

2020 - 2022

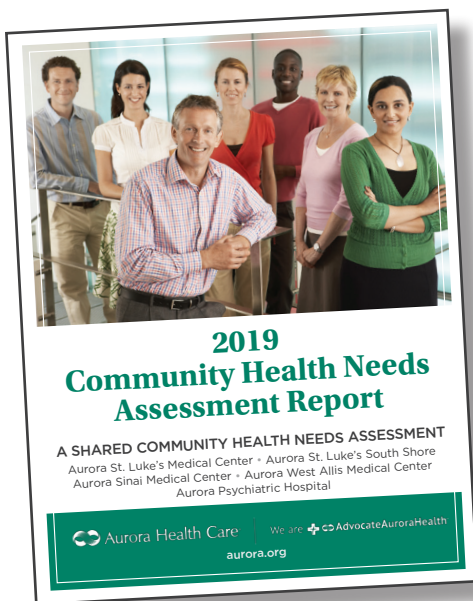
Implementation Strategy

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 behavioral health care in Milwaukee County and across our Wisconsin footprint. 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 Milwaukee County Community Health Needs Assessment Report is available here: www.aurora.org/commbenefits.



We are  Advocate Aurora Health

Aurora Psychiatric Hospital
1220 Dewey Avenue
Wawautosa, WI 53213

Our implementation strategies are organized into three main categories aligned with three core principles of community benefit:

Category	Community Benefit Core Principle
<p>Priority #1</p>	<p>Access and Coverage <i>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 behavioral health care.</i></p>
<p>Priority #2</p>	<p>Community Health Improvement Plan <i>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.</i></p>
<p>Priority #3</p>	<p>Social Determinants of Health <i>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.</i></p>

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>.

This Community Benefit Implementation Strategy was adopted by the Aurora Health Care Community Board on August 7, 2019.

Priority No. 1:

Access, a signature community benefit focus for Aurora Health Care

Target population

Adults and children in need of behavioral health care

Principal partner

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

Community partner

- Progressive Community Health Center
- Milwaukee Health Care Partnership (MHCP)

Impact goal

Increased access to behavioral health care



Current findings

Mental health and alcohol and other drug use (behavioral health) ranked among the top five health issues for Milwaukee County. In 2018, 28% of Milwaukee County adults reported a mental health condition (such as depression, anxiety disorder or post-traumatic stress disorder), and 3% of respondents reported someone in their household had an unmet mental health need (Source #1).

Our strategy

For our patients

- Continue to provide Aurora behavioral health counselors at all 16 Aurora Health Care hospitals, either in person or via secure video link, to conduct intake assessments in the ED and direct patients to appropriate resources and levels of care
 - Past impact: 20,893 assessments were provided in 2017 and 2018
- Continue to provide tele-intake urgent care screenings to direct patients to appropriate resources and levels of care
 - Past impact: 381 urgent care assessments were provided in 2017 and 2018
- NEW: Provide psychiatric assessments on admission to patients in Partial-Hospital programs via telehealth
- NEW: Provide ABHS Call Center coverage, including Intake Center telephone triage services linking patients to Aurora St. Luke's South Shore (Milwaukee County) and Aurora Sheboygan Memorial Medical Center for care
- NEW: Expand ABHS Call Center coverage to include Partial-Hospital and Intensive Outpatient programming
- Continue to provide inpatient tele-psychiatry consultations at all Aurora Health Care hospitals, providing recommendations to all patients appropriate to their needs
 - Past impact: 1,165 inpatients were provided with consultations in 2017 and 2018
- Continue to provide Partial-Hospital, Intensive Outpatient and Clinic-Based Outpatient care at ABHS's Glendale and Muskego hospital-based clinic locations
 - Past impact: 677 patients were served at Glendale and 537 at Muskego in 2017 and 2018
- Continue to expand outpatient capacity by partnering with outside organizations, through Clinically Integrated Network (CIN) agreements, to provide coordination of care and communication with primary care providers
 - Past impact: 312 referrals were made through CIN agreements in 2018

- Continue the behavioral health - primary care integration model of care at New Berlin, Oshkosh, and Kenosha adult and Sheboygan pediatric sites
 - Past impact: 121 patients served through this model in 2017, with work to include new sites completed in 2018 and 2019

MEASURES, number of:

- Assessments provided
- New and follow-up patients served; no shows
- Appointments scheduled
- Referrals provided
- Primary care physicians providing behavioral health care

For our community

- By 12/31/2022, continue to expand to 24/7 coverage for both residents and providers to extend clinical coverage after hours and provide information on behavioral health treatment
 - Past impact: 117,560 calls were received in 2018
- NEW: Through the MHCP and in response to the lack of a psychiatric Emergency Department within Milwaukee County, provide leadership on the Behavioral Health Provider group dedicated to increasing inpatient and outpatient behavioral health care capacity and psychiatric crisis center planning

MEASURES:

- Number of calls received
- Process milestones in expanding service and participation in MHCP Behavioral Health Provider Group

Priority No. 2:

Alignment with Community Health Improvement Plan focus on alcohol and other drugs

Target population

Individuals in need of care for alcohol and other drug abuse (AODA)

Principal partners

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

Impact goal

Increased and improved linkages to appropriate care for AODA treatment

Current findings

In 2018, 32% of Milwaukee County residents reported binge drinking in the past month (Source #1). When compared to other Wisconsin counties, both the 2015-2017 age-adjusted ER rate due to substance use (42.6 per 100,000 population) and age-adjusted hospitalization rate due to substance use (21.3 per 100,000 population) in Milwaukee County is in the worst quartile (Source #2). According to the CDC, the rate of dispensed opioid prescriptions peaked in 2012 and has since decreased steadily. However, the rate of opioid prescriptions dispensed was higher in Milwaukee County at 76.8 prescriptions per 100 population than the state rate (52.6/100 population). Residents and key informants identified substance use as one of the top health issues challenging the community (Sources #1, #3).

Our strategy

For our patients

- NEW:
 - Provide two Primary Care Hubs for Medication-Assisted Treatment (MAT), one in Milwaukee and one in Green Bay, offering 5-day per week primary care provider coverage for stable opioid recovery patients
 - Provide a Pain Management Center in Milwaukee, offering alternatives to opioid pain management
 - Provide an intensive outpatient suboxone clinic in Oshkosh, to treat adults who are dependent on opioids
 - Provide partial-hospital alcohol and other drug abuse (AODA) care, including suboxone treatment, in Sheboygan
 - Provide Outpatient and Intensive Outpatient addiction care for veterans
- As established in 2018 and expanded in 2019, continue to provide tele-psychiatry medication management outpatient services at ABHS Marinette, Green Bay, Oshkosh, and Sheboygan Clinics
 - Past impact: 53 patients were served in Marinette in 2018

MEASURES, number of:

- New and follow-up patients served; no shows



Priority #2 continued



For our community

- The Lighthouse on Dewey is a stand-alone facility dedicated to addressing the physical, spiritual, and emotional effects of drug and alcohol addiction to build the foundation for life-long recovery. At Lighthouse, continue to provide non-clinical meeting space seven days a week to accommodate support groups serving individuals and their families through the journey to maintain sobriety. Support groups utilizing Lighthouse include Alcoholics Anonymous, Cocaine Anonymous, Heroin Anonymous, Narcotics Anonymous, SMART Recovery, Women for Sobriety, ALANON, Couples in Recovery, Family Dynamics, Parents of Addicted Children, Veterans groups, and more
 - Past impact: An average of 39 support groups supporting 947 individuals utilized Lighthouse on Dewey in 2017 and 2018

MEASURES, average number of:

- Hours per week Lighthouse on Dewey is utilized by recovery support groups
- Support groups and individuals attending per week

Priority No. 3:

Alignment with Community Strategy focus on social determinants of health – workforce development

Target population

Behavioral health care providers

Principal partner

Aurora Health Care Medical Group (AHCMG)

Community partner

Local schools

Impact goal

Increased numbers of professionals equipped to respond to behavioral health care needs



Current findings

Across the majority of Aurora's footprint, there are HRSA-designated mental health provider shortages from the census tract level to a county-wide level. Efforts to recruit, train and retain providers are necessary to increase the numbers of providers available to patients in the Aurora service area. Additionally, as with all health professions, continuing education is highly valuable for behavioral health professionals. It ensures that providers' practice is current, aids in the development of contact with other behavioral health professionals, provides information about the health system, and enhances self-efficacy.

Our strategy

For our patients

- Continue to hire additional behavioral health providers system-wide
 - Past impact: 40 new behavioral health providers were hired in 2018
- NEW: Support placement of qualified treatment trainees (QTT), masters-level behavioral health providers working toward their license, system-wide
- Continue to host and provide continuing education through the Evidence-Based Health Series of lectures and intensive workshops to enhance knowledge in specialized areas of behavioral health and requested clinical topics
 - Past impact: 1,205 individuals were educated in 2017 and 2018
- Continue to provide immersion program to educate hospital medical inpatient RNs on working with behavioral health patients
 - Past impact: 8 RN leaders were trained in 2017 and 2018
- Continue to provide Verbal Defense and Influence (VDI) training on how to manage aggressive behavior for providers within Aurora hospital and outpatient facilities
 - Past impact: 361 providers were trained in 2017 and 2018
- Continue to provide training to primary care providers and support staff on working with behavioral health patients in Aurora Health Care facilities
 - Past impact: 14 trainings/consultations provided; 105 individuals trained

MEASURES, number of:

- Providers employed, by type; new providers
- QTTs placed
- Individuals educated/trained

For our community

- Continue to provide continuing education series to school professionals on recognizing behavioral health issues and improving the outlook for students who would benefit from behavioral health services
 - Past impact: 17 lectures with 178 individuals attending were provided in 2017
- NEW: Support six Mequon-Thiensville School District Social/Emotional Coaches through monthly training sessions, on topics such as suicide and risk assessment, and case consultations

MEASURES, number of:

- Lectures held; individuals trained
- Training sessions and consultations provided

¹ Health Resources & Services Administration, Shortage Areas. Available at <https://data.hrsa.gov/topics/health-workforce/shortage-areas>. Accessed May 14, 2019.

² Association of American Medical Colleges and the American Association of Colleges of Nursing – Lifelong Learning in Medicine and Nursing. Available at <http://www.aacn.nche.edu/education-resources/MacyReport.pdf>. Accessed May 17, 2016.