Improving the health of our communities is a community-wide effort and begins with assessing community health status every three years. We obtain input from community members and public health representatives and consult with our hospital staff and physician partners to prioritize the community health needs identified, and develop specific targets and measures for the needs we are best positioned to address. Our implementation strategies are organized into three main categories in alignment with three core principles of community benefit as shown in this progress report.

**Priority #1**  
*Increase access for persons in our community with disproportionate unmet health needs.*

**Focus | Access is an Aurora Health Care signature community benefit focus**

Based on the most recent key informant interviews in all the counties where an Aurora hospital is present, behavioral health consistently ranked among the top five community health issues. Behavioral health problems can impact one’s physical well-being, and appropriate referrals for mental health and substance abuse treatment are crucial. Our hospital is the hub for Aurora’s comprehensive behavioral health services department, which extends behavioral health care into hospital and primary care settings across Aurora’s footprint. We continually push to expand and extend our ability to provide access points to people in the communities we serve, with three inpatient locations, 3 hospital-based outpatient department locations, 44 ambulatory clinic locations and approximately 200 professional staff. During 2017, we:

- Provided 3,757 telephonic screenings in hospital and clinic settings to expedite referrals to appropriate levels of care.
- Conducted 332 urgent care evaluations to advance referrals to appropriate levels of care.
- Served 44 new patients and 185 follow-up patients with medication management outpatient telepsych at the Aurora Marinette Clinic.
- Provided 898 inpatients with tele-psychiatry consultations at hospitals across the Aurora footprint.
- Served 353 patients in Glendale and 211 in Muskego primary care locations through partial hospital intensive outpatient and clinic-based outpatient care.
- Served 363 patients through our hospital-based behavioral health clinic in Menomonee Falls.
- Served 121 patients through the behavioral health-primary care integration model.
- Referred 417 patients to Clinical Integrated Network providers.
- Received 149,163 calls from patients or providers through our behavioral health call center.
Priority #2 | Build links between our clinical services and local community health improvement plans.

Focus | Alcohol, drug dependence and substance abuse recovery support

The continuum of care for persons with substance use disorders is essential for preventing relapse. Transitional living and support groups are essential components of recovery. Research has shown that support groups facilitate recovery and reduce health care costs. They also promote a sense of belonging within the community and help in the development of self-efficacy. In 2017 we:

- Opened our new Alumni House to provide expanded accommodations in a home-like transitional living facility on our hospital campus, supporting the continuum of care.
- Hosted 144 not-for-profit support groups for a total of 3,675 individuals who utilized the accommodations in our Lighthouse on Dewey. Averaging 49.3 hours of facility use by community groups per week, this facility increases access to critical ongoing support needed by individuals maintaining a sober lifestyle.

Priority #3 | Address the underlying causes of persistent health problems.

Focus | Health professions and community education, workforce development

Shortages of behavioral health professionals are a national, state, and local issue. Offering continuing education ensures that providers’ practice is current, aids in the development of contact with other behavioral health professionals, and enhances self-efficacy. To address this shortage in 2017, we provided education through two strategic program offerings:

Evidenced-based behavioral health series for health professionals:
- Provided 10 continuing education programs and 3 intensive workshops with 542 attendees; 366 (68%) reported that they will change a specific aspect of their practice as a result of the lecture or workshop.
- Trained 3 Aurora RN unit leaders through an immersion program on working with behavioral health patients.
- Trained 182 Aurora providers in Verbal Defense and Influence on how to manage aggressive behavior.
- Conducted 14 trainings for 233 primary care providers and support staff on working with behavioral health patients.

Behavioral Health issues in the schools:
- Hosted 17 continuing education lectures for school professionals with 178 attendees.

Additionally, to address the growing behavioral health needs of Aurora’s patient populations, we hired, employed or trained:
- 8 psychiatric nurse practitioners system-wide.
- 8 clinical nurse specialists in behavioral health.
- 12 geriatric psychiatric providers.
- 21 additional psychiatry residents/fellows.
- 1 consultation liaison psychiatric fellow.
- 4 psychology residents, with 1 retained.
Education can be challenging for children experiencing behavioral or mental health issues. Established in 1963 on our campus, Kradwell School is a private, nontraditional and nonsectarian school for children in grades 5 through 12 that promotes success while utilizing a 5:1 student-teacher ratio. Kradwell specializes in serving students who struggle to succeed in traditional school environments. The teachers and support staff develop educational plans tailored to each student and any conditions they may have, such as dyslexia, ADD/ADHD, anxiety, bipolar disorder, depression, PSTD, OCD, reactive attachment disorder, Asperger’s syndrome and more.

In 2017 more than $57,000 in scholarship funds were awarded to families in need.

Every gift can change a life.

Aurora Partnership Campaign

During 2017, a total of 219 hospital caregivers pledged $73,055 through the Aurora Partnership Campaign to support the not-for-profit causes and organizations most important to them, including Aurora’s Well Community programs.

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

<table>
<thead>
<tr>
<th>Aurora Health Care 2017 Community Benefit Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial assistance (charity care) at cost*</td>
</tr>
<tr>
<td>Other means-tested programs at cost*</td>
</tr>
<tr>
<td>Subtotal**</td>
</tr>
<tr>
<td>Community health improvement services and community benefit operations</td>
</tr>
<tr>
<td>Health professions education</td>
</tr>
<tr>
<td>Other cash and in-kind contributions for community benefit</td>
</tr>
<tr>
<td>Subtotal</td>
</tr>
<tr>
<td>Total 2017 Community Benefits</td>
</tr>
</tbody>
</table>

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

To see our most recent Community Health Needs Assessment report and Implementation Strategy plan, please visit www.aurora.org/commbenefits.