

## COMMUNITY-BASED HEALTH SERVICES

**Theory of Change:** Expanding access to health resources in low-income communities enables residents to make informed decisions about appropriate care, reduce high-risk behaviors, and improve health outcomes.

**Program Goal:** To improve the health of low-income Chicago residents through increased access to community-based preventative and primary health care.

All proposals submitted to the Foundation should adhere to one of the following strategies:

### STRATEGY A

#### Health Promotion/Risk Reduction

**Target Population:** Low-income Chicago residents at risk of poor health outcomes.

**Components:** Uses a holistic approach to address the comprehensive health needs of participants, emphasizes prevention and early intervention, provides culturally sensitive, accessible, evidence-based information, offers referrals for follow-up screening, support and/or primary care, includes ongoing training and evaluation for presenters/staff.

#### Evaluation Criteria:

- Unduplicated number of individuals served and number of single-encounter education presentations
- Number of multi-session workshops presented/number of sessions per workshop
- Participant knowledge gain (about nature/consequences of risk behaviors, how to reduce risk behaviors) and attitude change (confidence about changing risk behaviors)
- Participant behavior change (decrease in risk behaviors)
- Percentage of individuals who subsequently access care
- Measurable health improvement

### STRATEGY B

#### Increased Access to Care

**Target Population:** Low-income Chicago residents who experience barriers to health care, including youth, immigrants, and individuals who are homeless, under-insured and/or differently-abled.

**Components:** Delivers comprehensive care (physical and mental health services), provides culturally sensitive, accessible, and confidential intake services and treatment, emphasizes prevention and early intervention, assesses and is responsive to community needs, engages in strong collaborations with local government and social service agencies to influence and change practices and/or systems, incorporates accountability mechanisms and performance improvement practices into administrative and clinical systems.

#### Evaluation Criteria:

- Unduplicated number served and total number of encounters
- Average length of time clients are served
- Percentage of clients who follow through with care after a medical problem has been detected
- Percentage of clients who develop a relationship with a primary care provider
- Decrease of emergency room usage
- Increase in healthy behavior and/or compliance with doctor's recommended care plan
- Measurable health improvement
- Number of community education presentations