As an affiliate of Advocate Aurora Health, the leading not-for-profit healthcare provider in eastern Wisconsin and Illinois, our purpose is to help people live well. We recognize our role in addressing concerns about the accessibility and affordability of health care in Kenosha County. Further, we recognize that we are accountable to our patients and communities, and that our initiatives to support our communities must fit our role as a not-for-profit community hospital.

The implementation strategies presented here are the result of our process for assessing community health needs, obtaining input from community members and public health representatives, prioritizing needs and consulting with our hospital staff and physician partners.

Our full Community Health Needs Assessment Report is available here: [www.aurora.org/commbenefits](http://www.aurora.org/commbenefits).
Our implementation strategies are organized into three main categories aligned with three core principles of community benefit:

<table>
<thead>
<tr>
<th>Category</th>
<th>Community Benefit Core Principle</th>
</tr>
</thead>
</table>
| Priority #1       | **Access and Coverage**  
Increase access for persons in our community with disproportionate unmet health needs. In this section we outline our approach to link our community’s most vulnerable residents with medical care. |
| Priority #2       | **Community Health Improvement Plan**  
Build links between our clinical services and the local health department community health improvement plan (CHIP). In this priority we outline our approach to addressing behavioral health needs, a top finding in our needs assessment. |
| Priority #3       | **Build a seamless continuum of care**  
Address the underlying causes of persistent health challenges in our community:  
• Infant mortality  
• Chronic disease  
• Senior care  
• Sexual assault  
• Cancer  
• Social determinants of health |

In addition to alignment with community benefit principles, our implementation strategies illustrate the coordination between population health activities within our hospital or clinic walls and outreach activities designed to target the broader community.

**Principal community health improvement tool: Community Partnerships**

For any community health concern, it is widely recognized that a diverse team of engaged community partners is essential for implementing strategic community health improvement initiatives that make a difference. Therefore, we recognize the need to be a good community partner. Our implementation strategies strongly reinforce our role as a partner for community capacity-building to address unmet community health needs.

These implementation strategies do not constitute the entirety of the community benefits our hospital provides each year. An annual account of the community benefits we provide can be found by visiting [http://www.aurora.org/commbenefits](http://www.aurora.org/commbenefits).

This Community Benefit Implementation Strategy was adopted by the Social Responsibility Committee of the Aurora Health Care Board of Directors on October 12, 2017.
Priority No. 1:
Access, a signature community benefit focus for Aurora Health Care

Current findings
Access to health services ranked among the top five health issues for Kenosha County. In 2016, 21% of the respondents delayed or did not seek medical care due to costs in the past 12 months. The number of individuals with an unmet medical need remained relatively the same at 15% (Source #1). The Healthy People 2020 target is to reduce the proportion of persons who are unable to obtain, or delay in receiving necessary medical care, to 4.2%. Residents and key informants identified access to health care as a top five community health issue (Sources #1 and #3).

Our strategy
For our patients
• Provide appropriate follow-up with non-emergent patients using our emergency department (ED) for primary care
• Refer uninsured and self-pay patients using our ED for primary care to KCHC
• Actively screen patients for coverage through the Marketplace or financial assistance programs and assist with application processes
• Provide follow-up call to ED patients to assure they understand their discharge instructions, address any questions related to the visit and identify any barriers or obstacles
• Provide Coverage to Care (C2C) program (for additional information, see Social Determinants of Health section on page 9)

MEASURES, number of:
• Non-emergent ED visits without a primary care physician; seen by an AHCMG primary care provider within 28 days
• Patients referred to KCHC
• Follow-up calls to ED patients
• Number of patients served through C2C

For our community
• Support KCHC in providing medical, dental and behavioral health care to underserved populations in Kenosha and the surrounding area:
  – Provide AHCMG obstetric care for KCHC patients (also listed in Infant Mortality section on page 4)

MEASURES, number of:
• Individuals reached

Target population
Uninsured residents of Kenosha County

Principal partner
Aurora Health Care Medical Group (AHCMG)

Community partner
Kenosha Community Health Center (KCHC)
A Federally Qualified Health Center with two locations provides medical, dental and behavioral health care to underserved populations in Kenosha and the surrounding area.

Impact goal
Increased access to care
Priority No. 2: Community Health Improvement Plan, focus on Behavioral Health

Target population
Residents of Kenosha County

Principal partners
• Aurora Health Care Medical Group (AHCMG)
• Aurora Behavioral Health Services (ABHS)

Community partners
• Kenosha County Chapter 51 Committee
• Self-Harm Death Analysis Review Team (SDART)
• Suicide Prevention Coalition of Kenosha County
• Local college advisory boards
• Racine Collaborative for Children’s Mental Health
• Local school districts

Impact goal
Increase linkages to appropriate care for behavioral health

Current findings
Mental health and alcohol and other drug use (behavioral health) ranked among the top five health issues for Kenosha County. In 2016, 18% of Kenosha County adults reported a mental health condition (such as depression, anxiety disorder or post-traumatic stress disorder) in the past three years. Five percent of adults reported feeling so overwhelmed in the past year that they considered suicide, worse than in 2005 (2%) (Source #1).

Thirty percent of adults in Kenosha County reported binge drinking in the past month, a statistically significant increase from 2005 (17%) (Source #1). The rate of emergency department (ED) visits due to opiate poisonings (also known as opiate overdoses) was 19.7 per 100,000 population in 2014, higher than the 2013 rate of 12.0 per 100,000 population.1

Our strategy
For our patients
• Provide ABHS referrals through tele-intake services in our ED and through inpatient tele-psychiatry consultations
• Provide behavioral health nurse practitioner at our hospital to round on inpatients with behavioral health needs and ensure appropriate care

MEASURE, number of:
• Individuals screened and referred
• Inpatients served

---

Priority No. 3:
Community benefit hospital focus on infant mortality

Target population
Mothers and caretakers of infants in Kenosha County

Principal partner
Aurora Health Care Medical Group (AHCMG)

Community partners
- Kenosha Community Health Center (KCHC)
- Black Health Coalition of Greater Kenosha
- Racine Kenosha Community Action Agency

Impact goal
Decreased risks to infant health and safety

Current findings
From 2012 to 2014, the rate of infants dying before their first birthday in Kenosha County decreased from 7.3 deaths per 1,000 live births to 6.1 deaths per 1,000 live births, but it remained higher than the statewide rate of 5.7 deaths per 1,000 live births (Source #2).

Our strategy
For our patients
- Provide bedside classes on baby care and breastfeeding to new mothers
- Prior to discharge, provide:
  - Safe sleep and Halo sleep-sack education
  - Car-seat safety education to new mothers prior to discharge; perform safety tests
  - Education on effects of second-hand smoke; smoking cessation support
  - Follow-up appointment scheduling with pediatrician
- Conduct post-discharge follow-up calls for mothers and infants delivered at our hospital
- Provide contact information to Kenosha County Division of Health to receive coupons for Pack ‘N Plays

MEASURES, number of:
- Mothers educated
- Follow-up lactation services
- Sleep-sacks distributed
- Car-seat safety tests performed
- Appointments scheduled
- Mothers who receive calls
- Pack ‘N Play coupons distributed

For our community
- Provide AHCMG obstetric care for KCHC patients
- Provide free classes on lactation, well-baby care, and prenatal education to community members
- Collaborate with Kenosha County Division of Health on well-baby fair held at AMCK to cover topics noted above
- Sponsor Racine Kenosha Community Action Agency Baby Expo, providing educational resources to approximately 200 attendees each year

MEASURES, number of:
- Visits provided to KCHC obstetric patients; women served
- Event attendees
Priority No. 3: Community benefit hospital focus on chronic disease

Target population
Residents of Kenosha County

Principal partners
• Aurora Health Care Medical Group (AHCMG)
• Aurora Diabetic Educators

Community partner
Kenosha Aging and Disability Resource Center

Impact goal
Increased awareness and control of chronic disease

Current findings
In 2016, 8% of adults reported diabetes in the past three years, a stagnant trend since 2005 (Source #1). Diabetes may lead to serious health complications including heart disease, blindness, kidney failure and lower-extremity amputations; it is the seventh leading cause of death in the US.²

Six percent of adults reported heart disease or heart condition in the past three years (Source #1). The term “heart disease” refers to several types of heart conditions, such as coronary artery disease, angina, heart failure and arrhythmias. High blood pressure is a key risk for heart disease.³ In 2016, 26% of adults reported high blood pressure (Source #1).

Our strategy
For our patients
• Provide two evidence-based Healthy Living with Diabetes programs annually, covering understanding diabetes, getting the right healthcare, monitoring blood glucose, learning about food and diabetes, adding activity to your life, understanding medications and living with diabetes (open and promoted to the public)
• Implement Care Management strategies to address high blood pressure (BP) within our clinic population by: scheduling the patients’ 6-month hypertension follow-up visit before they leave the clinic; rechecking any BP 140/90 or higher; scheduling for a 1-2 week nurse visit if BP remains elevated; scheduling with provider if BP remains elevated at nurse visit

MEASURES:
• Number of attendees for Healthy Living with Diabetes sessions
• Improvements in Care Management scores: 86% of patients between ages 18 and 85, with diagnosed hypertension, under good control (publicly accessible at www.wchg.org)

For our community
• Provide community stroke support group meetings with Aurora team members presenting relevant topics, such as pharmacy, physical fitness and rehab, nutrition and wellbeing
• Provide community diabetes education classes, free of charge to all community residents
• Provide monthly free outreach blood pressure screenings at various community locations/events
• Provide free outreach bone density screenings at various community locations/events

MEASURES, number of:
• Support groups; attendees
• Classes; attendees and evaluation data
• BP and bone density screenings
• Individuals screened and evaluation data
• Individuals referred for follow-up

Priority No. 3: Community benefit hospital focus on chronic disease: cancer

Target population
Residents of Kenosha County

Principal partners
• Aurora Health Care Medical Group (AHCMG)
• Aurora Cancer Nurse Navigators (ACNN)
• Aurora Kenosha Cancer Center (AKCC)

Community partners
• American Cancer Society
• Kenosha YMCA
• Stillwaters Cancer Support Services
• Blood Center of Southeastern Wisconsin

Impact goal
Decreased burden for persons diagnosed with cancer in Kenosha County

Current findings
The 2010-2014 cancer age-adjusted incidence rate in Kenosha County was 481.2 per 100,000 population, higher compared to the state at 468.3 per 100,000. In Kenosha County, the leading cancer mortality rates for males (per 100,000) are: lung and bronchus (65.7), colorectal (20.5) and prostate (19.0), with only prostate being lower compared to the state. The leading cancer mortality rates for females (per 100,000) are: lung and bronchus (44.4), breast (22.4) and colorectal (15.8), all higher than the state rates.\(^4\)

Our strategy
For our patients
• Provide cancer nurse navigators for all patients, regardless of payer status, to support them in their cancer treatment journey
• Administer our distress tool and, as appropriate, refer patients to our principal and community partners for needed support services
• Provide art therapy, aroma therapy and therapeutic massage free of charge, open to anyone with a cancer diagnosis
• Provide Aurora Wig program to all patients free of charge

MEASURE, number of:
• Individuals served

For our community
• Provide cancer screening and education at community events
• Host annual Community Breast Cancer Fair at AMCK

MEASURES, number of:
• Individuals screened and educated
• Individuals reached through Breast Cancer Fair

Priority No. 3: Community benefit hospital focus on senior care

Target population
Residents aged 65 and older in Kenosha County

Principal partners
• Aurora Health Care Medical Group (AHCMG)
• Aurora Senior Resource Nurses (SRN)

Aurora’s SRN program is a non-billable NICHE-designated (http://www.nicheprogram.org) geriatric nurse-driven program to help our hospital improve the care of older adults treated within our facilities, as well as frail elderly persons referred from within our community. The program was implemented in our service area in 2007.

Community partners
• Skilled nursing facilities in Kenosha County
• Kenosha Aging and Disability Resource Center
• Kenosha County Transition Care Coalition
• Kenosha Area Family and Aging Services, Inc.

Impact goal
Reduced readmissions and admissions for falls

Current findings
In 2014, the rate of injury-related hospitalizations due to falls among Kenosha County adults aged 80-84 years was 3,758.2 per 100,000 population, higher than the state rate of 3,023.2 per 100,000.5 For Kenosha County adults aged 85+ years, the rate of injury-related hospitalizations due to falls was 6,385.1 per 100,000, higher than the Wisconsin rate of 5,660.6 per 100,000 population.6

Our strategy
For our patients
• Assure that frail elderly patients and persons referred to our SRNs are assessed and followed-up for:
  - Behavioral health needs
  - Cognitive impairment (using MoCA – Montreal Cognitive Assessment)
  - Family and social support
  - Home visits when possible
  - Nutrition needs
  - Pharmaceutical assistance program
  - Safe-At-Home or appropriate supportive placements
  - Transportation needs for follow-up care
• Provide patient education and support for:
  - Advance Directives (Power of Attorney)
  - Family guidance and support services
  - Medication management/safety
• Administer the Identification of Seniors at Risk (ISAR) screening tool for detecting severe functional impairment, depression and increased utilization of health services to all patients 65 and older
• Collaborate with Kenosha Area Family and Aging Services, Inc. to provide therapist support for two Stepping On programs annually. Stepping On is a high-level, evidence-based program proven to reduce falls and build confidence in older people

MEASURES, number of:
• Patients served
• Patients screened
• Stepping On classes; attendees
• Fall-related admissions for residents 65 and older

For our community
• Conduct outreach activities led by SRNs throughout the year, including support groups and Powerful Tools for Caregivers:
• Provide group exercise classes three times per week at the Kenosha Senior Center, led by an AHCMG/AMCK licensed athletic trainer
• Provide annual senior health fair, with community access to Aurora senior resources including pharmacy, dietetics, benefits specialists, elder safety, Advance Directives, and bone density, blood pressure, and fall screenings, in addition to other local agency resources

MEASURES, number of:
• Events and types of events conducted
• Attendees and evaluations

---

Priority No. 3: Community benefit hospital focus on sexual assault

Current findings
The rate of rape for Kenosha County was 37.2 reports per 100,000 persons, higher than Wisconsin's overall rate of 24.3 per 100,000 in 2016. Sexual assault and rape are underreported and the definition of sexual assault varies across different agencies; therefore, the number and rate may vary depending on the source.

Our strategy
For our patients
Consistent within Aurora's system-wide Sexual Assault Nurse Examiner (SANE) program and AHAS provide:
• 24/7 trauma-informed and victim-sensitive services, including forensic evidence collection and SDFi®-TeleMedicine forensic photodocumentation based on the Federal Rules of Evidence
• Referrals as appropriate to medical, clinical, counseling and advocacy services

MEASURES, number of:
• Individuals served and referrals provided

For our community
• Provide community education/prevention/outreach trainings
• Participate in Country Thunder music festival sexual assault education by providing SANE nurse coverage from 2:00 p.m. to 10:00 p.m. each day at two different locations within the festival grounds, along with providing a public service announcement about sexual assault to be played between each musical act throughout the four-day event, which reaches approximately 20,000 attendees
• Participate in development and provision of a consistent, cohesive approach to sexual violence awareness and victim services at the University of Wisconsin - Parkside, Gateway Technical College and Carthage College
• Promote two programs addressing the needs of victims of sexual assault and/or domestic violence at Women and Children’s Horizons

MEASURES, number of:
• Events conducted or supported
• Attendees
• Individuals reached
• SANE admissions during Country Thunder music festival

Priority No. 3:
Community benefit hospital focus on social determinants of health

**Target population**
Residents of Kenosha County

**Principal partner**
Aurora Health Care Medical Group (AHCMG)

**Community partners**
- Local high schools
- United Way of Kenosha and Racine
- Boys & Girls Club
- Gateway Technical College

**Impact goal**
Increased opportunity for stable employment, education

---

**Rationale**
As a health system, AAH recognizes that it is uniquely positioned to leverage institutional resources through our Community Strategy to help address social determinants of health. Social determinants of health are the structural elements and conditions in which people are born, grow, live, work and age. They include factors like socioeconomic status, education, the physical environment, employment, and social support networks, as well as access to health care.

**Our strategy**

**For our patients**
- Through the Coverage to Care (C2C) program, provide intensive and systematic case-management for hospital ED high utilizers incorporating health care literacy, health care advocacy, health care coordination and health care homes. The service delivery of the C2C program:
  - Focuses on the patient’s health beliefs and attempts to reshape those beliefs in a way that promotes effective health care utilization and management;
  - Provides patients with necessary knowledge, skills and tools to successfully navigate the health care system and to advocate on their own individual health care needs and preferences;
  - Considers the influence of patients’ cultural factors and pays particular attention to the impact of social determinants such as poverty, trauma, racism and mental health.

**MEASURE:**
- Number of individuals served through C2C

**For our community**
- Fund and provide clinical preceptorship site for three individuals in CNA training for future employment with AMCK
- Host healthcare careers fair for community residents
- Serve on community boards addressing social determinants:
  - Chief nursing officer on Boys & Girls Club board
  - Vice President of Operations on United Way board

**MEASURES, number of:**
- CNAs graduating
- Career fair attendees
- Students reached through STEM program

Additionally, in support of emergency preparedness:
- Through the AMCK Trauma Coordinator, provide Stop the Bleed training and kits. Stop the Bleed is a national awareness campaign intended to cultivate grassroots efforts that encourage bystanders to become trained, equipped, and empowered to help in a bleeding emergency before professional help arrives.

**MEASURE:**
- Individuals trained in Stop the Bleed; kits distributed

---
