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 Waukesha 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.
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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</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:  
• Chronic disease  
• Senior health  
• Workforce development  
• 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 Aurora Health Care Community Board on November 19, 2018.
**Priority No. 1:**
Access, a signature community benefit focus for Aurora Health Care

**Target population**
Uninsured residents of Waukesha County

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

**Community partners**
- Lake Area Free Clinic (LAFC)
- St. Joseph’s Medical Clinic (SJMC)
- Silver Streak Cab Company
- Lake Country Cab Company

**Impact goal**
Increased access to care

**Current findings**
In 2017, 17% of the respondents delayed or did not seek medical care due to costs in the past 12 months. The percentage of adults who receive primary health services through a medical home have decreased steadily from 87% in 2006 to 68% in 2017. In addition, the number of individuals with an unmet medical need increased significantly from 4% in 2012 to 12% in 2017; those who were in the bottom 40 percent household income bracket were more likely to report this.

**Our strategy**

**For our patients**
- Provide appropriate follow-up with non-emergent patients using our emergency department (ED) for primary care
- Actively screen patients for coverage through the Marketplace or financial assistance programs and assist with application processes
- Refer uninsured and self-pay patients using our ED for primary care to Lake Area Free Clinic in western Waukesha County or St. Joseph’s Medical Clinic in the City of Waukesha
- Ensure access for seniors and other persons with transportation barriers by providing vouchers for Silver Streak Cab Company or Lake Country Cab Company

**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 LAFC or SJMC
- Transportation vouchers provided

**For our community**
- Provide free diagnostics and specialty care to patients referred from LAFC and SJMC through referral voucher program
- Provide hospital leadership to serve as board members for LAFC and SJMC

**MEASURES:**
- Number of vouchers from LAFC and SJMC redeemed
Priority No. 2: Community Health Improvement Plan, focus on Behavioral Health

**Target population**
Residents of Waukesha County

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

**Community partners**
- St. Joseph’s Medical Clinic
- Waukesha County Health Department
- Waukesha County Aging & Disability Resource Center

**Impact goal**
Increased 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 Waukesha County. In 2017, 18% of Waukesha County adults reported a mental health condition (such as depression, anxiety disorder or post-traumatic stress disorder) in the past three years, and 4% of adults in Waukesha County reported feeling so overwhelmed in the past year that they considered suicide. The percentage of residents with an unmet mental health care need in the past year increased from less than 1% in 2012 to 3% in 2017. According to the 2016 County Health Rankings, Waukesha County adults reported an average of 3.1 mentally unhealthy days in the past 30 days.

**Our strategy**

**For our patients**
- Provide ABHS social worker in our ED to assess and appropriately expedite referrals for behavioral health services
- Provide behavioral health consults and referrals through ABHS telepsychiatric program
- Provide post-traumatic stress disorder (PTSD) screening calls to trauma patients 30-45 days after discharge; provide referrals to mental health provider
- Provide Just Listen support program in which a “mentor” will be contacted either by ED staff or inpatient staff after a patient has come in with an issue related to opioid or heroin use. The mentor follows the patient after discharge and encourages appointments with mental health professionals or rehab programs with an end goal of sobriety.

**MEASURES, number of:**
- Patients screened by social worker or through telepsych
- PTSD calls provided; referrals
- Just Listen referrals made

**For our community**
- Provide peer-led trauma support groups, open to the public, for anyone who has experienced traumatic injury
- Provide Chronic Pain Self-Management program, free and open to the public
- Provide community education presentations including: Living Alone without Being Lonely, Caring for the Caregiver, Autism, ADHD, etc.

**MEASURES, number of:**
- Support groups provided; attendees
- Programs held; attendees
- Presentations provided; attendees and evaluation results
Priority No. 3:
Community benefit hospital focus on chronic disease

Current findings
Chronic conditions such as asthma, diabetes, heart disease and cancer can result in health complications, compromised quality of life and burgeoning health care costs. As the most common and preventable of all health issues, chronic diseases account for 86% of health care costs nationwide.\(^1\) Chronic diseases were identified as one of the top five health issues in the community by the residents (Source #1) and key informants (Source #3). Additionally, in 2017, 69% of adults in Waukesha County were classified as being overweight, a statistical increase from the baseline of 59% in 2006. Overweight and obesity can increase the risk for high blood pressure, high cholesterol levels, coronary heart disease, type 2 diabetes, stroke, some cancers, low quality of life and other health conditions.\(^2\)

Additionally, within Aurora’s care population are an estimated 8,000 people with undiagnosed hepatitis C, and over 37,000 in the state.\(^3\)

Our strategy
For our patients
• Provide Cancer Nurse Navigator (CNN) services for all cancer patients, regardless of payer status
• Provide low dose lung CT screenings and referrals
• Provide chiropractic and therapeutic massage sessions free to cancer patients
• Administer cancer distress tool and provide appropriate referrals for follow-up
• Hold annual cancer survivorship event for patients and their caregivers to provide information about cancer support resources and to address quality-of-life issues during and after treatment
• As part of a system-wide population health strategy, identify and screen clinic patients at risk for hepatitis C; treat those who test positive

MEASURES, number of:
• New patients served through CNNs
• Screenings provided; number of individuals identified for follow-up
• Chiropractic and massage sessions provided
• Patients completing distress tool; referrals
• Attendees
• Hepatitis C data collected regionally as part of Aurora Health Care Waukesha & Jefferson service area


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

For our community

• Provide free community education classes for chronic diseases
• Provide evidence-based Healthy Living with Diabetes programs, free and open to the public, to cover understanding diabetes, getting the right healthcare, monitoring blood glucose, learning about food and diabetes, adding activity to one's life, understanding medications and living with diabetes
• Provide free community diabetes support groups, facilitated by diabetes educators, with presentations by Aurora providers on topics including physical fitness, nutrition, rehab, pharmacy and well-being
• Provide community outreach blood pressure screenings at various community events
• Provide cancer screening events, free to the public
• Continue to partner with the YMCA at Pabst Farms to offer Habit Heroes free health and wellness program to fifth through eighth grade students. Program goals are to:
  - Positively impact children's well-being
  - Prevent health risks associated with inactivity and poor nutrition
  - Teach habit tracking and its importance
  - Provide incentives for personal growth and habit adoption
  - Create opportunities to replace poor habits with healthier ones
• Develop a Junior Chef Cooking Club for children ages seven through twelve years of age aimed at teaching about healthy cooking methods and eating habits

MEASURES:

• Numbers of screenings or sessions
• Numbers of attendees and evaluation data
• Process milestones of program development
Priority No. 3: Community benefit hospital focus on senior health

Current findings
In 2016, 15% of the Waukesha County population was 65 years or older. Inadequate health literacy disproportionately affects older adults in the United States. Improving health literacy is increasingly critical as information, choices, and decisions about health care and public health, have become more complex.

Our strategy
For our community
• Host monthly Summit Senior Breakfast Club, providing educational sessions on a variety of health topics including chronic disease, fall prevention and medication adherence
• Provide Stepping On, a high-level, evidence-based program proven to reduce falls and build confidence in older people
• Host Boost Your Brain and Memory program, an evidence-based, seven week workshop focused on brain fitness through physical activity, emotional health, intellectual activity, nutrition, spirituality and social engagement
• Host AARP Smart Driving focused on teaching driving techniques that make a difference in the elder population by keeping them active, engaged in their communities and their homes. Seniors will learn safe driving strategies and refresh their knowledge of the latest rules and hazards of the road
• Provide Advanced Directives classes, free and open to the public

MEASURES:
• Number of sessions held; attendees and evaluation data
• Number of advance directives completed

Target population
Residents of Waukesha County aged 65 years and older

Principal partner
• Aurora Health Care Medical Group (AHCMG)

Community partners
• Waukesha Aging and Disability Resource Center
• Community Senior Centers
• AARP

Impact goal
Increase awareness of health issues among seniors

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Priority No. 3: Community benefit hospital focus on workforce development

Current findings

The 2016 Waukesha County injury-related hospitalizations rate was 485.1 per 100,000. The injury-related emergency department (ED) visit rate for Waukesha County was 5,209.6 per 100,000, which is lower than the Wisconsin rate (7,392.4 per 100,000). The injury-related death rate in Waukesha County was 80.1 per 100,000 population compared to the state rate of 81.2 per 100,000 population.

To improve these rates and outcomes for injured persons, well-trained emergency response providers are essential.

Our strategy

For our community

- Provide educational sessions for EMS with speakers on evidence-based best practices including cardiac emergencies, trauma, working with pediatric patients and obstetrics
- Provide clinical experiences for paramedic students, both in our ED and ancillary areas of the hospital
- Provide Advanced Cardiac Life Support classes for paramedic students
- Provide Sim Man/Sim Baby trainings for paramedic students

MEASURES, number of:

- Sessions provided; attendees

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Target population
Local EMS providers

Principal partner
• Aurora Health Care Medical Group (AHCMG)

Community partner
• Local Emergency Medical Services (EMS) agencies

Impact goal
Increased access to educational opportunities for EMS providers

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

Target population
High school students and persons with disabilities in Waukesha County

Principal partner
• Aurora Health Care Medical Group (AHCMG)

Community partners
• Kettle Moraine High School of Health Sciences – a public charter school developed under the leadership of educators and local health care partners as a way to increase opportunities for students to learn in an immersive environment and open the door to the dynamic jobs and paths available in the world of health care
• Pewaukee High School INSIGHT program – an innovative education capstone, designed by Pewaukee High School, to give students hands-on, real-world experiences immersed in a professional setting
• Wisconsin Division of Vocational Rehabilitation (DVR)
• Opportunities, Inc.

Impact goal
Increased opportunities for stable employment

Current findings
Social determinants of health are the structural elements and conditions in which people are born, grow, live, work and age. They include factors such as socioeconomic status, education, the physical environment, employment, and social support networks, as well as access to health care. A steady job in favorable working conditions means more than just a paycheck. Employment can also provide the income, health insurance and other benefits, and stability necessary for good health.

Our strategy

For our community
• Partner with area school districts to support High School of Health Sciences in Kettle Moraine, providing educational sessions
• Provide job shadowing experiences for students of Pewaukee INSIGHT program, with rotations including radiology, lab, nursing, medical assistant, primary care physician, pharmacy, Emergency Department, and rehab
• In partnership with the Wisconsin Division of Vocational Rehabilitation (DVR), facilitate the system-wide Temporary Work Experience internship program for individuals with cognitive and physical barriers, creating new and diverse talent pipelines for those with diverse abilities. The fully-compensated, 90-day internship is intended to give job seekers first-hand experience on job duties, role expectations and workplace culture. Interns have the support of an assigned job coach who stays with them throughout the duration of the internship and works with them to develop an individual plan and transitional steps to meet job role expectations. At the end of the internship, a review takes place with the goal of hiring the intern into a permanent position as a team member.

MEASURES, number of:
• Educational sessions provided; attendees
• Shadowing experiences provided
• Individuals provided with temporary work experience positions system-wide and at AMCS