

# TRILOGY

BEHAVIORAL HEALTHCARE

ANNUAL REPORT

2018



[www.trilogyinc.org](http://www.trilogyinc.org)

# MISSION

**Trilogy's mission is to support people in their recovery from mental illness by helping them discover and reclaim their capabilities, life direction, and well-being.**

## Values

### Hope

Hope is the intentional practice of believing that growth, change and progress is possible. We inspire hope in our clients, each other, our organization, and the external systems we work within, and foster a positive outlook on the endless possibilities of our collective futures.

### Excellence

All employees at Trilogy are driven to do their very best in the service of our mission. We build upon each other's strengths, push each other to achieve our individual and organizational goals, and aspire to be better tomorrow than we were today.

### Adaptability

As an organization, Trilogy is flexible, creative, innovative, and open-minded to change. We strive to proactively anticipate the needs of our clients, our organization, and the communities we support in order to build service models and systems that best address those needs.

### Respect

At the core of respect is a willingness to listen and learn from one another to broaden our understanding of the world. We cultivate a safe environment that acknowledges the inherent dignity of each

individual, celebrates diversity and inclusivity, and encourages people to openly share their points of view.

### Teamwork

At Trilogy, we know we can achieve greater things working together. We cultivate a positive working environment built upon a foundation of mutual support and trust, collaboration, interdependence, accountability, open communication, and appreciation of each individual's contribution to the team.

### Compassion

We genuinely care about the well-being and happiness of one another, our clients, and our community. We demonstrate compassion by practicing mindfulness and self-care, listening with an empathetic and non-judgmental ear, validating each other's experiences, embracing humility, and learning from each other.



H.E.A.R.T & COMPASSION

## Vision

Trilogy's vision is to be the recognized leader in behavioral healthcare and the standard by which other providers measure their progress and success: an organization where each employee has a personal devotion to excellence in service and embraces the highest standards of ethics and integrity, where each person served takes pride in knowing that our organization provides the finest recovery-focused approaches available, and where all those who provide our funding sources and support are confident that they are getting the best possible return in services for each dollar invested in our organization.

## FROM THE CHAIR OF THE BOARD OF DIRECTORS



I am proud to report that 2018 was a very productive and successful year and look forward to all the good work we will provide moving forward.



Stephen M. Fatum, Chair, (left) and  
John Mayes, President & CEO (right)

This Annual Report covers the last full fiscal year led by John Mayes, President and CEO, before his retirement on December 31, 2018. In reviewing his 13-year tenure, I am struck first and foremost by how fast and large the organization has grown. When the Board hired John, we served 300 to 400 locally-based residents on the Northeast side of the city with a budget of \$4 million. And while we never doubted the quality of our services, our facilities were inadequate, our infrastructure was lacking, and our ability to reach Chicago's most vulnerable citizens was extremely limited. Looking back on John's tenure, we decided to focus on three of his major accomplishments for this report: our Supported Employment Program; our continued work with Heartland Health Centers and other providers to offer clients holistic Integrated Healthcare; and our geographical expansion from Rogers Park and Edgewater to vulnerable communities throughout Chicago where mental health services are badly needed, but scarce.

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## FROM THE PRESIDENT & CEO

It has been an absolute privilege to be part of this organization for the past 13 years. I've built important and long-lasting relationships with clients, staff, colleagues, and other stakeholders within TrilogY and the mental health field.

We are a recovery-based organization, and it is almost impossible to imagine recovery when you have no job. Employment provides us a sense of purpose and identity. It, in large part, defines who we are and how the world sees us. One of the first questions we are asked upon meeting someone new is "what do you do for a living?" The specifics of that job, whether it be an accountant or a grocery clerk, are less important than the confidence

we gain as individuals when we have responsibilities and a reason to get up each morning.

Before coming to TrilogY, I was at Thresholds where I worked with underserved communities on the West and South sides of Chicago. These were areas with no local clinics or easy or affordable access to behavioral healthcare of any kind. Upon arriving here, I realized that many of our clients were traveling long distances to get the help they needed in Rogers Park. This made no sense, so we began programs to bring staff and clinicians to clients where they live. And, we set up off-site locations to provide easier access to these clients.

While today Integrated Care – treating an individual's medical and mental health needs together – is regarded as common best practice, at the time we established a clinic in our facility it was considered groundbreaking. Nationwide, only a few mental health organizations had on-site primary care.

I am grateful to the Board and my employees who believed in and shared my vision. While retiring is bittersweet, I know I am leaving TrilogY in a strong position that will allow this organization to flourish in the years to come.

## Moving from Vocational Training to Supported Employment Services

Trilogy was originally founded to provide vocational services to mentally ill clients in the Uptown and Rogers Park neighborhoods. Employment training originally encompassed learning menial tasks such as change counting and other basic skills. Until the early 2000s, Trilogy continued to have a workshop on the first floor of 1400 Greenleaf that provided such services. Over the past 12 years, employment assistance has evolved significantly. Trilogy was one of the first community organizations to adopt the Individual Placement and Support (IPS) model of Supported Employment, which is an evidence-based approach to helping

people with mental illness get and keep a job. IPS includes integrating employment services with other mental health treatments, training employment specialists to establish relationships with reputable hiring companies, matching clients' job skills and wishes with potential employers, and placing clients in competitive positions where they are challenged and equitably compensated.

Trilogy staff works on résumé preparation, interview skills and presentation, and securing work-appropriate attire. Trilogy has had great success with this program. We regularly place clients with respected Chicago

companies. As Megan Ray, Trilogy's IPS Program Manager, describes, "For many, we don't just help individuals find work, we help them reclaim their lives through increased independence, and instill hope for the future." In recent years, we have consistently received high fidelity scores from the State of Illinois. In fact, in 2015 Trilogy received the highest score in the state's history. In Fiscal Year 2018, Trilogy supported 139 clients in jobs ranging from hospitality to the health-care industry.



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## Expanding into "Service Deserts"

For most of Trilogy's history, operations were centered on the far Northeast side of Chicago in and around the Rogers Park community. Services were offered on an out-patient basis. That dramatically changed in 2012 when Trilogy committed to establishing more community-based care. The organization opened new offices and expanded services in neighborhoods throughout the city, in areas of Chicago's South and West sides that represent "service deserts" in terms of behavioral healthcare. During the past six years, Trilogy has expanded from one permanent office location in 2012 to ten presently, excluding residential programs.

"Not working with our clients in the communities where they live significantly limited our ability to help them succeed with the treatment plans we were creating with them," Susan Doig, Trilogy's Chief Clinical Officer explains. "It also meant there were a significant number of clients who weren't being reached at all." Today, employees meet with clients in their homes, restaurants, or other environments that are convenient and comfortable for them. Part of community-based care also means Trilogy staff will take clients to pick up prescriptions, shop for groceries, and help them apply for government benefits. Samantha Handley, Trilogy's

Executive Vice President and Chief Operating Officer reflects "Rather than having Recovery Counselors (RCs) start their days in Rogers Park and then spend an hour driving each way, it just made sense to open offices in these locations. Less travel time for RCs means more treatment time with clients."

Currently, the Lawndale and South Shore offices serve nearly 300 clients annually. And as Trilogy has expanded beyond employment programs, adding healthcare, housing, substance abuse counseling, and other needed services, it has also made them available in these and other historically underserved neighborhoods.

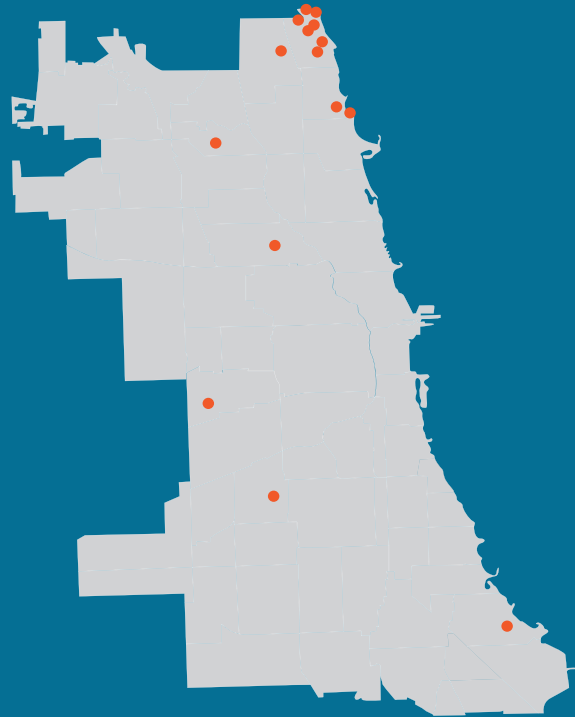


## Trilogy Locations

Trilogy sees clients at:

- 1400 West Greenleaf Avenue in Rogers Park
- 4534 South Western Avenue in Brighton Park
- 3737 West Lawrence Avenue in Albany Park (Children and Family therapy)
- 2551 West Peterson Avenue in West Ridge (Individual and Group therapy)

The organization also has offices in Lawndale, South Shore, Edgewater, two additional satellite locations in Rogers Park, and Evanston. Trilogy owns and/or manages four residential programs on the North side and one on the South side.



## Introduction of On-Site Integrated Care

The link between mental illness and chronic health problems is well established. Obesity, diabetes, smoking, and other substance use disorders occur two to three times more frequently in people with mental health issues. Consequently, their life expectancy is 25 YEARS less than those who are normatively functioning according to the National Alliance on Mental Illness (NAMI).

Trilogy pioneered bringing primary care in-house to complement its mental health services. In 2008, Trilogy, along with a handful of similar organizations from across the country, were awarded competitive federal grants from the Substance Abuse and Mental Health Services Administration (SAMHSA) to pilot integrated health programs. Partnering with Heartland Health Centers, Trilogy established a clinic on the first floor of its 1400 West Greenleaf building in Rogers Park, which, in addition to exam rooms, now includes a pharmacy and lab.

In addition to primary care, Trilogy offers prevention programs to promote physical fitness, healthy diets, and smoking cessation in both group and individual

settings. Combining all these services in one location improves the likelihood clients will access a broad range of healthcare services, not just because it is convenient, but because clients build trust with their mental health professionals who help them understand the importance of taking care of their whole selves. In 2018, the organization treated almost 1,200 individuals in its onsite integrated healthcare clinic.



# CLIENT REPRESENTATION

Throughout the organization, we listen to the voices of our clients through the Client Advisory Council (CAC). The CAC consists of 10 to 12 Trilogy clients who have demonstrated a level of wellness in their personal mental health recovery. The CAC meets monthly and has representatives from each program area and service department within Trilogy. The group promotes empowerment and self-determination, encouraging members to live a life of purpose and meaning. Not only that, the CAC works on behalf of all Trilogy clients to bring about changes that can positively affect user experiences overall.



## Clients by Race / Ethnicity

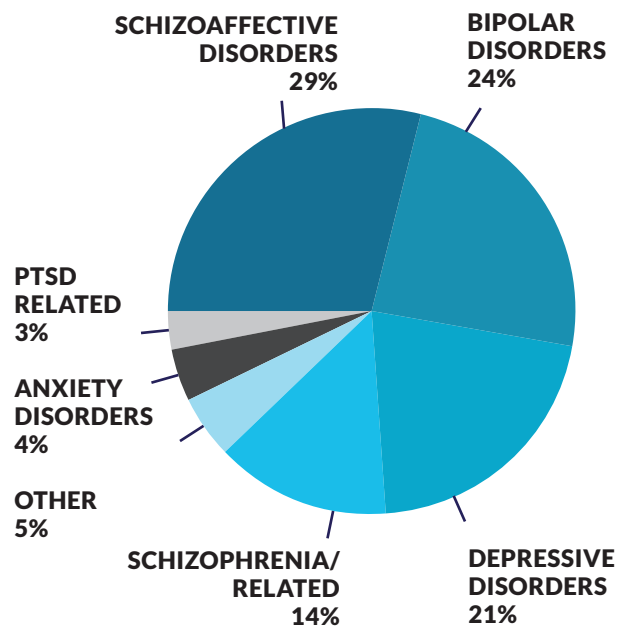
<b>49.8%</b>	<b>BLACK / AFRICAN AMERICAN</b>
<b>26.6%</b>	<b>WHITE / CAUCASIAN</b>
<b>20%</b>	<b>HISPANIC / LATINO</b>
<b>1.5%</b>	<b>ASIAN</b>
<b>0.3%</b>	<b>AMERICAN INDIAN / ALASKAN NATIVE</b>
<b>0.04%</b>	<b>NATIVE HAWAIIAN / PACIFIC ISLANDER</b>
<b>1.8%</b>	<b>Unknown / Declined / Not Reported</b>

## Clients by Gender

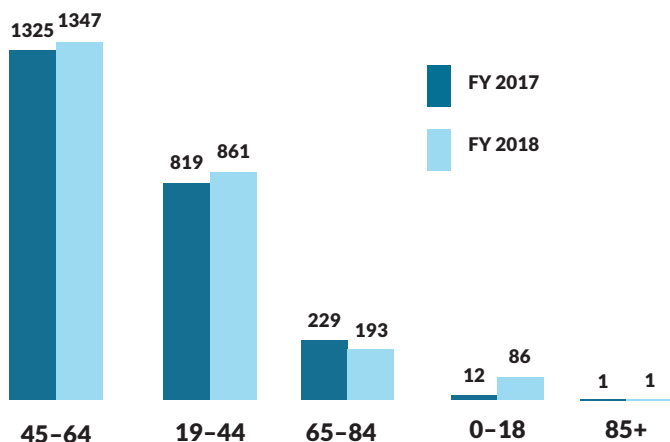
<b>60%</b>	<b>MALE</b>
<b>38%</b>	<b>FEMALE</b>
<b>1.4%</b>	<b>TRANSGENDER, GENDER NONCONFORMING, GENDERFLUID</b>
<b>0.6%</b>	<b>Unknown / Declined / Not Reported</b>

*Data is based on 2,518 unduplicated clients served.*

## Primary Psychiatric Diagnoses



## Client Age Groups



## FINANCIAL HIGHLIGHTS

### FY 2018

#### Revenue for Services

Clinical Fee for Service	\$19,899,902
Government Grant-Related Funding	\$4,858,382
Contributions, Special Events	\$431,310
Foundation & Corporate Giving	\$127,354
Rental, Interest & Miscellaneous Income	\$337,118
Less: Cost of Direct Benefits to Donors	(\$24,758)
<b>Total Revenue, All Sources</b>	<b>\$25,629,308</b>

#### Expenses by Major Category

Outreach Services	\$8,456,071
Recovery Services	\$3,539,102
Outpatient Services	\$3,480,377
Medical Services	\$1,018,708
Housing	\$2,125,984
Intake & Clinical Admin	\$668,041
<b>Total Program Services</b>	<b>\$19,288,283</b>

Fundraising & General Admin	\$5,140,369
<b>Total Expenses</b>	<b>\$24,428,652</b>

#### Net Surplus (Deficit)

Total Revenue Less Total Expenses	<b>\$1,200,656</b>
Percent of Total Revenues	<b>4.68%</b>

2018 Donors List available at  
[www.trilogyinc.org/2018-donors](http://www.trilogyinc.org/2018-donors).



# TRILOGY

BEHAVIORAL HEALTHCARE



MAIN LOCATION  
1400 W. Greenleaf Ave.  
Chicago, IL 60626



773-508-6100



[development@trilogyinc.org](mailto:development@trilogyinc.org)



[/TrilogyBHC](https://www.facebook.com/TrilogyBHC)



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