



2022 Community Benefits Plan Update

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I. Introduction

Advocate Health Care

Advocate Health Care is the largest health system in Illinois and a national leader in clinical innovation, health outcomes, consumer experience and value-based care. One of the state's largest private employers, the system serves patients across 10 hospitals, including two children's campuses, and more than 250 sites of care. Advocate Health Care, in addition to Aurora Health Care in Wisconsin and Atrium Health in the Carolinas, Georgia and Alabama, is now a part of Advocate Health, the fifth-largest nonprofit, integrated health system in the United States. Advocate Health Care is engaged in hundreds of clinical trials and research studies, and is nationally recognized for its expertise in cardiology, neurosciences, oncology, and pediatrics. To learn more, visit [Exceptional Care Any Time, Any Where | Advocate Health Care](#).

For reporting community benefits in compliance with the Illinois Community Benefits Act (2003), the content of this report will focus on Advocate Health Care hospitals which are identified as "Advocate" for state reporting and local brand identity purposes. This document provides a summary of community health programs and activities completed across Advocate in 2022--demonstrating fulfillment of all federal and Illinois state requirements while also living out our commitment to addressing the root causes of health inequity.

Advocate Health Care hospitals and sites of care:

- Advocate Christ Medical Center & Advocate Children's Hospital
- Advocate Condell Medical Center
- Advocate Good Samaritan Hospital
- Advocate Good Shephard Hospital
- Advocate Illinois Masonic Medical Center
- Advocate Lutheran General Hospital
- Advocate Sherman Hospital
- Advocate South Suburban Hospital
- Advocate Trinity Hospital

Mission, values & philosophy

It's not uncommon for an organization to have a mission statement. Advocate Health Care's mission, values and philosophy are grounded in more than 100 years of caring for individuals, families and communities.

Advocate Health Care is so uniquely committed to our mission, values and philosophy that we have a dedicated Office for Mission and Spiritual Care. One of the functions of this office is to ensure that the mission, values and philosophy are understood and integrated into all aspects of our health care ministry.

Mission

The mission of Advocate Health Care is to serve the health needs of individuals, families and communities through a wholistic philosophy rooted in our fundamental understanding of human beings as created in the image of God.

Values

Advocate exists to serve. The core values of compassion, equality, excellence, partnership and stewardship guide our actions as we work together to provide health services to others in our communities.

Philosophy

The care we provide is wholistic. This philosophy means we understand people have physical, emotional and spiritual needs and their relations to God, themselves, their families and society are vital to health and healing. Finally, we believe all people are created in the image of God. All human beings live under God's care and must be treated with dignity and respect.

Advocate Health Care's Community Strategy

Advocate Health Care (AHC) has a strong history of community engagement and service. A targeted strategy has been developed to build on this history and to transform the community facing work to provide support for patient health and to build health equity in communities. This focused community strategy impacts health outcomes for AHC patients as well as the broader community with the long-term goal of reducing health inequities across the organization's footprint.

To advance AHC's commitment and investment in helping people live well and achieve health equity, a multidisciplinary team of leaders from Community Health, Community Relations, Diversity, Equity and Inclusion, Government Relations, Mission and Spiritual Care and Population Health departments convened in November 2018. The Advocate Health Care Community Strategy developed from this work is a targeted systemwide approach to addressing health equity. The Community Strategy includes six focus areas and four enabling strategies, which take an upstream approach to addressing health equity. Community Strategy subcommittees and AHC team members and leaders joined forces to develop specific programs, initiatives, and services for each of the Community Strategy focus areas and enabling strategies.





Community Strategy Focus Areas







Access/primary medical homes: Primary care is critical for improving population health and reducing health disparities. AHC connects people with care and services at the right time, in the right place with the outcome of reducing low acuity ED visits, hospital readmissions and increasing access to primary care settings.



Access/behavioral health services: Mental health is integral to overall health and well-being. AHC provides behavioral health assessments to expedite referral of patients to appropriate levels of care and to supportive resources.

	Workforce development: Unemployment affects health through financial deprivation and social and emotional strain. AHC provides skill-building programs to improve employment skills for community members and workforce development programs for team members.
	Community safety: Violence affects the victim, their family and social network, the perpetrator, and ultimately the entire community. AHC implements programs to support these levels like the Aurora Healing Center in Milwaukee County, Sexual Assault Nurse Examiners (SANEs), and Advocate Trauma Recovery Center.
	Housing: Adequate and safe housing is critical to positive health outcomes. AHC hospitals are taking steps to provide patients with a healthy and safe home environment to heal such as the Safe Home Environment Program and The Cook County Flexible Housing Pool.
	Food security: Food insecurity leads to poor health outcomes and is linked to obesity, increased risk of chronic disease, and malnutrition. AHC teams have activated food distribution plans to address food insecurity by collaborating with community service groups and faith partners.

Community Strategy Enabling Strategies

	Social Determinants of Health (SDOH) Screening and Referral: Collecting and using data from patients living in the communities we serve is an important first step in developing upstream solutions to address the social needs of our patients. AHC team members developed processes, tools, and training necessary to screen patients for SDOH and to resource patients for identified gaps—tracking utilization of these resources in a closed-loop system.
	Local Purchasing (Business Diversity): An anchor strategy that builds upon existing DEI purchasing strategies and establishes targets to increase number of local and diverse vendors.
	Community Investment: Anchor strategy investments targeted to enhance critical services such as affordable or supportive housing and food access in communities that lead to improved health and demonstrated downstream benefits to our patients and the community. May also support strategic businesses to qualify as diverse vendors.
	Philanthropy: Charitable investments and grants fund essential community programs and support execution of AHC’s Community Strategy to create healthier communities and impact vulnerable populations.

AHC’s Community Strategy demonstrates the organization’s response to current forces of change in health care, as well as our commitment to advancing health equity. With effective implementation and evaluation, community partnerships and long-term investment, Advocate Health Care’s Community Strategy will not only improve health equity but transform and improve the lives and well-being of the communities we serve.

II. 2022 Community Health Needs Assessment and 2023-2025 Community Health Improvement (Implementation) Strategies

All Advocate Health Care hospitals’ 2022 Community Health Needs Assessments (CHNAs) utilized a mixed methodology approach to completing a comprehensive study of the demographics and health needs of the communities we serve. Data utilized to complete the CHNA reports include primary and secondary data and both qualitative and quantitative data. As encouraged by the IRS, every hospital collaborates with other health care providers, local health departments and other community stakeholders to complete the CHNA process every three years. Following completion of the CHNA report, each hospital develops Community Health Implementation Strategies (CHIS) to describe how they plan to address prioritized community health needs.

In Illinois, nine hospital CHNA reports were completed on an aligned three-year CHNA timeline. Additionally, two Advocate Children’s hospitals (Oak Lawn and Park Ridge) also completed a comprehensive CHNA report. All 11 CHNA reports for Illinois were reviewed and approved by the Advocate Health Care Network Board and each hospital’s Governing Council in late December 2022. By the first week of May 2023, the 2023-2025 Community Health Implementation Strategy plan for each hospital was made publicly available on our websites. Please visit [Hospital CHNA Reports Implementation Plans Progress Reports | Advocate Health Care](#).

Advocate Health, Illinois Market 2022-2025 Community Health Implementation Strategy Plan Priorities by Hospital	
North Area	
Advocate Condell Medical Center Region: Lake County <ul style="list-style-type: none"> Behavioral Health Obesity 	Advocate Sherman Hospital Region: Kane County <ul style="list-style-type: none"> Behavioral Health Obesity
Advocate Good Shepherd Hospital Region: McHenry County <ul style="list-style-type: none"> Behavioral Health Obesity 	
Central Area	
Advocate Illinois Masonic Medical Center Central, Cook County <ul style="list-style-type: none"> Behavioral Health Health & Nutrition Social Determinants of Health (SDOH) 	Advocate Good Samaritan Hospital Region: DuPage County <ul style="list-style-type: none"> Behavioral Health Health, Wellness & Nutrition
Advocate Lutheran General Hospital Region: North Suburban, Cook County <ul style="list-style-type: none"> Behavioral Health Health & Nutrition 	Advocate Children’s Hospital-Park Ridge North Suburban, Cook County <ul style="list-style-type: none"> Access to Care Behavioral Health

South Area	
Advocate South Suburban Hospital Region: South, Cook County <ul style="list-style-type: none"> • Mental & Behavioral Health • Obesity 	Advocate Trinity Hospital Region: South, Cook County <ul style="list-style-type: none"> • Behavioral Health • Diabetes
Advocate Christ Medical Center Region: South, Cook County <ul style="list-style-type: none"> • Mental & Behavioral Health • Obesity 	Advocate Children’s Hospital-Oak Lawn Region: South, Cook County <ul style="list-style-type: none"> • Access to Care • Behavioral Health
Advocate Health, Illinois Market 2022-2025 Community Health Implementation Strategy Plan Priorities by Hospital	
North Area	
Advocate Condell Medical Center Region: Lake County <ul style="list-style-type: none"> • Behavioral Health • Obesity 	Advocate Sherman Hospital Region: Kane County <ul style="list-style-type: none"> • Behavioral Health • Obesity
Advocate Good Shepherd Hospital Region: McHenry County <ul style="list-style-type: none"> • Behavioral Health • Obesity 	
Central Area	
Advocate Illinois Masonic Medical Center Central, Cook County <ul style="list-style-type: none"> • Behavioral Health • Health & Nutrition • Social Determinants of Health (SDOH) 	Advocate Good Samaritan Hospital Region: DuPage County <ul style="list-style-type: none"> • Behavioral Health • Health, Wellness & Nutrition
Advocate Lutheran General Hospital Region: North Suburban, Cook County <ul style="list-style-type: none"> • Behavioral Health • Health & Nutrition 	Advocate Children’s Hospital-Park Ridge North Suburban, Cook County <ul style="list-style-type: none"> • Access to Care • Behavioral Health
South Area	
Advocate South Suburban Hospital Region: South, Cook County <ul style="list-style-type: none"> • Mental & Behavioral Health • Obesity 	Advocate Trinity Hospital Region: South, Cook County <ul style="list-style-type: none"> • Behavioral Health • Diabetes
Advocate Christ Medical Center Region: South, Cook County <ul style="list-style-type: none"> • Mental & Behavioral Health • Obesity 	Advocate Children’s Hospital-Oak Lawn Region: South, Cook County <ul style="list-style-type: none"> • Access to Care • Behavioral Health

III. Community Benefits Plan and Program Examples/Outcomes

As indicated earlier, the AHC Community Strategy Core Team identified six key focus areas to target, all of which have been identified as “game changers” in achieving health equity. Most of the program descriptions and outcomes that follow are structured according to these six areas, and the progress/outcomes provided are from the 2023-2025 Community Health Implementation Strategy (CHIS) as well as outcomes carrying over from previous CHNA and CHIS cycles. While programs can often support more than one key focus area, the following examples are organized to demonstrate fulfillment of Advocate’s strategy in each focus area and preferably in the area in which programs have the most impact.

1. Access to Innovative Care and Service:

Access to health care was ranked as a top issue by community members and key stakeholders in the most recent Community Health Needs Assessments for all Advocate Health hospitals in Illinois and Wisconsin. Access to Innovative Care and Services is about creating conditions in our hospitals, across our health system and in our communities to provide accessible, available, affordable, and targeted health care and health services to support everyone’s ability to live well. Access to care offers an opportunity to detect and treat disease at an earlier stage, improve overall health, prevent disease and disability, and reduce preventable deaths. Some examples of the programs utilized to increase access for people living in the communities we serve in 2022 include:

- **Financial Assistance.** Advocate offers a very generous financial assistance program, requiring no payments from the patients most in need and providing discounts to uninsured and insured patients. Patients earning up to six times the Federal Poverty Level (FPL) and insured patients earning up to two and half times the FPL, may qualify for a full or partial financial assistance discount. Additionally, a Catastrophic Assistance discount is available for uninsured and insured patients whose incomes exceed the traditional financial assistance income guidelines and have outstanding patient balances of \$25,000 or more for a single date of service or sum of several dates of service. These patients may qualify to receive a financial assistance discount that reduces their outstanding balance to 25% of their net income. For uninsured patients, Advocate will presumptively provide financial assistance if the financial status has been verified by a third party. In these cases, the patient is not required to submit a separate charity application. If presumptive criteria are not available for uninsured patients, financial assistance eligibility is available using an income-based screening. Advocate extends its income-based financial assistance policy to its insured patients as well. Advocate continues to review and refine its policy in an ongoing effort to ensure that financial assistance is available to those who need help.

Emergency Department Charity Care Only, Provided at Cost

Advocate Health Care, IL North Region Hospitals			
Charity Care	Advocate Condell Medical Center	Advocate Sherman Hospital	Advocate Good Shepherd Hospital
Emergency Department Charity Care Only, Provided at Cost	\$1,956,734.69	\$2,163,927.93	\$377,634.11

Advocate Health Care, IL Central Region Hospitals			
Charity Care	Advocate Good Samaritan Hospital	Advocate Lutheran General Hospital, Advocate Children's	Advocate Illinois Masonic Medical Center
Emergency Department Charity Care Only, Provided at Cost	\$1,153,477.89	\$2,168,863.51	\$924,776.42

Advocate Health Care, IL South Region Hospitals			
Charity Care	Advocate South Suburban Hospital	Advocate Trinity Hospital	Advocate Christ Medical Center, Advocate Children's
Emergency Department Charity Care Only, Provided at Cost	\$1,155,810,259	\$915,187.24	\$1,994,256.48

- Financial Advocates.** Financial wellness includes having access to the plans, programs, and financial assistance options that are right for you. Advocate Health Financial Advocates are available to support people who don't have insurance and are within a certain income range. These advocates provide free, personalized financial assessments that include identifying each patient's unique health care needs, helping the patient understand the potential cost of medical treatment, and discussing their financial assistance options. The advocate then assists people in applying for the financial assistance programs most appropriate for them. In 2022, Financial Advocates processed 14,111 Advocate Financial Assistance applications, completed 1,188 Medicaid applications, identified 693 people for co-pay assistance and assisted people with completing 260 Marketplace applications.
- Federally Qualified Health Centers (FQHCs).** All Advocate's hospitals continue to have relationships with FQHC's or other community clinics within their service areas and collaborate with those partners to improve access to care for Medicaid and uninsured patients. **Advocate Sherman** continues to work closely with Greater Family Health (FQHC), VNA Health Care and Aunt Martha's (FQHC) to coordinate care for low-income patients in the Elgin area. The hospital provides colonoscopies and mammograms to Greater Family Health patients, coordinated through grant-funded programs. **Advocate Condell** works collaboratively with the Lake County Health Department and Community Health Center (FQHC) and Erie HealthReach Waukegan (FQHC), by providing

mammograms and some specialty care to uninsured and low-income patients as they are referred to the medical center. **Advocate Illinois Masonic and Advocate Lutheran General** also partner with Heartland Health Centers and CommunityHealth, one of the largest free clinics in the nation, to provide specialty care to uninsured patients and referrals to FQHCs and free clinics for primary care services. In addition, **Advocate Illinois Masonic** provides operations space to Heartland Health Centers on its campus to provide primary care for individuals and families that are uninsured. In partnership with the Access to Care organization, **Advocate Christ** continues to provide free mammograms to uninsured and low-income individuals that are referred by their clinic to the hospital when this service is required. **Advocate Trinity** works with Chicago Family Health Center and Christian Community Health Center to coordinate care for low-income patients. Advocate Hospital in Cook County work closely with CommunityHealth to connect treat uninsured patients and to connect individuals that need a primary care provider.

To maintain quality care excellence and improve quality of life for people seeking care from Advocate, working to find medical homes and to reduce emergency room visits and hospital admissions is essential. Advocate has numerous programs focused on managing the patient experience through the continuum of care—through inpatient and outpatient settings, and in the home.

- **Medicaid and Medicare.** Advocate actively works to improve the provision of services to individuals and families who are covered by Medicare and Medicaid and that seek services at any of Advocate’s 400 sites of care. Advocate collaborates with various community-based organizations (CBOs) and Federally Qualified Health Centers (FQHCs) in innovative ways to establish primary care relationships for Medicaid and uninsured patients.

Advocate Care Organization (ACO). Advocate collaborates with Meridian Family Health Plan (FHP) of Illinois as part of an integrated care model for people on Medicaid. Advocate has a strong history of providing high quality care to the Medicaid population within its network with key focus areas, including improved care coordination, access and quality performance. The result has been a reduction in ED utilization due to successfully connecting individuals in the plan to a medical home and due to connecting patients with community resources for unmet Social Determinants of Health needs.

- **Community Health Workers-Connecting and Navigating People to Primary Care and Social Services.** The Primary Care Connection (PCC) program, deploys Community Health Workers (CHWs) as community resource navigators to serve people in the ED. The purpose of the program is to reduce unnecessary ED visits and to connect people to a primary care home. CHWs educate people about accessing the appropriate level of care and providing follow-up appointments to a convenient care site for people during the ED visit. CHWs also conduct a community health assessment to identify social determinants of health and link people to social services and community resources that contribute to the persons’ overall wellbeing. The PCC program has reached over 40,000 people since

2018. From January 2018 through December 19, 2022, Community Health Workers have served a total of 40,082 people with a combined 90-day readmission rate for 2018-2022 of 3.5 percent.

- **Advocate Physician Partners (APP)**. Advocate population health leaders and community health leaders are partnering to develop new approaches to patient screening and resourcing patients for social determinants of health.

Advocate continues to pursue quality and utilization improvement activities like the Primary Care Connections intervention to achieve the quadruple aim of improved physician and patient experience, better patient outcomes and reductions in the total costs of care.

- **Mobile Integrated Health (MIH)**. In Kane County, a hospital-based MIH system was created to improve care coordination and reduce readmissions of chronically ill people at Advocate Sherman as they transition from hospital to home. National data shows that mobile care helps prevent hospital readmissions, especially in areas where people have limited access to health care and traditional home health services are restricted due to a variety of reasons. The MIH partnership between a physician and an on-staff paramedic, allows outreach to people in their homes when the patient is unable to make a scheduled clinic visit or when symptoms/conditions arise for which an in-person home assessment is most beneficial to the patient. The paramedic then communicates back to the physician to determine the plan of care. In 2022, COVID-19 continued to make an impact on home visits for the MIH program. However, 87 people were enrolled in the program and 244 in-home visits were provided. There were only two people readmitted within 30 days.

Advocate also provides language and other culturally appropriate services to improve access to a broad range of health-related services.

- **Deaf and Hard of Hearing Program**. Advocate Illinois Masonic's Deaf and Hard of Hearing Program provides comprehensive mental health care in American Sign Language (ASL) to deaf and hard of hearing children, adolescents, and adults across the Chicagoland area. *(This program is described in greater detail on page 16-17, under community health strategy focus area # 2. Access/Behavioral Health.)*
- **Language Services**. Our Language Services team bridges languages and cultures by connecting patients, family members, and companions to information and services at the desired time, in the optimal place, and utilizing appropriate communication modalities.

Infographic: Our journey over the last five years has yielded significant growth, demonstrated by a 124% increase in encounters, over 1.2 million interactions, and 193 languages from 2018 to 2022.

A focus for language services in 2022 was to ensure patients, family members, and companions have auxiliary aids, devices, or services that enable effective communication. We expect all access points within the system will be fully equipped with these aids. These aids include but are not limited to Clear Masks, Visual Alert Systems, Baby sound Alert, Pocket Talkers, CapTel Phones, TTY Phones, Picture Board, Whiteboard, Magnifier, and Special Communication Needs Signs. Enhancing the experience and positive outcomes of our consumers who are Deaf, Hard of Hearing, Blind, Low Vision, or those with limited literacy remains a core focus for Language Services.

- **Community-based Hispanic Council.** Diabetes is one of the costliest and highly prevalent chronic diseases in the U.S.—affecting nearly 20 percent of Latino men and women. This prevalence is evident in the ER hospitalizations for diabetes-related complications within Advocate Sherman’s service area. To address this epidemic, the hospital has joined forces with a cross-sector community-based coalition to educate the Hispanic community, cut hospital costs and reduce the risk for diabetes in this population. The coalition has already initiated an awareness campaign and provided glucose screenings at highly Latino-visited community venues. Additionally, the coalition implemented online risk assessments with immediate referrals to a medical home, social support services and connections to health insurance coverage for 100 percent of individuals newly identified as prediabetic or diabetic through screening events. All program activities remained on hold in 2022.
- **Cultural Health Initiatives.** Advocate Lutheran General Hospital reshaped two previous patient navigator positions previously serving the Polish and Korean populations and created a more robust Cultural and Community Liaison role. This position continues the more than decade long Advocate Lutheran commitment and dedicated response to the multitude and continually changing diverse cultures, languages, health literacy and demographics of the communities that we serve. This position’s priority is to create an environment that is conducive to developing lifelong relationships with members of the community, to increase access to health care services for members of the community and to help our current patients achieve best health outcomes. The Liaison also works in collaboration with the Central Chicagoland primary service area (PSA) and the Community Health area to meet the health care, cultural and spiritual needs of our patients and families.

The Liaison continues to assist patients who are limited/Non-English speaking and helps patients navigate the health care facility, provides linguistically competent and culturally sensitive patient education in the context of community outreach, and helps to identify potential barriers to health care for the community. The Cultural and Community Liaison collaborates with external stakeholders including but not limited to, Chambers of Commerce, community agencies and educational districts to promote our health care service lines and concurrently embed and integrate the AHC mission of diversity, equity and inclusion into the six components of this role. They are Patient Navigation, Community Relations/Outreach and Engagement, Cultural Competence, Physician

Relations/Recruitment and Community Health. The Liaison partners with internal stakeholders including physicians, team members, administrators and volunteers to provide guidance around cultural sensitivities of the patient's care plan and possible alterations needed to further the goal of service excellence for all, which in turn promotes an environment that meets the unexpressed and expressed needs of all those in the facility. This provides an opportunity to also identify potential barriers and to assess what educational materials and hospital resources are needed that support cultural sensitivities to continue to foster greater communication between the provider and patient/family around the patient's care plan.

- **LGBTQ (Lesbian, Gay, Bisexual, Transgender and Queer) Health Equity Index.** Advocate Illinois Masonic was the first Advocate Hospital to achieve, since its inception, “Leader” status denomination with the Human Rights Campaign Foundation’s Health Equality Index. The hospital is one of 496 leaders out of 906 participants. As the leading LGBTQ site, it has been the foundation for Advocate Health Care to be the 4th largest Health System with all its sites accredited in 2022. Leaders are recognized for policies and services supportive of LGBTQ rights, including patient visitation and employment non-discrimination, staff training in LGBTQ patient-centered care and employment non-discrimination, LGBTQ patient services and support, transgender patient services, employee benefits, and patient and community engagement. In 2016, Advocate Illinois Masonic created a site LGBTQ Work Group working on affinity, advocating for policies and processes affirming toward LGBTQ patients and team members. The medical center has developed processes for gender expansive affirming identification and capabilities to capture gender identify and sexual orientation SOGI data. Advocate Illinois Masonic’s experience served as the model for other medical centers within the Advocate Health Care network to participate in the Health Equality Index in 2020, impacting thousands of team members and millions of patients across Illinois and Wisconsin. The hospital was featured in the HEI 15 years report as one of 4 initial survey respondents and a model for community hospitals participation. Despite the circumstances and challenges that the COVID-19 pandemic brought to the entire health care system, Advocate hospitals continued their commitment to inclusive and affirming care for LGBTQ patients in 2022.
- **Baby-Friendly Hospitals.** There are more than 500 hospitals and birthing centers in the U.S. that hold a Baby Friendly designation, including three Advocate Hospitals — Trinity, Illinois Masonic and Sherman — all of which achieved this recognition in 2016. The Baby Friendly Hospital Initiative was established by the United Nations Children’s Fund (UNICEF) and the World Health Organization (WHO) in 1991 to offer an optimal level of care for infant feeding and mother-baby bonding. The core components of the Baby-Friendly Hospital Initiative (BFHI) are the UNICEF/WHO *Ten Steps to Successful Breastfeeding*, which are designed to facilitate the role of the birthing facility in providing women the information, care practices and opportunity to breastfeed, regardless of the method of birth.

To achieve better outcomes and use limited resources well, community health

leaders are frequently choosing programs that have been evaluated to replicate in their communities. These evidence-based initiatives increase the likelihood that identified needs will be met. An example of the numerous evidence-based programs implemented across Advocate is as follows.

- **Fall Prevention.** Given that falls are one of the most common reasons for older adults to visit an emergency room, Advocate Good Shepherd offered A Matter of Balance fall prevention program (MOB)—an eight-session evidence-based program to reduce the fear of falling among older adults. In 2022, as COVID-19 continued to impact the communities, four MOB classes were completed in the Advocate Good Shepherd service area. 2 Spring classes included 8 graduating participants each and 2 summer classes included 12 and 13 graduates. All classes were able to be conducted in-person with accommodations implemented including spacing of participants and optional masking. Requests for the class to be conducted virtually no longer existed as participants preferred in-person participation. Due to COVID-19 early in the year, no new coach trainings were completed in 2022 at Advocate Good Shepherd but would resume in early 2023.

To further address health equity, Advocate works to enhance access to health care, prevention and wellness services for many diverse populations that might otherwise have difficulty accessing/receiving necessary health services. Some examples of these programs include the following.

- **Ronald McDonald Care Mobile.** Since 2008, Advocate Children’s has partnered with Ronald McDonald House Charities to deliver free primary health care via Ronald McDonald Care Mobile – fully-equipped medical clinics on wheels – to vulnerable, underserved school children on the north and south sides of Chicago. The teams also provided physician referrals, helped with Medicaid enrollment and housing assistance, screened for food insecurity – providing food and information about social services, food pantries and other resources – and distributed winter clothing and basic personal hygiene supplies. Through these mobile units, we saw more than 2,361 patients and provided nearly 4,425 immunizations and 1,209 physicals. All patients seen on the Care Mobiles are either uninsured or on Medicaid.
- **Advocate Adult Down Syndrome Center.** Established in 1992 through a partnership between Advocate Lutheran General and the National Association for Down Syndrome (NADS), the Advocate Medical Group Adult Down Syndrome Center provides crucial psychosocial and medical services to adolescents and adults with Down syndrome living in all areas of Illinois. Each year, approximately 1800 individuals are served through over 6,000 visits, including care in the office, the patient’s home, at residential facilities, nursing homes and in the hospital. The Center’s multidisciplinary approach to comprehensive medical care, with a strong emphasis on preventive medicine, provides practical approaches to health education and health risk reduction, including supporting

people with Down syndrome in their own health promotion efforts. More time is provided to each patient visit to allow individuals with Down syndrome to participate in their own health care which reduces reimbursement. Further, only one-third of the cost of the clinic is reimbursed through billing insurance due to the payor mix. In addition, Advocate generously provides some services through the Center that are key to health promotion but that are not reimbursable or billable. In addition to patient care, the mission of the Center includes education and research. In 2022, the Center staff provided numerous educational events and classes (virtually, of course, during the pandemic but beginning to be in-person again), published research studies, provided extensive educational materials online and in print form, and participated in national and international projects educating about and researching the effect of a variety of conditions have on people with Down syndrome such as COVID-19, Alzheimer's disease, and mental health conditions.

- **Pediatric Developmental Center.** Advocate Illinois Masonic's Pediatric Developmental Center (PDC) serves children with autism and their families--both those with commercial insurance and Medicaid plans. The PDC remains one of the only centers in Illinois to provide diagnostic evaluations and therapy services for autism to low-income families. In 2022, for example, over 60% of patients served at the center were on Medicaid or government-funded, Early Intervention. The PDC provides both comprehensive diagnostic evaluations, specialty medical care (developmental pediatrics) as well as comprehensive therapy services (individual behavior therapy, socialization groups, speech, occupational and physical therapy, social work services, parent training and sibling support). In 2022, the PDC provided services 1,887 unduplicated patients for a total of 17,889 patient contacts—at least half of which represented patients with Autism. The PDC offers services in both English and Spanish, including ongoing parent training and support to enhance generalization of skills into all environments.
- **Illinois Oral Health Programs.** Advocate Illinois Masonic provides two dental programs focused on improving access to oral health services. The Mobile Dentistry Program brings oral health care services to underserved and uninsured populations, including low-income children and families, people experiencing homelessness, older adults and persons with special needs at 18 different locations across the community. The Special Needs Dentistry Program provides access to oral health for children and adults with developmental disabilities. Most dentists lack the training or equipment needed to effectively serve patients with special needs, resulting in many individuals lacking access to even basic dental care. In 2022, the Special Needs Dentistry program had 1,876 visits, serving 1,490 persons with special needs, and the Mobile Dental Van provided 2,487 services to 430 people in 1,124 visits.
- **Faith and Health Partnerships.** Advocate Aurora Health's Faith and Health Partnerships program works side by side with faith communities to promote health equity by mobilizing the transforming power of social connectedness and spiritual wisdom. The

program supports a Neighborhood Model that embeds AAH team members in specific neighborhoods identified as priorities through the AAH Community Strategy. Team members work with a collaborative network of faith communities and community-based organizations to address health issues that have been identified by community members as issues that are important to them. In Illinois we have Neighborhood Network programs in South Chicago and Avondale and are focused efforts on reducing stress and increasing social connectedness, managing chronic disease, and supporting food access. Faith and Health Partnerships also works across our footprint on building capacity of faith leaders and congregations to promote the wholistic health of their members and the communities they serve, particularly around mental health. AAH also supports a Faith Community Nurse Network of 27 nurses that serve congregations across the Chicagoland region.

Advocate Aurora Health's Faith and Health Partnership program is a key convener of the Chicagoland Trauma Informed Congregations Network (CTICN), a multifaith learning community that explores how faith communities can support healing and resilience across communities. The CTICN hosts conferences, provides training and education, and convenes regular Community of Practice gatherings around topics of common interest.

Mental Health is a priority in each of our hospitals' Community Health Needs Assessments. Faith and Health Partnerships provides a Faith and Mental Health Specialist to work with congregational leaders and members on reducing stigma and increasing support for people experiencing mental health challenges.

Since 2009, Advocate has supported The Center for Faith and Community Health Transformation. The Center works to advance health equity by partnering with faith-based and community organizations to build community, nurture leaders and connect the unique spirit power of faith communities to promote social justice and abundant life for individuals, families and communities. The Center is a partnership between Advocate and the Office for Community Engagement and Neighborhood Health Partnerships at the University of Illinois at Chicago. Advocate invests staff time and some program dollars as part of our commitment to this work.

2. ACCESS/BEHAVIORAL HEALTH SERVICES:

Behavioral health, which includes treatment and services for mental health conditions and substance use disorder is an urgent public health concern in both Illinois and Wisconsin. An analysis of health data within the Advocate Health patient service areas reveals the burden of mental illness and substance abuse.

Advocate Health has implemented many programs/services focused on improving the continuum of care for the benefit of mental health and behavioral health patients. In addition to having strong partnerships with community-based programs across our service areas, Advocate Health Behavioral Health offers a full continuum of treatment options

including Inpatient, Residential, Partial hospitalization, Intensive outpatient, Outpatient, Day treatment programs, and Support Groups. Examples of other initiatives include:

- **Behavioral Health Integration.** Many studies have shown that integrating behavioral health into primary care practice can lead to increases in a person's adherence to treatment, improves quality of life, and increases a person's satisfaction with their care. At Advocate Health we are integrating into primary care practices in Illinois and Wisconsin using the collaborative care approach and embedding social worker to work alongside the primary care team seeing people in need when they come in for their primary care visit. In addition, patients have access to a virtual licensed clinician for brief targeted solution focused therapy. Thirdly, primary care physicians have access to a consulting psychiatrist for questions regarding prescription medications to treat mental health conditions. The goal of this initiative is to address lower-level behavioral health issues in the primary care setting where people feel most comfortable. Between June 2021 through 2022, the program has served 2,927 people in our nineteen Behavioral Health Integration programs across Illinois and Wisconsin, including 2,133 people served in 2022 alone. This program is based on an evidence-based model of care, collaborative care out of University of Washington. We use evidence-based screening tools, PHQ-9 and GAD-7. Early metrics have demonstrated an increased time to first appointment by 83% compared to referral to usual outpatient behavioral health providers.
- **Behavioral Health Assessments.** Behavioral health assessments help providers identify when a person is experiencing behavioral health issues and assists in expediting referrals to appropriate levels of care and other supportive resources. In 2022, 10,637 assessments for people presenting in an Advocate Health in IL hospital ED in acute mental/behavioral health crisis were completed by a behavioral-health specialist. The totals by state are as follows:
- **Mobile Crisis Response team (Formerly known as MICCS).** The team is comprised of four clinicians and a peer support specialist. They provide crisis interventions, therapy and case management to acutely ill behavioral health patients, offering community-based encounters. In 2022, 85 people enrolled in Mobile Crisis received 1,917 services, of which about half was delivered in the community. Advocate Illinois Masonic's Behavioral Health Services also ran an injection clinic during the first 2 months of 2022 and during that time, 62 people received 107 injections.
- **Deaf and Hard of Hearing Program.** As briefly mentioned earlier under Language Services, AIMMC's Deaf and Hard of Hearing Program provides comprehensive mental health care in American Sign Language (ASL) to deaf and hard of hearing children, adolescents, and adults across Illinois. The program offers a continuum of care that includes clinical assessments; pre-screenings and linkage; individual and family therapy; psychiatric evaluations and medication monitoring; as well as crisis intervention with a 24-hour phone line. Tele-psychiatry is available to clients using a variety of methods,

including videophone equipment supported by the Federal Communications Commission (FCC) and Teams/Zoom, that suit the individual's linguistic and technological needs to enable the provision of otherwise scarce deaf-friendly psychiatric services in the homes of deaf patients. Over the years, the hospital has distributed several thousand free ASL DVDs on HIV/AIDS, STDs, breast health, diabetes, depression, and smoking cessation. In 2022, BHS provided 1537 services to 84 DHOH patients, with 1380 offered by the ASL-fluent staff and 157 services using accommodation. 12 patients of those 84 also have visual impairment; they received 195 services over the course of 2022.

- **First Access Program.** Given the high number of admissions and ED visits for behavioral health conditions at Advocate Illinois Masonic and the high number of discharged patients that were not keeping their outpatient follow-up appointments, the hospital's behavioral health department created the First Access program in 2013. The goal of First Access is to provide immediate access to follow-up behavioral health services to support recovery and prevent relapses. Through this program, behavioral health ED patients, as well as patients referred by the hospital's inpatient psychiatric unit, medical floors and physicians, are linked to follow-up for outpatient appointments with minimal wait time. Since its implementation, First Access consistently increased behavioral health patients' appointment follow-through rates from 40 percent in 2013 to 100 percent in 2019. Discharged patients received warm hand-offs to behavioral health services and left with an outpatient plan of care. Having achieved that, First Access started to focus on providing access to care to all Advocate patients and its volumes have steadily grown, providing 1,828 intakes to patients in 2021. These volumes were maintained and in 2022 First Access provided 1826 new-patient intakes.
- **Community Linkage Specialist (CLS).** In response to the increasing rates of substance abuse and mental illness in DuPage County, Advocate Good Samaritan employed a Community Linkage Specialist that works with Detox and Behavioral Health Unit patients to connect them to the appropriate community support services and resources. This individual also conducts community and home visits with discharged patients.
- **Mental Health First Aid (IMMC and GSAM).** Mental Health First Aid training aims to increase awareness around mental illness through helping people identify mental health issues/illness and address mental health crises in the community. The team implemented two Mental Health First Aid trainings across Central Chicagoland (Good Samaritan's EMS/paramedic students and Avondale Restorative Justice Community Court. Twenty-eight individuals completed the training and received their certification in Mental Health First Aid in 2022.

3. **WORKFORCE DEVELOPMENT:**

A steady job in favorable working conditions can mean a link to health insurance benefits for a family, the ability to pay for childcare services and education, and the opportunity to purchase healthy, nutritious food. Unemployment, on the other hand, can lead to negative

health outcomes including a decline in one's ability to access care, development of depression or other behavioral health issues, or an inability to pay for basic living expenses.

- **Advocate Workforce Initiative (AWI)**. The Advocate Aurora Health, Workforce Development team originated from a generous grant from JPMorgan Chase in 2015 via a grant entitled the "Advocate Workforce Initiative" (AWI). AWI was created to address high-unemployment rates and employment disparities in the city of Chicago's most underserved areas. Since the grant completion in 2020, AAH has continued this work by establishing a systemwide Workforce Development team across Wisconsin and Illinois. This team has created and continues to scale programs aimed to create equitable workplace programs, meeting the talent needs of the organization and building sustainable workforce development programming. These programs include, but aren't limited to:
 - **Registered Apprenticeship**. Launched in 2019, Advocate Health has created several apprenticeship models through the Wisconsin Department of Workforce Development (DWD) and the US Department of Labor (DOL) to address urgent talent needs. These programs include a Facilities Maintenance and Culinary Arts apprenticeship in partnership with local colleges.
 - **Diverse Abilities**. Since 2017, AAH has created a focused effort to source and employ individuals with disabilities while creating a more inclusive hiring process. To date, Advocate Health has employed 35 individuals through the program.
 - **Teammate Success Coaching**. Launched in 2022, this effort addresses social determinants to retention by providing complex case management and provide wraparound support to select new team members from the most vulnerable talent populations. This effort launched with two "Teammate Success Coaches" in South Chicagoland at Christ Medical Center in June 2022 and Central Chicagoland at Illinois Masonic Medical Center in January 2023.
 - **Corporate Internships**. Each summer, AAH employs 20+ corporate interns from around the country to introduce college students to careers in HR, Finance, IT and other corporate functions.
 - **Community Scholarship**. Starting in 2021, the AAH Community Scholarship Program awards \$5,000 scholarships to 10 community members and 10 dependents of AAH team members. In 2022, AAH awarded twenty, \$5,000 scholarships for students across Illinois and Wisconsin that are pursuing STEM-related careers.
 - **Historically Black Colleges and University (HBCU)**. Starting in 2021, AAH partnered with several HBCUs across the nation to provide sponsorships, scholarships, internships, and mentoring for students enrolled in college programs. Partner schools include Florida A&M, Central State University and Spelman College.
 - **Herzing Upskilling Programs**. Starting in 2021, Advocate Health developed and launched two upskilling programs with Herzing University – 'Sterile Processing to Surgical Technologist' and 'Medical Assistant'. Advocate Health team members in entry-level roles can enroll in regularly scheduled cohorts as they work through

online education and on-site skills training. To date, over 80 team members have enrolled across Illinois and Wisconsin with many more on the way.

- **MAAPET (Medical Assistant Accelerated Path to Employment Training Program).** The MAAPET Program was a paid training program in partnership with the Center for Healthcare Careers of SE WI (CHCSEW) and made possible by a \$500k grant through the Medical College of Wisconsin's Advancing a Healthier Wisconsin Endowment (AHW). This program, in collaboration with the region's four largest healthcare systems, trained over 100 new Medical Assistants from underserved communities by the end of 2022. Over the course of this paid, 14-week, accelerated training program, employees of all four systems trained to become MAs and sit for a national MA certification upon completion.
- **Workforce Development.** In 2021, Advocate Workforce Initiative and Central Chicagoland Community Health partnered with community colleges and organizations to provide phlebotomy and medical assistant externships for individuals living in underserved, disenfranchised communities. The initiative provided hands-on and workforce development training to 11 individuals from communities with high rates of unemployment. In addition, Advocate Lutheran General hospital partners closely with Maine East High School and their JumpStart Program. JumpStart is a youth employment program, federally funded through the Workforce Innovation and Opportunity Act based out of Main Township High School District 207. The program serves in and out of school youth with employment and education barriers throughout Northern Cook County with an emphasis on the Des Plaines, Park Ridges, Niles, Morton Grove and Glenview neighborhoods. Advocate Lutheran offers working opportunities in various entry-level department, such as Food and Nutrition Services and Environmental Services. The Community Health Department oversees the orientation process and works with the JumpStart team and hospital staff to ensure that the students are equipped with the proper tools to start their paid internship. From 2021 to 2022, a total of 27 JumpStart youth has had work experiences at Advocate Lutheran General and seven of those youth have been hired into permanent positions.

4. COMMUNITY SAFETY:

Experiencing violence, sexual assault and other forms of trauma can have harmful and lasting consequences for survivors, families and communities including, but not limited to, long-term physical consequences, immediate and chronic psychological issues, health behavior risks and financial costs. For example, the chronic stress associated with feeling unsafe can cause anxiety and depression, and fear of violence can keep people indoors, limiting access to social encounters, exercise, or even healthy foods options.

- **Illinois Advocate Health Forensic Nurse Examiners (FNEs).** FNEs, specially trained and state certified nurse examiners located in Advocate Health hospitals in both Illinois and Wisconsin, provide compassionate, trauma-informed care to sexual assault and domestic violence survivors seeking care in the Emergency Department. These highly trained practitioners perform forensic exams pertaining to sexual assault/abuse, address sexually

transmitted infection concerns, collect forensic evidence, testify in court as expert witnesses, and provide access to advocacy and after-care resources—supporting survivors through the entire process. In Illinois, we have been aggressively training and recruiting sexual assault nurse examiners to meet the regulatory mandate that goes into effect January 2023. In 2022 we trained 11 RN to support coverage at all Advocate Hospitals in Illinois. We have developed a regional response to sexual assault victims that will provide 24/7 coverage within 90 minutes of the patient’s arrival at our facilities. In 2022 across our Illinois market, 294 adults and 234 children <13 years were treated for sexual assault, with an additional 91 children referred for further evaluation to Advocate Children’s Hospital Child Protection Team Sexual Abuse Clinic.

- **Southland Rise.** Southland RISE (Resilience Initiative to Strengthen and Empower) is a collaborative uniting the Trauma Recovery Center of Advocate Christ Medical Center in Oak Lawn and the Violence Recovery Program of Hyde Park-based UChicago Medicine (UCM). Inspired by U.S. Senator Dick Durbin's HEAL (Hospital Engagement, Action, Leadership) Initiative, the two hospitals work together and alongside community partners to improve long-term trauma recovery care and mitigate violence-related injury in Southland and on the South Side of Chicago. Through its active leadership role in Southland RISE, Advocate Health champions efforts that increase access to quality care for survivors of intentional violence and strives to build stronger, more resilient communities. Advocate Health’s leadership role in Southland RISE had a profoundly positive impact on South Side communities in 2022.

Through the Rapid Cycle Violence Prevention & Community Resiliency Grant Program, 18 South Side community groups received \$150,000 to strengthen their grassroots work supporting youth and keeping them safe during the summer in 2022. The collaborative has been able to expand the Community Violence Prevention Initiative by hiring two staff members in 2022. Additional funds were received to improve the delivery of Trauma-Informed Care and support awareness efforts such as the Strides for Peace, Race Against Gun Violence event. Southland RISE hospital partners have again renewed their commitment to fund the Rapid-Cycle Violence Prevention & Community Resiliency Grant Program, with the added goal of strengthening collaboration between grant receiving organizations. Also, a priority is continuing to strengthen community partnerships, fostering deeper collaboration with key violence prevention stakeholders, and encouraging continued collaboration between the two hospitals through the Southland RISE Steering Committee.

- **Advocate Trauma Recovery Center (TRC).** The TRC is a health care-based violence intervention program that provides social and behavioral health services, individual and group therapeutic services, and psychiatric consultation to survivors of intentional crime and/or trauma. The purpose is to aid individuals who have experienced trauma in rebuilding, restoring and strengthening their sense of safety by ending the cycle of violence. The TRC provides access to trauma-informed care by acknowledging how past and present traumatic experiences and stress may impact the individuals and families

served—responding to the unique needs of each survivor and their family. The TRC program began at Advocate Christ Medical Center in 2019. In late 2022, the TRC program expanded its services to Advocate Condell Medical Center and Advocate Illinois Masonic through support from the Illinois Criminal Justice Information Authority. The TRC services have expanded from Cook County, Will County, Kankakee County and DuPage County to also serve Lake County, Kane County, Kendall County, McHenry County. The program now has Trauma Outreach Workers that are available 24 hours a day, 7 days a week. In 2022, a total of 1,556 people were served by the TRC program. The top three groups serviced, by race and ethnicity, were Black or African American (56.8%), Hispanic or Latino (21.2%) and White Non-Latino or Caucasian (17.7%).

- **Violence Reduction.** The Trauma Recovery Center has partnered with Communities Partnering 4 Peace (CP4P) to better serve our communities that are impacted by gun violence. CP4P is part of Metropolitan Family Services; they work with street outreach organizations that cover 28 communities in the Chicagoland area. TRC teammates are trained by CP4P to identify high risk for retaliation situations and then to partner with the street outreach organization in the neighborhood in which the incident occurred. Street Outreach will work within the neighborhood to prevent retaliation and partner with members of the TRC to help the patient in their healing process and do our best to ensure safety upon discharge.
- **Trauma-Informed Care (TIC) Training.** Through staff meetings, student education, and specialized training as requested by Advocate Health teams, the Trauma Informed Care (TIC) Manager located at Aurora Sinai Medical Center in Milwaukee provided a fundamental overview of trauma-informed care to teammates in various roles across the system. The training provides an overview of the Four Rs of Trauma-informed Care (realize, recognize, respond, and resist re-traumatization) and historical trauma as a factor impacting a person's lifetime wellness. This expanded the work with Initiatives to assure team member and patient safety by integrating trauma-informed care practices tailored to service areas and expanded implementation of the Four R's of Trauma-Informed Care. Our TIC manager trained 1,100 Aurora teammates in 2022.

5. HOUSING:

The impact of housing on health is widely understood. Environmental factors in homes contributes to respiratory conditions like asthma and lead poisoning, while those who are “cost burdened” because they spend more than 30% of their household income on housing may lack the ability to spend money on other necessities like food or prescription medications. Homelessness is also closely connected with medical conditions such as HIV infection, alcohol and drug abuse, mental illness, tuberculosis, and other conditions ([Center for Disease Control and Prevention](#)). It is for this reason that Advocate Health has focused on helping navigate people to safe environments to heal.

- **Cook County Flexible Housing Pool.** The Cook County Flexible Housing Pool is a collaborative partnership among health systems, managed care organizations, Cook

County Health and Hospital System, City of Chicago Department of Public Health and the Center for Health and Housing. The program addresses housing insecurity among homeless patients by placing individuals in permanent supportive housing while also providing wrap around care, case management and behavioral health services. The main goal of the program is to address homelessness, one of the most significant root causes of poor health. While this program serves a small number of people, the impact is deep and lifelong. In 2022, the Advocate Health teams in Cook County placed 10 individuals and families into permanent supportive housing.

- **The Carol Street Apartments.** The Advocate Lutheran General Care Management Department plans safe discharges for patients recovering from hospitalization and who have no housing resources. The department manages the Advocate Lutheran Carol Street apartments. Located on the hospital’s campus, these apartments are available for rent on a daily, weekly or monthly basis. The apartments are used by patients that are actively getting services on campus, i.e., chemotherapy, radiation, etc., and are also available for family members of inpatients that do not live near the hospital. Financial assistance is granted to patients and families that demonstrate financial hardship. In 2022, the program served 11 individuals.

6. FOOD SECURITY:

Over 15 million households in the U.S., face some level of food insecurity. This statistic hits close to home for many of the communities that Advocate Health serves. Food security and access to fresh meat and produce has been identified as one of the primary social drivers of health affecting health outcomes. Food deserts in parts of Advocate Health’s service area create barriers for people to access healthy food. Advocate Health teams continued food distribution plans to address food insecurity by collaborating with community service groups and faith partners. Examples of various programs used to distribute the food include Pop-up Farmers Markets, Food Farmacy, Hospital Based food pantries and community food distributions. Below are some examples of the programs that took place in 2022:

- **RX Mobile Pantry.** In 2019, Advocate Condell launched the Rx Mobile Food Pantry to serve food insecure (FI) residents of the Round Lake area. The program grew from the medical center’s community health efforts in screening and referral for food insecurity. In December of 2021, Advocate Condell’s Rx Mobile Food Pantry program transitioned into an Rx Market, which will be managed by Catholic Charities. The permanent location will continue addressing the needs of the community while offering the same variety of healthy foods during several days and at various hours of each week. The program evolved into a sustainable model that has significantly increased access to healthy foods in that area. In 2022, Advocate Condell launched a second Rx Mobile Program in Lake County, focusing on Lake Villa. IN 2022, the program served 8,478 people and distributed over 100,000 pounds of meat, dairy and produce.

- Hospital-Based Food Pantry Programs in Central Chicagoland.** *Advocate Illinois Masonic Medical Center* hospital-based food pantry program screens patients for food insecurity. Patients who screen positive for food insecurity are eligible for a non-perishable food bag and fresh produce box once a month. In addition, the medical center implements pop up farmers markets in low-income and vulnerable communities with high food insecurity rates. In 2022. The program served 47 new patients and 21 repeat patients, a total of 68 patients. Similarly, *Advocate Lutheran General Hospital* has an established hospital-based pantry program that served 98 patient and 3 repeat patients in 2022. Advocate Good Samaritan Hospital served 19 new patients and 4 repeat patients in 2022. The Central Chicagoland Hospital-Based pantry program continue to grow and will continue to evolve to address the growing needs of the community and the patients.
 - Healthy Living Food Farmacy.** Advocate launched an innovative pilot program—Healthy Living Food Farmacy—at Advocate Trinity Hospital to make a positive impact on patients facing socio-economic barriers to better health. Patients are invited to attend the bi-weekly events for a free dose of healthy food—making their selections from tables of assorted fresh produce and low-sodium, shelf-stable proteins. The program is focused on impacting the health of the community by providing access to healthy food options for food insecure patients. The Healthy Living Food Farmacy is supported by a partnership with the Greater Chicago Food Depository, Advocate Trinity’s leadership, volunteers and community health department. In 2022, the Food Farmacy distribute 48,917 pounds of food and served 2,065 patients.
- Sherman Natural Prairie and Community Garden (SNPCG).** Advocate Sherman Hospital is addressing food insecurity by donating produce harvested from the Master Gardeners (collaboration with University of Illinois Extension Office) and excess produce from community garden beds through the on-campus community garden. In 2022, 315 pounds of produce was harvested and donated to the Elgin Community College Spartan Student Food Pantry and Food for Great Elgin Food Pantry.

IV. Addressing Social Determinants of Health with Community Partners

To support the Advocate hospitals in conducting CHNA’s, Advocate purchased access to Metopio, a CHNA data tool. Metopio is a software and services company that is grounded in the philosophy that communities are connected through places and people. Metopio’s tools and visualizations use data to reveal valuable, interconnected factors that influence health outcomes in different locations. Metopio offers a data, tailored to support all Advocate Health Care hospitals with identifying health inequities in communities. Metopio uses the most current data sources and creates tools and indices that focus on the communities within the AHC services areas. The data can be used to focus on specific regions, communities, and hospital services areas. Below is a description of two important indices found in Metopio.

Hardship Index Description. The Hardship Index was originally developed by Richard P. Nathan and Charles F. Adams, Jr. in 1976 to compare socioeconomic conditions between communities.

It is highly correlated with other measures of economic hardship, such as labor force statistics, and with poor health outcomes. The index combines the following topics into a single composite value on a scale of 0-100:

- Crowded housing (more than one person per room)
- Poverty rate for households
- Unemployment rate
- Adults with a high school degree or equivalent
- Age dependency ratio (% of residents who are <18 or >65 years old, compared to those of working age)
- Per-capita income

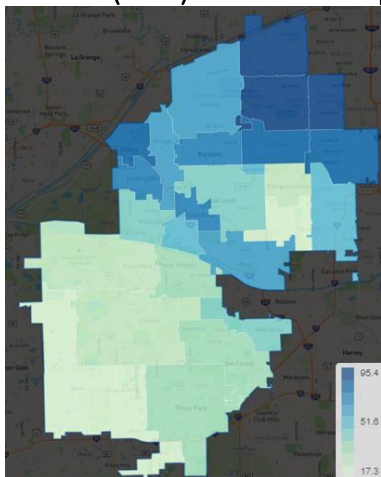
Higher values indicate greater hardship and correlate higher with poor health outcomes. The index does not preserve the ratio between two places, so if one place has twice the hardship index of another, we cannot say that it experiences "twice as much hardship" as another place. Instead, compare different places using the constituent topics.

Social Vulnerability Index. The Social Vulnerability Index (SVI) was developed by the Center for Disease Control and Prevention (CDC) to help public health officials and emergency response planners identify and map the communities that will most likely need support before, during, and after a hazardous event, such as a natural disaster, disease outbreak, or chemical spill. SVI indicates relative vulnerability by ranking places on 15 social factors that can be divided into 4 categories:

- Socioeconomic
- Household Composition & Disability
- Minority Status & Language
- Housing Type & Transportation

The original score is on a scale from 0-1, but it is multiplied by 100 for readability on Metopio. A higher score represents a community more vulnerable to a hazardous event. Detailed documentation is available from the CDC [here](#)

Advocate Christ Primary Service Area (PSA) and Hardship Index Map 2015-2019



Source: Metopio, American Community Survey, 2022.

The example map above identifies the 27 communities within Advocate Christ's PSA (902,434 residents), and it highlights, in dark blue, the communities that are experiencing greater hardship within the Community Health specific, primary service area. The map incorporates unemployment, age dependency, education, per capita income, crowded housing, and poverty into a single score that allows comparison between geographies.

All AHC hospitals in Illinois incorporate a similar map in their community health needs assessment and serves as an instrumental tool in the implementation planning process. To learn more about the 2022 CHNA cycle data assessment results for each hospital, visit [Hospital CHNA Reports Implementation Plans Progress Reports | Advocate Health Care](#).

Advocate Christ PSA Zip Codes with the Highest Hardship Index 2015-2019

Community Name	Zip Code	Hardship Index
Advocate Christ Medical	PSA	59.4
West Englewood	60636	95.4
Chicago Lawn	60632	88.5
Brighton Park	60629	87.1
Auburn Gresham	60620	82.8

Source: Metopio, American Community Survey, 2022.

Advocate is working locally and nationally with many prominent community partners to address social determinants of health. Examples of these efforts include the following:

- **Health Care Anchor Network (HAN).** AHC is a founding member of the Healthcare Anchor Network which has expanded to include 70 other area health system and hospital partners. AHC has significant economic and human resources across its service area as the largest employer in the Milwaukee area and the fourth largest in Chicago. To leverage these resources, in 2019, AHC announced a commitment to invest \$50 million to help address the economic, racial, and environmental disparities that impact community health outcomes and decrease health inequity. Additionally, AHC committed to driving community health and well-being through its inclusive, local hiring and local purchasing strategies and initiatives.

Advocate, in alignment with HAN strategy, has launched two significant initiatives to address health equity in the communities it serves.

- **Advocate Health \$50M Investment Pledge.** Advocate Health is among the first health systems in the country to make a significant commitment to investing in targeted community development. The anchor strategy investments are targeted to enhance critical services such as affordable or supportive housing and food access in communities that lead to improved health and demonstrated downstream benefits to our patients and

the community. Initially, the investment work was done in partnership with Community Development Financing Institutions (CDFIs) to fund projects. Although not a profit maximizing activity, this investment commitment will result in a return of the principal to the organization with interest to ensure a sustainable investment capacity for reinvestment over time. A Community Investment Strategy Team was formed to plan and guide the work—consisting of Finance and Treasury, Community Health and Operations teams to develop the scope and process. The team is responsible for deploying \$50 million in loans to CDFIs across our footprint by the end of 2025. To date, the team has completed five contracts with local CDFIs (representing 77% of our 2025 goal) to drive development of affordable housing, food pantry space, Federally Qualified Health Center (FQHC) expansion and business loans to minority and women owned small businesses in vulnerable neighborhoods:

\$25M with Local Initiative Support Corporation (LISC)

\$5M with IFF

\$5M with Generation Growth Capital Fund IV

\$2.5M with Chicago Community Loan Fund (CCLF)

\$1M with Wisconsin Women’s Business Initiative Corporation (WWBIC)

- **Advocate Health Purchasing Commitment.** In 2019, a dozen hospitals and health systems across the country, including Advocate Health, signed an “Impact Purchasing Commitment” to build healthy, equitable, and climate-resilient local economies through what and how they spend their dollars. The commitment, designed by the Healthcare Anchor Network (HAN) in partnership with Health Care Without Harm and Practice Greenhealth, is focused on increasing spending with Minority and Women Owned Business Enterprises (MWBES) as well as local and employee-owned, cooperatively owned and/or nonprofit-owned enterprises. The group plans to increase spending with MWBEs by at least \$1 billion over a five-year period.

Throughout unprecedented times with supply chain challenges, securing consistent and reliable suppliers yielded a universal challenge. Yet, GCB Medical—a Women's Business Enterprise (WBE)—met AH's needs, producing medical-grade garments to keep teammates safe during a critical time, further confirming the importance of our impact purchasing commitment. This diverse supplier delivered when large, non-diverse suppliers failed to. This partnership remains mutually beneficial; three years later, GCB has grown to \$4M in annual sales with AH, and we continue to consistently suit our teammates. This success story parallels our commitment to Tier 2 Subcontracting contract language that requires our non-diverse suppliers with greater than \$1 Million in sales to report diversity spend quarterly.

Additionally, we increased the number of suppliers reporting Tier 2 spend in 2022 and the Tier 2 spend by 50% at the end of Q2 2022 over Q2 2021. Utilizing diverse businesses aligns with our company's DE&I goals and brings in savings and business efficiencies. Our decision to source scrubs from Phoenix Textiles, another woman-owned business, is expected to produce \$150,000 in savings compared to our previous supplier. Another

decision to purchase medical-grade masks from Caracal—a Detroit-based Minority Business Enterprise—saves Advocate Health over \$600,000 yearly. Ultimately, these masks allow all patients and visitors to enter our facilities to receive the same standard of care while saving the company money.

There are several additional examples of efforts to strengthen corporate options through human resource, supply chain, environmental stewardship and investment policies that impact the social determinants of health in the communities served by Advocate.

- **Environmental leadership.** Reducing waste, conserving energy and water, minimizing use of toxic chemicals, and constructing eco-friendly buildings for today and tomorrow—all these efforts have a direct benefit on the health of local communities via cleaner communities, healthier air quality, reduced greenhouse gases, and preservation of natural resources. As Advocate works to reduce the environmental and health impacts of health care, its environmental stewardship practices ease the burden of health care costs both directly (lower energy costs) and indirectly (lower environmentally related disease burden) and help save resources for future generations.

In addition to continuing to reduce Advocate’s own environmental impacts as a health care organization, Advocate also provides national leadership and mentoring in sustainable health care through the membership and participation in several sustainability leadership councils and groups. These collaborative partnerships address multiple sustainability issues, including antibiotic overuse in agriculture, safer chemicals in furnishings and medical products, climate change, clinical plastics recycling, and environmentally preferable and local purchasing, spurring movement toward healthier and more sustainable practices throughout the health care sector and wider marketplace. These partnerships include:

- Healthcare Anchor Network -Impact Purchasing Committee
- Health Care Climate Council
- Healthcare Plastics Recycling Coalition – Healthcare Facility Advisory Board
- Practice Greenhealth Market Transformation Group–Safer Chemicals
- Healthy Building Network
- Premier’s Environmental Advisory Council
- Steering Council oversight and Signatory of the Chemical Footprint Project

It is important to highlight that we accomplished much, but decarbonization is a much larger issue than any one business can solve on its own. We have a long history of environmental and climate advocacy because we understand through policy and legislative changes, we are opening doors, getting permission, and supporting compliance in this impact work. Below are some highlights over the past four years.

- Through the Health Care Climate Council, a letter of support was sent to the members of congress about the Build Back Better package and certain provisions (2022)

- We provided comments to the Current Assessment of Climate Change Impacts on Outcomes, Care, and Health Equity—Request for Information (RFI) in the Medicare Program: Hospital Inpatient Prospective Payment Systems (IPPS), etc. proposed rule (Section IX.A) (2022)
- In the summer of 2022, we responded to the House Ways & Means Committee Hearing and RFI Report on Health Care’s Role in the Climate Crisis (2022)
- In June 2022, as a system we signed the HHS pledge to become a Net Zero Health system by 2050** (2022)
- **Project C.U.R.E. (Commission on Urgent Relief and Equipment).** Advocate is a medical equipment and supply donation partner of Project C.U.R.E., the world’s leading medical supply distribution organization benefiting resource-limited areas across the globe. In 2022, Advocate donated a total of 182 pallets of miscellaneous medical supplies to Project C.U.R.E.
- **Sustainable Buildings and Operations.** Sustainability, safety and efficiency are core elements of Advocate building and operations programs.
 - Advocate pursues Leadership in Energy and Environmental Design (LEED) certification for all new major buildings and utilizes a rigorous, internal tool called *The Healthy Spaces Roadmap* to ensure sustainability in all its renovations and projects. To date, Advocate has completed six major projects that have received LEED Silver or Gold certification.
 - In 2008, Advocate embarked on a journey to reduce its carbon footprint and to become the most energy efficient health system in the country. By 2015, Advocate had reduced energy consumption by 23% from the 2008 baseline. While aggressively continuing energy efficiency projects, Advocate now aims to be carbon neutral by 2030 and net zero by 2050 and has signed on the US department of health and human services climate pledge.

Advocate combines sustainable facilities with environmentally friendly operations and purchases. This includes waste minimization and recycling, reducing chemicals in furniture and cleaning products, purchasing meat raised without antibiotics, and other eco-friendly products, all of which have community health impacts in their life cycle. In 2022, Advocate achieved the following:

- Avoided 34 MtCO₂e of greenhouse gases (equivalent to 82,000 miles of driving) through eco-friendly management of anesthetic gases.
- 95% of Advocate’s furniture purchases avoided five key chemicals of concern.
- 87% of five main categories of cleaners were on third party certified green cleaners
- Over \$1 million of Advocate’s meat purchases supported producers who raise their animals without the use of antibiotics (30% of total).
- Copy paper used contains 30% post-consumer recycled content and is Forest Stewardship Council certified.
- Recycled 2,982 tons of waste from hospital operations.

Environmentally Responsible Investing. Advocate institutes an environmentally-based social screen for its marketable investment program. All companies in separately managed accounts are scored on environmental practices, behavior and controversies. Poor-scoring companies are screened out of the investment program.

Recognition. Advocate is consistently recognized for its commitment and achievements in sustainable health care.

- All Advocate hospitals received individual recognition from Practice Greenhealth.
- Advocate Aurora Health received the Practice Greenhealth System for Change award for the 15th consecutive year and received a circle of excellence in chemicals, top 25 performer
- Advocate Aurora Health was named a Climate Champion in the category of Climate Leadership (silver) through the Health Care Climate Challenge

Employee Engagement. Every Hospital has a Green Team, led by Site Sustainability Leaders and sponsored by Executive Champions (often including hospital Presidents). Together, our SSLs each year host a minimum of two environmental sustainability campaigns used to inform, inspire, and involve hospital team members in our ES journey.

Some campaigns to highlight:

- Annual ‘Bike to Work’ celebrations (supporting alternative transportation)
- Children’s hospital celebrating Children’s Environmental Health Week for three consecutive years, since 2019.
- Site Sustainability Leaders and Green Advocates collecting and giving away FREE partially used (halter monitor) batteries to team members
- Racial Equity Challenge
 - In 2022, the system adopted environmental justice as a lens for which to implement environmental sustainability and launched the first-ever Racial Equity Challenge in collaboration with SSLs and hosted a reflection and learning conversation as our featured 2022 Earth Day event

Community Engagement/Collaborative Assessments

Advocate works to leverage resources and maximize community engagement by building and strengthening community partnerships with health departments and other diverse community organizations. One of the primary values of Advocate’s Community Health Department is collaboration with partners, preferably through a collective impact model. To align initiatives with local health departments and their community health priorities, all Advocate hospitals collaborate with their respective health departments during the CHNA and health improvement (implementation) plan cycles. One such notable collaboration for Advocate’s most recent 2017-2019 CHNA cycle as well as its previous cycle is provided below.

- **The Alliance for Health Equity.** Advocate Health Care, Presence Health (now known as Amita Health) and the Illinois Public Health Institute (IPHI) were the three founding organizations of the Health Impact Collaborative of Cook County (HICCC). These organizations invited health departments and all Cook County nonprofit hospitals to join them in creating what is now one of the largest CHNA and community health improvement collaboratives in the country. The initial participating hospitals and health departments worked together to design a shared leadership model and collaborative infrastructure to support community-engaged planning partnerships and strategic alignment of implementation plans to facilitate more effective and sustainable community health improvement.

In late 2017, HICCC merged with the Healthy Chicago Hospitals Collaborative to create The Alliance for Health Equity (The Alliance). IPHI serves as the backbone organization for the collaborative and the hospitals provide funding for the shared assessment and community health improvement planning work.

In 2019, the Alliance grew to include 37 nonprofit and public hospitals, six local health departments and more than 100 community organizations. In 2022, the Alliance completed a collaborative Community Health Needs Assessments (CHNA) for Chicago and Suburban Cook County. The report builds on the previous assessments and allows partners to identify strategic priorities that they can collectively address to improve community health. A copy of the report and the appendices can be found at this link [2022 CHNA Report - Alliance for Health Equity \(allhealthequity.org\)](https://www.allhealthequity.org/2022-CHNA-Report)

Primary and secondary data from a diverse range of sources were utilized for robust data analysis and to identify community health needs in Chicago and Suburban Cook County. For the 2022 CHNA, the Alliance for Health Equity built on the previous collaborative CHNA work (2019). Advocate continues to be actively involved in leadership of The Alliance partnership, serving on the steering committee. Advocate hospitals, as well as the other member hospitals, provide the monetary support for the collaborative's work and support the cost of staff and oversight provided by the Illinois Public Health Institute. Additionally, Advocate has been involved in leading this assessment work as an active member of the Steering Committee, providing financial support to the Alliance in 2022.

The priority areas selected by The Alliance include social and structural determinants of health, access to care, mental health and substance use disorders, chronic health conditions, injury including violence, and maternal/fetal health. All participating hospitals selected some of the priorities to address in the areas served. There are multiple work groups addressing the priority areas and Advocate staff serve on most of the work groups.

2022 Collaborative Assessment and Health Improvement Plan Partners

As previously mentioned, Advocate hospitals leverage local partnerships as a strong component of all community health initiatives. The following chart shows the local health department(s) and other community organizations with whom each Advocate hospital partnered in the community health needs assessment (CHNA) and community health improvement planning for

the 2022 CHNA. The partners listed below were instrumental in the data analysis, both qualitative and quantitative, and they were also involved in the strategy planning process to create alignment across the county.

Hospital	2022 Collaborative Assessment/ Health Improvement Plan	Partners
Advocate Christ Medical Center	Alliance for Health Equity	Chicago Department of Public Health, Cook County Health Department, 4 Regional Health Departments, 37 Hospitals, 100+ Stakeholders/CBOs
Advocate Condell Medical Center	Lake County IPLAN	Health Department, Hospitals, CBOs
Advocate Good Samaritan Hospital	DuPage County Health Department IPLAN	Health Department, Hospitals, CBOs
Advocate Good Shepherd	McHenry County IPLAN Collaborative; Lake County Health Department IPLAN; Healthier Barrington Coalition Study	Health Departments, Hospitals, CBOs, Mental Health Board
Advocate Illinois Masonic Medical Center	Alliance for Health Equity	Chicago Department of Public Health, Cook County Health Department, 4 Regional Health Departments, 37 Hospitals, 100+ Stakeholders/CBOs
Advocate Lutheran General Hospital	Alliance for Health Equity	Chicago Department of Public Health, Cook County Health Department, 4 Regional Health Departments, 37 Hospitals, 100+ Stakeholders/CBOs, Healthier Des Plaines, Niles and Park Ridge members
Advocate Sherman Hospital	Kane County IPLAN Collaborative, McHenry County IPLAN Collaborative	Health Departments, Hospitals, CBOs, Mental Health Board
Advocate South Suburban Hospital	Alliance for Health Equity	Chicago Department of Public Health, Cook County Health Department, 4 Regional Health Departments, 37 Hospitals, 100+ Stakeholders/CBOs
Advocate Trinity Hospital	Alliance for Health Equity	Chicago Department of Public Health, Cook County Health Department, 4 Regional Health Departments, 37 Hospitals, 100+ Stakeholders/CBOs

Other Community Benefits

In addition to the provision of programs and services to address access and health inequities, Advocate also devotes considerable staff and resources to other efforts that benefit the community and that align with the reporting categories of the Illinois Community Benefits Act.

Training Future Health Professionals. To further the tradition of providing medical education to undergraduate and graduate medical students, nursing students and students in other health professions, Advocate has developed long-term academic affiliations with all major universities in the Chicago metropolitan area for the education and training of students in undergraduate

medical education (UME), graduate medical education (GME), nursing undergraduate and graduate education and in numerous other allied health professional fields.

- **Medical Education (Undergraduate Medical Education [UME]/Graduate Medical Education [GME]/Post-Graduate [CME] Medical Education.** The Advocate Medical Education Department's mission is to train the next generation of physicians through undergraduate (UME) and graduate medical education (GME), and to continue the development of Advocate physicians through continuing medical education (CME).

Advocate is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education (CME) for physicians. Advocate's CME program provides professional development through year-round scheduling and planning of accredited courses, seminars and meetings for Advocate and non-Advocate physicians and health care professionals in the region. Advocate's medical staff share their expertise through grand rounds, mortality and morbidity conferences, and enduring material—as well as single activities addressing a variety of clinical and research topics. In 2022, Advocate documented 124,03 learners and provide 763 activities to over fourteen different health professions ranging from physicians, nurses, dentists, social workers, pharmacy technicians and more.

- **Nursing Education.** Undergraduate and graduate (APN/NP/management) nursing education occurs at ten Advocate hospitals and support centers, many Advocate Medical Group sites, and Advocate Home Health-Hospice. Notably, eight Advocate hospitals have earned Magnet Recognition from the American Nurse Credentialing Center (ANCC), including Advocate Children's, Advocate Condell, Advocate Christ, Advocate Good Samaritan, Advocate Good Shepherd, Advocate Illinois Masonic, Advocate Lutheran General and Advocate Sherman. Magnet status represents hospital-wide teamwork and dedication to creating a positive environment, which helps attract the best physicians and nurses, resulting in better overall patient care.
- **Allied Health Education.** Advocate is committed to teaching students in a broad range of specialties. These students come from local universities and colleges with whom Advocate has contracted to provide education. Students are provided a clinical environment in which to learn in over twenty health care disciplines/fields, including, but not limited to: pharmaceutical; cardio diagnostics; cardiac rehabilitation; radiology, nuclear medicine, MRI and X-ray; radiation therapy; exercise physiology; physical, occupational, speech and recreational therapy; psychiatry; behavioral health; respiratory; audiology; pathology; podiatry; phlebotomy; nutrition/dietary; and dentistry (dentistry is only available through Advocate Illinois Masonic).

Several Advocate hospitals provide emergency medical technician (EMT) education from basic through paramedic level. In fact, some of these Advocate facilities serve as the lead hospital in their counties/service areas, providing education, standardization of protocols of care among all hospitals (non-Advocate included) and EMS responders, and direction of

county-wide emergency medical services in response to community-based, mass injury/casualty disasters. Multiple Advocate system and hospital departments also provide learning environments for undergraduate and graduate students in Public Health and Health Information Management.

- **Clinical Pastoral Education (CPE).** Advocate’s spiritual leaders oversee a nationally accredited CPE program. The program provides opportunities for seminary students, chaplains and local faith leaders to grow and develop self-awareness and spiritual care ministry skills. In 2022, a total of 76 CPE students were supervised in Illinois, not including the additional 3 students in Wisconsin.
- **South Shore International College Preparatory.** Several Advocate hospitals provide experiential learning to area high school students that are on an educational track to a health care career. These students receive credit towards graduation in addition to helping them discern in which health care area they wish to specialize. To give Chicago Southside students better job opportunities, Advocate Trinity works with students from Chicago Vocational Career Academy, and South Shore and Julian High Schools. These students are rotated in hospital units to learn marketable job skills.

Volunteer Services. As part of its community programs, Advocate engages community volunteers to strengthen hospital and community initiatives. These programs and opportunities are described below.

- **Volunteers from the Community.** Each year, volunteers from the community share their time and talents through service at Advocate’s hospitals, Advocate Medical Group and Advocate at Home, and in their own way, further Advocate’s commitment to providing excellent health care. In 2022, Advocate Health Care managed to open volunteer services and welcomed a total of 1,551 community volunteers that engaged patients, families and staff in a variety of activities, some of which were: providing information desk services to visitors; clerical support to staff; serving customers in hospital gift and resale shops; offering compassionate concern to patients and their loved ones in multiple hospital areas, such as the Emergency Department, Intensive Care Unit, Surgery Waiting Room, Post-Anesthesia Care and Nursery Intensive Care Units; assisting with community health screenings and blood drive events; providing cheerful service to patients by delivering flowers, mail and newspapers; and providing support services in the hospital that have libraries and/or wellness centers.

Volunteers from the community also give their time and talents to various other programs and fundraising activities. Members of Advocate’s hospital auxiliaries plan and engage in fundraising efforts to support not only services in the hospital but also community-focused programs and services. Students from the community volunteer their time to taking care of children in the Pediatric Developmental Center located on Advocate Illinois Masonic’s campus so that parents can meet with the center’s staff to learn the skills necessary to work with their children with special needs so they can reach their full potential. The Hearts for

Hope group at Advocate Children's—Oak Lawn is comprised of grateful parents, concerned families and caring community members who support the mission of the hospital. The volunteers ensure they have a presence in the hospital by positively impacting family-centered care, as well as working to raise funds and awareness through philanthropic events and activities benefiting Advocate Children's.

Advocate Team Members Volunteering in the Community. Advocate team members (employees) and physicians are encouraged to donate to, volunteer at and help raise funds for community initiatives. Advocate promotes and supports team member, physician and hospital participation in four company-sponsored walks for multiple health-related, not-for-profit organizations, including the American Heart Association (AHA Heart Walk), American Cancer Society (Making Strides Against Breast Cancer), Alzheimer's Association (Walk to End Alzheimer's) and the March of Dimes (March for Babies). In 2022, 1,559 Advocate team members registered to participate in the annual local fundraisers and \$316,317 in charitable contributions were raised to support these partner organizations, demonstrating our commitment to helping our communities live well. This year, Advocate was designated by the American Heart Association as the #1 health care company in the Midwest. In addition, Advocate's associates and physicians generously support multiple community partners, programs and initiatives, including some of Advocate's own system-wide and hospital-based community health programs. For IL only, Advocate team members, nurses and physicians contributed \$1,061,451 through the annual Advocate Team Member Giving Campaign in 2022.

Advocate associates devote work time volunteering on dozens of community boards, committees, councils, task forces and coalitions, using their talents to support a variety of community-based organizations. An example of associate volunteerism is Advocate Good Samaritan's Vice President of Support Operations and the President of Medical Staff devote time to serve on the DuPage Health Coalition's board—DuPage Health coalition is an organization that links uninsured and undocumented individuals to primary and specialty healthcare and insurance. Yet another example of associate volunteerism is Advocate Trinity Hospital's President and AHC's Regional Vice President time devoted to the South Side Healthy Community Organization, a community coalition focused on improving health equity on the south side of Chicago.

System and Site Accountability for Community Health. Advocate has taken several steps to assure system and site accountability for and alignment of community health improvement efforts. These actions include developing a governance and departmental infrastructure at the sites and system levels to lead and support efforts, and to include Advocate's ample clinical expertise in developing and sustaining evidence-based programs that measurably impact/improve community health.

Engaging System Board in Support of Community Health Vision. As the function accountable for Advocate's system wide CHNA process, CHNA Report and Implementation Plan development and execution, as well as community benefits regulatory reporting, the Community Health Department provides updates at least annually to the Advocate Health Care Network Board.

The Advocate Health Care Network Board is responsible for the adoption of community health strategy.

Establishing a Department of Community Health. Advocate established a Community Health Department in late 2015 and the department was fully staffed and operating by January 2016. As of 2016, hospital-specific community health department budgets were developed to support the hospitals' plans to implement program strategies. Community Health staff salaries, annual contracted data access costs and costs to participate in the county-wide collaboratives were budgeted at the system level. In 2020, the Community Health department contracted with a new database vendor, Metopio, a Chicago-based company offering a state-of-the-art CHNA data and reporting tool. All community health leaders were trained in 2021 and the tool is being used to support Advocate's CHNA process for the 2022 CHNA cycle. Advocate's system level Community Health Department also contracted with an outside vendor to use a well-respected, secure and time-efficient web-based software for tracking and reporting community benefits expenditures.

Expanded Role of Governing Councils in Community Health. Community Health is strongly integrated into Advocate's governance structures. Community Health Councils, comprised of community experts and hospital leaders, have been developed at each of the Advocate hospitals. These councils are co-led by the hospital community health leader and a hospital Governing Council member. A minimum of 50% of the council members for the 2022 CHNA Report and 2023-2025 Community Health Implementation Plan cycles were community representatives with a focus on people who represented underserved and vulnerable populations. Dependent on the hospital, the councils met three or four times during the year.

Hospital community health staff analyzed and presented primary and secondary community health data to the hospitals' Community Health Councils. The council members identified the hospital service areas' significant health needs, subsequently employing consensus-based, priority-setting processes to determine the needs upon which to focus. As part of the prioritization process, the councils scanned hospital and community challenges and assets, as well as potential partnerships with other organizations that might result in larger health improvement impact.

To learn more about the 2022 CHNA cycle data assessment results for each hospital, visit [Hospital CHNA Reports Implementation Plans Progress Reports | Advocate Health Care](#).

Engaging System Clinical Service Lines to Expand Their Focus on Community Health. Advocate is viewed as a leader in the population health management arena. An early adopter of managing care across populations, Advocate has significant success in improving health outcomes while decreasing or maintaining cost of care delivery.

Advocate's Community Health Department has intentionally aligned with Advocate population health leaders and Advocate service lines. This alignment assures that members of the communities Advocate serves and our patients receive community-based interventions, as well

as education and programming that aligns with their health needs. Community programs are tailored to meet the specific health needs identified in a community or a specific population.

Many of the examples of education and programming aligned with population health and service line development have already been discussed in other sections of this plan. All Advocate hospitals, for example, are participating in local community behavioral health and substance abuse collaboratives, following Advocate's integrated approach to implementation. Several examples of the Behavioral Health initiatives are provided below.

- **Warm Handoff Program.** Three Advocate Health Care hospitals, Advocate Condell Medical Center, Advocate Good Shepherd Hospital and Advocate Sherman Hospital work in partnership with Gateway Foundation, a community-based addiction medicine treatment provider, to implement an evidence-based model to screen and assess patients coming to the hospital for substance use. The Warm Handoff program integrates a full-time credentialed engagement specialist employed by Gateway Foundation into the hospital ED team to assess and counsel patients with substance use disorder, and then assists with linking them to treatment. A Gateway Foundation-employed recovery coach on the team also provides support to patients as they transition into treatment. In 2022, the Gateway engagement specialists at these three hospitals completed patient encounters with 899 patients and 392 (44 percent) were connected and placed in substance use treatment.
- **Medication Assisted Treatment (MAT).** In July of 2020, Advocate Good Shepherd launched a program that prescribes buprenorphine upon discharge from the emergency department (ED) for patients with substance use disorder seeking Medication Assisted Treatment. The program is designed to help individuals with withdrawal symptoms and increase their chances of treatment. In 2022, Advocate Good Shepherd had 12 patients that were discharged from the ED on Buprenorphine prescription.
- **Ending the Silence and Teen Support Group.** Advocate Good Samaritan partnered with NAMI DuPage to provide Ending the Silence to middle and high school students. Ending the Silence is a one-hour class that aims to destigmatize mental illness and create awareness around mental health. In 2022, Advocate Good Samaritan supported Westmont High School and Eisenhower Junior Highschool, offering 11 presentations in total, serving 193 students. In addition, Advocate Good Samaritan Hospital worked with NAMI by providing a behavioral health specialist to facilitate a teen support group. The six week program served 6 students in the summer of 2022. The support group addresses concerns around anxiety, fear, self-esteem and more.

V. Communities Served

Service Area

Advocate's primary service area, in Illinois, is comprised of the Chicago Metropolitan Six-County Area, including Cook, DuPage, Kane, Lake, McHenry and Will counties.

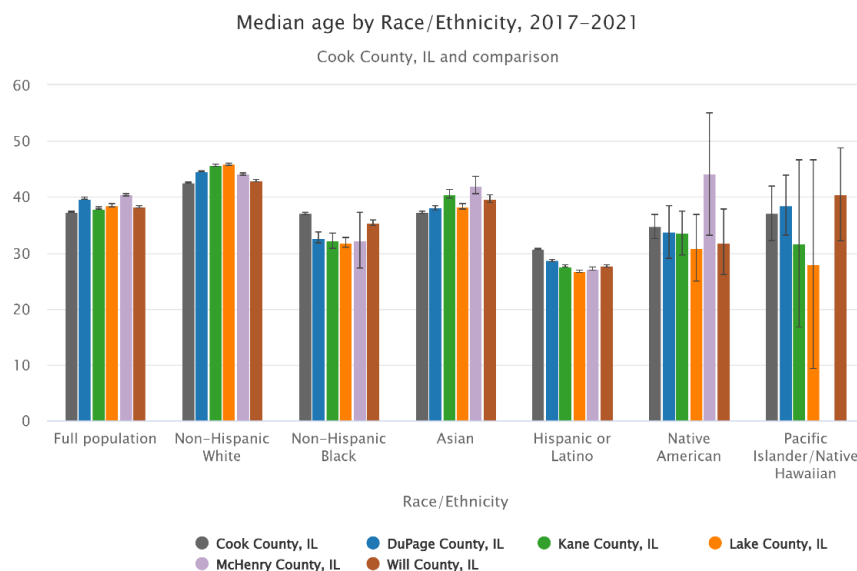
Demographic Characteristics - Chicago Metropolitan Six-County Area

Population. The Chicago Metropolitan counties with the greatest population are Cook (includes city of Chicago) at over 5M, DuPage at 924K, Lake at 711K, and Will at 697K. Kane and McHenry counties continue to be the less populated counties at 515K and 311K, respectively.

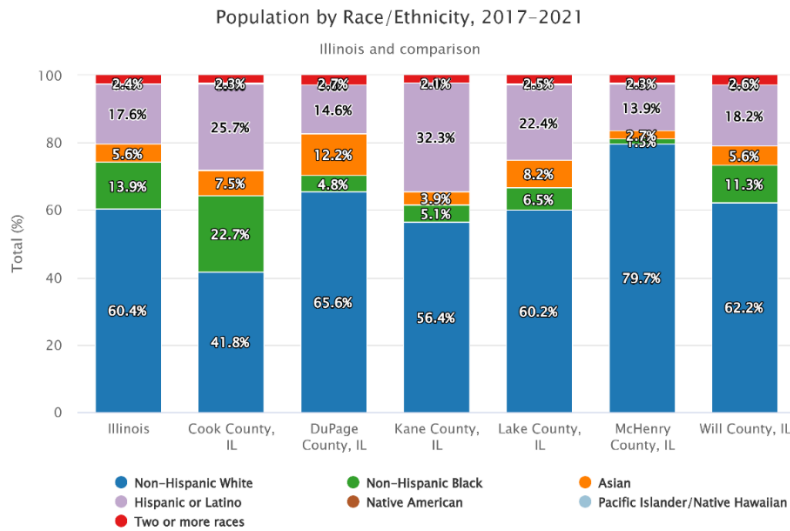
Chicago Metropolitan Six-County Area –		
County	2021 Population	(%) Change
Cook	5,173,146	1.56
DuPage	924,885	1.74
Kane	515,588	0.24
Lake	711,239	1.55
McHenry	311,122	0.48
Will	697,252	2.77
Chicagoland Six-County Area	8,333,232 total	1.39 average

Source: Metopio, American Community Survey, 2021; Decennial Census 2010-2020.

Age. The two youngest counties with the lowest median age are Cook County (37.3 years) and Kane County (38 years). When compared to all racial and ethnic groups, the Hispanic or Latino population have the lowest median age for all six counties. The Non-Hispanic White population have the highest median age for all counties. Due to confounding variables, the life-expectancy is also the lowest in Cook County (78.5 years) when compared to the other counties in the Advocate service area. DuPage, Kane and Lake County are the only three counties with life expectancy rate over 80 years of age. Kane County is also a younger county; Kane County has the highest rate of infants ages 0-4 years of age (6.3%) and largest juvenile (5-17 years) population at 19.2 percent. In contrast, DuPage County has the highest rate of seniors age 65 and older (15.6%) and has the highest life expectancy rate, 81.3 years (American Community Survey, 2016-2020).



Source: Metopio, American Community Survey, 2017-2021.



Source: Metopio, American Community Survey, 2017-2021.

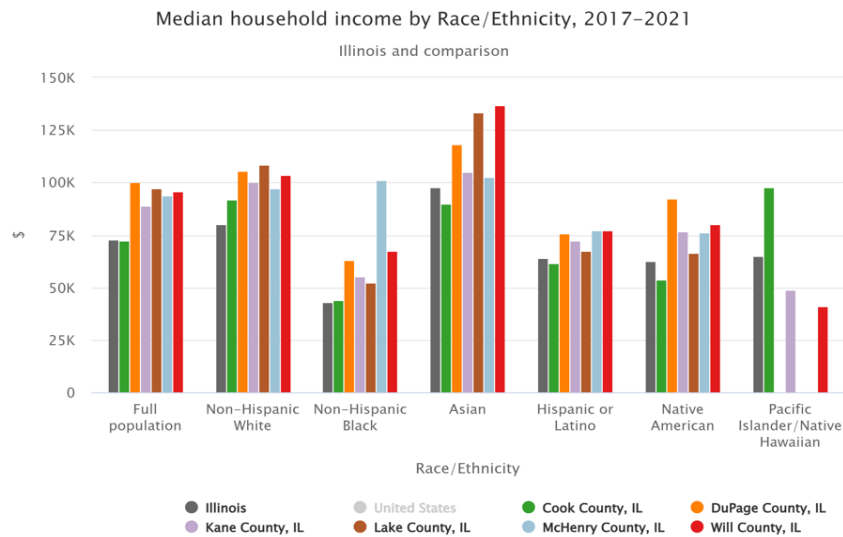
Ethnic/Racial. The following tables display the racial distribution of the metropolitan area. McHenry County has the largest non-Hispanic White population (76.7%), Cook County has the largest non-Hispanic Black population (22.7%), DuPage has the largest Asian or Pacific Islander population (12.2%) and the Hispanic or Latino population make up 32.3 percent of the Kane County population. In Illinois, the non-Hispanic White population remains the largest population overall (60.4%) followed by the Hispanic or Latino population (17.6%).

When compared to the counties in Advocate’s service area in Illinois, Cook County has the highest poverty rate (13.8%), the highest percent of residents with Medicaid coverage (21.4%) and the highest percent of uninsured (8.7%) residents. Cook County is also the largest, more diverse county. Kane County is the second county with the highest poverty rate (8.5%) and the highest uninsured rate (8.9%). McHenry County has the lowest poverty rate (5.2%) when compared to all other counties. DuPage County has the highest percentage of Medicare coverage (16.5%).

Chicago Metropolitan Six-County Area – Poverty and Insurance Coverage by County (% of residents), 2021							
Topics	Units	Cook County, IL	DuPage County, IL	Kane County, IL	Lake County, IL	McHenry County, IL	Will County, IL
Poverty rate, 2021	% of residents	13.83	6.90	8.47	8.39	5.62	7.97
Medicare coverage, 2021	% of residents	16.13	16.56	15.07	15.68	16.12	14.70
Medicaid coverage, 2021	% of residents	22.05	11.61	16.22	13.70	12.34	15.28
Uninsured rate, 2021	% of residents	8.94	4.78	6.73	7.15	4.39	6.01

Source: Metopio, American Community Survey, 2021.

According to Healthy People 2020 “residents of impoverished neighborhoods or communities are at increased risk for mental illness, chronic disease, higher mortality and lower life expectancy”¹. Advocate is committed to address health disparities and leveraging community data to strategically focus its resources on communities with greatest need. Advocate hospitals are responsible for analyzing the community disparities and leverage additional data to identify those communities and populations that have higher socioeconomic needs when compared to other communities, populations and the overall county rate.



Source: Metopio, American Community Survey, 2017-2021

The average household income for all six counties in the AHC service area is \$91K. The Asian population have the highest median household income by race in Will County (\$136k) exceeding the median household income when compared to the Chicago Metropolitan Six County area. The median household income is lowest in Cook County area. By race and ethnicity, the Asian population have a higher overall median income when compared to other populations. The median household income is lowest among the Non-Hispanic Black population for all counties, with exception to McHenry County (\$101K). Of the six counties, DuPage County (\$100K) has the highest median household income with Cook County (\$72K) reporting the lowest median household income.

Education is one of the main domains in the Healthy People 2030 Social Determinants of Health wheel. Individuals with higher education also have greater access to better paying jobs and don’t often have to live in poverty, which contributes to better health outcomes. Higher education has a strong correlation with higher income and better health outcomes.

When comparing the six counties in the Advocate service area, Cook County and Kane County have the lowest high school graduation rates (under 90%), all other counties reported a percentage above 90 percent. DuPage and McHenry County are excelling, with an above 93

¹ U.S Department of Health and Human Services, Healthy People 2020, retrieved from www.healthypeople.gov/Poverty.

percent of high school graduation rate. When evaluating higher degree graduation rates, DuPage and Lake County are above 50 percent; neighboring counties have a percentage rate well under 50 percent. DuPage County (51.1%) and Lake County (46.8%) reported the highest college graduation rate; neighboring counties reported a college graduation rate under 45 percent.

Chicago Metropolitan Six-County Area – Education Level & Mean Wage or Salary Income, 2021							
Topics	Units	Cook County, IL	DuPage County, IL	Kane County, IL	Lake County, IL	McHenry County, IL	Will County, IL
High school graduation rate, 2021	% of residents	88.28	93.46	87.46	90.80	93.95	90.98
Higher degree graduation rate, 2021	% of residents	48.63	58.95	44.72	53.09	44.32	45.86
Any higher education rate, 2021	% of residents	66.19	75.28	63.90	70.53	67.51	66.59
College graduation rate, 2021	% of residents	41.86	51.13	37.94	46.87	35.00	37.36
Mean wage or salary income, 2021		\$80,884	\$105,083	\$88,562	\$103,403	\$89,184	\$89,653

Source: Metopio, American Community Survey, 2021

The Chicago Metropolitan Six-County Area currently has a consistent labor force participation across all six counties. By race and ethnicity, the labor force participation is consistently between 60 percent and under 71 percent. There are no significant disparities by race and ethnicity. However, DuPage County does have the largest work from home population (26.6%) – significantly increase when compared to 2020 data (10 percent) followed by Cook County with 23 percent of the population working from home (American Community Survey, 2021). The ability to work from home allows families more flexibility and helps with reducing commute time and added stress associate with travel.

Chicago Metropolitan Six-County Area – Labor Force Participation by Race/Ethnicity (% of residents 16 and older), 2021							
Topics	Units	Cook County, IL	DuPage County, IL	Kane County, IL	Lake County, IL	McHenry County, IL	Will County, IL
Labor force participation	% of residents 16 and older	65.59	68.13	69.58	67.36	70.09	68.26
Private not-for-profit workers	% of civilian employed population	11.14	8.47	6.83	7.52	6.59	7.99

Private for-profit workers	% of civilian employed population	71.22	76.79	76.19	77.17	75.93	75.93
Local government workers	% of civilian employed population	7.69	7.35	9.26	7.54	10.37	7.91
State government workers	% of civilian employed population	2.79	1.32	1.81	1.45	1.98	2.31
Federal government workers	% of civilian employed population	1.87	2.01	1.86	1.93	0.79	2.66
Self-employed	% of civilian employed population	5.04	3.95	3.97	4.19	4.22	2.88
Work from home	% of workers 16 years and older	23.79	26.66	20.07	21.44	20.28	17.47

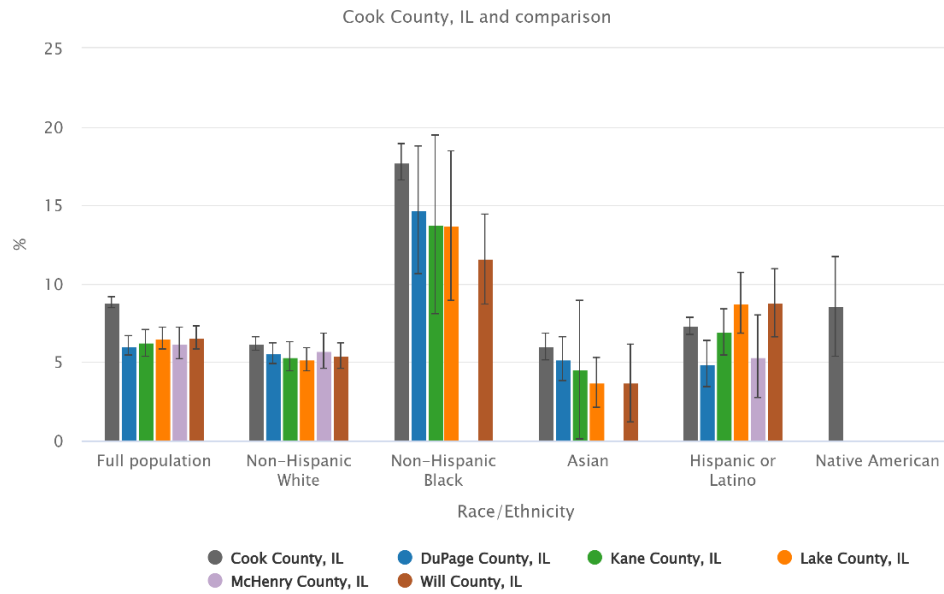
Source: Metopio, American Community Survey, 2021

Over the years, research has identified a correlation with unemployment and negative health outcomes. According to Healthy People 2020, “those who are unemployed report feelings of depressions, anxiety, low self-esteem, demoralization, worry and physical pain. Unemployed individuals tend to suffer more from stress-related illnesses such as high blood pressure, stroke, heart attack, heart disease and arthritis².

When comparing the unemployment rate in the Chicago Metropolitan Six-County Area, we observe that Cook County (8.8%) has the highest unemployment rates, comparable to the Illinois rate (8.9%). All other counties in the Advocate Health Care service area for Illinois reported an unemployment rate under 6.6%. DuPage County (6%) reported the lowest unemployment rate when compared to all other counties. By race, the Non-Hispanic Black population reported the highest unemployment rates across five of the six counties.

² U.S Department of Health and Human Services, Healthy People 2020, retrieved from www.healthypeople.gov/unemployment.

Unemployment rate by Race/Ethnicity, 2021



Source: Metopio, American Community Survey, 2021

VI. Advocate Hospitals Presence in Communities

An examination of inpatient hospitalizations by MS-DRG identified the top ten services (see following table) based on volume across Advocate Health Care in Illinois. These services represent the highest patient demand at Advocate and directly relate to diseases that are, per national statistics, among the most prevalent in the country. The top three services with the greatest discharge percentage for Advocate in 2022 were infectious disease (17%), obstetrics (11.6%) and cardiology (10.7%). Across the six-counties, the top three were infectious disease (24.4%), pulmonology (24.0%) and cardiology (23.7%).

2022 Inpatient Hospitalization Trends – Chicago Metropolitan Six-County Area		
Service	% of Total Advocate Hospital Discharges	Advocate % of Six-County Discharges
Infectious Disease	17.0%	24.4%
Obstetrics	11.6%	21.5%
Cardiology	10.7%	23.7%
GI	7.2%	22.4%
General Medicine	5.9%	23.2%
Neurology	5.6%	21.7%
Neonate	4.9%	21.8%
Pulmonology	4.9%	24.0%
Orthopedics	4.7%	21.4%
Psychiatry	4.6%	9.3%

Source: IHA COMPdata, 2022, excludes observation care and normal newborns

VII. Community Health Needs

During the 2022 CHNA cycle, multiple data sources were examined to help determine the types of programs and services to provide to meet the needs of the diverse communities Advocate serves. Each Advocate hospital worked with at least one health department in addition to many community organizations and hospital leaders to complete the assessment and identify program priorities for implementation. As mentioned earlier, the 2022 CHNA Reports and the 2023-2025 Community Health Implementation Strategy reports can be found by clicking [here](#).

In addition to the demographic and market data presented above, selected utilization, chronic disease and health risk data by county is presented for the Six-County Metropolitan Chicago Area, where Advocate hospitals are located. This information provides a snapshot of some of the health issues faced by hospitals servicing these regions.

The first set of health data is ED utilization or hospitalization data for selected conditions. This data was provided by the Illinois Hospital Association through Advocate Health Care to Metopio, a data analytics organization. Metopio’s research team analyzed the data, age-adjusted it and created PSA, secondary service area (SSA), county and zip code values for selected utilization indicators.

The following is a summary of key observations from the data reviewed during the 2022 CHNA cycle.

- Asthma** continues to be a substantial problem on Chicago’s south side and south suburbs with ED rates in Advocate Trinity’s PSA (641.2 per 100,000 residents) that are two to four times the rates in other service areas. Other hospitals with alarming emergency room rates due asthma include Advocate Christ (224.1 per 100,000 residents), Advocate South Suburban Hospital (281.8 per 100,000 residents) and Advocate Illinois Masonic Medical Center (221.1 per 100,000 population). Advocate Good Shepherd Hospital in McHenry County is the only hospital with low emergency rates due to asthma. Overall, asthma is a greater health concern in the southern Cook County area.

Stroke, Heart Failure and Hypertension ED visit rates per 100,000 residents in the PSAs of Advocate Hospitals in Chicago Metropolitan Area			
Advocate Hospital PSA	Asthma hospitalization rate per 100,000 residents	Asthma emergency department visit rate per 100,000 residents	Current asthma (% of adults)
North Region			
Good Shepherd Primary Service Area	24.62	98.60	8.92
Sherman Hospital Primary Service Area	39.16	187.34	9.08
Condell Medical Center Primary Service Area	24.83	141.30	9.21
Central Region			

Good Samaritan Hospital Primary Service Area	34.07	139.19	8.56
Illinois Masonic Primary Service Area	37.79	221.10	8.95
Lutheran General Hospital Primary Service Area	29.14	115.87	8.45
South Region			
Christ Medical Center Primary Service Area	43.31	224.16	9.61
South Suburban Hospital Primary Service Area	50.55	281.82	10.42
Advocate Trinity Primary Service Area	115.54	641.21	12.01

- According to the CDC, Heart Disease continues to be the leading cause of death in the United States and stroke is ranked fifth ([Access Report Here](#)). By region, the South region hospital sites experience the highest emergency department visits for stroke, heart failure and hypertension. The hospital in the North and Central region share similar outcomes for the three categories. Advocate as a whole, is committed to addressing the health inequities and developing programs that improve health outcomes in communities experiencing greater need.

Stroke, Heart Failure and Hypertension ED visit rates per 100,000 residents in the PSAs of Advocate Hospitals in Chicago Metropolitan Area			
Advocate Hospital PSA	Stroke emergency department visit rate per 100,000 residents	Heart failure emergency department visit rate per 100,000 residents	Hypertension emergency department visit rate per 100,000 residents
North Region			
Good Shepherd Primary Service Area	59.12	67.02	300.00
Sherman Hospital Primary Service Area	60.12	66.63	357.28
Condell Medical Center Primary Service Area	41.60	52.82	293.04
Central Region			
Good Samaritan Hospital Primary Service Area	45.73	59.80	278.81
Illinois Masonic Primary Service Area	45.21	56.58	291.72

Lutheran General Hospital Primary Service Area	33.24	42.79	240.54
South Region			
Christ Medical Center Primary Service Area	60.56	68.50	325.92
South Suburban Hospital Primary Service Area	80.80	129.04	819.58
Advocate Trinity Primary Service Area	89.31	179.66	640.08

Source: Metopio, Illinois Hospital Association, COMPdata, 2021

- Emergency department visit rates for **heart failure** are highest in Advocate Trinity’s PSA (179.6 per 100,000 residents) and Advocate South Suburban Hospital’s PSA (129 per 100,000 residents). By site, both hospitals have more than double when compared to other Advocate hospitals. The emergency department visit rates for hypertension are also significantly higher for Advocate Trinity and Advocate South Suburban Hospital. However, ED visit rates for hypertension are elevated across all regions, well above the 200 ED visit rate per 100,000 residents.
- Hospitalization rates due to **Suicide and Intentional self-injury** for all service areas in Metro Chicago are relatively the same when compared across the three regions. Advocate Good Shepherd Hospital is the only site with hospitalizations rates above 47 hospitalizations per 100,000 residents. However, Advocate Lutheran General and Illinois Masonic Medical Center are the only two sites with more emergency department visits in 2021.

Suicide and Self-injury ED visits and Hospitalization rates per 100,000 residents in the PSAs of Advocate Hospitals in Chicago Metropolitan Area		
Advocate Hospital PSA	Suicide and self-injury hospitalization rate per 100,000 residents	Suicide and self-injury emergency department visits
North Region		
Good Shepherd Primary Service Area	61.85	200
Sherman Hospital Primary Service Area	46.03	210
Condell Medical Center Primary Service Area	40.81	347
Central Region		
Good Samaritan Hospital Primary Service Area	39.63	325
Illinois Masonic Primary Service Area	33.65	504
Lutheran General Hospital Primary Service Area	46.74	528
South Region		
Christ Medical Center Primary Service Area	39.85	408

South Suburban Hospital Primary Service Area	30.92	218
Advocate Trinity Primary Service Area	38.17	187

Source: Metopio, Illinois Hospital Association, COMPdata, 2021

Finally, the third set of data (2015-2019) reviewed was age-adjusted cancer diagnosis rates per 100,000 residents from the Illinois Department of Public Health Illinois State Registry. The following are key observations from the county data reviewed. The data has not changed as of 2022.

- McHenry County, Advocate Good Shepherd’s PSA, had the highest oral cancer diagnosis rate when compared to other Advocate hospitals.
- By hospital site, Good Samaritan’s PSA, had the highest breast cancer diagnosis rate followed closely by Good Shepherd (McHenry) and Lutheran Hospital’s PSA (Suburban Cook County).
- The South region had the highest diagnosis rates of cervical cancer when compared to the North and Central Region.
- Prostate diagnosis cancer rates are also highest in the Advocate Trinity and Advocate South Suburban hospital PSAs.
- Lung and Colorectal cancer was also more prevalent in the South region when compared to the Central and North Region.

Cancer Related Diagnosis Rates per 100,000 Residents, 2015-2019 PSAs of Advocate Hospitals in Chicago Metropolitan Area					
Advocate Hospital PSA	Cancer diagnosis rate	Invasive breast cancer diagnosis rate (female)	Colorectal cancer diagnosis rate	Cervical cancer diagnosis rate (female)	Lung cancer diagnosis rate
North Region					
Good Shepherd Primary Service Area	588.79	180.61	44.99	7.96	70.53
Sherman Hospital Primary Service Area	529.27	156.88	42.32	7.11	61.71
Condell Medical Center Primary Service Area	541.26	156.96	42.83	6.80	61.72
Central Region					
Good Samaritan Hospital Primary Service Area	576.65	186.64	44.55	7.47	59.09
Illinois Masonic Primary Service Area	491.19	142.94	45.23	9.21	55.52
Lutheran General Hospital Primary Service Area	569.48	173.87	47.78	8.57	60.45
South Region					

Christ Medical Center Primary Service Area	556.02	156.37	51.32	10.67	73.91
South Suburban Hospital Primary Service Area	611.68	168.23	60.98	10.07	77.04
Advocate Trinity Primary Service Area	607.05	169.37	58.18	10.69	87.77

Cancer Related Diagnosis Rates per 100,000 Residents PSAs of Advocate Hospitals in Chicago Metropolitan Area					
Advocate Hospital PSA	Nervous system cancer diagnosis rate	Oral cancer diagnosis rate	Other cancers diagnosis rate	Prostate cancer diagnosis rate	Average stage of cancer at diagnosis
North Region					
Good Shepherd Primary Service Area	7.48	16.11	181.15	136.74	1.70
Sherman Hospital Primary Service Area	5.67	13.81	167.97	119.56	1.72
Condell Medical Center Primary Service Area	7.29	12.65	171.73	123.00	1.76
Central Region					
Good Samaritan Hospital Primary Service Area	6.95	14.20	171.64	137.35	1.72
Illinois Masonic Primary Service Area	6.41	13.52	151.43	110.88	1.76
Lutheran General Hospital Primary Service Area	7.22	14.26	174.30	127.84	1.75
South Region					
Christ Medical Center Primary Service Area	5.38	12.80	159.66	146.83	1.78
South Suburban Hospital Primary Service Area	6.04	13.21	160.16	205.96	1.77
Advocate Trinity Primary Service Area	3.49	14.88	162.50	202.31	1.84

Source: Metopio, Illinois Department of Public Health Illinois State Cancer Registry, 2015-2019