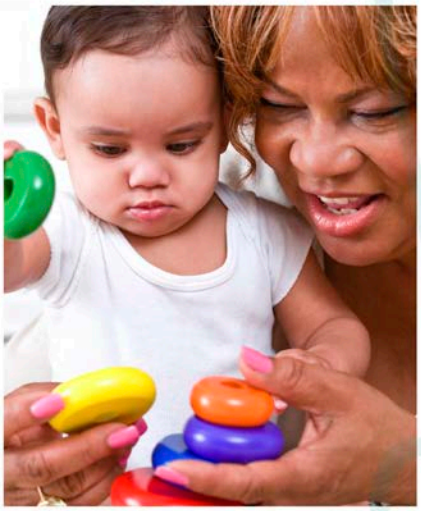

2013 *Community Health Needs Assessment* **Report**

2014 *Implementation* **Strategy**

Aurora Sinai Medical Center®
of Aurora Health Care Metro, Inc.

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Medical Center
945 N. 12th Street
Milwaukee, WI 53233

Aurora Sinai Medical Center
Update for 2016

Posted: December 31, 2015

Executive Summary

Aurora Sinai Medical Center (ASMC) is located in the heart of downtown Milwaukee. This full-service, comprehensive hospital offers inpatient and outpatient care with expertise to meet the diverse needs of its patients and surrounding communities. ASMC shares a rich history with the University of Wisconsin Medical School and is home to nine community-based clinics, community-health research programs with faculty physicians and midwives who are teaching the next generation of healthcare providers.

In 2013 ASMC completed and published its Community Health Needs Assessment (CHNA) Report and 2014 Implementation Strategy, which was adopted by the Social Responsibility Committee of the Aurora Health Care Board of Directors on November 22, 2013 and posted to Aurora Health Care web site. This document, which provides a comprehensive overview of the community served and significant health needs identified, is available by visiting http://www.aurora.org/commbenefits. Experience in carrying out the 2014 Implementation Strategy informed the process for updating it for 2015.

It should be noted that addressing the social determinants of health to promote healthier communities requires more effort than can be carried out by one hospital alone. ASMC is fortunate to be one of five Aurora hospitals located in Milwaukee County, working together and in concert with other providers and organizations within the county to address significant community health needs on a global level. The chart below represents the ongoing multi-stakeholder initiatives of which ASMC is both directly and indirectly a part.

Prioritized significant needs in Milwaukee County	Multi-Partner Initiatives		
	Milwaukee Health Care Partnership[1]	Lifecourse Initiative[2]	United Way[3]
Health care access	✓	✓	✓
Health insurance coverage	✓		
Behavioral health	✓	✓	✓
Obesity, nutrition and physical activity		✓	✓
Chronic disease	✓		✓
Infant mortality	✓	✓	✓
Sexual health			✓
Health literacy	✓	✓	✓
Poverty		✓	✓
Racism		✓	✓
Social determinants		✓	✓
Specialty access for uninsured persons	✓	✓	✓

In addition to the resources dedicated each year to these ongoing initiatives, the ASMC 2015 Implementation Strategy outlined specific priorities to work within its neighboring communities in Milwaukee County and with the hospital's unique patient population. That work continues in 2016.

[1] The Milwaukee Health Care Partnership is a public/private consortium dedicated to improving health care coverage, access and care coordination for underserved populations in Milwaukee County. View http://mkehcp.org/

[2] The goals of the Lifecourse Initiative are: 1) Strengthen father involvement in African-American families; 2) Reduce poverty among African-American families; 3) Expand access to health care. View http://www.planningcouncil.org/PDF/LIHF_Milw_CAP_final_w_cover.pdf

[3] For *United Way of Greater Milwaukee* initiatives, view http://www.unitedwaymilwaukee.org/home

ASMC 2016 Implementation Strategy: Introduction

As in 2015, our 2016 ASMC implementation strategy is organized into three main categories in alignment with three core principles of community benefit as shown below.

Category	Community Benefit Core Principle
Priority #1: Access and Coverage	• Access for persons in our community with disproportionate unmet health needs
Priority #2: Community Health Improvement	• Build links between our clinical services and local health department community health improvement plan
Priority #3: Community Benefit Hospital Focus	• Address the underlying causes of persistent health problems

It is widely recognized that a diverse team of engaged community partners is essential for implementing strategic community health improvement initiatives. Our implementation strategy reinforces the importance of our role as a partner for community capacity-building to address unmet community health needs.

The following table itemizes the significant health needs identified in our 2013 Community Health Needs Assessment and how our hospital and health system resources are allocated. The Key:

H = specifically addressed within our hospital's implementation strategy
I = addressed through our integrated healthcare system and strategic partnerships
S = standard within the continuum of care

Significant community health needs/issues identified in the 2013 CHNA Report	Intent to address in the 2016 Implementation Strategy
Access	
• medical	H and I
• prescription	H and I
• dental	H and I
Coverage	
• enrollment, health care coverage or financial assistance	H and I
Chronic disease	
• Asthma, cancer, diabetes and heart disease	I and S
Health risk behaviors	
• Alcohol and tobacco use	I and S
• Nutrition	H and I
• Physical activity	I and S
Health risk factors	
• High blood pressure, high cholesterol and overweight/obesity	S
Infant mortality	
• Infant mortality, premature birth and low birth weight	H and I
Mental health	
• Mental health intake and assessment	H and I
Sexual assault and domestic violence	
• Abuse response services	H and I

Implementation ***Strategy***

Note: Our implementation strategies do not constitute the entirety of the community benefits our hospital provides each year. For a full accounting of the community benefits we provide each year, please see our most recent report: http://www.aurora.org/commbenefits.

Target population for Aurora Sinai Medical Center's Implementation Strategy
Our implementation strategy focuses on improving the health of residents and communities surrounding our hospital. These include zip codes with high rates of unemployment, underemployment and poverty (53233, 53208, 53205, 53212, 53206, 53210, 53216, and 53218). ASMC is located in zip code 53233, in the heart of downtown Milwaukee.

Focus | Access is an Aurora Health Care signature community benefit program focus

Access
Based on the 2012 City of Milwaukee Community Health Survey (in the 12 months):

- 15% of adult respondents reported someone in their household had not taken their prescribed medication due to cost
- 21% reported unmet dental care
- 13% reported unmet medical care
- 6% reported unmet mental health care

Based on the key informant findings, access to health care services and health insurance coverage emerged as one of the top five health issues for Milwaukee County.

Health care coverage
Based on the 2012 City of Milwaukee Community Health Survey Report:

- 17% of adult respondents reported they personally were not currently covered
- 22% reported they personally did not have health care coverage at least part of the time in the past 12 months
- 25% reported a household member was not covered at least part of the time in the past year

Principal partners

- Aurora Health Care Medical Group (AHCMG), including a broad range of primary and specialty care clinics for underserved communities in Milwaukee County, on the campus of Aurora Sinai Medical Center (ASMC):
  Note: * denotes offsite AHCMG Clinics.
  - Aurora Internal Medicine Clinic
  - Aurora Comprehensive Breast Care Center
  - Family Practice Clinic at ASMC
  - Family Practice Center at Aurora St. Luke's Medical Center*
  - Family Care Center
  - Aurora Midwifery and Wellness Center
  - Aurora Midtown*
  - Aurora Women's Health Center
  - ExclusivelyForWomen
  - Aurora Comprehensive Breast Care Center
  - Aurora Center for Senior Health and Longevity
  - Aurora Walker's Point Community Clinic*
  - Aurora Wiselives*
- Aurora Parish Nurse at Cross Lutheran Church
- Aurora Psychiatric Hospital and Behavioral Health Services

Community partners

- **Bread of Healing Clinic (BOH) -** Located at Cross Lutheran Church just blocks away from our campus, along with two other north-side sites, BOH was founded in 2000 by one of Aurora's parish nurses, in partnership with a medical resident from Aurora Sinai Medical Center. BOH provides a health home for uninsured community members who experience financial or other barriers to quality health care. The vital services BOH provides are focused on individuals with chronic health conditions, care for acute and chronic illnesses, dental, vision, medical specialty consultation and podiatry, and, through a Community MedShare program, free medications to uninsured persons. ASMC supports BOH by funding the clinic director position; providing radiology and lab services and access to specialty care for BOH patients; educating for medical interns and residents; and providing medical care to BOH patients by Aurora faculty physicians at AHCMG clinics. With the Aurora *Better Together Fund*, the behavioral health program grew by adding two volunteer psychologists, a psychiatrist, four counseling students and a coordinator. In 2013, BOH provided more than 9,300 visits for nearly 2,000 patients.

- **Milwaukee Health Care Partnership (MHCP) Emergency Department Care Coordination Initiative -** Includes community-wide Emergency Department (ED) to Medical Home Care Coordination Process. This process includes 1) Milwaukee County EDs identify target populations, provide patient education and schedule appointments with medical homes; 2) Using MyHealthDIRECT appointment scheduling technology, community health centers post open appointments. EDs schedule appointments electronically while the patient is at the hospital; and 3) Intake coordinators at community health centers reach out to patients prior to first appointment and attempt to reschedule if appointment is not kept. Aurora Health Care is a founding and sustaining member of the MHCP and ASMC is a participating ED.
- **Progressive Community Health Centers (PCHC)**
  Progressive Community Health Centers, designated as Federally Qualified Health Centers, improve the health and quality of life of the community by providing culturally competent services that address identified needs.
- AIDS Resource Center of Wisconsin
- Benedict Center
- Catholic Charities
- City on a Hill
- Marquette University School of Dentistry
- Milwaukee Health Services
- Outreach Community Health Center
- Penfield Children's Center
- United Community Center
- University of Wisconsin – Milwaukee (UWM) College of Nursing Free Clinic

Target population

- Medicaid-eligible and uninsured patients using the ED for primary care and frequent users of the ED for non-emergent conditions

Intended impact

- Uninsured and Medicaid eligible patients who are currently relying on our hospital's ED for primary care services, chronic disease management and dental care are successfully transitioned to a health home
- Uninsured patients obtain coverage

Measures to evaluate impact

- Number of uninsured and non-emergent care patients transferred to and treated at our PCHC satellite clinic
- Number of Bread of Healing (BOH) patients referred to AHCMG physicians at ASMC for Specialty Access for Uninsured Program (SAUP)
- Number of uninsured patients screened for financial assistance in our ED and number enrolled in programs (e.g. *Aurora's Helping Hand Patient Financial Assistance* program) and the Marketplace (the health insurance exchange)
- The Milwaukee Health Care Partnership, in collaboration with MyHealthDIRECT, monitors and tracks the Milwaukee Health Care Partnership Emergency Care Coordination Initiative, http://mkehcp.org/care-coordination-2/emergency-department-care-coordination. Measures include total scheduled appointments, total kept appointments (FQHC only), show rate (FQHC only, percent), number of scheduled appointments by ASMC (per month), clinic appointment show rate for ASMC (per month)

Action plan (see next page)

Action Plan	Target date
Improve access and coverage for uninsured and Medicaid-eligible patients using ASMC's Emergency Department (ED) for primary care and dental care:	
For Access	
• Remove barriers for patients seeking urgent and primary care in our ED: - Expand and expedite access to care by opening a Progressive Community Health Center (PCHC) satellite clinic in our ED (beginning on or about September 1, 2015) - Triage patients in our ED and transfer non-emergent cases to PCHC - Provide ED-based Medicaid and Marketplace enrollment and scheduling services - Refer uninsured discharged ED patients without a primary care physician to PCHC or BOH to establish a health home	Ongoing
• Support and continue participation with the Milwaukee Health Care Partnership ED Care Coordination Initiative and Specialty Access for Uninsured Program (SAUP) to: - Navigate Medicaid-eligible and uninsured patients to health homes at our BOH and AHCMG community clinics or other Federally Qualified Health Centers (FQHCs) - Continue to contract with AHCMG specialists to treat SAUP-referred patients	Ongoing
• Promote benefits of primary care by providing a "health care consumer" information kits to Medicaid-eligible and uninsured patients	
• Provide in-kind imaging and lab services for patients referred from Bread of Healing (BOH) clinics	
• Include our hospital's gastrointestinal and women's health specialists in Aurora's SAUP through our partnered safety-net medical home clinics for qualified patients (200% of FPL) - AWPCC on Milwaukee's near south side - Bread of Healing Clinic on Milwaukee's near north side	
• Support expansion of primary health care and behavioral health services at Bread of Healing (BOH) through Aurora's *Better Together Fund* grant of $200,000; monitor progress and impact	2016-2017
• Support expansion of primary health care services and renovation of clinic space at City on a Hill through two Aurora's *Better Together Fund* grants totaling $173,000; monitor progress and impact	
• Support expansion of six primary health care providers at Milwaukee Health Services through Aurora's *Better Together Fund* grant of $431,295; monitor progress and impact	
• Support expansion of primary health care and urgent care services at two new Progressive Community Health Care sites through Aurora's *Better Together Fund* grant of $1,700,000; monitor progress and impact	
• Support expansion and collaboration of health services at the United Community Center in partnership with Carroll University through Aurora's *Better Together Fund* grant of $25,000; monitor progress and impact	
• Support expansion of primary health care services at UWM College of Nursing Free Clinic through Aurora's *Better Together Fund* grant of $85,453; monitor progress and impact	

Action plan continues (see next page)

For behavioral and mental health	**Target date**
• Expedite access to mental health care and AODA services - Provide site-based APH intake coordinators in our ED to conduct behavioral health screenings - Refer as appropriate to Aurora behavioral health units or other community-based resources	Ongoing
• Support expansion of behavioral health services at AIDS Resource Center of Wisconsin through Aurora's *Better Together Fund* grant of $100,000; monitor progress and impact	2016-2017
• Support expansion of behavioral health services at Benedict Center through Aurora's *Better Together Fund* grant of $100,000; monitor progress and impact	
• Support addition of a bilingual behavioral health therapist at Catholic Charities through Aurora's *Better Together Fund* grant of $65,000; monitor progress and impact	
• Support upgrade of clinic space and launch of a behavioral health services pilot at Outreach Community Health Center through Aurora's *Better Together Fund* grant of $467,838; monitor progress and impact	
• Support expansion of behavioral health services for toddlers and children at Penfield Children's Center through Aurora's *Better Together Fund* grant of $100,000; monitor progress and impact	
For dental care and oral health	
• Advance our discussion with Marquette University School of Dentistry to develop approaches for providing: - Dental and oral health care to uninsured patients - Hospital-based dental residency opportunities	2015-2016
• Screen uninsured patients seen in ED for financial assistance programs, including Aurora's *Helping Hand Patient Financial Assistance* program, and assist with application processes	Ongoing
• Inform and educate uninsured patients about the insurance exchange (ED case managers) and assist in navigating patients to our financial counselors who will assist with the application process	During Open Enrollment
• Our parish nurse will assist community members with accessing the Marketplace (the health insurance exchange)	

Focus | Infant Mortality – three distinct programs
Additional focus areas: low birth weight, premature births, safe sleep and behavioral health

Milwaukee Infant Mortality (2010)

Infant mortality rate (>365 days) **8.1**

Related disparities for infant mortality

Infant Mortality Rate by Race/Ethnicity of Mother

Non-Hispanic White **4.6**

Non-Hispanic Black **14.2**

Hispanic **5.3**

Laotian/Hmong **6.1**

All data are per 1,000 live births
Source: Wisconsin Interactive Statistics on Health (WISH), infant mortality module. Presented in the secondary data report.

Linking to city and state community health improvement plan
The reduction of infant mortality, and specifically the reduction of racial disparities in infant mortality, is a goal of the City of Milwaukee Health Department.
http://city.milwaukee.gov/Infant-Mortality

Healthiest Wisconsin 2020 (HW 2020) identified significant racial and ethnic disparities in birth outcomes in Wisconsin. A greater proportion of infants born to Black/African American women than those born to White women are low birth weight or preterm. HW 2020 Objectives:

- Improve women's health for healthy babies
- Reduce disparities in health outcomes

http://www.dhs.wisconsin.gov/hw2020/pdf/healthygrowth.pdf

1. **Family Enrichment Program:** This program provides parents with support, information and guidance, including prenatal care coordination, child care coordination and parenting education to make the best choice for themselves and their new babies.

Principal partners

- Aurora Family Service
- Aurora Sinai Medical Center's (ASMC) Women's Health Clinic, NICU and Labor & Delivery
- Aurora Health Care Medical Group (AHCMG) Midwifery and Wellness Center

Community partners

- United Way of Greater Milwaukee
- Wisconsin Division of Health and Human Services

Target population

- Women who deliver at Aurora Sinai Medical Center

Intended impact

- Improve caregiving and parenting skills and the ability to better cope with and reduce stress

Measures to evaluate impact

- Total number of risk assessments (total admitted, other in household and assessments without first visit)
- Percent of parents/caregivers reporting improvement in parenting/caregiver skills
- Percent of parents/caregivers reporting improvement in coping with and reducing stress
  Note: This measure is taken twice a year using the survey tool from United Way of Greater Milwaukee.

Action plan	Target date
• Provide home-based education, information, counseling and referral to medical and other community resources to ensure a healthy pregnancy and healthy birth	Ongoing
• Provide supportive home visits by a case manager or parent educator to help parents cope with the demands of caring for a newborn – instructing on child development and infant care, managing stress and anger, completing school and learning job skills	

2. **Healthy Families Milwaukee:** A voluntary program that offers home-visiting services for expectant parents and their families. This is a collaborative effort between three social-service agencies in Milwaukee and Aurora Sinai Medical Center.

Principal partners

- Aurora Family Service (AFS)
- ASMC Women's Health Center

Community partners

- The Parenting Network
- Pathfinders/Rosalie Manor Community & Family Services

Target population

- Women who deliver at ASMC and are connected with Aurora Family Service, who are at high risk due to mental health issues, chronic medical issues, domestic violence, multiple parenting stresses; also pregnant teen mothers

Intended impact

- Decrease adverse birth outcomes for pregnant mothers in the target population

Measures to evaluate impact

- Total risk assessments (total admitted, other in household) and assessments without first visit
- Number of ED visits among mothers in the target population
- Number of ED visits for children of mothers in the target population (when child is 1 week, 1 month, 2 months, 4 months, 6 months, 9 months and 12 months of age) and incidence of child injuries requiring medical treatment
- Percent of individuals reporting parental emotional well-being or parenting stress
- Percent of individuals with health insurance (maternal and child health insurance)
- Number of families that require services and completed referral to community resources
- Number screened for domestic violence, families identified for presence of domestic violence, number of referrals and safety plans developed

Note: This is a federal grant and there are several benchmarks identified by the Federal government. This data is collected and entered into the State's Informational System (Sphere).

Action plan	Target date
• Provide a community-based home visiting nurse from AFS within the Women's Health Clinic at Aurora Sinai to conduct risk assessment for pregnant mothers interested in *Healthy Families Milwaukee*	Ongoing
• Provide home-visiting services for expectant parents and their families, including ongoing family-centered case-management services, in-home parent education, assistance with navigating the health system, support and advocacy	
• Bridge the communication between the medical team at Aurora Sinai and the home visiting agencies around the health of the mother through AFS or intake specialist	

3. **Healthy Next Babies:** A highly targeted, innovative and integrated care delivery and coordination model to decrease adverse birth outcomes among low-income African-American mothers. The program addresses two *Milwaukee Lifecourse Initiative for Healthy Families'* goals: 1) improving and maximizing existing services that help at-risk African-American mothers develop self-care skills during the interconception period, and 2) strengthening father involvement in African American families. This grant is based on a previous work of Healthy Mom Healthy Baby, which is funded by the United Way.

Principal partners

- Aurora Family Service and the University of Wisconsin-Milwaukee's Center for Urban Population Health

Community partners

- Milwaukee Lifecourse Collaborative (Note: Aurora caregivers, including Aurora Family Service, have been actively engaged in the *Milwaukee Lifecourse Initiative for Healthy Families* Collaborative from its inception)

Target population

- The program will target at-risk African-American parents who have experienced an adverse birth outcome. Program participants will be identified by Aurora Sinai Medical Center Neonatal Intensive Care Unit (NICU) admission reports. ASMC was selected because it is the only delivery center in downtown Milwaukee.

Intended impact

- Delay next pregnancy by at least 12 months
- Meet the health needs of the entire family and increase capacity to address stressors
- Increase engagement and support of the family, access to community resources and involvement in interconception care by fathers
- **Healthy Next Babies** long-term goal: reduce preterm and low weight births and ultimately help eliminate black-white disparity in infant mortality in Milwaukee.

Measures to evaluate impact

- Number of interconception care support materials distributed to fathers
- Number of fathers connected to community resources
- Number of families delaying next pregnancy by at least six months
- Percent of fathers involved in interconception care
- Percent of fathers involvement with their families

  Note: The Center for Urban Population Health is conducting the evaluation for Healthy Next Babies

Action plan	Target date
• Provide interconception care education with supportive home visitation	Ongoing
• Conduct joint home visits by the Healthy Next Babies nurse and parent educator for mothers and families who want child care coordination services	
• Implement a client-directed, family-focused Interconception Wellness Model (IWM) program. The model helps mothers gain healthcare self-sufficiency, connecting them with relevant community resources and encouraging father and family involvement.	
• Build father-centered program components that connect fathers with relevant community resources	
• Promote holistic interconception care between the health care system and mothers at-risk for adverse birth outcomes through strong relationships with the care coordination team at Aurora Family Service	

4. CenteringPregnancy prenatal program

Principal Partners
- Aurora Midwifery and Wellness Center at ASMC
- ASMC Women's Health Center

Community Partners
- None

Target population
- Women receiving Medicaid, but open to any women

Intended impact
- A 97% full-term rate and a 95% normal birth weight for all women who participate in the program is achieved (note: this is generally better than comparable populations in the City of Milwaukee)
- Three major components of care (health assessment, education and support) are united into a multi-faceted model of group care

Measures to evaluate impact
- Centering Healthcare Institute measures:
  - Gestational age
  - Birth weight of infants born to program participants
- Number of CenteringPregnancy groups and attendance
- Number of staff trained

Action plan	Target Date
• Continue to provide three specific CenteringPregnancy groups - Physician-led group - Physician-led Spanish speaking group - Midwife led regular group	Ongoing

Focus | Abuse Response Services – four distinct programs
Additional focus on mental health

In 2013, the Sexual Assault Treatment Center received 2,516 crisis calls.

Sexual assault can have harmful and lasting consequences for victims, families and communities including, but not limited to, long term physical consequences, immediate and chronic psychological consequences, health behavior risks and financial cost to victims, families and communities.

Aurora Sinai Medical Center is widely recognized for having developed a network of services that are integrated to address the impact of sexual assault and domestic violence, and has been a Regional Center of Excellence for Aurora Sinai Medical Center since 1986.

1. **Sexual Assault Treatment Center:** Aurora's Sexual Assault Treatment Center (SATC) at Aurora Sinai Medical Center is hospital-based and the only 24-hour emergency sexual assault treatment site in Milwaukee. This program combines aspects of a rape crisis center and a **Sexual Assault Nurse Examiner** (SANE) program to offer trauma-informed and victim-sensitive services to people of all ages who have been affected. The nurses complete specialized training and receive certification to be a sexual assault nurse examiner.

Community partners
- City of Milwaukee Health Department
- Commission on Domestic Violence and Sexual Assault
- Milwaukee County District Attorney Office, Domestic Violence and Sexual Assault Unit
- Multiple community organizations dedicated to serving individuals who have been sexually assaulted
- Pathfinders
- Marquette University
- Near West Side Partners
- University of Wisconsin – Milwaukee

Target population
- SATC provides immediate, acute care to individuals who have been sexually assaulted

Intended impact
- Increased access to services, resources and advocacy for individuals who have been sexually assaulted
- Increased community awareness about sexual assault and available resources

Measures to evaluate impact
- Number of people provided with services and medical care related to sexual assault
- Number of calls from victims and the general public to the 24-hour crisis phone line
- Number of personal advocacy and liaison services with the Sensitive Crimes Unit, District Attorney's Office
- Number of referrals to counseling and social service agencies
- Number of community education/prevention/outreach presentations
- Number of people attending education/prevention/outreach presentations

Action plan (see next page)

Action plan	Target date
• Support Marquette University's 'Creating a Safe Campus Environment' program through Aurora's *Better Together Fund* grant of $209,429; monitor progress and impact	2016-2017
• Support the initiation of the 'Promoting Assets & Reducing Crime (PARC)' program by the Near West Side Partners through Aurora's *Better Together Fund* grant of $499,998; monitor progress and impact	
• Support expansion of sexual assault advocacy service delivery and capacity at Pathfinders through Aurora's *Better Together Fund* grant of $30,000; monitor progress and impact	
• Support expansion of sexual assault prevention and education at the University of Wisconsin – Milwaukee through Aurora's *Better Together Fund* grant of $255,000; monitor progress and impact	
• Provide medical assessment and treatment, crisis intervention and emotional support, discharge counseling and resource information and 24 –hour crisis line	Ongoing
• Conduct forensic exam with evidence collection (if seen within 72- 120 hours of the assault)	
• Provide pregnancy risk assessment and screen for sexually transmitted infections, as appropriate	
• Implement SDFI® -TeleMedicine forensic photodocumentation system based on and designed around the Federal Rules of Evidence	
• Provide personal advocacy to community-based organizations including, but not limited to, Sensitive Crimes Unit, District Attorney's Office and Department of Human Services	
• Provide follow-up contact, emotional support and referrals to community-based organizations to assist with healing	
• Complete community education, prevention and outreach presentations	

2. **The Healing Center (THC) :** An off-site program of Aurora Sinai Medical Center and the only resource in Milwaukee exclusively committed to serving victims of sexual violence at any point in their recovery and healing process. THC receives referrals from across Southeastern Wisconsin region.

Community partners

- City of Milwaukee Health Department Commission on Domestic Violence and Sexual Assault
- Milwaukee County District Attorney Office, Domestic Violence and Sexual Assault Unit
- UMOS - Latina Resource Center
- Pathfinders
- Multiple community organizations dedicated to serving individuals who have been sexually assaulted

Target population

- Adults who have experienced and been traumatized by sexual violence

Intended impact

- Recovery and improved quality of life for victims of sexual violence

Measures to evaluate impact

- Percent of individuals (in counseling or support group) reporting improved mental health
- Number of individuals able to use healthy coping techniques
- Number of individual counseling and support groups and people served
- Number of professionals, mental health providers and community members trained

Action plan (see next page)

Action plan	Target date
• Advocate for survivors	Ongoing
• Provide individual counseling for survivors of sexual assault	
• Provide support groups and education programs, including - Survivors Toward Recovery - Men's Group - Sexual Wholeness - Adult Rape/Sexual Assault support group - Adults Molested as Children	
• Conduct community education and sexual assault advocacy training to teach professionals, mental health service providers and community members about sexual violence and how to advocate for survivors	

Based on the Aurora Health Care Abuse Response Services: Domestic Violence 2002-2011 ten-year report:

- Domestic violence is a leading cause of female homicides and injury-related deaths during pregnancy.
- Results from an Aurora Health Care study found nearly one in two women experienced physical abuse in their lifetime; 11.7% had experienced physical abuse within the past year; and women in every demographic group reported instances of abuse in their lifetime, although younger, poorer and less educated women reported the highest rates.
- Estimates indicate approximately 1 out of 12 pregnant women may be experiencing domestic violence (based on an average of 8%).

Injury and violence prevention is one of the twelve health focus areas for *Healthiest Wisconsin 2020*.

3. **Domestic Violence Service**: Provides safe environments with skilled staff at multiple Aurora Health Care settings to promote disclosure of abuse, along with advocacy and counseling services. This enables patients to have confidential access to support services they need in addition to the health care services they seek.

Community partners

- Sojourner Family Peace Center
- City of Milwaukee and Milwaukee County Law Enforcement
- Community organizations dedicated to serving individuals who are experiencing domestic violence
- Hmong America Women's Association (HAWA)
- Jewish Family Services
- Meta House
- Milwaukee LGBT Community Center

Target population

- Patients/individuals experiencing and disclosing domestic violence

Intended impact

- Improved system-wide awareness and practice to respond to disclosures of domestic violence with trauma-informed care

Measures to evaluate impact

- Number of Aurora physicians, nurses, social workers, residents and other health care providers educated
- Number of cases referred to the clinical nurse specialist
- Number of staff requests for Emergency Department domestic violence consult for the Aurora hospitals in Milwaukee County
- Number of referrals provided by the clinical nurse specialist

Action plan	Target date
• Support initiation of the 'Young Leaders Anti-Violence Project' at the Hmong America Women's Association through Aurora's *Better Together Fund* grant of $21,000; monitor progress and impact	2016-2017
• Support expansion of mental health counseling to adult survivors of sexual assault and/or domestic violence at the Jewish Family Services through Aurora's *Better Together Fund* grant of $48,325; monitor progress and impact	
• Support expansion of 'Seeking Safety's' services and in-depth trauma services and advocacy at Meta House through Aurora's *Better Together Fund* grant of $31,716; monitor progress and impact	
• Support expansion of sexual assault/domestic violence advocacy services to LGBT-identified individuals at the Milwaukee LGBT Community Center through Aurora's *Better Together Fund* grant of $20,455; monitor progress and impact	
• Provide training to physicians, nurses, social workers, medical residents and other health care providers on domestic violence and trauma-informed care at ASMC and Aurora's other Milwaukee County hospitals	Ongoing
• Serve as a resource for all Aurora staff with questions about referring or treating patients reporting domestic violence	
• Conduct visits with Emergency Department patients to provide advocacy and counseling regarding shelters, restraining orders, transportation, additional counseling, or other community resources	

4. **Safe Mom Safe Baby:** A case-management service provided specifically to pregnant or recently delivered women experiencing intimate partner violence.

Principal partners

- ASMC Women's Health Center
- Aurora Midwifery and Wellness Center

Target population

- Women receiving obstetric services at ASMC and other Aurora facilities

Intended impact

- A consistent and sustainable response to intimate partner violence in the perinatal setting
- Improved safety behaviors of pregnant women
- Improved health outcomes of mothers and infants

Measures to evaluate impact

Safe Mom Safe Baby has been studied and tracked since 2005 demonstrating that women in the program have fewer adverse birth outcomes. We will continue to track:

- Number of women served
- Percent of women needing intensive support
- Percent of women with improved safety behaviors
- Percent of women who reach full term and percent of preterm (before 37 weeks of gestation) and low birth weight births (less than 2,500 grams or approximately 5.5 pounds)

Action plan	Target date
• Provide support to abused pregnant women through case management, education and advocacy (including intensive case management when needed)	Ongoing
• Maintain partnership with Sojourner Family Peace Center, which helps the woman pursue protective legal action and connect to other community resources	
• Help women interact successfully with healthcare providers and navigate the complicated criminal justice, legal and social service systems in order to produce the best health outcomes for both moms and babies	
• Develop a collaborative model of care for survivors of IPV that can be replicated in other health care settings to improve outcome	

Aurora SANE Program Logic Model			Outcomes Measures		
Inputs	**Activities**	**Outputs**	**Short Term**	**Intermediate**	**Long Term**
• Staff • Program coordinator • On call SANE nurses • Community resources • Dedicated exam room • Resources to support the SANE nurses and their ability to continue in the program	• Assess community need and determine agencies and their current roles (who is doing what) • Community education • Staff education to identify trauma • Connect to crisis counselor • Connect to advocacy • Connect to legal system • Maintain the chain of evidence	• Number of people receiving forensic exam • Patient satisfaction • Number of providers participating in community and campus education programs • Evidence sent to crime lab for maintenance & safekeeping • Barriers to care identified	• Number of referrals to community resources • Number of referrals from physician offices and/or other community resources that received education • Number of preventive strategies that universities put in place based on education program • Response time to assist the victim (minutes)	• Number and % of patients for which follow up connection is made • Contacts with advocacy agencies established • Contacts with referral agencies • # of referrals made to physicians or other resources • Individuals' needs/ barriers addressed • Decrease in # and % of walkaways	• Continue healing at post-crisis service providers • Increased % of victims accessing care • % of consumers who recognize Aurora for abuse programs/ services • Sustain 24/7 program • Job satisfaction of the SANE nurses