

Ascension Mercy

Implementation Strategy for the TY2023 CHNA Kane County, Illinois



Ascension

The purpose of this Implementation Strategy (IS) is to describe how the hospital plans to address prioritized health needs from its current Community Health Needs Assessment (CHNA). The significant health needs 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 at increased risk for poor health outcomes or experiencing social factors that place them at risk.

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The authorized governing body approved the tax year 2023 Implementation Strategy on September 25, 2024 (2023 tax year) and applies to the following three-year cycle: July 2024 to June 2027. This report, as well as the previous report, can be found on 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 impoverished and vulnerable persons.

About Ascension

Ascension is a faith-based healthcare organization dedicated to transformation through innovation across the continuum of care. As of April 2024, the national health system operates 140 hospitals and 40 senior living facilities in 19 states and the District of Columbia, while providing a variety of services including clinical and network services, venture capital investing, investment management, biomedical engineering, facilities management, risk management, and contracting through Ascension's own group purchasing organization.

Ascension's Mission provides a strong framework and guidance for the work done to meet the needs of communities across the US. It is foundational to transform healthcare and express priorities when providing care and services, particularly to those most in need.

Mission: Rooted in the loving ministry of Jesus as healer, we commit ourselves to serving all persons with special attention to those who are poor and vulnerable. Our Catholic health ministry is dedicated to spiritually-centered, holistic care which sustains and improves the health of individuals and communities. We are advocates for a compassionate and just society through our actions and our words.

For more information about Ascension, visit <https://www.ascension.org/>.

Ascension Illinois

Ascension Illinois is one of the largest health systems in the state of Illinois, with 150 sites of care, including 14 hospitals spanning the Chicagoland area. It provides inpatient, outpatient, and emergency care to more than 680,000 people in Illinois, including critical, advanced facilities, and specialized expertise not widely available. It is a strong economic driver and job creator as well, with thousands of jobs. But beyond this core commitment, Ascension Illinois provided over \$220 million in community benefit and care for persons living in poverty in fiscal year 2023.

Ascension Mercy

As a Ministry of the Catholic Church, Ascension Mercy is a non-profit hospital that has been providing medical care to the Aurora and the Fox Valley community since 1911 following in the footsteps of founders, the Sisters of Mercy. Today, Ascension Mercy provides emergency as well as specialty care including behavioral health, heart, cancer, stroke care, orthopedics and women's health including birthing center.



Ascension Mercy

For more information about Ascension Mercy visit:

<https://healthcare.ascension.org/locations/illinois/ilchi/aurora-ascension-mercy>

Overview of the Implementation Strategy

Purpose

This IS is the hospital's response to the health needs prioritized by its current CHNA. It describes the hospital's actions to address prioritized needs, allocate resources, and develop hospital programs, and mobilize community partners to work together. This approach aligns with Ascension Mercy's commitment to offer programs designed to address the community's health needs with an emphasis on advancing health equity.

Advancing Health Equity

Health equity is the state in which everyone has a fair and just opportunity to attain their highest level of health. Progress toward achieving health equity can be measured by reducing gaps in health disparities. (CDC, 2023; Healthy People 2030). Health disparities are a particular health difference closely linked with economic, social, or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater social or economic obstacles to health based on their racial or ethnic group, religion, socioeconomic status, gender, age, or mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion (Braveman, 2014).

Ascension acknowledges that health disparities in our communities go beyond individual health behaviors. Ascension's Mission calls us to be "advocates for a compassionate and just society through our actions and words"; therefore, health equity is a matter of great importance to Ascension.

The 2023 CHNA report aims to offer a meaningful understanding of the most significant health needs across Kane County, emphasizing identifying the barriers to health equity for all people. The purpose of the 2023 Implementation Strategy is to describe how the hospital plans to address prioritized health needs from its current CHNA, with emphasis on responding to the challenges to achieving health equity.

Locally and nationally, Ascension addresses health disparities and inequities through the following initiatives:

- Regional ABIDE Councils ("Appreciation-Belongingness-Inclusivity-Diversity-Equity") that drive change at the local level and engage associates in support of fostering an inclusive, diverse, and equitable environment;
- Unconscious Bias and Cultural Competency and Humility education and training for associates and providers to promote high-quality care for all;
- Collection of REaL Data (Race, Ethnicity, and Language) to understand inequities among patient populations and inform initiatives to address disparities;
- Screening for SDoH (Social Determinants of Health) to understand patients' needs;
- Utilization of Neighborhood Resources to connect patients and individuals to services and support for basic needs;

- Ascension Employed Clinician Network health disparities goals for clinical care and outcome improvements (diabetes, maternal health, etc.).

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


The CHNA and IS satisfy specific tax reporting requirements pursuant to the Patient Protection and Affordable Care Act of 2010 provisions, 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 IS 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 the CHNA and the current implementation strategy can be found at <https://healthcare.ascension.org/CHNA>, and paper versions can be requested at Ascension Mercy’s Administration Office.





Needs Prioritization

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 Mercy used a phased prioritization approach to identify the needs of Kane County. The first step was to determine the broader set of identified needs. The CHNA assessment narrowed identified needs to a group of significant needs determined most crucial for community stakeholders to address.

After completing the CHNA assessment, significant needs were further narrowed down to prioritized needs that the hospital will address within the IS. To arrive at the prioritized needs, Ascension Mercy 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 five criteria below to prioritize the significant needs.

The criteria used to prioritize the significant needs were:

	<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?
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	<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> <p>Do we have community partners that we can align with on this issue?</p> <p>Do we need to build new relationships?</p>

Needs That Will Be Addressed

Following the completion of the current CHNA, Ascension Mercy has selected the prioritized needs outlined below for its TY2023 IS. Ascension has defined “prioritized needs” as the significant needs that the hospital has prioritized to address through the three-year CHNA cycle:

1. **Behavioral Health** - This need was selected because 80% of community survey respondents identified behavioral health mental health as one of the most important health needs in their communities. Forty percent 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 Kane 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 Mercy prioritization process.
2. **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 Mercy prioritization process.
3. **Social Determinants of Health** - Many underlying social factors were identified through the CHNA process, which is common as social determinants are often intertwined, systemic and complex community issues. For this next cycle, the hospital chose to focus on the social determinants in which it can provide the most influence and impact.
 - a. **Food Access:** This need was selected because access to healthy food was identified within the top three most important needed improvements on the community survey. This need was voted the top need in this category in the prioritization process. The top five most common searches in the Community (Neighborhood) Resource Directory included food pantries, food assistance, and food delivery.
 - b. **Housing:** This need was selected because social and economic factors are important drivers of health outcomes. Affordable housing and access to affordable housing were identified within the top six most important needed improvements on the community survey. Homelessness and housing instability was the number four most important health need identified on the community survey.

Ascension Mercy understands the importance of all the community's health needs. It is committed to playing an active role in improving the health of the people in the communities it serves. For this implementation strategy, Ascension Mercy has focused its efforts on the above priorities.

Needs That Will Not Be Addressed

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

- **Maternal and Child Health** - This need will not be addressed in the Implementation Strategy, but we will continue to support through advocacy, community partnerships and public health

collaboration as needed. Improving quality outcomes in maternal health continues to be a clinical priority for the organization as a whole.

- **Chronic Disease** - This need will not be addressed in the Implementation Strategy, but we will continue to support through advocacy, community partnerships and public health collaboration as needed. Additionally, community education and health screenings are routinely provided by the hospital that focus on chronic health issues.
- **Socioeconomic Factors** - This need will not be addressed in the Implementation Strategy, but we will continue to support through advocacy, community partnerships and public health collaboration as needed.

While these needs are not the focus of this Implementation Strategy, Ascension Mercy 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 only encompasses a partial inventory of everything Ascension Mercy does to support health within the community.

To find a list of resources for each need not being addressed, please refer to Mercy's 2023 CHNA: <https://healthcare.ascension.org/CHNA>.

Acute Community Concern Acknowledgement

A CHNA and 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. If adjustments to an IS are necessary, the hospital will develop documentation as an 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 of the IS

To ensure the Ascension Mercy's efforts meet the needs of the community and have a lasting and meaningful impact, the 2023 Implementation Strategy was presented and adopted by Ascension Illinois Joint Hospitals Board on September 25, 2024. Although an authorized body of the hospital must adopt the IS to be compliant with the provisions of 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.



Ascension Mercy

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.

STRATEGY #1: ACCESS TO SUBSTANCE USE DISORDER (SUD) RESOURCES AND SERVICES	
Hospital(s) Name(s) Ascension Mercy - Aurora	
Prioritized Health Need #1 Behavioral Health	
Strategy Provide Warm Hand-Off services for patients in need of access to Substance Use Disorder (SUD) treatment.	
Strategy Source or Alignment <ul style="list-style-type: none"> • Warm Hand-Off Services • SBIRT Model (Screening, Brief Intervention, Refer to Treatment) 	
Objective By June 30, 2027, increase utilization of warm hand-off services for SUD patients that present in the emergency department (ED) and medical floors.	
Priority 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 Hospitals: Ascension Saint Joseph Elgin, Ascension Saint Joseph Joliet, Ascension Alexian Brothers Behavioral Health Hospital, Ascension Holy Family, Ascension Saint Francis, Ascension Saint Mary • Joint Venture: N/A • Collaborator: Gateway Foundation • Consultants: Gateway Foundation • Other Non-Profit Hospitals: N/A 	
Resources <ul style="list-style-type: none"> • Other Ascension hospital(s): Ascension Alexian Brothers Behavioral Health Hospital, Ascension Mercy Behavioral Health • Joint Venture: N/A • Collaborators: Gateway: Recovery Coach and Recovery Support Specialists (assessments, evaluations, referrals to treatment and data dashboards on outcomes of referrals and completion of treatment) • Consultants: Gateway Foundation: Recovery Coach and Recovery Support Specialists • Other non-profit hospital: N/A 	Budget* Estimate the cost of the actions of the strategy plan. <ul style="list-style-type: none"> • Funded through Gateway SOAR grant
ACTION STEPS	ROLE/OWNER
Appoint Associate lead for this strategy	Ascension Mercy Aurora
Participate in Ascension Illinois Warm-Handoff Workgroup	Ascension Illinois
Identify internal resources for supporting substance use disorder services and care coordination	Ascension Mercy Aurora Ascension Illinois Behavioral Health Service Line

Design implementation workflows that allow for warm handoffs	Ascension Mercy Aurora Ascension Alexian Brothers Emergency Department Ascension Illinois Behavioral Health Service Line
Orient and train internal team members in warm-handoff program and workflows	Ascension Alexian Brothers Ascension Mercy Emergency Department Ascension Illinois Behavioral Health Service Line
Educate patients, families and the community of warm handoffs	Ascension Mercy Emergency Department and Community Health Ascension Illinois Behavioral Health Service Line
Monitor work, evaluate progress, and report outcomes	Ascension Mercy Behavioral Health Ascension Community Health
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY24 Baseline ● Target: <ul style="list-style-type: none"> ○ Increase total number of patients screened for Substance Use Disorder treatment from baseline ○ Increase total number of patients referred for Substance Use Disorder Treatment from baseline ○ Increase total number of patients entering treatment for Substance Use Disorder treatment from baseline ● Data Source; Data Owner: Emergency Department, BHS Service Line, Gateway 	
ANTICIPATED IMPACT	
The anticipated impact of these actions is increased access to substance use disorder services and community resources for individuals in need.	

**The budget for this initiative is an estimate and should be considered as such.*

STRATEGY #2: LOCAL MENTAL HEALTH & SUBSTANCE USE DISORDER ASSISTANCE SUPPORT AND PARTNERSHIPS	
Hospital(s) Name(s) Ascension Mercy - Aurora	
Prioritized Health Need #1 Behavioral Health	
Strategy Provide support to Mental Health/Behavioral Health community based organizations and networks.	
Strategy Source or Alignment <ul style="list-style-type: none"> Local Mental Health & Substance Use Disorder Assistance Support and Partnerships 	
Objective By June 30, 2027, increase support for individuals in need of mental health or substance use disorder assistance in the hospital community.	
Priority Population <ul style="list-style-type: none"> Target Population: Ascension Mercy patients and community residents. Medically Underserved Population: Individuals experiencing mental health/behavioral health issues. 	
Collaborators <ul style="list-style-type: none"> Other Ascension hospital: Ascension Mercy, Ascension Holy Family, 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, National Hispanic Suicide Prevention Network, Family Service Association, NAMI, Ecker Center, Faith-based Institutions, local schools, Colleges, Universities Consultants: N/A Other non-profit hospital - N/A 	
Resources <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, School Districts, colleges & universities Consultants: N/A Other non-profit hospital: N/A 	Budget* Estimate the cost of the actions of the strategy plan. <ul style="list-style-type: none"> \$50,000 - \$75,000 / 3 year cycle
ACTION STEPS	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Mercy Community Health
Identify community partner that provides mental health/behavioral health services	Ascension Mercy Community Health
Explore opportunities for mental health/behavioral health partnerships with external organizations and providers	Ascension Mercy Community Health
Provide funding support for local community based organizations (CBO) that provide mental health/behavioral health services and resources	Ascension Mercy Community Investment Review Committee
Monitor work, evaluate progress, report outcomes	Ascension Mercy Implementation Strategy Workgroup and Community Health
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> Baseline: FY24 Data Target: 	

- Increase the total amount of Community Investment support provided through community partnerships from baseline.
- **Data Source; Data Owner:** Community Investment Committee

ANTICIPATED IMPACT

The anticipated impact of these actions is increased access to Mental Health resources, education and services.

STRATEGY #3: ACCESS TO SUBSTANCE USE DISORDER (SUD) RESOURCES AND SERVICES	
Hospital(s) Name(s) Ascension Mercy - Aurora	
Prioritized Health Need #1 Behavioral Health	
Strategy Provide Crisis Stabilization Unit (CSU) services for patients in need of access to SUD treatment.	
Strategy Source or Alignment <ul style="list-style-type: none"> Crisis Stabilization Unit 	
Objective By June 30, 2027, increased utilization of Crisis Stabilization services.	
Priority Population <ul style="list-style-type: none"> Target Population: Patients that present to CSU 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 Hospitals: Ascension Alexian Brothers Behavioral Health Hospital Joint Venture: N/A Collaborator: Consultants: N/A Other Non-Profit Hospitals: N/A 	
Resources <ul style="list-style-type: none"> Other Ascension hospital(s): Ascension Alexian Brothers Behavioral Health Hospital, Ascension Saint Joseph Elgin Joint Venture: N/A Collaborators: TBD Consultants: Gateway Foundation: Recovery Coach and Recovery Support Specialists Other non-profit hospital: N/A 	Budget* Estimate the cost of the actions of the strategy plan. <ul style="list-style-type: none"> \$180,000 - \$220,00 / 3 year cycle
ACTION STEPS	ROLE/OWNER
Appoint Associate Lead for this strategy	Ascension Mercy Aurora
Participate in Ascension Illinois CSU	Ascension Illinois
Identify internal resources for supporting CSU services and care coordination	Ascension Mercy Aurora Ascension Illinois Behavioral Health Service Line
Orient and train internal team members in CSU design and workflows	Ascension Mercy Aurora Emergency Department Ascension Illinois Behavioral Health Service Line
Educate patients, families and the community of CSU	Ascension Mercy Emergency Department and Community Health Ascension Illinois Behavioral Health Service Line
Monitor work, evaluate progress, and report outcomes	Ascension Mercy Behavioral Health Ascension Community Health
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> Baseline: FY24 Baseline Target: 	

<ul style="list-style-type: none"> ○ Increase total number of individuals served from baseline. ● Data Source; Data Owner: Emergency Department, BHS Service Line, Gateway
ANTICIPATED IMPACT
The anticipated impact of these actions is increased access to substance use disorder services and community resources for individuals in need.

**The budget for this initiative is an estimate and should be considered as such.*

STRATEGY #4: PROVIDE PUBLIC HEALTH INSURANCE ENROLLMENT SERVICES	
Hospital Name Ascension Mercy	
Prioritized Health Need Access to Care	
Strategy Provide Assistance with Public Health Insurance Coverage Enrollment Services (PHICES)	
Strategy Source <ul style="list-style-type: none"> ● Advocatia or similar healthcare enrollment partner 	
Objective By June 30, 2027, there will be an increase of individuals provided with healthcare enrollment services from FY24 baseline.	
Target Population <ul style="list-style-type: none"> ● Target Population: Adults, children, immigrants ● Medically Underserved Population: Uninsured and underinsured individuals 	
Collaborators <ul style="list-style-type: none"> ● Other Ascension hospital: Ascension Holy Family, Ascension Saint Joseph Elgin, Ascension Resurrection, Ascension, Ascension Saint Francis, Ascension Saint Joseph Chicago, Ascension Saint Joseph-Joliet, Ascension Saint Mary-Kankakee, Ascension Saints Mary and Elizabeth-Chicago, Ascension Alexian Brothers ● Joint Venture: N/A ● Collaborators: Ascension Medical Group (AMG), Community Based Organizations, Faith Based Institutions, Food Pantries, Libraries, Immigrant Welcoming Centers ● Consultants: Advocatia or other enrollment partners ● 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 Organization, Faith Based Institutions, Food Pantries ● Consultants: Advocatia-program consultant ● Other non-profit hospital: N/A 	Budget* Estimate the cost of the actions of the strategy plan. <ul style="list-style-type: none"> ● \$30,000-\$40,000 / 3 year cycle
ACTION STEPS: Public Health Insurance Coverage Enrollment Services (PHICES)	ROLE/OWNER
Appoint Associate Lead for this strategy	Ascension Mercy

Promote awareness of PHICES via flyers, social media, Ascension and Community partner newsletters	Ascension Mercy and Community Health
Identify external partners that need PHICES information	Ascension Illinois Community Benefit and Community Health
Identify and establish opportunities for PHICES in the community	Ascension Illinois Community Benefit and Community Health
Monitor work, evaluate progress, report outcomes	Ascension Mercy Community Health
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> ● Baseline: FY24 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.	

**The budget for this initiative is an estimate and should be considered as such.*

STRATEGY #5: ACCESS TO MEDICATION ASSISTANCE SERVICES	
Hospital(s) Name(s) Ascension Mercy	
Prioritized Health Need #2 Access to Care	
Strategy Provide Medication Assistance/Pharmacotherapy Services	
Strategy Source or Alignment <ul style="list-style-type: none"> ● Ascension Rx Pharmacy (340B) ● Ascension Pharmacotherapy 	
Objective By June 30, 2027, there will be an increase of individuals provided with medication assistance services from FY24 baseline.	
Priority Population <ul style="list-style-type: none"> ● Target Population: AM patients and community residents. ● Medically Underserved Population: Individuals experiencing access to medication assistance services barriers in the AM community especially low-income individuals. 	
Collaborators 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 Organization, Faith Based Institutions, Food Pantries, local physicians ● Consultants: N/A ● Other non-profit hospital: N/A 	
Resources	Budget* Estimate the cost of the actions of the strategy plan.

<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 Organization, Faith Based Institutions, Food Pantries • Consultants: N/A • Other non-profit hospital: N/A 	<ul style="list-style-type: none"> • \$45,000-\$60,000 / 3 year cycle
ACTION STEPS	ROLE/OWNER
Appoint Associate Lead for this strategy	Ascension Mercy Rx Pharmacy
Promote awareness of pharmacy services via flyers, social media, Ascension and Community partner newsletters	Ascension Mercy and Community Health
Identify external partners that need medication assistance information	Ascension Illinois Community Benefit and Community Health
Monitor work, evaluate progress, report outcomes	Ascension Mercy Implementation Strategy Workgroup
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> • Baseline: FY24 Data • Target: <ul style="list-style-type: none"> ○ Increase persons provided with medication assistance services from baseline • Data Source; Data Owner: Ascension Rx Pharmacy 	
ANTICIPATED IMPACT	
The anticipated impact of these actions is to increase access to medications for individuals who are underinsured or uninsured.	

**The budget for this initiative is an estimate and should be considered as such.*

STRATEGY #6: TRANSPORTATION ASSISTANCE	
Hospital(s) Name(s) Ascension Mercy	
Prioritized Health Need #2 Access to Care	
Strategy Increase transportation assistance services for individuals in the AM community residents.	
Strategy Source or Alignment <ul style="list-style-type: none"> Lyft Concierge Services 	
Objective By June 30, 2027, increase the percentage of individuals that have been screened and connected to transportation assistance services.	
Priority Population <ul style="list-style-type: none"> Target Population: hospital patients and community residents. Medically Underserved Population: Individuals experiencing transportation barriers in the ASJE community especially low-income individuals. 	
Collaborators <ul style="list-style-type: none"> Other Ascension Hospitals: Ascension Mercy Joint Venture: N/A Collaborator: Lyft, 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 Mercy: staff time donated for program maintenance Ascension Mercy: cash donations to community organizations in need of transportation assistance services Lyft Concierge Services: Program Coordinator 	Budget* Estimate the cost of the actions of the strategy plan. <ul style="list-style-type: none"> Lyft Concierge Services: \$40,000-\$75,000 / 3 year cycle
ACTION STEPS: Lyft Concierge Services	ROLE/OWNER
Appoint Associate Lead for this strategy	Ascension Mercy Case Management, Therapies
Identify patients (i.e., uninsured, underinsured, VA, Medicaid, Medicare, etc.) in need of transportation assistance	Ascension Mercy Case Management, Therapies
Establish eligibility criteria for patients in need of transportation assistance	Ascension Mercy Case Management, Therapies
Pay Lyft Concierge Services (LCS) monthly/annual service fees	Ascension Mercy
Provide funding support for local community based organizations (CBO) in need of transportation assistance	Ascension Mercy Community Investment Review Committee
Monitor work, evaluate progress, report outcomes	Ascension Mercy Implementation Strategy Workgroup and Community Health
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> Baseline: FY24 data Target: <ul style="list-style-type: none"> Increase the total number of persons screened with transportation needs from baseline. Increase total Number of rides provided from baseline. Data Source; Data Owner: Lyft Concierge Services or other transportation service 	

ANTICIPATED IMPACT
The anticipated impact of these actions is increased access to healthcare services by eliminating transportation barriers.

**The budget for this initiative is an estimate and should be considered as such.*

STRATEGY #7: FOOD ACCESS ASSISTANCE	
Hospital(s) Name(s) Ascension Mercy	
Prioritized Health Need #3 Social Determinants of Health (<i>SDoH: Food Security</i>)	
Strategy Increase food access assistance for food insecure individuals for residents in the hospital community.	
Strategy Source or Alignment <ul style="list-style-type: none"> ● Micro Pantry ● School Backpack Program ● Local Food Assistance Support and Partnerships 	
Objective By June 30, 2027, increase community support for local food pantries, increase food access partnerships and increase the number of individuals provided with food access assistance.	
Priority Population <ul style="list-style-type: none"> ● Target Population: AM community residents, including ASA associates and patients. ● Medically Underserved Population: Individuals experiencing food insecurity in the community. 	
Collaborators <ul style="list-style-type: none"> ● Other Ascension Hospitals: Ascension Saint Joseph Elgin, Ascension Saint Joseph Joliet, Ascension Resurrection, Ascension Saint Alexius, Ascension Alexian Brothers ● Joint Venture: N/A ● Collaborator: Northern Illinois Food Bank, Marie Wilkinson Food Pantry, Aurora Interfaith Food Pantry, City of Aurora, Ascension Illinois Food Access and Nutrition Workgroup, Community Investment Committee ● Consultants: Touchpoint ● Other Non-Profit Hospitals: N/A 	
Resources <ul style="list-style-type: none"> ● Other Ascension hospital(s): staff time donated, funding/cash donations, materials to build and/or maintain programs, education collateral, marketing resources, and others ● Joint Venture: N/A ● Collaborators: Northern Illinois Food Bank, Faith-Based Institutions, staff/volunteer time donated ● Consultants: N/A ● Other non-profit hospital: N/A 	Budget* Estimate the cost of the actions of the strategy plan. <ul style="list-style-type: none"> ● \$50,000 - \$60,000 / 3 year cycle
ACTION STEPS: MicroPantry	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Mercy Community Health & Volunteers
Identify internal resources for supporting healthy food donations, healthy food distribution and food access program delivery	Ascension Mercy
Identify food-drive event dates	Ascension Mercy Associate Engagement Committee
Identify potential community partners to support maintenance of MicroPantry	Ascension Mercy Community Health

Provide funding support for local community food access programs and initiatives	Ascension Mercy Community Investment Review Committee, Ascension Illinois Community Benefit
Monitor work, evaluate progress, report outcomes	Ascension Mercy Implementation Strategy Workgroup and Community Health
ACTION STEPS: School BackPack Program	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Mercy Community Health
Identify potential community partners to support maintenance of School BackPack Program	Ascension Illinois Community Health Director
Provide funding support for local community food access programs and initiatives	Ascension Mercy Implementation Strategy Workgroup and Community Health
Monitor work, evaluate progress, report outcomes	Ascension Mercy Implementation Strategy Workgroup and Community Health
ACTION STEPS: Local Food Pantry Support and Partnerships	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Mercy Community Health
Participate in Ascension Mercy Community Investment Committee	Ascension Mercy Administration, Foundation, Community Health
Identify local food pantries in need of financial support	Ascension Illinois Community Health Director
Identify internal resources to support food pantry initiatives (i.e. food drives, nutrition education and training)	Ascension Illinois Community Health Director
Monitor work, evaluate progress, report outcomes	Ascension Mercy Implementation Strategy Workgroup and Community Health
Output(s) and/or Outcome(s)	
<ul style="list-style-type: none"> ● Baseline: <ul style="list-style-type: none"> ○ FY24 data ● Target: <ul style="list-style-type: none"> ○ Increase total number of individuals served by food access programs from baseline ○ Increase total number of meals provided from baseline ○ Increase total pounds of food provided from baseline ○ Increase cash donations provided to food access organizations from baseline ● Data Source; Data Owner: Feeding America, Northern Illinois Food Bank, Ascension Mercy Community Investment Committee 	
ANTICIPATED IMPACT	
The anticipated impact of these actions is increased access to healthy food and reduced food insecurity.	

**The budget for this initiative is an estimate and should be considered as such.*

STRATEGY #8: HOUSING ASSISTANCE	
Hospital(s) Name(s) Ascension Mercy	
Prioritized Health Need #3 Social Determinants of Health (<i>SDoH Housing & Transit</i>)	
Strategy Provide support to community based organizations that provide access that address housing assistance.	
Strategy Source or Alignment <ul style="list-style-type: none"> Local Housing Assistance Support and Partnerships 	
Objective By June 30, 2027, increase support for individuals in need of housing assistance in the hospital community.	
Priority Population <ul style="list-style-type: none"> Target Population: hospital patients and community residents. Medically Underserved Population: Individuals experiencing housing assistance needs in the hospital community. 	
Collaborators <ul style="list-style-type: none"> Other Ascension Hospitals: Ascension Saint Joseph Elgin, Ascension Saint Alexius, Ascension Alexian Brothers Joint Venture: N/A Collaborator: Hased House, Mutual Ground, FUSE Consultants: N/A Other Non-Profit Hospitals: N/A 	
Resources Resources the collaborators plan to commit: <ul style="list-style-type: none"> Ascension Mercy staff time donated for program maintenance Ascension Mercy cash donations to community organizations in need of housing assistance services 	Budget* Estimate the cost of the actions of the strategy plan. <ul style="list-style-type: none"> \$35,000 - \$50,000 / 3 year cycle
ACTION STEPS	ROLE/OWNER
Appoint an Associate Lead for this strategy	Ascension Mercy Community Health
Identify community partner that provides housing assistance services	Ascension Mercy Community Health
Explore opportunities for housing assistance partnerships with external partners	Ascension Mercy Community Health
Provide funding support for local community based organizations (CBO) in need of housing assistance	Ascension Mercy Community Investment Review Committee
Monitor work, evaluate progress, report outcomes	Ascension Mercy Community Health
Output(s) and/or Outcome(s) <ul style="list-style-type: none"> Baseline: FY24 data Target: <ul style="list-style-type: none"> Increase support for community based organizations that provide Housing Assistance from baseline. Data Source; Data Owner: Community Investment Committee 	
ANTICIPATED IMPACT	
The anticipated impact of these actions is to increase access to safe, affordable housing to improve overall health.	

**The budget for this initiative is an estimate and should be considered as such.*

Evaluation

Ascension Mercy will develop a comprehensive measurement and evaluation process for the implementation strategy. The hospital 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. Mercy's uses a tracking system to capture community benefit activities and implementation. Data will be aggregated into an annual Community Benefit report made available to the community to ensure accountability.