2017 Update Implementation Strategy

Aurora Sheboygan Memorial Medical Center 2017 Implementation Strategy Update

In 2013, Aurora Sheboygan Memorial Medical Center (ASMMC) completed a Community Health Needs Assessment (CHNA) and CHNA Report and 2014 Implementation Strategy, which was reviewed by the Social Responsibility Committee of the Aurora Health Care (AHC) Board of Directors on November 22, 2013, and published on the AHC web site.


Experience in carrying out the Implementation Strategy in 2016 informed the process for updating it for 2017. Our ASMMC implementation strategy is organized into three main categories in alignment with three core principles of community benefit as shown below.

<table>
<thead>
<tr>
<th>Category</th>
<th>Community Benefit Core Principle</th>
<th>Focus area</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Priority #1: Access</strong></td>
<td>Access for persons in our community with disproportionate unmet health needs</td>
<td>• Access</td>
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<td>• Health care coverage</td>
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<tr>
<td><strong>Priority #2: Community Health Improvement</strong></td>
<td>Build links between our clinical services and local health department community health improvement plan</td>
<td>• Alcohol, tobacco and other drug use and mental health</td>
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<td>• Health knowledge and health literacy</td>
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<td>• Nutrition, physical activity and overweight/obesity</td>
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<tr>
<td><strong>Priority #3: Community Benefit Hospital Focus</strong></td>
<td>Address the underlying causes of persistent health problems</td>
<td>• High blood pressure and cholesterol, stroke</td>
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<td>• Cancer</td>
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<td>• Sexual assault</td>
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<td>• Hepatitis C</td>
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We help people live well. Our hospital offers all the benefits of a true community hospital. Yet, as part of Aurora’s integrated health care system (IHCs), our hospital benefits from Aurora’s system-wide expertise and programing in areas including women’s health and cancer care, greatly expanding the scope of options, opportunities and expertise we can offer to our patients in settings across Sheboygan County. When this is the case, you find the designation [IHCs](#) with measures reflecting regional and/or system-wide targets, tracking and reports.

**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.
Special focus: Health Disparities
Providing culturally competent and appropriate care has always been a priority for us in helping people live well. In addition to the demographic data already collected by our providers, we will be making an extra effort to collect demographic information on individuals touched by the programs in our Implementation Strategies. This will support our efforts to identify disparities and work to address them.

Significant health needs/issues not specifically addressed in our implementation strategy and the reason
The implementation strategy does not include specific strategies for diabetes and heart disease/conditions, as these are part of the standard continuum of clinical care at ASMMC and Aurora Health Care Medical Group clinics. Diabetes and heart disease/conditions are covered within our stroke awareness efforts, which provide education on reducing risk factors, such as maintaining a healthy weight, eating healthy foods, engaging in physical activity and preventing or controlling high blood pressure and cholesterol.

Note: Our implementation strategies do not constitute the entirety of the community benefits our hospital provides each year. For an annual accounting of the community benefits, please see our most recent report: http://www.aurora.org/commbenefits. A new CHNA process is currently under way, which will provide updated data for use in development of a new Implementation Strategy for 2018-2020.
Focus | Access is an Aurora Health Care signature community benefit focus

Based on the 2014 Sheboygan County Community Health Survey:
- 14% of respondents reported that in the past 12 months, someone in their household had not taken their prescription medication due to costs (up from 12% in 2011).
- 15% of respondents reported unmet medical care in the past 12 months (up from 9% in 2008).
- 16% of respondents reported unmet dental care in the past 12 months (up from 7% in 2008).

Access to medical care can detect and treat disease at an earlier stage, improve overall health, prevent disease and disability, and reduce preventable deaths. Likewise, access to oral health services can prevent cavities, gum disease and tooth loss, improve the detection of oral cancer and reduce future dental care costs.

Principal partner
- Aurora Health Care Medical Group (AHCMG)

Community partners
- Lakeshore Community Health Center (LCHC) – A Federally Qualified Health Center that provides primary and preventive medical, oral and behavioral health services to uninsured and underinsured individuals in Sheboygan County and surrounding communities
- East Central Income Maintenance Partnership/Partners for Community Development – Two federal grants were awarded in 2013 for the sole purpose of assisting low income, underinsured or uninsured individuals and families by providing resources for education and enrollment in the ACA Marketplace
- Sheboygan County Affordable Care Act Task Force

Target population
- Uninsured and Medicaid-eligible persons seeking primary care in our hospital Emergency Department (ED)

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| Ongoing    | Number of non-emergent ED visits without a primary care physician | Annual volume | • Decreased ED admissions for primary care needs  
|            | Of those ED visits, number who saw an Aurora Health Care primary care provider within 28 days | | • Ensured coverage and care for uninsured and Medicaid-eligible patients using our ED for primary and dental care |
| Ongoing    | Number of ED patients referred to LCHC to establish a health home | Annual volume | Reduction in ED visits by Medicaid-eligible and uninsured patients previously treated in our ED |

**IHCS**

**Continue to provide operating costs to maintain reliable transportation services for patients in Plymouth**

- **Ongoing**: Number of rides provided  
  | Annual volume | Increased access to care for patients with transportation limitations |

**Provide necessary ancillary services including lab, radiology and pharmacy for Lakeshore Community Health Center**

- **Ongoing**: Number of physicians volunteering, hours  
  | Annual volume | Increased access to care, including ancillary services for Medicaid-eligible and uninsured patients |
- **Ongoing**: Number of ancillary services provided by type  
  | Annual volume | |

**Provide telepsychiatry consultations at our hospital to respond to behavioral health needs and link patients with appropriate behavioral health services**

- **Ongoing**: Number of patients provided with telepsychiatry consultations  
  | Annual volume | Increased access to behavioral health services |

**Through an Aurora Health Care Better Together Fund grant:**

- **establish tele-psychiatry services and hire a psychiatric provider at Lakeshore Community Health Center in Sheboygan and Manitowoc County**
Focus | Alcohol, tobacco and other drug abuse and mental health

- Among the key informants interviewed, mental health (ranked #1) and alcohol and drugs (ranked #2) were included as top five health issues in Sheboygan County.
- Based on findings from the County Health Rankings, Sheboygan County has far more residents per mental health provider as compared to Wisconsin and the national benchmark.
- Based on data from the Wisconsin Hospital Patient Data System, hospital ED visits and inpatient hospitalization with opioid-related diagnoses has increased steadily in Sheboygan County and Wisconsin.

According to the Substance Abuse and Mental Health Services Administration, the number of people using, misusing and abusing illicit and prescription opioids has been on the rise. Health care providers have increasingly been prescribing opioids for the treatment of pain at an alarming rate. With that comes an increased risk of overdose and accidental death.

Overall health depends on both physical and mental well-being.

Principal partners
- Aurora Health Care Medical Group (AHCMG)
- Aurora Pharmacies

Community partners
- Healthy Sheboygan County 2020
- Lakeshore Community Health Center
- Sheboygan County Division of Public Health
- Sheboygan Heroin Task Force
- Advanced Pain Management
- CSM Marsho Family Medical Group
- Law enforcement – county and local
- Mental Health America
- St. Nicholas Hospital
- Prevea Health

Target population
- Sheboygan County residents with mental health and/or addiction issues

Activities

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<tr>
<td>Support the Healthy Sheboygan County 2020 AODA Committee to reduce substance abuse in Sheboygan County:</td>
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<tr>
<td>Initiate community adoption of an evidence-based approach leading to broad-based community systems change by supporting the implementation of the SBIRT (Screening, Brief Intervention, &amp; Referral to Treatment) model, in partnership with Lakeshore Community Health Center</td>
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<tr>
<td>Ongoing</td>
<td>Process milestones related to implementation of SBIRT model across community</td>
<td>Deadlines</td>
<td>Increased prevention, early intervention and treatment for mental health disorders and substance abuse</td>
</tr>
<tr>
<td>Number of community partners adopting SBIRT model</td>
<td>Annual volume</td>
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- Provide professional education on medication misuse to physicians, pharmacists and dentists in our community

| Ongoing | Number of education sessions provided, number of attendees | Annual volume | Increased awareness of medication misuse among area providers |
| Number of education sessions provided, number of attendees | Annual volume |

- Provide outreach and education to local community members on the problem of medication misuse and abuse, behavioral health topics

| Ongoing | Number of outreach/education sessions provided, number of attendees | Annual volume | Increased awareness of medication misuse and behavioral health topics in Sheboygan |
| Number of outreach/education sessions provided, number of attendees | Annual volume |
Focus | Health knowledge and health literacy

According to the Centers for Disease Control (CDC), sudden cardiac arrest is when the heart suddenly stops beating, resulting in no blood flow to the brain and other vital organs. A very high percentage of people who suffer sudden cardiac arrest die before reaching the hospital. However if people are trained and able to help, it increases each person’s chance of survival.  

The Red Cross recommends that at least one person in every household and place of business receive training in CPR and proper use of an AED. This training can give that person the knowledge and confidence to respond during an emergency situation with skills that can help save a life.  

Health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions. (Source: Healthy People 2010)  

According to the CDC, obtaining, communicating, processing, and understanding health information and services are essential steps in making appropriate health decisions. "Limited health literacy" occurs when people can't find and use the health information and services they need.

Principal partner
- Aurora Health Care Medical Group (AHCMG)

Community partners
- Area Health Education Council
- Healthy Sheboygan County 2020
- St. Nicholas Hospital
- Prevea Health
- UW Sheboygan Extension

Target population
- Residents of Sheboygan County

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<tbody>
<tr>
<td>Ongoing</td>
<td>Provide CPR/AED trainings (CPR Anytime) at local high schools and within the community</td>
<td>Number of trainings provided, populations reached and number of attendees</td>
<td>Annual volume</td>
</tr>
<tr>
<td>Ongoing</td>
<td>Support the Advance Care Planning Coalition in the development and implementation of strategies to educate Sheboygan County residents about advance care planning and palliative care</td>
<td>Process milestones related to work with Advance Care Planning Coalition on advance care planning and palliative care</td>
<td>Deadlines</td>
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</table>
Focus | Nutrition, physical activity & overweight/obesity

**Overweight/Obesity**
- Among the key informants interviewed, physical activity (ranked #5) was included as a top five health issue for Sheboygan County.
- Based on findings from the 2014 Sheboygan County Community Health Survey, about two of three (67%) adult respondents were classified as overweight or obese (up from 59% in 2003).
- While countywide data on childhood obesity is unavailable, data from the 2011 National Survey of Children’s Health found 28.8% of children in Wisconsin age 10 – 17 years are overweight or obese.

**High blood pressure and cholesterol**
Based on the 2014 Sheboygan County Community Health Survey, 27% of respondents reported high cholesterol (up from 19% in 2003) and 28% reported high blood pressure (up from 17% in 2003) in the past three years. As outlined by the Centers for Disease Control and Prevention, high blood pressure and cholesterol are risk factors for heart disease and stroke.

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

**Community partners**
- Sheboygan City Parks Department
- United Way
- *Healthy Sheboygan County (HSC) 2020*

**Target population**
- Residents of Sheboygan County, with a special focus on children who are overweight/obese

**Activities**

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<tr>
<td><em>In partnership with the Sheboygan City Parks Department, develop plan to replace Lakefront VITA course exercise equipment, with a focus on incorporating a child-specific course such as the United Way’s Born Learning Trail</em></td>
<td>Process milestones related to development of plan for new exercise equipment, including assessing need, determining location and setting installation timeline goals</td>
<td>Deadlines</td>
<td>Plan in place to update the adult trail and add a child trail beginning in 2018</td>
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<td>By 12-1-17</td>
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<tr>
<td>Ongoing</td>
<td>Number of hospital caregivers engaged</td>
<td>Annual volume</td>
<td>Reduced incidence of obesity among Sheboygan County residents</td>
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<tr>
<td></td>
<td>Process milestones related to work with <em>Healthy Sheboygan 2020</em> on education and promotion of healthy food choices, nutrition and increased physical activity</td>
<td>Deadlines</td>
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Priority No. 3: Community Benefit Hospital Focus

Focus | High blood pressure and cholesterol, stroke

Based on the 2011 Public Health Profile, the Sheboygan County cerebrovascular disease death rate was 47.0 per 100,000, slightly higher compared to Wisconsin (45.0 per 100,000).

Cerebrovascular disease, also referred to as stroke, is a leading cause of death and is a major cause of adult disability. A healthy lifestyle may prevent or reduce the risk of stroke.

Additionally, knowing the signs and symptoms, and receiving fast treatment, are important to prevent death and disability from stroke.

Principal partner
- Aurora Health Care Medical Group (AHCMG)

Community partners
- American Heart Association/American Stroke Association
- Local churches
- Community organizations (i.e. Elks, Lions Club, Rotary)

Target population
- Residents of Sheboygan County

Activities

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<tbody>
<tr>
<td>Ongoing</td>
<td>Provide blood pressure, cholesterol, stroke screenings and education at community events</td>
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- Number of education/screening events and locations by type
- Number of screenings provided
- Number of individuals educated
- Number of individuals reporting behavior change and/or knowledge gained

Annual volume

Improved community awareness of high blood pressure, cholesterol and the connection to stroke, as reported on evaluations
Increased screening opportunities for Sheboygan County residents
Focus | Cancer

Secondary data report key findings, based on the Wisconsin Cancer Reporting System, showed that the top five cancer incidence rates for Sheboygan County are prostate, breast, lung and bronchus, colon and rectum and melanoma of the skin.

The top five cancer mortality rates for Sheboygan County are lung and bronchus, prostate, colon and rectum, breast and pancreas.

Cancer is a leading cause of death in Sheboygan County. A person's cancer risk can be reduced in a number of ways including, but not limited to, receiving regular medical care, avoiding tobacco, limiting alcohol use, avoiding excessive exposure to ultraviolet rays from the sun and tanning beds, eating a diet rich in fruits and vegetables, maintaining a healthy weight and being physically active.

Principal partner
- Aurora Health Care Medical Group (AHCMG)
- Vince Lombardi Cancer Clinic

Community partners
- Local employers
- Sheboygan YMCA – Livestrong program
- Lakeshore Community Health Center
- Sheboygan County Cancer Care Fund

Target population
- Residents of Sheboygan County

Activities

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<th>Intended Outcomes</th>
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<tbody>
<tr>
<td>Ongoing</td>
<td>Provide community cancer education and screening events</td>
<td>Annual volume</td>
<td>• Increased knowledge about cancer prevention and early detection, as indicated by evaluations</td>
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<td></td>
<td>Number of education/screening events and locations, by type</td>
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<td>• Increased number of cancers identified</td>
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<td></td>
<td>Number of individuals educated</td>
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<tr>
<td></td>
<td>Number of individuals screened, by type of cancer</td>
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<tr>
<td></td>
<td>Number of high risk individuals identified, by type of cancer</td>
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Focus | Sexual assault

Sexual assault is underreported and definitions can vary across different agencies; therefore, the number and rate may vary depending on the source. Sexual assault can have harmful and lasting consequences for victims, families and communities including, but not limited to, unintended pregnancy, sexually transmitted infections, long-term physical consequences, immediate and chronic psychological consequences, health behavior risks, and financial cost to victims, families and communities.

The 2012 forcible rape rate for Sheboygan County was 25.0 per 100,000 residents, higher compared to Wisconsin (21.4 per 100,000) (Crime in Wisconsin Report).

Within Aurora’s system-wide Sexual Assault Nurse Examiner (SANE) program and Abuse Response Services, Aurora’s (SANE) program at ASMMC offers trauma-informed and victim-sensitive services to people of all ages who have been affected. Our SANE nurses complete specialized training and certification to be designated a sexual assault nurse examiner and provide 24/7 coverage.

Principal partner
- Aurora Health Care Medical Group (AHCMB)

Community partners
- Local law enforcement
- Safe Harbor – Safe Harbor provides prevention education, crisis intervention and ongoing outreach services to empower individuals, families and the community to live lives free of domestic abuse and sexual assault.

Target population
- Individuals who have been sexually assaulted

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</table>
| Ongoing    | • Provide trauma-informed and victim-sensitive services to people of all ages who have been affected, including forensic evidence collection, through 24/7 coverage  
• Provide SDFI®-TeleMedicine forensic photo documentation based on and designed around the Federal Rules of Evidence  
• Refer as appropriate to medical, clinical, counseling and advocacy services  
• Conduct community trainings on how to care for and work with victims of crime using trauma-informed care techniques | Annual volume           | Increased access to trauma-informed care and forensic nursing |
|            | • Individuals provided with services for sexual assault                               |                        | Increased community knowledge of available resources        |
|            | • Post-assault care management services provided, by level                           |                        |                                                             |
|            | • Referrals provided, by type                                                        |                        |                                                             |
|            | • Personal advocacy and liaison services provided, by type                            |                        |                                                             |
|            | • Number of scheduled on-call hours                                                  |                        |                                                             |
|            | • Community education/prevention/outreach trainings, number of attendees              |                        |                                                             |
| Ongoing    | • Partner with Safe Harbor to support the development of a Child Advocacy Center in Grafton to provide care to children in Ozaukee, Sheboygan and Washington Counties who are victims of domestic violence, including forensic interviews |                        |                                                             |
|            | • Process milestones related to development of Child Advocacy Center                  | Deadlines              | Increased access to care for children who are victims of domestic violence |
| By 12-31-17 | • Milestones related to completion of needs assessment and development of action plan | Deadlines              | Strategy in place for 2018-2020 execution                    |
|            | • Through Aurora Health Care Better Together Fund grants:                           |                        |                                                             |
|            |   • support the expanded hours of a family therapist at Safe Harbor                 |                        |                                                             |
|            |   • support educational programming and advocacy for violence prevention at Lakeland College |                        |                                                             |
Implementation Strategy

Priority No. 3: Community Benefit Hospital Focus

Focus | Hepatitis C Program

According to the CDC, hepatitis C-related mortality in 2013 surpassed the total combined number of deaths from 60 other infectious diseases. Death certificates often underreport hepatitis C, so there likely were even more hepatitis C-related deaths than reported.

The greatest hepatitis C burden falls on baby boomers, those born from 1945 to 1965. Many baby boomers were infected during medical procedures prior to 1985, when injection and blood transfusion technologies were not as safe as they are today. Without diagnosis and treatment, hepatitis C may lead to liver cancer and other life-threatening diseases and may be transmitted to others.¹

In 2014, according to the Wisconsin Division of Public Health²:
- Wisconsin hepatitis C incidence rate per 100,000 population – 56.1
- Median age of death in Wisconsin due to hepatitis C – 57 years
- Hepatitis C is under-reported on death certificates and plays a larger role in premature death in Wisconsin than is recognized.

Principal partners
- Aurora Health Care Medical Group (AHCMG)

Community partner
- AIDS Resource Center of Wisconsin

Target population
- Adults born from 1945 to 1965 residing in the Greater Milwaukee North & Sheboygan service area
- Patients who self-identify for other factors*

System Activities – Hepatitis C

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<th>Long-term Outcomes</th>
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| Ongoing    | Data collected regionally as part of Aurora Health Care Greater Milwaukee North & Sheboygan service area | Patients in cohort are identified and screened
Referrals, staging and standardized care delivery process for our patient population are implemented for those who test positive | Decreased burden of hepatitis C in our communities
Decrease in rates of cirrhosis and liver cancer in our patient population over time |

* Other patients at risk for hepatitis C include persons:
- Who are HIV positive
- Who injected illegal drugs
- Who received clotting factor concentrates produced before 1987
- On chronic hemodialysis
- With persistently abnormal alanine aminotransferase (ALT) levels
- Who received transfusions or organ transplants prior to 1992
- With recognized occupational exposures
- Born to HCV-positive women