Our hospital’s community benefits are guided by our community health needs assessment (CHNA). To see our 2016 CHNA report, please visit www.aurora.org/commbenefits.

In 2016, we continued to focus on helping patients who present in our Emergency Department (ED) for non-emergency care by scheduling them with primary care providers who are most appropriate to meet their needs. Through our hospital’s participation in the Milwaukee Health Care Partnership ED Care Coordination Initiative, we scheduled 37 patient appointments in our ED for Federally Qualified Health Centers (33) or other clinics (4).

To ensure a safe discharge, 219 prescriptions were provided free of cost to uninsured patients who had no resources for medications through our Essential Medication Fund.

The one-time Aurora Better Together Fund was extended in 2016 to increase funding for partner organizations that share our mission to increase access to primary care, behavioral health services, and sexual assault and domestic violence prevention and treatment programs across eastern Wisconsin. Twenty-one of our community partners in Milwaukee County received Aurora Better Together funding in 2016.

Visit www.aurorahealthcare.org/better-together to learn more about our partners and Aurora’s Better Together Fund.

Priority #2:

Managing blood pressure

To help community members track and appropriately manage their blood pressure, we continued to offer free drop-in blood pressure screenings and education on our campus twice per month. In 2016 our nurses completed 176 screenings and provided one-on-one counseling and appropriate referrals to participants. As a result of the screenings, 21 individuals were referred for blood pressure management.

Physical activity

In 2016, a new health trail in Warnimont Park was introduced to the community. The trail connects the area near the intersection of East Ramsey Avenue and South Lake Drive, directly across the street from our campus, eastward to the Oak Leaf Trail. Aurora St. Luke’s South Shore, with the help of philanthropic donations, assisted in funding the trail and purchasing the fitness equipment that was installed along the trail, including an elliptical station, upper-body stretch station, balance steps, and plyometric steps. Following the ribbon-cutting ceremony, physical therapists from our hospital demonstrated how to use the equipment.
Cancer care

Our cancer care team is comprised of certified nursing professionals called nurse navigators who are registered nurses with oncology-specific clinical knowledge. They offer individualized assistance to community members, patients, families, and caregivers to help overcome healthcare system barriers and guide individuals and their families from diagnosis through cancer treatment and into post-treatment. In 2016, our nurses provided services to 129 families and offered three Look Good Feel Better classes for a total of 11 participants.

Behavioral health

Based on the most recent key informant interviews in Milwaukee County, 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 behavioral health treatment are crucial. A behavioral health assessment gives medical professionals who are caring for individuals a complete picture of their emotional, psychological, and social well-being. In 2016, our hospital’s behavioral health specialists completed behavioral health intake for 2,435 people.

The need for behavioral health services does not always require admission to an inpatient program. We offer a progressive four-step process that allows individuals managing behavioral health issues to utilize whatever combination will meet their needs:

1. Inpatient care can be the crucial first step to receive help. Our 23-bed inpatient behavioral health unit offers a safe and structured environment where patients can receive the individualized help they need to restore balance to their lives. We had 1,590 behavioral health inpatients in 2016.

2. Step two is our partial hospital program, which offers outpatient services Monday through Friday for eight hours each day. This program accommodated 331 average daily visits in 2016 to maintain access points for people managing mental health concerns.

3. The third step is our intensive outpatient program that includes therapy sessions focused on improving daily coping skills and enhancing self-respect. These sessions are held for three hours per day for three days each week. This program averaged 200 daily visits in 2016.

4. As a fourth step, former program participants also have the opportunity to join an outpatient touchpoint group that meets once per month. This also allows our hospital caregivers to have a pulse on how former patients are managing their behavioral health concerns after program completion.

Geriatric mental health and well-being

Older people discharged to home from the ED are at high risk of adverse outcomes including functional decline, return to the ED, institutionalization, and death. In 2016, we fully implemented the Geriatric Emergency Medicine Department Project at our hospital. One hundred percent of our ED nurses are trained to use the Identification of Seniors at Risk (ISAR) screening tool for detecting severe functional impairment, depression, and increased utilization of health services. Of those screened in 2016, 56 percent were referred to community and social service resources best equipped to provide the tools required to properly care for each individual after discharge from the hospital.

Grief bereavement support meetings

Aurora Health Care Parish Nurse Marla Isherwood, RN, facilitates monthly Healing Grief group sessions. At these sessions, community members experiencing loss join together to receive emotional support and understanding and gain knowledge about self-healing tactics to aid in the healing process. Our hospital started this group in response to a request from community members and averages between 10 to 16 attendees each month.