2020
DE&I
Diversity, Equity & Inclusion Impact Report
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Doubling down on DIVERSITY, EQUITY & INCLUSION
The year 2020 will undoubtedly go down in our nation’s history as one of our most difficult years, exacerbated by the pain and suffering experienced by communities of color as our country battled two pandemics: COVID-19 and racism. As a health care leader, I recognize the opportunities Advocate Aurora Health has to make a difference in these areas from our vantage point as one of the top health systems in the country.

That’s why our organization continued to build upon our foundational diversity practices, doubling down on our efforts to build a diverse and inclusive environment and ensure equitable care. We’ve focused on – and will continue to focus on – taking tangible action to affect real change by:

- Prioritizing health equity to ensure all people have the opportunity to live well
- Working in our communities to eliminate race-based barriers to health care employment
- Denouncing discrimination and racism by identifying and dismantling structural barriers in our organization

This report details the work we undertook to advance those initiatives in 2020. From supporting minority and women-owned businesses through our supply chain purchasing efforts to addressing health inequities by mobilizing free flu shot clinics in under-resourced areas, we answered the call to keep our communities healthy during this challenging year when health care was top of mind for everyone. At the same time, we responded to our nation’s outcry for social justice reform by continuing our critical efforts to increase access to care in communities of color.

We recognize the need to evolve and grow as our world also continues to change. We must continue raising the bar to advance how we lead, who we are, who we will become and how we can meet the needs of the communities we are so very privileged to serve.
A year of LEARNING & ACTION
Looking back on 2020, it’s clear there were significant lessons to be learned. As we battled the dual pandemics of COVID-19 and racism, the common thread between these two issues is historically marginalized communities and people of color experience serious inequities that need to be addressed. The challenges of 2020 exposed the increasing need for outreach, education, services, technology and innovation to address health care challenges and barriers to improve outcomes across our communities.

Helping people live well is our purpose and delivering consistent, equitable outcomes for our patients, communities and team members is our priority. It’s our responsibility to close gaps in the inequities within our control. COVID-19 shined a bright light on the inequities facing our patients, communities and team members, and has challenged us to not only stay true to our purpose but to double down on our Diversity, Equity and Inclusion (DE&I) strategy and connect it to our purpose. To that end, our Advocate Aurora Health Board of Directors has created a DE&I Board Committee, which elevates and supports our strategy at the highest level of the organization and ensures accountability that the strategy is embedded throughout our system.

For 2020 and beyond, we will continue expanding our successful DE&I strategy while developing innovative, new programs to address social determinants of health and work to eliminate health inequities.
Diversity, Equity & Inclusion: 
OUR COMMITMENT IN ACTION
Advocate Aurora Health believes that a diverse workforce, in a thriving inclusive environment, delivers a higher level of equitable care, serving all patients across all communities. In this current climate, we must continue to evolve and grow as our world also continues to change. Now is the time to double down on our efforts. Our commitment is focused on three areas – our leaders and team members, patients and communities - to challenge us to raise the bar on how we lead, who we are and whom we serve.

Our leaders and team members
- Advance DE&I as a strategic organizational priority and enhance policies and processes
- Improve workforce diversity
- Increase engagement with team members of color
- Reduce turnover rate for team members of color
- Increase our representation of people of color in leadership

Our patients and communities
- Enhance safety, health outcomes and patient experience
- Improve patient-clinician communication and relationships
- Address health inequities across all communities
- Transform communities through strategic partnerships that support health and well-being
- Increase supplier diversity spend to support diverse and inclusive economic development in our communities

Opportunities presented by COVID-19
- Increased need for language services to meet increased demand for COVID-19 related health services, including testing tents and mobile units
- New technology demands for patient services and everyday operations
- Acknowledgement of racial tension by offering ways to effectively break down barriers
- With many community events cancelled, development of new ways of interacting and providing thought leadership
OUR 2020 RESPONSE

Researched

• Monitored real-time COVID-19 data to identify changing health care trends and inform our community focus

Listened

• Reached high impact communities through listening sessions, focus groups and community meetings to gain insights about COVID-19 challenges and needs
• Hosted and participated in online discussions with community leaders and influencers
• Held internal discussions with more than 1,000 team members about current events and racial tensions

Enhanced access

• Expanded on-site and remote translation and interpretation services to support research, health services and community outreach for patients who might avoid screening and testing for safety and privacy reasons
• Made changes to current systems and workflows to address unique LGBTQ health challenges

Garnered support

• Launched new COVID-19 initiatives and programs, prioritized by importance and urgency
• Expanded distribution of multi-language health education resources
• Increased focus on mental health challenges exacerbated by the COVID-19 shelter-in-place and stay-at-home orders and social distancing precautions
• Partnered with other organizations to provide extra support, education and free health care services for new parents and babies affected by the pandemic
Our focus on
TEAM MEMBERS
We’re focused on recruiting and retaining a diverse array of team members because we know we’re better when – by empowering diverse perspectives – we inspire creativity that leads to innovative solutions. We aim to cultivate an atmosphere of inclusion and compassion to create a welcoming and safe space for all our team members.

**SPOTLIGHT: REAL TALK CONVERSATIONS**

“We were comfortable with uncomfortable conversations.”

*Tiffany Strong-Salaam, Director, Learning & Development*

We offered our team members a new virtual platform to share how they were feeling about this year’s unprecedented world and local events. On top of a global pandemic, George Floyd’s murder and the subsequent protests had a significant personal impact on our team members’ mental well-being and psychological safety. Our team members needed a safe space to discuss, listen and share their feelings and personal experiences.

We developed a REAL Talk conversation series, creating a facilitator guide and compassionate conversations toolkit to support participants in these difficult conversations.

With more than 1,000 REAL Talk participants across our health care system, we were rewarded not only with appreciation for these sessions, but also an increased interest in DE&I and a new sense of personal responsibility to one another.
Advocate Workforce Initiative (AWI)

With funding by JPMorgan Chase & Co., we continue to develop a pipeline of diverse talent from the greater Chicagoland area by seeking out individuals who are interested in entry-to mid-skill level health care careers. With the pandemic escalating while our 2019 initiative was concluding, we were able to continue program training, leveraging financial resources for 80% of our partners who were transitioning to virtual training platforms.

Corporate internship program

For the last seven years, we’ve awarded competitive summer internships to a small group of students to support hard-to-fill corporate positions in our organization. To date we’ve hired interns from more than 40 colleges across the nation, partnering with local organizations that support underrepresented students.

Despite the pandemic and increased responsibilities on student and mentor participants, we placed eight interns with Advocate Aurora mentors. We provided meaningful projects during one of the most uncertain times in these students’ lives – some of whom had family who were sick or died from COVID-19. We conducted online meetings, created team building connections and provided support by text and email during and beyond the internship.

“I absolutely loved interning with Advocate Aurora and am so proud and blessed to be a permanent member of the Advocate Aurora team! It truly is an amazing organization.”

*Julie Aspera, 2020 Intern, now part of the Advocate Aurora’s Health Information and Technology team*
Workplace transition policy and practice

In the fall of 2020, we created guidelines to support our transgender, non-binary and gender diverse team members who may be socially, legally or medically transitioning during their employment with Advocate Aurora. Our Human Resources and legal teams, as well as transgender team members, worked to adapt Human Rights Campaign policies specifically for Advocate Aurora and produce guidance sheets for transitioning team members, managers and Human Resources representatives.

Team member development: LGBTQ cultural awareness

Based on feedback we received from team members participating in the Healthcare Equality Index (HEI) accreditation process, we’re expanding our LGBTQ cultural awareness initiative and exploring easily accessible and trackable LGBTQ learning opportunities for our team members.

We’ve developed a personal pronoun information sheet to help team members increase their skills and comfort level using various pronouns to introduce themselves and ask others for their pronoun preference. Team members are now better equipped to ask patients sexual orientation and gender identity questions and use these answers to provide individualized patient care. This helps clinicians make more accurate and well-informed health decisions for patients. It also enhances reporting of health outcomes and inequities for this patient population.
Earn-while-you-learn corporate apprenticeship program

We partnered with the Wisconsin Department of Workforce Development and the Wisconsin Technical College System to offer job seekers the opportunity to earn while they learn and expand their skills for middle-skill positions. Through the apprenticeship program, Advocate Aurora pays an hourly wage for our apprentices to attend the related classroom instruction portion of the apprenticeship. This allows apprentices to receive an income while working toward an industry certification. Apprenticeship allows access for individuals who might not have been previously considered for these roles due to lack of experience and proper certification. Through apprenticeship, we’ve been able to integrate diverse pipelines of talent for these roles. Eight apprentices have already started or are in the process of starting in the program.
Inclusion council and core teams

The Advocate Aurora Health Inclusion Council is a newly launched, differentiated model for integrating DE&I into our health system with the support and passion of our team members. This model addresses the challenge of locally executing our system DE&I strategy by deploying 11 inclusion council core teams dedicated to leading DE&I action plans for our patient service areas, corporate functions and select ancillary services. Through this work, we’re harnessing the collective strength of more than 150 team members who are trained in our DE&I strategy and key principles and behaviors, such as valuing differences and exhibiting courage. The teams are tasked with locally implementing DE&I efforts that will strengthen our culture of inclusion by improving team member engagement. The system inclusion council reports to our President and CEO Jim Skogsbergh and has involvement from our executive leadership team, patient service area presidents, hospital presidents and other executive leaders.

“We're excited to continue our DE&I efforts in our Patient Service Area and even more excited to see the collaboration and support from the system. This new approach brings us all together and aligns our work. Together we’re stronger and will have more meaningful impact at our workplace and in the community we serve.”

Paola Velasquez, Manager, Patient Relations, Guest Services & Switchboard Operators
Advocate Sherman Hospital
NAVIGATE career development program

We created the NAVIGATE career development program to address key obstacles many U.S. frontline workers face - a lack of training and opportunities to advance into higher paying jobs. NAVIGATE provides these marginalized workers with:

- Essential skills workshops
- Career coaching and mentoring
- Resume development tips and interview preparations tools

Since starting in the Chicagoland area in 2017, NAVIGATE has expanded to other parts of Illinois and Greater Milwaukee. It’s now available at eight Advocate Aurora sites with a goal to expand to our remaining 18 sites by 2024.

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<th>Total team members in the program</th>
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<tr>
<td>Percentage</td>
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<tr>
<td>Wisconsin</td>
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<td>Wisconsin participants promoted since Q1 2020</td>
</tr>
<tr>
<td>Advocate Aurora site</td>
<td>8</td>
<td>Advocate Aurora sites with the program</td>
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Our focus on
COMMUNITY

BLACK Lives MATTER
White Coats for Black Lives
As one of the top health systems in the country, we have an opportunity to be a leader for diversity, equity and inclusion – and it starts in our own communities. Through partnership and collaboration, we help our communities thrive from within.

**Racial Equity Rapid Response Team**

We’ve signed onto Chicago Mayor Lori Lightfoot’s Racial Equity Rapid Response initiative, which is a data-driven and community-based mitigation of COVID-19 illness and death in African American and Hispanic communities. This initiative is a collaborative partnership involving other like-minded health systems and community partners that have a desire to incite real change to achieve racial justice and end health disparities.

Advocate Aurora also serves as a member of the Healthcare Anchor Network, alongside UChicago Medicine, Rush University Medical Center and Sinai Health System. Through this work, we’ve joined over 80 health care and social service organizations by releasing a joint statement to declare racism as a public health issue.

**Southwest Comprehensive Strategic Partnership Group**

Led by Vernard Alsberry, Mayor of Hazel Crest, IL, this collaborative provides long-term solutions for issues impacting the health and vitality of the Southland region beyond the COVID-19 pandemic. Its 40 partners, including the South Suburban Mayors and Managers Association, focus on business and commerce, health care and community engagement. Over $2 million has been raised, personal protective equipment (PPE) and emergency food was distributed, and community COVID-19 testing was provided. Advocate Aurora provided micro-mobile COVID-19 testing and offers flu shots in this area.

**Chicago’s South Side Healthcare Transformation**

A collaboration between Advocate Trinity Hospital, UChicago Medicine and St. Bernard Hospital, South Side Healthcare Transformation has engaged federally qualified health centers, faith leaders, community organizations, elected officials and residents to collaborate on a new health transformation plan for Chicago’s South Side. Rooted in health equity, the goal is a community-driven process that connects existing health care organizations to maximize their current assets, increase quality of care and address social determinants of health. To date, more than 500 stakeholders have engaged through multiple virtual listening sessions, an online survey and a web-based response form.
Living Well Community Conversations

To keep our communities informed about the COVID-19 pandemic, we started monthly *Living Well Community Conversations*. To launch this virtual community conversation series, we reached out to community members, faith leaders and businesses for their expertise and insight about COVID-19 related topics such as testing, mental health, flu immunizations and preparing for reopening. To date, we’ve conducted 11 virtual sessions in dual languages with an average viewership of more than 150 people. New video content is distributed monthly to more than 300 community partners in Illinois and Wisconsin, allowing viewers to tune in to live and recorded events on Advocate Aurora’s YouTube and Facebook channels.

**Community conversations in dual languages**

- Advocate Aurora virtual Living Well Community Conversation in Spanish with Erika Colón, Dr. Sofia Padilla and Dr. Federico Sanchez
- Roundtable discussions with Hispanic faith leaders in Illinois and Wisconsin, bringing faith leaders together to help us identify ways to partner to address health needs and the impact of COVID-19 in their communities

**Building COVID-19 preparedness for diverse business owners and faith leaders**

In 2020, we launched a three-part virtual series to provide diverse businesses and faith organizations with guidance and resources on safely reopening during the pandemic. We developed a prevention plan and hosted virtual conversations for businesses who were looking to reduce the spread of COVID-19 among employees, patrons and the community. Leveraging our partnerships, we touched more than 500 businesses, 25 ZIP codes and 75 faith-based organizations. Similarly, our educational resources and COVID-19 prevention kits impacted more than 150 families.

“Thank you for providing resources for our most pressing needs. The kits, educational resources and sessions with industry leaders for cleaning and sanitation, legal liability and socially distancing inside were extremely valuable.”

*Rev. Marilyn Miller, Pastor of Reformation Lutheran Church*
Healthcare Anchor Network

In 2017, Advocate Aurora was one of the founding members of the Healthcare Anchor Network (HAN), a national consortium of health systems dedicated to driving inclusive anchor strategies to positively impact the social and economic determinants of health. Last year, Advocate Aurora was among a small group of health systems nationally announcing the HAN Community Investment Commitment, setting a goal to deploy $50 million by 2025 to provide access to capital for critical needs like affordable housing, small business development and food centers in low income neighborhoods. Investment development is on target, with multiple community development financial institution (CDFI) partnerships established to begin deployment in 2021. In addition, we’re again leading the way as one of five leading health systems participating in a new HAN initiative called the Impact Purchasing Commitment, which proposes to spend one billion dollars annually with minority and women-owned businesses by 2025. As part of HAN, we are identifying and committing to specific goals for local impact hiring from underserved communities and spending with local minority and women-owned businesses – with a focus on sustainable projects.

“By our very nature, health systems are anchor institutions in the neighborhoods we serve. By implementing socially responsible hiring, training, purchasing and investment strategies, health care can help lesson economic, racial and environmental inequities.”

Mark Huber, VP, Community Health

Chicago Housing Authority health & wellness program

This is the fourth year of our continued partnership with Chicago Housing Authority (CHA). Our objective is to educate senior resident leaders of the CHA Northside Providers Council on how to navigate and assist other residents with resources available through Advocate Illinois Masonic Medical Center. Eleven of 20 senior resident building presidents – each representing an average of 200 senior citizens in their building – took part in the program.
“Our efforts provide awareness, health and wellness education for a group that is often vulnerable. CHA residents represent a diverse group that Advocate Illinois Masonic’s comprehensive services can help meet their greatest need – a home where they can feel safe during these unprecedented times.”

Sandra Arellano, Coordinator, Community Network Development

GROWTH IN BUSINESS DIVERSITY SPEND

Despite the challenges of the COVID-19 pandemic, Advocate Aurora focused on strengthening our commitment to support nationally certified enterprises owned by persons of color, women, LGBTQ-identified individuals and veterans. We set our business diversity spend goal to 6% and aim to reach a goal of 6.6% in 2021.

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<td>Planning, design, construction</td>
<td>$36,059,843</td>
<td>$59,788,675</td>
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<td>Supply chain</td>
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<td>$97,759,899</td>
<td>$106,425,851</td>
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<td>Total business diversity spend</td>
<td>$127,035,459</td>
<td>$157,548,574</td>
<td>$197,056,359</td>
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<td>Percentage of total AAH spending</td>
<td>4.1%</td>
<td>5.4%</td>
<td>6.4%</td>
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In Wisconsin, Advocate Aurora spearheaded an effort with multiple health care organizations to establish a Racial and Health Equity Advisory Council within the Milwaukee Health Care Partnership. Within this advisory council we have built an interorganizational anti-racism and health equity collaboration that is committed to being part of the solution to racism and injustice, both within our organizations and in partnership with local community groups. We’re committed to advancing diversity, equity and inclusion to improve access to care, eliminate biases and address systemic drivers that contribute to poor health outcomes. Through this partnership we share a common purpose in enhancing representation at all levels of governance, creating workplace environments that cultivate belonging and reducing unjust inequities within the communities we serve.

Health Equity Council community-based flu clinics

To keep our communities healthy, we must address gaps in the number of people receiving flu immunizations. From our research, we found a flu immunization gap of 25% in people of color in high impact ZIP codes who received the flu vaccine compared to non-people of color. To address this significant gap, we went into the community to provide free flu vaccines for our most vulnerable populations. Our data also demonstrated communities with the greatest gaps in flu immunization are among those most severely affected by COVID-19. This makes flu immunizations a viable mitigation strategy to reduce the risk of flu and flu-related hospitalizations while improving the health of the communities already battling COVID-19.

“People are afraid to leave their homes. They’ve lost loved ones to COVID-19 and are severely affected, personally and financially, by the pandemic. By offering flu vaccines to anyone who presents, we’ve reduced the risk of illness and hospitalization.”

Dru Bhattacharya, VP, Diversity, Equity & Inclusion
## 2020 FLU CLINIC IMPACT

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<tr>
<th>Number</th>
<th>Description</th>
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<tr>
<td>55</td>
<td>Flu clinics in underserved communities</td>
</tr>
<tr>
<td>15</td>
<td>Unique community-based partners</td>
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<tr>
<td>8,000</td>
<td>Flu vaccines administered through October 2020</td>
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<td>14x</td>
<td>Increase in Advocate Aurora COVID-19 Virtual Care Program enrollments in Illinois, which was promoted on site via Chicago flu clinics</td>
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<td>9</td>
<td>Media articles and TV news broadcast</td>
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### COVID-19 consultations and kits

To further mitigate and address COVID-19 among African Americans and Hispanics in Milwaukee and Chicago, we launched the COVID-19 Kit and Call initiative. COVID-19 kits were assembled and distributed upon discharge to all COVID-19 patients and patients under observation within data-identified high impact ZIP codes. About 10,000 kits were assembled and more than 4,000 have been given out. To address Milwaukee’s COVID-19 uptick within the 53204 and 53215 ZIP codes, we formed a partnership with the area’s Carmen South High School. During Carmen’s student orientation, we offered virtual consultations with Advocate Aurora physicians and distributed more than 400 COVID-19 kits including educational materials in English and Spanish, masks, hand sanitizer and other supplies.
LGBTQ COMMUNITY SUPPORT AND OUTREACH

Demonstrating PRIDE: With Illinois and Wisconsin fests and parades canceled this year because of COVID-19, we found new ways to show pride and support for our LGBTQ communities during Pride Month. From wearing rainbow masks to showcasing our hospitals’ health care equality index accreditations, we demonstrated that pride belongs everywhere, not just at parades.

Cream City Foundation’s 12th Annual Business Equality Luncheon: In October, we sponsored and served as the keynote speakers for this virtual event. Erickajoy Daniels, our Senior VP and Chief Diversity, Equity & Inclusion Officer, and Dr. Michael Otte, an Advocate Aurora physician, spoke about Advocate Aurora’s LGBTQ journey and continued commitment to the LGBTQ communities we serve.

Salvation Army Emergency Lodge community support

The Salvation Army Emergency Lodge experienced serious challenges providing language access for individuals with limited English proficiency – especially for non-scheduled emergency visits requiring on-demand interpreters. As a partner, we provided phone equipment and access to our internal interpreters and telephonic partners to deliver prompt language access. Since the beginning of the year, we’ve provided interpreters for 37 successful patient appointments, totaling more than 1,150 minutes.
Diversity investment program

As part of our advocacy efforts, we continue to break down barriers in the historically non-inclusive finance industry by:

Identifying, reviewing and working with diverse money managers and banking and investment firms to recruit diverse talent and strengthen their DE&I efforts

Speaking as DE&I experts at financial e-conferences throughout the year

Having 13 diverse vendors in our investment and banking pool to date. These vendors are expected to use and promote diverse talent.

NBA All-Star Weekend Brunch

As a corporate partner for the Chicago Bulls, Advocate Aurora leveraged the NBA All-Star Game in Chicago to build new partnerships and connections with local and national buyers and diverse suppliers. In highlighting our supplier diversity initiatives in Chicago, the NBA’s own supplier diversity effort made them a perfect partner. The Advocate Aurora Health NBA All-Star Weekend Brunch, hosted by our Board of Directors Chairman John Daniels and President and CEO Jim Skogsbergh, included appearances by former NBA players Horace Grant and Wayne Embry. It was attended by more than 100 community and supplier diversity leaders including Aon, Blue Cross Blue Shield, Manpower and others.

Renewed commitment to Near West Side Partners

In 2020, Advocate Aurora renewed its commitment to serving as an anchor institution for the Near West Side Partners, a non-profit neighborhood collaborative with the mission to revitalize Milwaukee’s near west side as a thriving business and residential corridor. By renewing our commitment, we pledged $500,000 alongside other anchor institutions including Harley-Davidson, Marquette University, MolsonCoors and Potawatomi Business Development Corporation. Through our support, the non-profit has launched several efforts to promote economic development and boost greater safety for residents and businesses in the community.
Community health care coordination

Advocate Aurora is committed to addressing health inequity while focusing on quality of care, safety and reducing the cost of care. Uninsured and Medicaid patients often present at our hospital emergency departments for low acuity health needs due to lack of access to care. Many experience multiple complex health and social needs that serve as barriers to their ability to live well and manage their chronic health conditions. Advocate Aurora has implemented three unique models to address the social and medical care needs of low-income patients in need of medical home and specialty care follow-up. A cross-functional team is constructing a hybrid model from those pilots, developing recommendations to advance the best practices learned.

**Primary Care Connection program**

The Primary Care Connection (PCC) program at Advocate Christ Medical Center, Advocate Condell Medical Center, Advocate Sherman Hospital and Advocate Trinity Hospital, deploys Community Health Workers (CHWs) as community resource navigators to serve patients in the emergency department (ED). The program reduces unnecessary ED visits by connecting patients to a primary care home. CHWs educate patients about accessing the appropriate level of care and providing follow-up appointments to a convenient care site for patients during the ED visit. CHWs also conduct a community health assessment to identify social determinants of health and link the patients to social services and community resources that improve patients’ overall well-being. From January to September 2020, the program served more than 4,400 patients at an estimated cost avoidance of nearly $465,000, with a less than 3% 90-day readmission rate among all patients.

**Transition Support Program**

In 2020, we provided care coordination and assistance for 4,200 patients through our Transition Support Program (TSP). TSP helps patients navigate health care and social determinants by addressing the needs of our growing uninsured population and patients experiencing significant economic hardship because of the pandemic. Many of our patients have low health and tech literacy and cannot navigate telehealth independently. The TSP successfully reduces readmissions by improving post-discharge appointment scheduling, compliance and patient satisfaction.
NowPow

Advocate Aurora is contracted with NowPow, a women-owned and led technology company that provides a multi-sided referral platform including a local community resource directory, social determinants of health (SDOH) screenings, resource matching algorithms and the ability to track referrals. Advocate Aurora uses the program to provide important SDOH resource referrals to our patients. During the pandemic, Advocate Aurora leveraged NowPow to provide team members access to the platform so they can identify resources to meet their needs. A pilot in south Chicagoland showed 25% of patients screened through NowPow demonstrated a need for SDOH support. Food security and affordable housing were the top two needs identified.

COVID-19 community testing

To combat the spread of COVID-19 in our most vulnerable communities of color, Advocate Aurora was an active provider of micro-mobile COVID-19 testing in high impact areas such as Chicago’s South Side, providing more than 1,500 individuals with free tests. Drive-through testing at Condell and Imani Village provided an additional 5,000 tests in Illinois. In Wisconsin, we partnered with the Division of Health to obtain donated test kits and lab work valued at more than $6.8 million. Twelve drive-through testing sites were established across the state to deploy those kits. In total, we provided more than 68,000 community COVID-19 tests through drive-through and mobile test sites across our health care system.
Because health care is built upon relationships, it’s important for the people we serve to be able to trust us to meet their unique needs. And better understanding our patients’ needs allows us to create an environment where our patients can heal – ultimately improving health outcomes.

LGBTQ Healthcare Equality Index designation

The Human Rights Campaign’s Healthcare Equality Index (HEI) is the national benchmarking tool that evaluates health care facilities’ policies and practices related to equity and inclusion for LGBTQ patients. To demonstrate our commitment to inclusive health care, all our hospitals underwent the HEI accreditation process and all 26 hospitals were designated LGBTQ healthcare equality leaders – with a perfect HEI score of 100.

**THIS MEANS WE:**

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<tr>
<td>1.</td>
<td>Ensure foundational protections for patients, visitors and staff in patient and staff policies through cultural competency training</td>
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<td>2.</td>
<td>Demonstrate progress toward inclusive LGBTQ patient care and support</td>
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<td>3.</td>
<td>Cultivate an inclusive workforce by providing LGBTQ employee support and benefits</td>
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<td>4.</td>
<td>Demonstrate public commitment to the LGBTQ community</td>
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We’re building on our 2020 HEI successes by directly licensing HEI training for use on our own internal learning management system. This helps us prepare for future accreditation and gives our team members opportunities to continue their LGBTQ health equity and inclusive care education.
Increased collection of sexual orientation and gender identity data

This year, we trained more than 7,000 team members on our new electronic health record system Epic and increased capacity to collect important personal data related to patients’ sexual orientation and gender identity (SOGI), preferred pronouns, organ donation preferences and relationship status. All Advocate Aurora teams are trained to help them understand the importance and value of consistently collecting SOGI and inclusive sexual health data from all patients. This helps clinicians make more accurate and well-informed health decisions for patients, while enhancing reporting of health outcomes and disparities.

“Our work in this area is especially important this year as we saw certain rollbacks of federal health care protections for the LGBTQ community. By showing our commitment to them, our LGBTQ patients can be sure they will continue to receive the same standard of care because our purpose is to help people - ALL people - live well.”

Mallory Krumrei, DE&I Clinical Operations

LGBTQ clinical care

This year, we enhanced our clinical capacity to treat and care for patients with HIV. This resulted in:

- A new clinical screening workflow specific to referrals between primary care, infectious disease and gastroenterology
- Adding anal Pap smear to our available LGBTQ clinical services
- Designing new clinical training for LGBTQ specialized providers
- Adding a new “Service to HIV Clinic” function to our electronic health record system
In addition, Advocate Illinois Masonic Medical Center implemented a new pilot policy for the emergency department (ED) using an opt-out rather than opt-in approach to HIV screening as recommended by the CDC to reduce the stigma of HIV testing. Under this approach, ED patients are informed they’ll undergo an HIV test as part of ED policy and consent is implied unless the patient specifically declines or opts out of the test.

**THE RATIONALE BEHIND THESE GUIDELINES IS TWOFOLD:**

1. The non-targeted approach lessens stigma and statistical discrimination associated with targeted testing.

2. Its psychological framing of the choice (opting out versus opting in) promotes increased test acceptance.
TEAM MEMBER SPOTLIGHT: Joelle Espinosa

As Advocate Aurora’s Civil Rights Director with a passion for accessibility and a background in education, restorative justice and conflict resolution, Joelle Espinosa is integral in our pursuit of total health equity.

Early in the pandemic, the media brought attention to people disproportionately affected by the virus – particularly Black and Hispanic communities – highlighting the same issues she works on every day. “I was happy to see that the media was taking notice and this issue was finally getting the attention it deserved,” Joelle said.

Joelle began partnering with organizations to put communities at ease about testing and teamed up with the Brand, Consumer Experience and Public Affairs team to quickly launch Advocate Aurora’s COVID-19-specific website. Joelle recommended translating the website and our COVID-19 symptom tracker into Spanish since Hispanics are the population with the highest number of individuals with limited English proficiency.

During this period, another ongoing issue came to a head – a lot of patients were on halal, kosher or other special diets and needed menu options that followed those dietary preferences. With COVID-19 protocols in place, Joelle helped our system navigate this challenge by partnering with Food & Nutrition Services to develop a kosher and halal menu that was translated into multiple languages and is now available across all Advocate Aurora facilities.

Joelle contributed significant restorative justice insights and tools to help develop our REAL Talk Conversation sessions in response to the deaths of George Floyd and Breonna Taylor and other African Americans across the country this year.

What really stands out to Joelle about the DE&I team’s accomplishments is: “Our ability to evolve and grow so quickly, and create an impact. Change never comes rapidly, but we’ve been able to affect access and shift the culture in how we treat patients. We do this work because we believe in it.”

“So much about racial inequality has been brought to the forefront this year. George Floyd’s killing was traumatic for so many of our team members. It became a point of contention within some teams, departments and locations because it became such a politicized, polarizing topic.” Joelle Espinosa, Civil Rights Director
New language services strategies

Despite the challenges of the pandemic, we proactively deployed strategies to help provide uninterrupted access to language services for patients and their families.

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<tr>
<th>We expanded our video interpretation capabilities by deploying more than 500 new iPads, bringing our total to 1,400. Phones, iPads and computers helped connect our patients in nearly 850,000 interactions across 98 languages in 2020.</th>
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<td>As the use of telehealth increased, we seamlessly integrated interpreters into the telehealth platforms to continue communicating with patients in their preferred language, resulting in nearly 2,000 telehealth visits with an interpreter.</td>
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<td>We ensured vital COVID-19 information was provided in languages other than English to help mitigate the spread in at-risk communities of color. In total, 32% translated documents included COVID-19 related content. In a similar vein, our main webpages were upgraded to include Spanish translations with plans to incorporate other key languages.</td>
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<td>We added a new multi-language online COVID-19 symptom tracker tool for populations with limited-English proficiency, directing them to appropriate health care resources.</td>
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<td>We provided onsite interpreters, equipment and software for COVID-19 testing trailers, screening tents, mobile units and entrance screening tables throughout Illinois and Wisconsin.</td>
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“Our commitment to making sure our patients are able to receive their health information in their native language speaks volumes about our commitment to the community. Providing access to health care through communication is a key component to health equity and healthy living – which everyone deserves.”

*Emmanuel Chepkwony, System Director, Cultural & Linguistic Services*
Onsite interpreters at community health care events included:

- A diabetes outreach event for English class students at the Elgin (IL) YWCA
- Employee health screenings at Lakeside Foods in Manitowoc, WI
- An Aurora Sheboygan Memorial Medical Center tour for more than 35 adult English as Second Language students (Spanish, Burmese and Rohingya)
- Palermo Pizza employee COVID-19 testing in Milwaukee (Spanish and Rohingya)

## INTERPRETING IMPACT

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<tr>
<td>518</td>
<td>Upgraded video devices in Illinois</td>
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<tr>
<td>1,449</td>
<td>Total video devices</td>
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<tr>
<td>189,547</td>
<td>Calls using Video Remote Interpreting (61% handled by Advocate Aurora team members)</td>
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<tr>
<td>522,754</td>
<td>Over the Phone Interpreting calls</td>
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<tr>
<td>1,921</td>
<td>Telehealth visits with interpreting services</td>
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COVID-19 hotspot analysis and reporting

In direct response to the pandemic, we developed an online DE&I dashboard with analysis of data from 26 hospitals across races, ethnicity, age groups, health conditions and ZIP code groups. Our objective was to identify trends and anticipate health care needs across our entire system based on testing, positive diagnoses and deaths. Using Advocate Aurora data and trend identification, we:

- Deployed 10,000 COVID-19 relief kits to discharged patients that included masks, educational materials, healthy recipes and seasoning packets
- Reported weekly data trends to community advocacy groups to support messaging, outreach and mask deployment in at-risk communities
- Served as panelists for community webinars, discussing how data informs our COVID-19 strategy
- Located COVID-19 testing sites in high-risk areas and provided outreach and education activities in those communities
A CONVERSATION ABOUT 2020
with Erickajoy Daniels

As our Chief Diversity, Equity and Inclusion Officer, Erickajoy Daniels is responsible for driving the execution and operations of our DE&I strategy across Advocate Aurora. Within DE&I, she oversees language services, civil rights and business diversity spend. We asked for her insights about the biggest DE&I challenges, lessons and victories this year.

What do you think was the biggest DE&I takeaway from the events of 2020?

What has really struck me is this year was like a dual pandemic with the spread of COVID-19 and racial protests around the country. The tension mounting on the streets was pouring into our walls and inside our organization. As a health care organization, we had to ask: What was our responsibility for that? What should we do to address it?

So how did you address it?

We approached it in three ways:

1. **We had to be vulnerable** enough to honestly acknowledge as a health system that strives to provide a healthy, healing environment, the external fear and racial tension was disrupting healing – not just in our communities, but for our own team members. We needed to help our teams process the confusion, pain and anger they were feeling to encourage healing. We did this by offering REAL Talks, facilitated sessions created to have uncomfortable conversations about race in a safe environment. We also doubled down on our commitment to a safe, diverse and inclusive environment by creating an actionable 2021 plan from what we learned in our REAL Talks and from our communities this year.
We had to be connected enough to our communities to understand how to help them. Our purpose is to help people live well. For us, living well was disrupted by a whole lot of things going on this year. We’d create tools and messaging and education plans for the community, and we’d think they were great. But the community response was, “That’s not relevant for us right now. Don’t just tell me to go home and throw my things in the washing machine. What if my washing machine is down the street at a laundromat – which I’m now quarantined from? I need guidance that is relevant for me.” We had to reach out to people in their own environments, in their own languages, to find out what they needed and how to successfully deliver.

We had to be agile enough to continuously assess, shift and ask what is our best course of action right now? As a health care system, we knew it wasn’t just about giving people COVID-19 tests and saving lives. We had to act in real time, responding to what was immediately in front of us, but not lose sight of our longer-term strategies to impact change in the future. I praise the work of our language services teams who had to be redeployed remotely but managed to leverage technology to ensure there was no disruption in our ability to offer interpretation services for our patients and their families. Even so, when there were emergent outbreaks, particularly among diverse communities, interpreters were deployed on-site to assist. Whenever and wherever language assistance services were needed, the teams were notified and timely deployed culturally relevant and linguistically appropriate educational materials.

Did we have the impact you’d hoped?

My hope is that what we delivered this year really improved the lives of our patients, our teams and our communities. Every day people needed to know: “Should I wear a mask or not wear a mask? Am I washing my hands and clothes enough? When I bring groceries home, do I need to spray them down?” That kind of confusion is something we wanted to mitigate. We supported mobile units, patients and teams by providing medical supplies, public service materials, language services and technology. We focused on delivering trusted, practical support to people where and when they needed it. By doing these things, I hope we demonstrated we always question why people aren’t able to live well and how we can change that in our patient care and our workplace.