



Illinois Children's
Healthcare Foundation



2009 Community Report



ALL ABOUT
children

FROM THE CHAIRMAN OF THE BOARD

Dear partners and friends,

Reflecting back over the past years since the inception of the Foundation, I am grateful for how far we have come in such a short period. From our first set of grants in 2004 to today, the Foundation has invested over \$36 million in 225 programs.

As Illinois' only statewide Foundation dedicated to ensuring every child has the opportunity to grow up healthy, the Foundation has put in place a thoughtful and deliberate process to identify areas of greatest need and potential for the greatest impact on the health of children. This process includes not only an analysis of children's healthcare data points but also discussions with people on the front lines of providing children's healthcare and who have the same purpose and passion for improving the lives of children throughout Illinois.

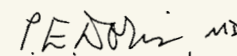
Based on this process, the Foundation has committed substantial time, resources and funding to the focus areas of oral health and mental health while continuing to monitor children's healthcare needs in general. Underlying all of our work has been a commitment to children receiving quality, comprehensive services within the context of a medical home.

While proud of all the Foundation has accomplished to date, I am humbled knowing how much remains to be done if we are to make a lasting impact on the more than three million children in Illinois.

We look forward to the future. We challenge each of you to be on the forefront of change. By collaborating with our partners, we can make the difference in the lives of the children of Illinois.

In my final year as Chair, I cannot adequately express my appreciation to so many individuals. I do want to recognize the dedication of each member of the Board, both past and present; and the commitment and hard work of our outside advisors, of our grantees, and especially, of our staff. It has been an honor and privilege to have served with YOU who have such passion for the greatest treasure in Illinois: *our children*.

Sincerely,



Peter E. Doris, MD
Chairman of the Board

OUR VISION

To ensure every child in Illinois has the opportunity to grow up healthy.

OUR MISSION

ILCHF creates opportunity for and leads in the development of initiatives that improve the health of all children.

OUR STORY

Illinois Children's Healthcare Foundation was formed in December, 2002 through an action of the State of Illinois Attorney General's Office and a group of Illinois insurance carriers. This action and a settlement of approximately \$125 million established Illinois' only private foundation focused solely on the health needs of children across the state.

ALL ABOUT

community

HAVE YOU HAD THE OPPORTUNITY to drive through the many communities down Interstate 57 from Chicago through Champaign to Effingham? Or drive up through the cities, towns and villages from St. Louis through Peoria to Rockford? The diversity

of communities in Illinois is as diverse as the needs of its children.

What is a community? A community is a place where children and their families live, go to school and work. A community is a place where leaders hold a common vision and work together to identify and resolve issues. A community is a place where governmental units, hospitals,

schools, social services organizations, and families anticipate and adapt to an ever changing environment.

A fundamental principle the Foundation has adopted since its beginning is the principle that communities, themselves, know how best to serve the healthcare needs of their children. The phrase “one size fits all” doesn’t work in regards to ensuring all children in Illinois have the opportunity to grow up healthy.

How does the Foundation geographically define a community? Simple. The Foundation defines a community as the community sees itself. For example, in the Chicago area, a community may be a neighborhood. In central Illinois, a community may be a county. In northwest Illinois, a community may be a cluster of counties.

One of the hallmarks of successful communities is collaboration.

MAKING A POSITIVE IMPACT



From the Foundation's inception through 2009, a total of more than \$36 million in grants has been invested in over 225 programs making an impact on the lives of children throughout the state of Illinois.

COLLABORATION—a journey where two or more people work together for a common goal through a shared vision and trust.

How many times have you heard that word? Everyone everywhere wants collaboration. You can't complete a grant application without answering the question on how your project will collaborate with others. Have you ever stepped back for a moment and really thought about what it means to collaborate?

As a group of people work through various levels of linkage, the main issue to consider is trust. How much do I trust that the person and/or organization sitting next to me share my goals and objectives?

If we exchange information and try not to duplicate services—are we collaborating? If we share resources to address common issues and sometimes merge resources to create something new—is that collaboration? Is collaboration committing to a three-year initiative to increase access to care? Though each of these scenarios is levels of working together, they aren't true collaboration.

True collaboration exists when the people and/or organizations set common goals across the different organizations. Collaboration exists when consensus is used in shared decision making and when links are formalized, there is highly developed communication and ideas and decisions are shared equally and honestly. Collaboration exists when what matters most is how to provide the care and services needed to help a child.

As you will see in the pages that follow, impacting children's lives in Illinois is best accomplished, community by community, through meaningful collaboration.



ALL ABOUT
collaboration

Based on research, we know that tooth decay remains one of the most common chronic infectious diseases among children. According to Illinois' 2003/2004 Health Smiles Healthy Growth report, 55% of third graders have some tooth decay with 30% having significant decay.

ILCHF is committed to changing these statistics by investing resources along three strategies. The Foundation's mission in the focus area of oral health is to ensure all children have access to quality oral health services in their communities and a new culture of awareness exists throughout the state about the inter-



connection of oral health and overall health. We are excited to share with you how grantees are carrying out these strategies in their communities.

The Foundation has invested over \$19 million in 114 programs and initiatives. How have these investments impacted the oral health services

for children in Illinois? ILCHF has partnered with communities to construct, renovate and purchase equipment for over 80 operatories and three mobile dental vans. These investments have enabled local communities to recruit, hire and retain over 125 oral health professionals dedicated to serving children in Illinois. And, these investments have strengthened the oral health safety net clinics to ensure that barriers to services are overcome and children are being served.

Even more important than the output numbers above, these investments have made it possible for over 100,000 children throughout the state to have access to a dental home.

Building and strengthening the capacity of the safety net system

SARAH BUSH LINCOLN DENTAL SERVICES

In 2008, Sarah Bush Lincoln Dental Services expended ILCHF funding of \$300,000 and more than \$170,000 in matching support to purchase and equip a 40-foot mobile dental unit, the latest component of their growing dental program.



The mobile unit, staffed by oral health professionals, travels to schools and

rural areas to increase the program's capacity to provide much needed restorative care to children in a nine-county area in East Central Illinois. For the first six months of operation, 2,056 dental examinations, 9,655 dental procedures and 945 restorative/surgical procedures were completed.

In 2009, the Foundation awarded SBL Dental Services \$75,000 to strengthen their program by creating a role of Team Leader for the portable component of the dental program and to support additional education outreach efforts by the Oral Health Educator. These new roles will allow the program to reach 12,000 children and parents annually with oral health education and to ensure those children needing preventive or restorative services had the opportunity to receive services.

Workforce development

BRIGHT SMILES FROM BIRTH

Bright Smiles from Birth (BSFB) was launched in 2005 as a pilot program in Cook County. BSFB is a program of the Illinois Chapter of the American Academy of Pediatrics in collaboration with the Illinois Department of Healthcare and Family Services, Illinois Department of Public Health and other funding partners. BSFB's goal is to reduce the incidence of early childhood caries and securing dental homes for Illinois children by helping primary care practice systems better address oral health through service delivery, patient education and referral. For the period 2008-



2010, the Foundation provided funding to allow the expansion of the program through a controlled

statewide spread, beginning with all providers in the counties surrounding Cook as well as federally-qualified health centers (FQHCs) throughout Illinois.

As a result of this collaborative funding structure, the program has provided training and technical assistance to 29 FQHCs, 21 residency programs, and 126 private practices in Illinois as well as increased its focus on providers who serve children with special health care needs. Early output data shows an increase in fluoride varnish claims of over 60%.

Public education and awareness

HOGAR DE SALUD DEL NIÑO OUTREACH

Community Health Partnership of Illinois (CHP), a leading provider of health services to



migrant and seasonal farm workers and their families, utilized funding from ILCHF to open a new two-

chair dental clinic in Kankakee, Illinois. With a portion of the funding, CHP collaborated with Maria Margarita Silva, a dentist from Columbia and MPH candidate from the University of Illinois at Chicago, to develop and pilot a popular education-based oral health curriculum designed specifically for Spanish-speaking adult learners. The curriculum is utilized by CHP's *promotores de salud* (peer health promoters) to provide oral health education, basic oral health assessments, and referrals for dental care within their communities.

As a result of these and other targeted outreach programs, CHP provides access to a full range of preventive and restorative oral health services, including pediatric specialty care, to over 500 migrant farm worker children annually.

We know that 7.5% of Illinois children ages 3-17 are reported to have moderate or severe social or emotional difficulties and that only 20% of these children will receive mental health services. We also know that half of all lifetime cases of mental illness begin by the age of 14. Why then do we continue to try to mold the way we treat children into an adult model of care?

ILCHF is committed to changing the way we look at the development of a child and how to provide children's mental health services. To do this, we must first define what we mean by children's mental health:

Children's mental health encompasses the broad spectrum of age appropriate social and emotional, cognitive, motor, behavioral, learning, speech and language development. Through appropriate development, a child is able to manage behavior and can adapt to an ever-changing internal, domestic and community environment. Through this process, the child grows into a competent,

functioning adult who can care for self and others, as well as be a productive member of society.



ILCHF has focused its investments in programs that support collaborative efforts to coordinate and integrate existing services that will result in a comprehensive community-based

children's mental health system and in those programs that can be replicated in communities across the state. One strategy to do this is through the Foundation's investment in the first round of communities for the Children's Mental Health Initiative, *Building Systems of Care, Community by Community* (2010). We are pleased to introduce to you the communities.

Adams County Children's Mental Health Partnership

MODEL: Rural Community, Medical Home/School Focus

ADAMS COUNTY is a rural, highly agricultural community located in West Central Illinois, with a total area of 871 square miles. The population in 2006 was 68,277, a decline from the 2000 census. Sixty percent of the population lives in Quincy. Approximately 25% of the population is under the age of 18 of which 12% of those are living in poverty.

The county is served by five unified school districts providing school social work and psychological services, three primary health care provider groups and two primary provider networks covering children's mental health services.

The Community is designing the project with a focus on universal developmental screenings and the medical home model.

The majority of the mental health services for children are located in Pontiac, the home of the County's only hospital, mental health center and Health Department.

The Community will be engaging the barriers associated with rural service delivery, such as lack of providers, transportation and stigma.

The Community that Cares

MODEL: MultiRural Community

The four-county region in the northwest corner of Illinois, **CARROLL, LEE, OGLE AND WHITESIDE**, is a community with agricultural and blue collar working roots. The region encompasses 2,500 square miles and has a population of approximately 165,290. Of 64,800 households, 34.1% have children under the age of 18.

The Community will include a diverse group of providers and draw on the existing Local Area Network structure in each county. Each of the four counties will be organized with a Care Team that will provide oversight and direction.

The Community will address the needs of children and their families who struggle with isolation, services access, and limited resources. This model emphasizes family involvement and the integration of primary care.

Building an Integrated Children's Mental Health System of Care in Berwyn and Cicero

MODEL: Urban Community

The **CITIES OF BERWYN AND CICERO** are neighboring communities located just west of Chicago and comprise 9.5 square miles. As of 2008, the population was approximately

130,000 with 37% in the 0-19 age range. The majority of the children are Latino, and many from low income households.

Cicero and Berwyn share many commonalities in history, geography, demography, public policy and community needs. The community's work will build on strong collaboration, including the Cicero Youth Task Force.

The Community is designing the project to provide the mental health prevention, early identification, and treatment that children need to succeed in the home, school and community. The model will emphasize cultural competency and increasing system capacity for prevention and early intervention services.

Children's MOSAIC Project: Providing Meaningful Opportunities for Success and Achievement through Service Integration for Children

MODEL: City Neighborhood

The **CITY OF SPRINGFIELD** has a diverse population of about 117,000 residents. Nearly 29,000 are youth ages 0-19. They are served by a single public school district and have more than 100 faith- and community-based organizations, government units, and medical providers that offer services to children and their families.

The MOSAIC project is being designed to serve all children in Springfield. However, the Community will develop a neighborhood-by-neighborhood approach, beginning with the highest concentrations of underserved children. The target area is the 9 census tracts that are the most in need in the city.

2009 Financial highlights

Statement of financial position

	December 31, 2009	December 31, 2008
Assets		
Cash	\$ 599,514	\$ 1,122,567
Investments, at fair value	111,132,392	94,596,734
Other assets	48,625	29,309
Total assets	111,780,531	95,748,610
Liabilities		
Grants payable	1,598,007	5,676,698
Other liabilities	16,481	10,038
Total liabilities	1,614,488	5,686,736
Unrestricted net assets	110,166,043	90,061,874
Total liabilities and net assets	\$111,780,531	\$ 95,748,610

Statement of activities

	2009	2008
Investment income	\$ 22,267,910	\$ (39,492,195)
Other income	3,250	1,000
Total revenue	22,271,160	(39,491,195)
Grants approved, net	1,428,786	9,546,423
All other expenses, net	738,205	848,688
Total expenses	2,166,991	10,395,211
Change in net assets	20,104,169	(49,886,406)
Grants paid during the year	\$ 5,650,799	\$ 7,500,309

For a copy of the 2009 audited financial statements, 2009 Form 990PF, or a complete and detailed listing of our 2009 program investments, please visit our website at www.ilchf.org or contact Debra Pitts-Brown at 1.630.571.2555.

2009 Approved grant recipients

Alivio Health Center

Chicago
Oral Health in High Schools
Expansion Program
\$53,182

Bond County Health Department

Bond County
Dental Health Education
\$14,995

Christopher Greater Rural Health Planning Corporation

Franklin County
REA Dental Clinic Upgrades
\$200,000

Clay County Health Department

13 Counties in Southeastern Illinois
Oral Health Needs Assessment & Planning Process
\$50,000

Community Health Partnership of Illinois

Mendota
Healthy Smiles for Life
\$71,235

Douglas County Health Department

Douglas County
Education of Young Children and Their Parents
\$20,200

Erie Family Health Center

Chicago
Orthodontics: A Continuum of Oral Health Care
\$66,750

Greater Elgin Family Care Center

Elgin
Adding Specialty Care & Enhancing Transportation Services for Children's Dental Clinic
\$51,000

Hancock County Health Department

Hancock County
Better Oral Health through Access to Transportation
\$25,000

Heartland International Health Center

Chicago
Oral Health Outreach and Sustainability Program
\$71,052

Illinois Chapter, American Academy of Pediatrics

Statewide
Bright Smiles from Birth
\$115,965

Illinois Council Against Handgun Violence

Statewide
Student Voices
\$45,000

Knox County Health Department

Knox County
Dental Clinic Access Expansion Project
\$75,000

McHenry County Health Department

McHenry County
Oral Health Care Case Management Services
\$75,000

NAMI of Dupage County Illinois

Dupage County
School Connections
\$40,000

OSF St. Francis Medical Center

Peoria
General Dental Practice Residency Program
\$50,000

Sarah Bush Lincoln Health Center

Mattoon
SBL Dental Services
\$75,000

Smile Healthy, Inc.

Champaign County
Family Oral Health Investment
\$59,600

Southern Illinois Healthcare Foundation

Southern Illinois
Hospital Dentistry Program
\$39,195

Southern Illinois University, School of Medicine, Department of Family & Community Medicine

Carbondale
Strengthening the Capacity of a Rural Dental Clinic
\$75,000

St. Bernard Hospital

Chicago
Dental Center Evaluation
\$40,000

The Children's Clinic sponsored by Oak Park River Forest Infant Welfare Society

Oak Park/River Forest
Strengthening the Service Model
\$50,000

Well Child Center, Inc.

Elgin
Increasing Oral Health Capacity through Digital Radiology and Electronic Patient Records
\$62,423

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**Illinois Children's
Healthcare Foundation**

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“No man stands so tall as when he stoops to help a child.”

—Abraham Lincoln