



CASE STUDY

Produced in collaboration with Rush
University Medical Center (RUMC)

Rush University Medical Center (RUMC)

*Collaborating with community stakeholders to improve
economic vitality and health*

CHICAGO, ILLINOIS



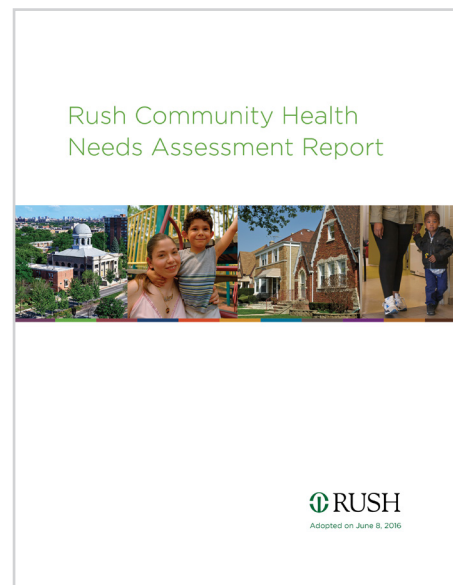
Overview & Background

Rush University Medical Center (RUMC) has been located on the West Side of Chicago for over 180 years. As an academic medical center, RUMC has developed many community programs with the goal to improve health. Despite these efforts, in 2016 while conducting its tri-annual Community Health Needs Assessment, RUMC leadership discovered life expectancy gaps of up to 16 years between Chicago's wealthier downtown area and several West Side neighborhoods. This discovery became the catalyst for 1) revising RUMC's mission; 2) engaging community partners and residents in new, more impactful ways; 3) launching an anchor mission strategy; and 4) working in partnership with other hospitals, community based organizations and residents to launch West Side United – a collaborative focused on improving the economic vitality and health of Chicago's West Side using a racial justice and equity lens. This case study examines RUMC's evolution.

RUMC viewed its mission and role on the West Side. Second, leadership at RUMC realized that access to healthcare was only one cause for the "death gap." To improve the health and well-being in surrounding neighborhoods, RUMC would have to focus more deeply on the social factors that affect health. Third, for the first time RUMC called out systemic racism as an underlying cause of disparities in health outcomes, including life expectancy. Finally, the organization would need a new strategy and would have to find better ways to engage the community to improve health.

Leveraging the Community Health Needs Assessment Process

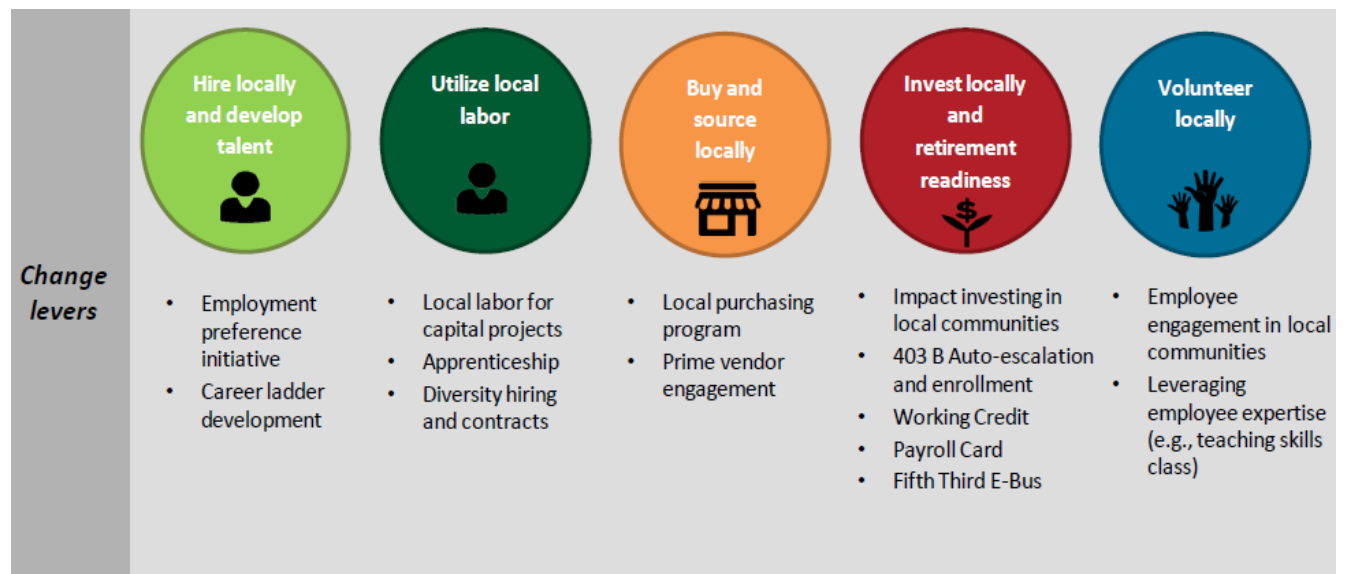
In 2016, several events happened concurrently. First, RUMC began to collect data on the health outcomes of residents in communities surrounding the hospital as part of its tri-annual Community Health Needs Assessment (CHNA). The data showed that these West Side communities were adversely affected by unemployment, lack of quality education, and poverty. Most surprising was the 16-year gap in life expectancy between Chicago's downtown area, which was 85, and West Garfield Park, which was 68.8. This became a catalyst to shift how



Launching and Expanding the Anchor Mission

By mid-2016, RUMC’s Board of Directors had changed the mission of the organization from “to be the best in patient care” to “to improve the health of the diverse communities it serves.” This shift included a more strategic focus on RUMC’s surrounding communities in addition to providing quality health care within the organization.

RUMC adopted an anchor mission strategy that included 5 components:



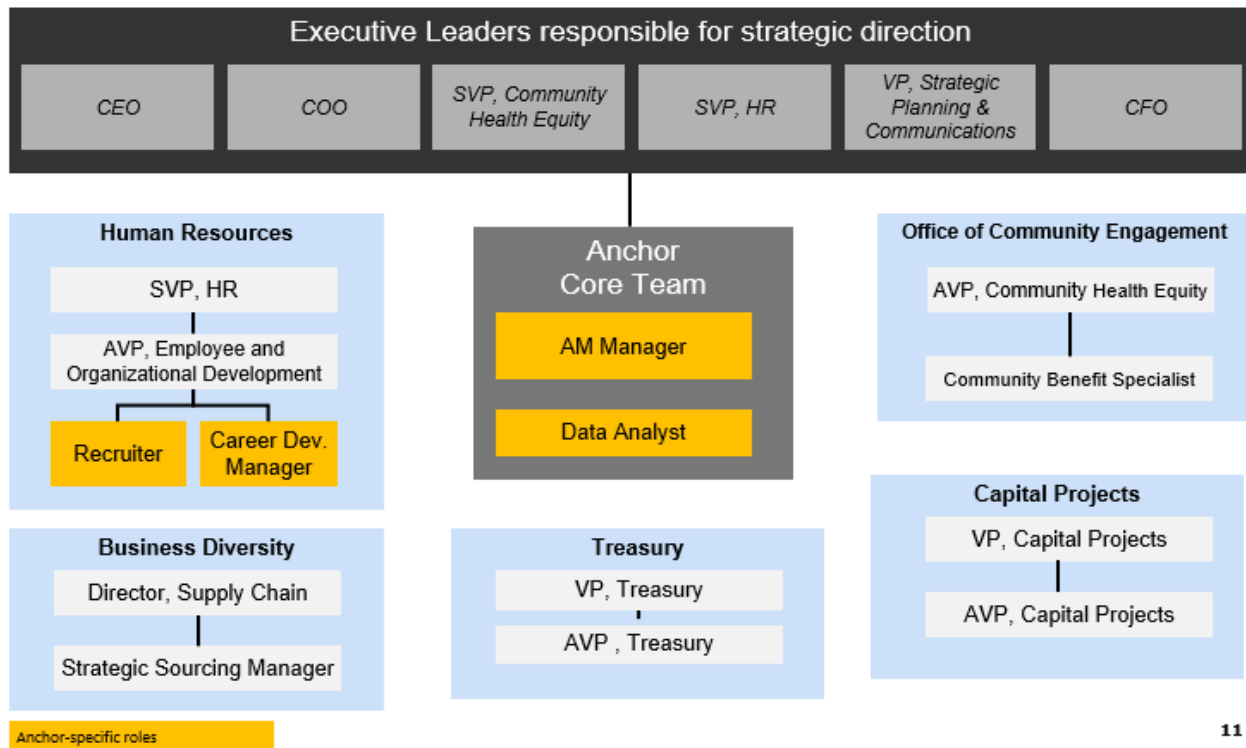
The anchor mission strategy provided an opportunity to engage the community in new ways to ensure that RUMC’s work was in line with the real world experiences of West Side residents. While RUMC had worked with community partners for decades, the idea of being more “community resident centered,” such that residents were involved in decision making, became a new approach. One way of broadening community engagement was to involve RUMC employees who were also residents of the West Side neighborhoods of focus. RUMC launched a West Side Resource Group to leverage ideas and talent from internal employees. This group helped raise awareness about hiring initiatives and also helped in RUMC’s inaugural social impact investing work. RUMC’s expanded community engagement approach also required the organization to

commit additional resources to support the work.

To implement the strategy, RUMC reorganized its structure, putting full-time staff in place to conduct community outreach and develop community partnerships in line with annual anchor mission goals.

As an example, RUMC’s human resources team deepened or built relationships with community partners for its local hiring strategy. [Skills for Chicagoland’s Future](#), and [The Cara Program](#) helped RUMC source candidates from West Side neighborhoods. RUMC had previously partnered with Skills for its human resources needs, but pivoted the relationship to focus on West Side applicants. Cara uses workforce development as a solution for people impacted by poverty. The organization helped RUMC find

Organizational structure



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talent that is often overlooked. Finally, Skills and One Million Degrees helped RUMC develop patient care technician and medical assistant career pathway programs and provided support to candidates such as coaching and professional development. These partnerships grew from connections with existing RUMC staff.

The human resources team also launched 16 community hubs in surrounding neighborhoods to connect residents directly with hiring opportunities. This work resulted in 400 hires from RUMC's West Side communities – or nearly 18 percent of its hiring for FY 20.

RUMC also launched the West Side Anchor Committee with 5 other hospitals. Three more have joined since 2017. Each institution has committed to the 5 anchor mission strategies. To date, the hospitals have invested \$7.6

million in community economic development projects, \$725,000 in small west side businesses, and hired a total of 1,825 people. Importantly, representatives from community-based organizations and West Side residents guided the decision making for each of these initiatives in partnership with the hospitals. The institutions invested economic resources and the community stakeholders invested lived experience and knowledge about the neighborhoods that would receive those investments.

Launching West Side United

As the anchor mission approach grew, RUMC and its partner hospitals sought to deepen their connections to the community even more. In 2017, this led to the development of West Side United (WSU), a collaborative that brings together hospitals, government, community

What We Heard

Coming Together to
Improve Health and Wellness
on the West Side

JULY 2017 UPDATE



residents, and other stakeholders to improve economic vitality, health, and well-being in 10 West Side neighborhoods. WSU's work builds off of RUMC's anchor mission strategy and spans 4 domains: economic vitality, health/healthcare, education, and neighborhood/physical environment.

WSU's mission, vision, and initiatives were developed in response to 2 community listening tours conducted in 2017 and 2018. The team hosted 46 listening sessions and engaged nearly 2,000 community stakeholders. WSU captured the results of these efforts in a "What We Heard Report." Community stakeholders confirmed that their top 4 priorities were: access to quality jobs, youth programs, education, and access to quality healthcare. WSU developed initiatives based on these priorities.

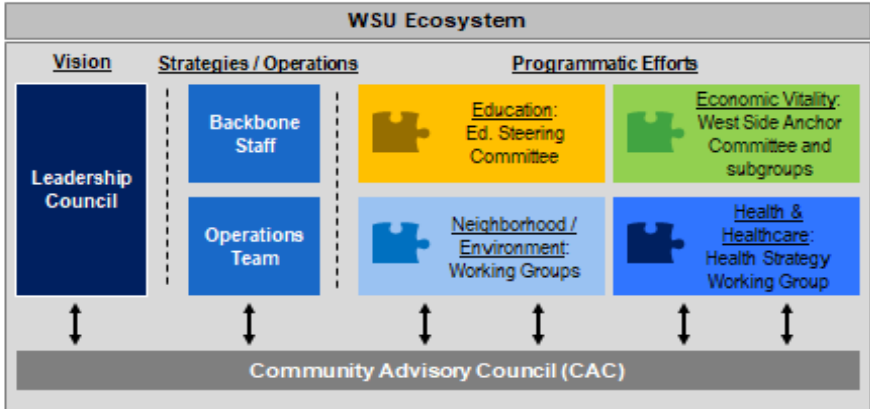
The listening tours helped WSU identify community stakeholders that wanted to partner with the collaborative more deeply. Conducting listening sessions twice played an important role in establishing WSU's credibility. WSU made a commitment to ongoing engagement,

not a one-time transactional exchange, and delivered on that promise.

Engaging community members as equal stakeholders and decision makers was also a foundational principle of the work. WSU created an 18-member Community Advisory Council (CAC) to co-lead the work. Sixty percent of the CAC members live on the West Side. The remaining members work in one of WSU's West Side neighborhoods. Members assist with strategy development and implementation across multiple initiatives. The CAC co-leads the work by participating at the work group level for each initiative. Six members of the CAC are on the Executive Leadership Council for WSU.

To date, and in addition to the economic investments listed above, WSU has provided \$500,000 in community grants, started a school-based community hub that provides healthcare, mental health supports, and other services to students and their families, and offered more than 500 paid summer internship opportunities to high school students.

The Community Advisory Council (CAC) will play an important role in the entire West Side United ecosystem



The 18-member CAC was selected in June and is composed of West Side residents and people who serve the West Side through non-profit, advocacy, and healthcare organizations. The CAC will serve as the communities voice and ensure that community feedback is integrated in each program and level of governance.

COVID 19 Response

At its core, RUMC’s anchor mission work is focused on eliminating health inequities. In March of 2020, a local news report showed that while African Americans are 30 percent of Chicago’s population, 70 percent of those who died from COVID 19 were African American. Like the life expectancy gap, this statistic mobilized RUMC, WSU, and their stakeholders.

In April 2020, RUMC and WSU joined Chicago Mayor Lori Lightfoot’s Racial Equity Rapid Response Team (RERRT) to provide guidance on the City’s response to COVID 19 in African American and Latinx communities. As part of its RERRT community efforts, WSU invested \$110,000 in 11 local food pantries; awarded \$110,000 in emergency grants to 11 small west side businesses, and partnered with the American Medical Association and the City of Chicago to disseminate more than 60,000 masks and gloves (personal protective equipment) to Chicago residents and essential workers. WSU has also coordinated the dissemination of nearly \$4 million in COVID 19

relief funds to community based organizations across Chicago. This work was an extension of existing WSU initiatives in economic vitality, food access, and support for non-profit organizations.

Learning from Challenges

There were challenges at each step in the development of the anchor mission, WSAC and WSU. The RUMC team learned that:

1. Not all anchor mission initiatives move forward at the same speed
2. Implementing anchor mission strategies requires organizational restructuring
3. Community partnerships are critical and take time to develop
4. Community residents and organizations don’t need saviors, they need partners
5. Setting goals/metrics and being accountable for meeting them is critical

The last 3 points are key. Often large institutions have innovative ideas for community programs based on their review of quantitative data. An example is the data gathered by RUMC as part of its CHNA process. However, the strength and ultimate impact of those programs must be grounded in the reality of the communities and people that organizations want to serve. For example, community stakeholders told RUMC and WSU “nothing about us without us,” which meant “don’t make plans for the community without engaging the community first.” They also told RUMC that organizations have often over-promised and

undelivered. They asked how WSU would be different. In response, RUMC and WSU have been intentional about building trust through ongoing engagement, shared decision making, and tangible investments in West Side neighborhoods through impact investing, workforce development, and community grants.

Finally, authentic engagement and partnerships are important to success. Accountability to organizational and community stakeholders is also key. An initiative is only as strong as its ability to show impact.

Levels of Engagement

Collaboration began with **consult** (through public meetings and focus groups), then moved along the spectrum to **involve, collaborate**, and then **colead/ shared governance** as community-anchor relationships developed and mutual investment deepened.

