2016 COMMUNITY HEALTH CARE REPORT

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The mission of the Infant Welfare Society of Chicago is to provide services for the healthy physical and mental development of children and families in order to give them a foundation for a future productive and wholesome life.

Infant Welfare Society of Chicago (IWS) patients are low-income children and families from northwest Chicago, of which 96 percent self-identify as Latino. Many of these patients speak Spanish as a primary language and experience barriers to healthcare access due to language, cultural differences, socio-economic status, and both awareness and availability of public resources. According to the United States Census Bureau these neighborhoods together average 60 percent Hispanic, 27 percent of the residents earn less than 200 percent of the Federal Poverty Level, and 52 percent spend more than 30 percent of household income on housing costs. Based on numerous patient surveys, data collected via the IWS Electronic Medical Record system, project data collected currently and over the years, and in response to the needs assessments conducted by the Chicago Department of Public Health –IWS has developed culturally and linguistically sensitive healthcare patient outreach, intake, treatment and follow-up healthcare services.

IWS continues to emphasize the need for bilingual and bicultural employees in the hiring process to provide a welcoming and accurate assessment of each patients needs. Cultural competency is one of several core training modules each new IWS employee must complete to ensure the relationship between caregiver and patient is respectful of cultural differences that may create barriers to sufficient healthcare. IWS produces a variety of healthcare outreach educational materials in both English and Spanish to ensure outreach is clear and effective. Infant Welfare Society of Chicago is continually increasing the accessibility of healthcare services for low-income clients living in the communities surrounding Logan Square, Humboldt Park, Avondale, West Town, Hermosa and Belmont-Cragin.

IWS has developed several strategies to gather input from both the medically underserved patient population and community leaders as a basis for continual improvement of service delivery. IWS conducts patient surveys in both Spanish and English to ensure patient voices are considered when planning, organizing and implementing service improvements. IWS operates a Community Advisory Board (CAB) which is comprised patient consumers, community members, and community leadership. The IWS CAB evaluates survey and operational data to provide feedback on organizational policies and procedures, service development, and in general makes recommendations that both reflect and accommodate community need. CAB meeting minutes are shared with the IWS Board of Directors committees including facilities, personnel, and services. Finally, IWS has community relations staff that engages community stakeholders often resulting in specific feedback that gets shared, reviewed, and implemented whenever possible.

IWS maintains several partnerships with other providers and community-based organizations to promote continuity of healthcare for IWS medically underserved patients. Active clinical

partnerships include those with Advocate Illinois Masonic Medical Center, St. Mary's and St. Elizabeth's Medical Centers, University of Illinois Medical Center, Erie Family Health Center, Planned Parenthood, Mercy Hospital and Medical Center, Stroger Cook County Hospital and Lurie Children's Hospital. These partnerships have been essential when patients are in need of services not provided at IWS; referral to these partners continues to be effective in the ongoing effort to promote continuity of healthcare.

IWS also continues to develop relationships with local elected officials, community and business leaders, community-based organizations, media outlets and other local healthcare providers. IWS is developing and maintaining relationships with several local schools and faith-based organizations and participates in several health fairs and public presentations. IWS employs a Community Relations Manager within the Department of Institutional Advancement to procure additional community-based stakeholders to explore potential collaboration.

IWS recognizes that women's health is vital to sustaining the overall wellbeing of our patient families. Our central location provides quality well-woman care, including prenatal health and family planning, in a safe, bilingual environment where women feel at ease. Prenatal services are provided by midwives from Swedish Covenant Hospital and Presence Saints Mary and Elizabeth Medical Center; patients come to Infant Welfare for their exams and deliver in the hospital setting. Beginning this fiscal year, Infant Welfare Society of Chicago will provide Centering Pregnancy in collaborations with Swedish Covenant Hospital and the Centering Institute. Centering is an evidence-based health care delivery model that integrates maternal health assessment, education, and support. It replaces traditional one-on-one prenatal visits with group sessions to promote greater patient engagement, empowerment, and community-building. Prenatal patients will have the option to choose the Centering group care, or individual care. On average, IWS absorbs a \$26 loss for each well-woman and reproductive health visit as public funding and private insurance do not fully cover these services. We rely on the generous support of our corporate and foundation partners to help us fill these compensation gaps so we can enable healthy parenting and prevent teen pregnancy.

The Child-centered Health & Advanced Therapies (CHAT) prevention model was designed in response to an acute need for timely interventions for Latino children with special needs. Latino families experience significant disadvantages accessing bilingual child development services resulting in late diagnoses and less effective interventions for developmentally delayed children. Numerous studies show that early intervention for young children with developmental delays results in positive outcomes across developmental domains including health, speech and language, cognitive development, and social/emotional skills¹. In turn, this often reduces the need for special education when these children start school.

The CHAT intervention model coordinates existing and new child development services across disciplines to ensure timely diagnoses and culturally competent interventions that address the needs high risk children and families. The target population is Latino families with children ages 3 to 8 who present/are at risk for developmental delays, and whose access to services is impaired

¹ Karoly, Lynn A., M. Rebecca Kilburn and Jill S. Cannon. Proven Benefits of Early Childhood Interventions. Santa Monica, CA: RAND Corporation, 2005. http://www.rand.org/pubs/research_briefs/RB9145.

by economic, social and/or linguistic isolation. IWS expects to serve more than 5,000 dental clients this year and has allocated \$1,255,173 for the dental program, which represents about 11.5 percent of the organization budget. Infant Welfare Society of Chicago is focused on providing services for the healthy physical and mental development of children and families to give them a foundation for a future productive and wholesome life.