Advocate Aurora Health (AAH) is among the 10 largest not-for-profit, integrated health systems in the United States and a leading employer in the Midwest with more than 70,000 team members, including more than 22,000 nurses and the region’s largest employed medical staff and home health organization. A national leader in clinical innovation, health outcomes, consumer experience and value-based care, the system serves nearly 3 million patients annually in Illinois and Wisconsin across more than 500 sites of care. As an AAH hospital, we recognize our role in addressing concerns about the accessibility and affordability of health care in Manitowoc 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 Manitowoc County Community Health Needs Assessment Report is available here: 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>
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| **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**| **Social Determinants of Health**  
*In alignment with the Advocate Aurora Health Community Strategy, this section describes our approach to addressing social determinants of health, the structural elements and conditions of our communities that influence the health of residents.* |

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 our community benefits can be found by visiting [http://www.aurora.org/commbenefits](http://www.aurora.org/commbenefits).

This Community Benefit Implementation Strategy was adopted by the Aurora Health Care Community Board on December 2, 2019.
Priority No. 1:
Access, a signature community benefit focus for Aurora Health Care

Target population
Uninsured residents of Manitowoc County

Principal partner
Aurora Health Care Medical Group (AHCMG)

Community partners
• Lakeshore Community Health Care (LCHC)
• Healthiest Manitowoc County (HMC)

Impact goal
Increased number of non-emergent patients presenting in our emergency department (ED) are navigated to a medical home

Current findings
In 2019, 7% of Manitowoc County respondents had an unmet medical need in the past 12 months, 15% delayed medical care due to cost, and 9% delayed filling a prescription due to cost. Access to health care was a ranked as a top issue by community members and key stakeholders (Sources #1, #3).

Our strategy
For our patients
• Provide complimentary transportation for individuals with transportation limitations needing access to our hospital
  – Past impact: 3,338 rides were provided in 2017 and 2018
• NEW: Provide complimentary transportation or cab vouchers from our hospital for un- and under-insured patients, enabling them to get to same-day appointments available at LCHC
• NEW: Provide needed prescriptions upon discharge free of cost to uninsured patients who lack resources through the Aurora Essential Medication Fund

MEASURES, number of:
• Complimentary rides provided
• Cab vouchers provided
• Prescriptions provided; value

For our community
• Participate in the HMC Steering Committee, comprised of persons or organizations representing all sectors of the community to pool their collective expertise, resources, and voice in ‘whole community’ efforts to positively affect health outcomes of the residents of Manitowoc County

MEASURES, number of:
• Process milestones of HMC Steering Committee
Priority No. 2:  
Alignment with Community Health Improvement Plan  
focus on behavioral health

Target population  
Residents of Manitowoc County

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

Community partner  
• Healthiest Manitowoc County (HMC)  
• Holy Family Memorial Hospital

Impact goal  
All patients who present in our hospital needing behavioral health services are identified and referred to appropriate care

Current findings  
Mental health and alcohol and other drug use (behavioral health) ranked among the top five health issues for Manitowoc County key stakeholders. In 2019, 19% of Manitowoc County adults reported a mental health condition (such as depression, anxiety disorder or post-traumatic stress disorder). Additionally, 30% of Manitowoc County residents reported binge drinking in the past month (Source #1). The rate of opioid-related hospital discharges was 490.4 per 10,000 population in 2017, higher than Wisconsin rate of 475.4 per 10,000 population (Source #2).

Our strategy  
For our patients  
• NEW: Administer depression and suicide screening at all appropriate patient encounters, including new patients and those with history of mental illness, in our hospital and clinics, and provide linkages to resources as needed

MEASURES:  
• Number of individuals screened; number scoring at risk and provided with resources

For our community  
• Started in 2018, continue to provide behavioral health informational and educational programs for community members  
  • Past impact: 2 educational programs were provided to 36 individuals in 2018  
• Participate in the HMC Substance Abuse/Mental Health Coalition, which works to create a community that helps support people who have a substance use disorder or suffer from mental illness in staying safe, getting treatment, and maintaining their recovery  
• NEW: In collaboration with Holy Family Memorial Hospital, support the development of a residential treatment program for individuals in need of substance abuse treatment. The program will provide 16 beds and 16 outpatient treatment slots, in contract with the CORE Treatment Services Company

MEASURES:  
• Number of educational programs held; attendees  
• Process milestones of HMC coalition  
• Process milestones of residential treatment program development
Priority No. 3:
Alignment with Community Strategy focus on social determinants of health – community safety

Current findings
Threats to an individual’s safety can take many forms. In 2019, 3% of respondents reported a personal safety issue (Source #1). The rate of rape for Manitowoc County was 55.3 per 100,000 in 2017. Additionally, the 2017 Manitowoc County injury-related hospitalizations rate was 519.9 per 100,000 and the 2016 injury-related death rate in Manitowoc County was 61.8 per 100,000 population. The top ranked cause of injury-related ED visits was falls (Source #2).

Our strategy
For our patients
Consistent with 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 system based on the Federal Rules of Evidence
• Refer as appropriate to medical, clinical, counseling and advocacy services – Past impact: 51 individuals were provided with SANE services and 64 referrals were made in 2017 and 2018
• NEW: Identify older adults at risk for readmission through use of the LACE tool embedded in EPIC and link those at risk with transition services. LACE refers to the length of stay, acuity of admission, comorbidities, and emergency department visit criteria used in scoring
• NEW: Provide the Bundled Hospital Elder Life Program (HELP), pairing inpatient older adults with specially-trained volunteers to keep them awake and active during the day, decreasing their risk for developing delirium during their hospital stay

MEASURES, number of:
• Individuals served; referrals provided

For our community
• Provide community sexual assault education/prevention/outreach presentations – Past impact: 290 community members were educated in 2017 and 2018
• NEW: Host Stepping On, a high-level, evidence-based program proven to reduce falls and build confidence in older people

MEASURES, number of:
• Sessions provided; attendees

Target population
Residents of Manitowoc County

Principal partners
• Aurora Health Care Medical Group (AHCMG)
• Aurora Healing and Advocacy Services (AHA)

Community partner
Local law enforcement

Impact goal
Increased safety and enhanced injury and violence prevention and response
Priority No. 3:  
Alignment with Community Strategy focus on social determinants of health – food security

Target population  
Residents of Manitowoc County

Principal partner  
Aurora Health Care Medical Group (AHCMG)

Community partners  
- Wisconsin Department of Health Services Women, Infants, and Children Program (WIC)  
- Local food pantries

Impact goal  
Increased access to nutritious foods for local residents

Current findings  
Food insecurity is defined as the disruption of food intake or eating patterns due to lack of resources. Food insecurity, long-term or temporary, may be influenced by several factors including income, employment, neighborhood conditions, transportation, race/ethnicity and disability. Adults and children who are experiencing food insecurity may be at an increased risk for a variety of negative health outcomes and health disparities, including obesity. In 2019, 4% of respondents reported their household went hungry because they were unable to afford enough food in the past year (Source #1).

Our strategy  
For our patients  
- NEW: Provide education and referrals to the WIC Special Supplemental Nutrition Program which provides supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five who are found to be at nutritional risk

MEASURES, number of:  
- Women educated; receiving referrals

For our community  
- Continue to supply cafeteria food to local food pantries  
  - Past impact: $54,636.00 worth of cafeteria food was provided in 2017 and 2018

MEASURES:  
- Dollar value of food provided

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