

QUESTIONS AND ANSWERS  
June 22 South Side Healthy Community Organization Town Hall

**1. Tell us more about the community health workers and nurse care coordinators ... when will the community start to feel the benefits from these added resources?**

Job offers were made in mid-June for a first wave of 9 community health workers (CHWs) plus 2 managers for those workers, and they are being trained to start having an impact in the community. We are still in the hiring process with the nurse care coordinators – 7 in this first round. These first new hires will be spread among Friend Health, Near North and St. Bernard Hospital and should be active by mid-July. By the end of this year, we are targeting to hire up to 48 CHWs and 20 nurse care coordinators spread among all 13 health care partners, and much more to come in future years.

**2. How will more of those kinds of job opportunities get communicated?**

The SSHCO is hiring these important community resources in phases so that we can accommodate the training as well as the placement and oversight of these workers at the various FQHCs, hospitals and health systems in our network. We plan to hire another round of community health workers in late-August/September and in November, and that will be communicated through the SSHCO website – [www.southsidehealthycommunity.com](http://www.southsidehealthycommunity.com) – through our Facebook and Linked In social channels, and through direct outreach to our 2,000+ community database, like we did for the May/June opportunities.

**3. You've talked before about a Community Advisory Council. Now that the new CEO is on board, when might that get formed?**

Community needs, input and ideas have been front and center since the beginning of the South Side health transformation process and in every step along the way. That will continue under the CEO's watch. We still have a lot of foundational work to do for the SSHCO. You'd be surprised what it takes to start an organization like this from scratch, even with all of our 13 awesome partners!

And it's important that we get this right so our work and impact is sustainable well into the future. We will continue gathering input and conducting these community-based town halls but in terms of formalizing an additional layer of community involvement, the CEO's plan is to create an active Community Advisory Council by the first quarter of 2023. You'll hear more about that towards the end of this year.

**4. You have shared that state funding lasts for five years – what happens once those five years are over and the state funding ends? How will these important health care resources continue?**

The SSHCO is designed to be sustainable for the long-term. We are extremely grateful for the state funding, which is enormously helpful for building this important foundation, including the critical connectivity between and among our 13 organizations, with our community, and with the new jobs and resources we are putting in place. We are just

about one year into the five-year state funding promise but are already working on a robust philanthropic campaign so that the community benefits of the SSHCO continue to thrive and grow for decades. We will also need to get creative with the Medicaid Managed Care organizations and with the State Department of Healthcare and Family Services around alternate payment models and additional opportunities for funding support.

**5. What services are needed most and how are you addressing these needs?**

The South Side Healthy Community Organization is focused on three key areas of need: 1) patients with chronic conditions like high blood pressure, 2) patients who experience mental illness and/or a chemical dependency or substance use disorder, and 3) pregnant patients.

- For high blood pressure, it is our hope that increasing access to Primary Care doctors who are responsible for check-ups and managing medications, will help in this area. We are hiring 10 in our first year alone.
- For mental illness and substance use, we are hiring five Behavioral Health Specialists this year – including psychiatrists and counselors - who will be available to patients by phone and by video visit. More to come in future years.
- For pregnant patients, we are working to connect our partner hospitals who deliver babies to the clinics that offer prenatal and post-partum care – building a continuum of care before and after pregnancy. We will hire five specialists in maternal health in the first year.

**6. When will we start to see the increase in services being made available to address the healthcare needs and what are the priorities of these services being offered?**

Services will ramp up over the summer, fall and winter. First, patients may start to see additional care coordination staff at the clinics and hospitals they visit for their care. Next, they will start to be able to get in to see a primary care doctor sooner than they might have otherwise, as we start to hire doctors for well-visits and check-ups. We hope patients will also start to benefit from more access to specialists as we start to build those resources and care providers who are specialized in areas like mental health, maternal health and more.

**7. Which areas on the South Side will be most impacted ... where can we expect to see the most impact? For someone living in Englewood, for instance, who doesn't currently have a primary-care doctor, what can they expect when they need to get an appointment?**

The South Side Healthy Community Organization is designed to serve 15 zip codes on the South Side where our 13 collaborative partner organizations are located. The organization has looked at each of those areas and their specific needs coupled with the current resources available, and is using that data to make decisions about where to place doctors, nurses, and care coordinators at our various sites. So, no one area will be most impacted – our plan is to see a steady increase in access to care and supports across the South Side based on need as we add more resources.

**8. Will there be a mailing to the community letting us know where there are additional healthcare services in our area?**

Yes, we will send out an email to our database and we encourage everyone on our database to spread the word through their electronic and community networks. If you haven't signed up yet, please visit our website at [www.southsidehealthycommunity.com](http://www.southsidehealthycommunity.com) so that you continue to get our information and updates in a timely way. We will also work with community partners to post information on community bulletin boards and in their locations.

**9. How did you determine where physicians are being placed?**

Decisions about provider placement are being made mainly based on need. One way we looked at this was geographical need -- which specific location on the South Side has the largest gap in primary care resources or doctors who are available for regular visits and check-ups. When we looked at the data, the Northwest Quadrant had the highest need -- so our partner sites located in this area are prioritized for primary care providers in year one. As we continue to add resources, we will be broader in where our providers will work. By next year, we anticipate every site in the collaborative will have the ability to hire at least one doctor, and likely several nurses.

**10. While it's good to see a few behavioral health and maternal health specialists being added in this first year, there is SO much need ... what is the long game? How many of these specialists do you plan to bring on to address the needs long-term?**

The SSHCO has prioritized both maternal and behavioral health for just that very reason, that we know there is so much need. Right now, our plans call for starting with five now and working toward 30 new maternal health specialists by the end of five years, including doctors, nurses, midwives and more. On the behavioral health side, we know those practitioners are in huge demand and very hard to find but so necessary. We don't yet have an ultimate number, but it is a huge priority in our work.

**11. Will the CHW's be employed by the SSHCO or by the FQHCs?**

The community health workers will be employed by the SSHCO.

**12. Will non-SSHCO CHWs have access to the shared platform for coordination of care? For example- I manage a group of CHWs at UChicago Medicine and if they wanted to refer a patient to a CHW at Beloved, could we access the platform?**

The technology platform should be available to Community Health Workers and Nurse Care Coordinators that are part of the SSHCO model by the summer. Staff at our 13 sites will be able to refer patients to providers through the platform.

**13. With whom shall we share possible community resources to be included in the offering to the community at large?**

Please go to our website -- [www.southsidehealthycommunity.com](http://www.southsidehealthycommunity.com) -- and if you scroll a little ways down on our home page, we still have our Request for Information open and you can fill out the brief survey there to get added to our database. Thank you!

**14. Does SSHCO have any plans to streamline referral pathways for primary care providers in our community? Is there a database for the resources available? Often a fragmented referral pathway leads to delays in diagnosis and treatment that results in poorer outcomes, widening the disparity gap. Additionally, patients may be referred outside of our community because of lack of provider education about available resources...**

It is the intention of the SSHCO to create A) access to primary care providers through hiring, B) access to specialty care through hiring, and C) streamlined referral pathways through care coordination staff at all of the SSHCO sites. When the model is fully operational, we hope to be able to address the challenge described regarding gaps in continuity of care, diagnosis, and care management.

**15. How will systemic barriers - healthcare policies -- be incorporated into the framework?**

Access to quality healthcare is the primary focus of the South Side Healthy Community Organization model. One of the ways we intend to become sustainable is to seek updates to healthcare policies specifically related to payments for different types of care services (clinical care and care coordination services, for example).