Our community role

Aurora Psychiatric Hospital has been providing quality behavioral health to community members of all ages through inpatient and outpatient services since 1884. As caregivers, we apply our knowledge, skills, time and charitable resources to respond to community behavioral health needs, focusing primarily on Milwaukee County.
Assessing community health status – an ongoing commitment

Improving the health of our communities begins with assessing community health status. Since 2003, we have underwritten a community health survey of our service area every three years, conducted in partnership with the City of Milwaukee and other Milwaukee County Health Departments. This helps them to focus their resources on population health issues and enables us to align our charitable resources and expertise to respond to identified community health needs in a coordinated fashion.

During 2013, we published our 2013 Community Health Needs Assessment (CHNA) Report and 2014 Implementation Strategy. This comprehensive CHNA was completed in collaboration with our colleagues in the Milwaukee Health Care Partnership (mkhecp.org), a public private consortium dedicated to improving care for underserved populations in Milwaukee County. All findings are detailed in our 2013 CHNA Report and 2014 Implementation Strategy, which you can find by visiting Aurora.org/CommBenefits. When you do, please note that you are invited to submit comments on the Community Health Needs Assessment.

Here in this 2013 Community Benefit Report we present a few highlights from the past year, organized around three priorities corresponding to three core principles of community benefit.

Priority #1:
Access and coverage for persons in our community with disproportionate unmet health needs.

Our implementation strategy considers four dimensions of access including: Availability, affordability, accessibility, and accommodation.

Availability and affordability
To minimize the wait times between assessments and each patient’s first appointment with a psychiatrist, we piloted a 45-minute telephone assessment to replace the two-hour in-person assessment.

Additionally, Aurora Health Care launched an integrated, system-wide enrollment strategy in 2013 to help uninsured persons obtain affordable and/or subsidized health insurance coverage through the Health Insurance Marketplace. Through this approach, all of Aurora’s financial assistance advocates, including ours:

- Were trained to become certified application counselors at their respective facilities
- Joined with Aurora Family Service Public Benefits team to implement and staff 59 patient/community events in their respective communities

Aurora’s comprehensive enrollment strategy continues in 2014 and also includes a toll-free hotline.

Accessibility
Not all persons needing behavioral health services require intensive outpatient or partial hospitalization programs. To increase access points for patients, we provided space for 30 community-support groups that address a variety of mental health and substance abuse issues, including Alcoholics Anonymous, Cocaine Anonymous, Overeaters Anonymous and Al-Anon.

Accommodation
Patients with acute mental health or substance abuse issues experience delays in getting the help they need when they arrive in hospital emergency departments. To assure the right levels of care and services, we embedded Aurora behavioral health specialists in each of our four Aurora hospital emergency departments in Milwaukee County to conduct intake assessments. In 2013, Aurora Behavioral Health Specialists at Aurora Sinai Medical Center, Aurora St. Luke’s Medical Center, Aurora St. Luke’s South Shore, and Aurora West Allis Medical Center provided intake assessments to a total of 5,329 Milwaukee County residents.
Behavioral and mental health services in Milwaukee County

In April 2011, the Milwaukee County Board of Supervisors passed a resolution supporting efforts to redesign the Milwaukee County mental health system and create a mental health redesign and implementation task force (Redesign Task Force) to provide the Board with data-driven implementation and planning initiatives based on the recommendations of various public and private entities. (See county.milwaukee.gov/MHRedesign.htm.) To fulfill our role in the Milwaukee County Mental Health Redesign Task Force, our hospital president actively served as the co-chair. In addition, our caregivers actively served on six action teams: System of Care, Crisis System Redesign, Continuum of Community-Based Services, Integrated Multi-System Partnerships, Reduction of Inpatient Utilization and Cultural Intelligence. In 2014, these action teams will present recommendations for improving mental health within their respective areas.

Evidence-based behavioral health series for health professionals

The future of our community relies on our ability to continually advance knowledge and expertise of mental and behavioral health specialists. In 2013, we:

- Provided our annual continuing education series of eight lectures to enhance knowledge in specialized areas of our profession with topics including self-care for the caregiver, psychotherapy with the elderly, spiritual care in therapy, legal and ethical issues surrounding the treatment of minors, and treating chronic grief
- Provided a four-day intensive workshop series featuring national speakers on requested clinical topics including internal family systems, ethics and boundaries for providers, and confusing medical ailments with mental illness
- Offered our Behavioral Health Issues in the School series. This continuing education series is comprised of four lectures per education semester and is aimed to help school professionals better understand the etiology of behavioral health illnesses, as well as treatment alternatives and strategies for coping with behavioral health issues in schools. Some of the topics presented include: students with Asperger’s Syndrome in schools, how to effectively engage chronically inflexible children, dating and technology, and the clinical aspects of para-suicidal behavior in teenagers.

Priority #2: Build links between our clinical services and the local health department community health improvement plan (CHIP)
Priority #3:  
Address the underlying causes of persistent health problems

**Alcohol, drug dependence, and substance abuse**

To promote the efficacy and proliferation of 12-step recovery support groups for those in recovery, and to increase accessibility to support groups, in December 2013 we completed the restoration of the new **Lighthouse on Dewey** - formerly known as the President’s House. The Lighthouse on Dewey is now a modern space for hosting concurrent 12-step group programs and is available on evenings and weekends for family programming, leisure activities and retreats.

The restoration also included a Women’s Center for women in recovery who have experienced physical, sexual, and/or emotional trauma. This initiative included rooms and halls of various sizes for large and small meetings.

In addition to the restoration project, we provided Family Program AODA (alcohol and other drug abuse) education to patients, families and the community at large at our facility every Wednesday evening. There were 1,900 individuals who attended these sessions throughout 2013.

**Kradwell School**

Aurora Psychiatric Hospital also hosts Kradwell School, a unique learning environment that promotes success while utilizing a 5:1 student-teacher ratio. In 2013, Kradwell celebrated 50 years as one of southeastern Wisconsin’s only specialty schools for children and adolescents who have behavioral health issues. We celebrated 27 students who graduated in 2013, which brings the total number of Kradwell graduates to 714 since 1963.

In addition, $164,645 in scholarship funds were awarded to families in 2013.

**Aurora Psychiatric Hospital 2013 Community Benefits**

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial assistance (charity care) at cost*</td>
<td>$180,000</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td><strong>$180,000</strong></td>
</tr>
<tr>
<td>Community health improvement and education services, and community benefit operations</td>
<td>$600,056</td>
</tr>
<tr>
<td>Health professions education</td>
<td>$1,012,388</td>
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<tr>
<td>Subsidized health services (clinics)</td>
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<tr>
<td>Cash and in-kind contributions for community benefit</td>
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</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td><strong>$2,210,245</strong></td>
</tr>
<tr>
<td><strong>2013 Total Community Benefits</strong></td>
<td><strong>$2,390,245</strong></td>
</tr>
</tbody>
</table>

*Cost-to-charge ratios are based on Wisconsin Hospital Association percentages.

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Every gift can change a life

During 2013, as part of a patient service area in Milwaukee County, a total of 174 APH caregivers pledged $56,222 to the Aurora Partnership Campaign in support of the not-for-profit agencies, organizations and causes in our community that are most important to them. The campaign offers more than 1,600 funds that include more than 300 Aurora funds, local United Way agencies, and other not-for-profit organizations responding to important community needs.

To learn how you can make a gift to support programs featured in this report, please visit Aurora.org/Foundation