Advocate Aurora Health is among the 12 largest not-for-profit, integrated health systems in the United States and a leading employer in the Midwest with more than 75,000 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 Advocate Aurora Health hospital, we recognize our role in addressing concerns about the accessibility and affordability of health care in Winnebago County. Further, we acknowledge 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 Winnebago County Community Health Needs Assessment Report is available here: www.aurora.org/commbenefits.
Our implementation strategies are organized into three main priorities:

<table>
<thead>
<tr>
<th>Category</th>
<th>Community Benefit Core Principle</th>
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| **Priority #1** | **Access and Coverage**  
*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 medical care.*                            |
| **Priority #2** | **Community Health Improvement Plan**  
*In this priority we outline our approach to addressing behavioral health needs, a top finding in our needs assessments.*                                |
| **Priority #3** | **Social Determinants of Health**  
*In alignment with the Advocate Aurora Health Community Strategy, this section describes our approach to addressing social determinants of health, which are the structural elements and conditions of our communities that influence the health of residents.* |

In addition to alignment with community benefit principles, our 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 acknowledge the need to be a good community partner. Our strategies strongly reinforce our role as a partner for community capacity-building to address unmet community health needs.

These 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](http://www.aurora.org/commbenefits).

**COVID-19 Pandemic Response**

In 2020, Advocate Aurora’s community benefit programming efforts pivoted and transformed to meet the newly identified significant health needs of the community during the COVID-19 pandemic. Implementation was delayed for some previously planned programs, and activities for some existing programs slowed, paused or shifted to a virtual platform. This allowed our team members and resources to be redirected to focus on the community’s need to prevent and control the spread of COVID-19. Aurora - Oshkosh will use the 2022-2024 Implementation Strategy as an opportunity to redesign our community health improvement work. We will review opportunities to reconvene groups that may have been paused during the COVID-19 pandemic and seek out new opportunities to address this community need. As a result of this rebuilding, the Implementation Strategy may expand to include more programs in upcoming years.
Priority No. 1:
Access, a signature community benefit focus for Advocate Aurora Health

Current findings
In 2018, only 73.8% of Winnebago County residents reported having been to a doctor for a routine checkup (e.g., a general physical exam, not an exam for a specific injury, illness, condition) in the previous year (Source #2).

Our strategy
For our patients
• Actively screen patients for coverage through the Marketplace or financial assistance programs and assist with application processes
• Provide Cancer Nurse Navigator (CNN) services for all patients, regardless of payer status
• Provide Transition of Care Clinic (TCC), which is available to take care of patients who are in between care with primary care providers (due to retirement, leaves, etc.) or patients looking to establish with a primary care provider, but need immediate follow up post Urgent Care visit, Emergency Department visit or hospitalization

MEASURES:
• Number of patients served; number of survivorship plans developed
• Number of patients served

For our community
• Accept vouchers for eligible diagnostic lab and radiology services for Oshkosh area free clinics

MEASURES:
• Number of vouchers accepted, by type

2024 Update: Follow-up with non-emergent patients using our emergency department for primary care will no longer be tracked, but the work is continuing
Priority No. 2: Behavioral health, a signature community benefit focus for Advocate Aurora Health

Current findings
Mental health, alcohol and other drug use were listed as top health issues to focus efforts on by community stakeholders (Source #3). In 2018, 12.8% of Winnebago County adults reported 14 or more days during the past 30 days during which their mental health was not good (Source #2).

Our strategy
For our patients
- Provide access to an ABHS Intake team member in our ED to assess and appropriately expedite patient referrals for behavioral health services
- Provide behavioral health referrals through telepsychiatric program
- Provide an intensive outpatient treatment (IOP) program for patients with substance use disorders
- NEW: Develop a protocol for drug endangered children, in collaboration with Winnebago County, as a proactive approach to identifying children who are victims of abuse

MEASURES:
- Number of patients screened
- Number of patients treated through IOP
- Process milestones

For our community
- In collaboration with AMG and community partners, develop new services and partnerships to address mental health issues, especially addiction prevention and treatment strategies

MEASURES:
- Milestones related to selection of alcohol abuse prevention strategy

Target population
Residents of Winnebago County

Principal partners
- Aurora Medical Group (AMG)
- Aurora Behavioral Health Services (ABHS)

Community partner
Winnebago County Health Department

Impact goal
Increase linkages to appropriate care for behavioral health
Priority No. 3: Alignment with Community Strategy focus on social determinants of health – community safety

Target population
Residents of Winnebago County

Principal partners
• Aurora Medical Group (AMG)
• Aurora Healing and Advocacy Services (AHAS)

Community partners
• Oshkosh Area School District
• Local law enforcement

Impact goal
Increased access to care for survivors of sexual assault

Current findings
Threats to an individual's safety can take many forms. Based on current data for Winnebago County, sexual assault response is prioritized in order to improve community safety. The rate of rape for Winnebago County was 44.8 reports per 100,000 persons, higher than Wisconsin's overall rate of 27.9 per 100,000 in 2019 (Source #2). However, sexual assault and rape are underreported, and the definition of sexual assault varies across different agencies; therefore, the number and rate may vary depending on the source.

Our strategy
For our patients
Consistent with Aurora’s system-wide Forensic Nursing and AHAS programs, provide:
• 24/7 trauma-informed and victim-sensitive services by our specially trained Sexual Assault Nurse Examiners (SANEs), including examination, STI and HIV prophylactic medications, forensic evidence collection and SDFI®-TeleMedicine forensic photodocumentation system based on the Federal Rules of Evidence
• Refer as appropriate to medical, clinical, counseling and advocacy services

MEASURES:
• Number of individual served; referrals provided

For our community
• Provide community education/prevention/outreach trainings

MEASURES:
• Number of trainings provided; attendees
Priority No. 3: Alignment with Community Strategy focus on social determinants of health – food security

Target population
Residents of Winnebago County

Principal partner
Aurora Medical Group (AMG)

Community partner
Be Well Fox Valley

Impact goal
Increased access to nutritious foods for local residents

Current findings
Food insecurity is defined as the disruption of food intake or eating patterns due to lack of resources. Food insecurity, long-term or temporary, may be influenced by several factors including income, employment, neighborhood conditions, transportation, race/ethnicity, and disability. Adults and children who are experiencing food insecurity may be at an increased risk for a variety of negative health outcomes and health disparities, including obesity. Feeding America estimates 13.5% of Winnebago County residents experienced limited or uncertain access to adequate food at some point during 2020 (Source #2).

Our strategy
For our community
• Provide monthly nutrition classes at the Senior Center
• Support Be Well Fox Valley, which includes-
  – Work with Americorps Team members to engage the Eat Well For life program which selects food starved diabetic patients from Advocate Aurora Health, ThedaCare, Ascension Wisconsin and Mosaic Health to include in the program. The program has a defined curriculum and provides food to these patients with education re food preparation, food shopping, disease management, and support groups.
  – Working with our 22 food pantries in the Fox Valley to align how we might change food distribution to support diabetic and obese patient dietary needs

MEASURES:
• Number of sessions provided and number of attendees
• Process milestones