabeth Implementation Strategy Workgroup |
| Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: TBD (FY22 Baseline) ● Target: Increase from baseline: <ul style="list-style-type: none"> ○ # of patients screened for Substance Use Disorders ○ # of Naloxone kits distributed/prescribed | |

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| <ul style="list-style-type: none">• Data Source; Data Owner: Ascension Saint Mary & Elizabeth Emergency Department; Behavioral Health |
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| ANTICIPATED IMPACT |
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| The anticipated impact of these actions is increased access to substance use disorder services and community resources for individuals in need. |
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Evaluation

Ascension Saints Mary & Elizabeth 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 Saints Mary & Elizabeth 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.