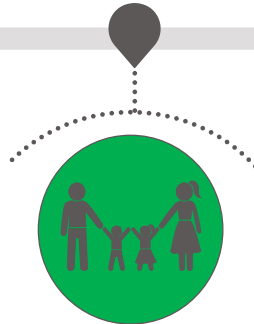


Proposed Model

CREATING A HEALTHY COMMUNITY



More access to doctors, nurses and health care providers in the community for both Primary Care and special conditions.



Care Programs to support people with diseases or concerns common on the South Side such as behavioral health, disease management, or maternal and infant health.



Community Health Workers and care coordination to form connections between different types of care, helping people easily find the resources and patient education they need.



Technology is a foundational element which will bring together health care providers and community health workers in support of Care Programs.

Creating a Healthy Community

Gerald's experience

Meet Gerald



53 years old



Born/raised in Fuller Park



Devoted uncle



10th grade at Tilden High



\$13/hr., warehouse stocker



Diehard Bulls fan

Clinical Background:

- *History of high blood pressure and diabetes*
- *Takes DM medication twice a day*
- *Manages to check blood sugar a few times a week when he has strips*
- *In the past year Gerald has gone to the ER 4 times*
- *Does not have a trusted regular doctor*

Social Background:

- *Gerald has been couch-surfing for the past 2 years with friends and family*
- *Eats on a budget, his diet consists of mostly fast-food*
- *Does not have a car, primarily rides the bus*

Goals:

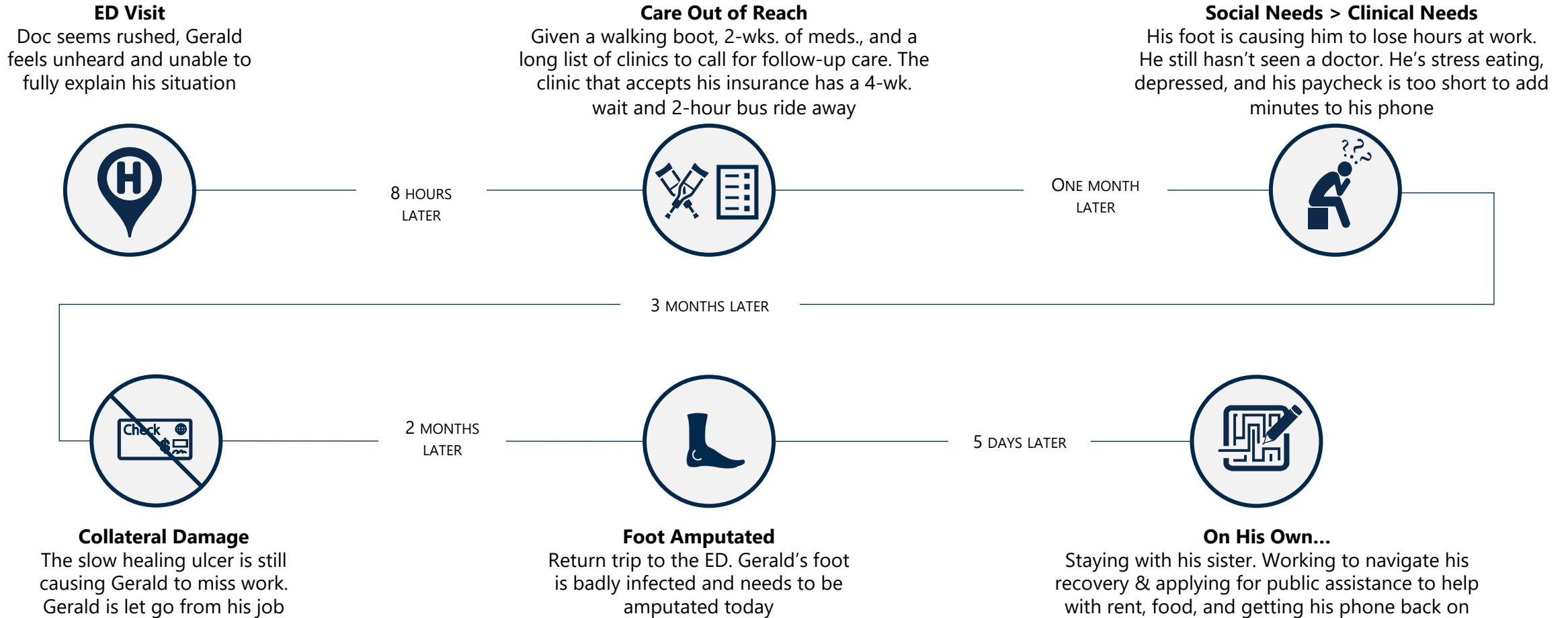
- *Would like to lose weight, but finds it difficult*
- *Interested in finding a better paying job*
- *Would love to be able to coach nephew's football team*

! Health concern:

Gerald has been dealing with a slow healing foot ulcer for a few weeks now. One night he notices redness, swelling, and very sharp pain when he's walking to the bathroom. In a panic, Gerald picked up the phone and called 911. An ambulance arrived and transported Gerald to the closest ED

Creating a Healthy Community

Gerald's experience –*current state*

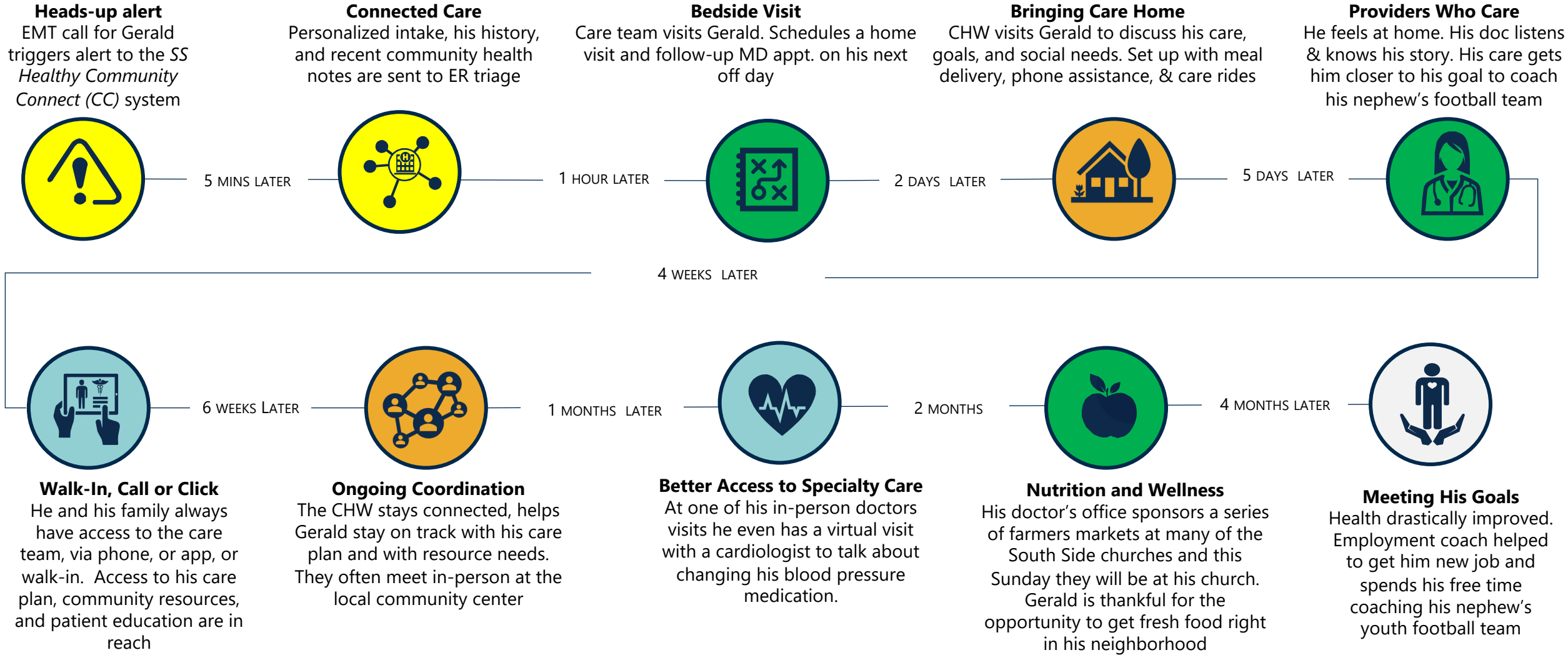


Creating a Healthy Community

Gerald's experience – *future state*

South Side Health Transformation Project

-  Access to providers
-  Comm. Health Workers & Coordination
-  Care Programs
-  Technology



The Healthy Community Model *(March 24, 2020)*

We are seeking to create **transformative change, better outcomes**



SERVING 400K SOUTH SIDERS WITH BETTER, MORE SEAMLESS & MORE ACCESSIBLE CARE

Through an unprecedented collaboration of the region's FQHCs, safety net hospitals, health systems and community



DRAMATICALLY
INCREASE & ENHANCE
PRIMARY CARE WITH
**90 ADDITIONAL PCP
& OB HIRES**



ADDRESS UNMET
CHRONIC DISEASE &
BEHAVIORAL NEEDS
WITH **ACCESS TO
NEARLY 50 NEW
SPECIALISTS**



MEET SOCIAL
DETERMINANT NEEDS
AND DRIVE
PREVENTATIVE CARE
WITH **~250 CHWs &
CARE COORDINATORS**



SEAMLESSLY
TRANSITION CARE &
SHARE DATA WITH A
**CONNECTED CARE
TECHNOLOGY
PLATFORM**

We Will:

REVERSAL OF LONGSTANDING HEALTH DISPARITIES

Reduced Infant
Mortality

Reduced Chronic
Disease Morbidity

Enhanced Life
Expectancy

REDUCED COSTS & IMPROVED ECONOMIC SUSTAINABILITY

Improved Value &
Outcomes per
Dollar

More Care
Delivered Locally

Over 400 New
Jobs Created

To Achieve:

Our Timeline for Impact *(March 24, 2020)*

WITHIN THE FIRST 12 MONTHS

- Establish our **Community Advisory Council** who will help provide direction and guidance to our leadership
- Establish **partnerships with CBOs** who are focused on social determinants of health, particularly: **transportation, housing, and food insecurity**
- Develop **standardize clinical protocols** helping to enhance specialty care on the South Side with a priority focus on:
 - Behavioral Health
 - Maternal Health
 - Chronic Disease Management
- Increase access to specialists within the community
- Hire at least **10 new primary care providers**
- Hire and train at least **30 new community health workers**

FULL IMPLEMENTATION IN YEAR 5

400k

South Side residents impacted by our Healthy Community Model

250+

New Community Health Workers hired to serve South Side residents, linking patients to care and support services

75+

New primary care providers deployed in the community at FQHCs, safety net hospitals and new practice sites in primary care deserts

50+

New specialty care providers brought to the South Side for the most needed, least available specialties (e.g., psychiatry, OB, endocrinology) and embedded at safety net hospitals and FQHCs