Advocate Aurora Health is one of 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 Walworth 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 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 Walworth County Community Health Needs Assessment Report is available here: www.aurora.org/commbenefits.
Our Implementation Strategy is organized into three main priorities:

<table>
<thead>
<tr>
<th>Category</th>
<th>Community Benefit Core Principle</th>
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</table>
| 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      | **Behavioral Health**  
In this priority we outline our approach to addressing behavioral health needs, a top finding in our needs assessment. |
| 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, 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 [www.aurora.org/commbenefits](http://www.aurora.org/commbenefits).
Priority No. 1: 
Access, a signature community benefit focus for Advocate Aurora Health

Current findings
In 2019, 6% of Walworth County respondents had an unmet medical need in the past 12 months, 13% delayed medical care due to cost, and 13% delayed filling a prescription due to cost. Access to health care was a ranked as a top issue by community members and key stakeholders (Sources #1, #3).

Our strategy
For our patients
• Provide appropriate follow-up with non-emergent patients using our emergency department (ED) for primary care
  – Past impact: 187 non-emergent ED patients without a primary care physician saw an AMG provider within 28 days in 2018 and 2019
• Refer uninsured and self-pay patients using our ED for primary and dental care to OAFC
  – Past impact: 47 ED patients referred to OAFC in 2018 and 2019
• Actively screen patients for coverage through the Marketplace or financial assistance programs and assist with application processes

MEASURES:
• Number of non-emergent ED visits without a primary care physician; seen by an AMG primary care provider within 28 days
• Number of patients referred to OAFC

For our community
• Provide free radiology and specialty services to patients referred by OAFC
  – Past impact: 154 radiology services and 144 specialty services provided to patients referred by OAFC in 2018 and 2019
• Designate leaders to serve on board of OAFC and Community Health Improvement Planning Coalition

MEASURES:
• Number of services provided for OAFC referrals (radiology and specialty)
• Progress milestones

Target population
Uninsured residents of Walworth County

Principal partner
Aurora Medical Group (AMG)

Community partner
Open Arms Free Clinic (OAFC)
The Open Arms Free Clinic provides routine primary care, pharmacy, health education and referral services (all free of charge) for uninsured, low income and underserved residents of Walworth County.

Impact goal
Increase access to care
Priority No. 2: Behavioral Health, a signature community benefit focus for Advocate Aurora Health

**Target population**
Residents of Walworth County

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

**Community partners**
- Emergency Medical Services (EMS) providers
- Local law enforcement

**Impact goal**
Increase linkages to appropriate care for behavioral health

**Current findings**
Mental health and alcohol and other drug use (behavioral health) ranked among the top five health issues for Walworth County. In 2019, 24% of Walworth County adults reported a mental health condition (such as depression, anxiety disorder or post-traumatic stress disorder). Additionally, 37% of Walworth County residents reported binge drinking in the past month (Source #1). The rate of opioid-related hospital discharges was 437.1 per 10,000 population in 2017, lower than Wisconsin rate of 475.4 per 10,000 population (Source #2).

**Our strategy**

**For our patients**
- Provide ABHS referrals through tele-intake services in our ED and through inpatient tele-psychiatry consultations
- Screen for behavioral health issues in the ED including mental health, depression, alcohol abuse and drug use, and provide follow-up care and referral as appropriate
  - Past impact: 143 patients screened in 2019; 46 referred

**MEASURES:**
- Number of individuals screened and referred

**For our community**
- NEW: Provide awareness, education, and skill development opportunities for local law enforcement partners. Increasing their awareness of, and responsiveness to, the impact their role has upon their own well-being as well as their family and community.
- NEW: Provide Chronic Pain Self-Management program on demand, as requested by community organizations

**MEASURES:**
- Number of education events provided; individuals engaged
- Number of classes provided; attendees
Priority No. 3: Alignment with Community Strategy focus on social determinants of health – community safety

Current findings

Threats to an individual’s safety can take many forms. In 2018, the total number of injury emergency department (ED) visits among Walworth County adults aged 65 years and older was 1,120, which is a rate of 6,472.3 per 100,000, slightly lower than the state rate of 6,711.3 per 100,000. Of the ED visits by Walworth County adults aged 65 years and older, 561 resulted from falls.

Sexual violence is defined as sexual activity when consent is not obtained or not given freely. The rate of rape for Walworth County was 26.40 reports per 100,000 persons, lower than Wisconsin’s overall rate of 27.21 per 100,000 in 2018 (Source #2). However, sexual assault and rape are underreported and the definition of rape varies across different agencies; therefore, the number and rate may vary depending on the source.

Our strategy

For our patients

• Assure that persons referred to our SRNs are assessed and followed-up for:
  • Behavioral health needs
  • Cognitive impairment (using MoCA – Montreal Cognitive Assessment)
  • Family and social support
  • Home visits when possible
  • Nutrition needs
  • Pharmaceutical assistance program
  • Safe-At-Home or appropriate supportive placements
  • Transportation needs for follow-up care
    – Past impact: 2,864 assessments completed in 2018 and 2019

• Provide patient education and support for:
  • Advance Directives (Power of Attorney)
  • Family guidance and support services
  • Medication management/safety
    – Past impact: 404 patients educated on Advanced Directives (Power of Attorney) in 2018 and 2019; 329 of those completed Advance Directives; 444 patients educated on family guidance and support services; 112 patients educated on medication management safety

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
  – Past impact: 65 sexual assault victims were provided medical care and services in 2018 and 2019
• Referrals as appropriate to medical, clinical, counseling and advocacy services
  – Past impact: 12 medical referrals in 2018 and 2019; 10 counseling referrals; 45 advocacy referrals

MEASURES:
• Number of patients served
• Number of fall-related admissions for residents 65 and older
• Number of individuals served and referrals provided

For our community

• Provide two Stepping On sessions annually. Stepping On is a high-level, evidence-based program proven to reduce falls and build confidence in older people.
  – Past impact: 7 sessions provided in 2018 and 2019; 73 total attendees
• Conduct SRN-led outreach blood pressure screenings throughout the year.
  – Past impact: 113 blood pressure screenings led by Senior Resource Nurses in 2018 and 2019
• NEW: Provide Stand Up & Move More program, an evidence-based program designed to help older adults reduce sitting time by standing up and moving more
• Provide 12 community education/prevention/outreach trainings
  – Past impact: 36 trainings provided in 2018 and 2019; 3,108 total attendees
• Support expansion of sexual assault treatment capacity and advocacy services for teens and elders at New Beginnings APFV
• Participate in training to expand sexual assault treatment capacity and advocacy services, including a new child abuse and neglect therapy program, through the Walworth County Alliance for Children
• NEW: Designate leader to serve on board of Join the Movement and BELEAF Survivors
• Designate leader to serve on Walworth County Anti-Human Trafficking Task Force

MEASURES:
• Number of Stepping On classes; attendees
• Number of events and type of events conducted
• Number of attendees and evaluations
• Number of educational events provided; attendees
• Process milestones of local coalition and community partnership involvement

Priority No. 3: Alignment with Community Strategy focus on social determinants of health – infant mortality

Current findings
In 2017, the rate of infants dying before their first birthday in Walworth County was 5.4 deaths per 1,000 live births, lower than the statewide rate of 6.1 deaths per 1,000 live births. Walworth County mothers who are Hispanic had a higher rate at 7.1, compared to Non-Hispanic White (5.4) (Source #2).

Our strategy

For our patients
• Staff our Lactation Center with International Board-Certified Lactation Consultants accessible seven days a week to:
  • Provide telephone consults, advice, support and schedule outpatient consults
  • Inform mothers about – and promote – available resources, such as Lactation Consultants, Peer Counseling and Lactation Rooms, within their county of residence
    – Past impact: 213 outpatient breastfeeding consults provided in 2019; 317 telephone consults provided
  • Provide education to new mothers prior to discharge on:
    • Car seat safety
    • Infant safe sleep
      – Past impact: 1,357 mothers educated in 2018 and 2019
  • Provide referrals for portable cribs and baby boxes distributed by WCDHHS as needed
    – Past impact: 32 portable cribs distributed by WCDHHS in 2018 and 2019

MEASURES:
• Number of outpatient and phone consults provided
• Number of mothers educated
• Number of portable cribs and baby boxes distributed by WCDHHS
• Percentage of mothers breastfeeding at discharge

For our community
• Provide educational classes to community residents:
  • Infant CPR classes
  • Two reduced-cost babysitting classes per year to area teens, with education including babysitting as a business, baby development, baby safety with CPR and choking, baby care, and include a video by the American Safety & Health Institute
    – Past impact: 29 infant CPR classes offered in 2018 and 2019; 149 total attendees; 6 babysitting classes offered in 2018 and 2019; 85 total attendees; all participants completed pre- and post-test and showed knowledge gain
  • Designate leader to serve on Infant and Child Mortality and Breastfeeding Coalitions

MEASURES:
• Number of classes provided, by type, and attendees
• Participants with knowledge gained (as measured in completed evaluations) for babysitting classes
• Progress milestones of local coalitions
Priority No. 3:  
Alignment with Community Strategy focus on social determinants of health - workforce development

Current findings
Efforts to recruit, train and retain providers who are able to address the special needs of rural populations are necessary to increase the number of providers available to community members in Walworth County. According to the 2020 County Health Rankings, Walworth County had 2,860 residents to every 1 primary care physician, higher than the Wisconsin average of 1,270 residents to every 1 primary care physician (Source #2).

Our strategy
For our community
• NEW: Serve as the primary residency practice site for the Rural Family Medicine Residency program
• NEW: Provide scholarships on behalf of the Medical Staff Leadership Council of Aurora Lakeland Medical Center to local high school students seeking advanced studies in health care
• NEW: Provide Kathleen Skowlund Scholarship to students who are pursuing an academic course of study leading to a career in the health field
• Provide training to EMS agencies and quarterly continuing education based upon needs identified by EMS agencies, run report trends and state requirements, including care for opioid overdose
  - Past impact: 20 trainings provided in 2018; 278 individuals educated

MEASURES:
• Number of medical residents enrolled
• Number of scholarships provided; dollar amount
• Number of trainings provided; individuals trained

Target population
Residents of Walworth County

Principal partner
Aurora Medical Group (AMG)

Community partner
Residents of Walworth County

Impact goal
Increase the number of providers in Walworth County
Priority No. 3:
Alignment with Community Strategy focus on social determinants of health – Coronavirus/COVID-19 Pandemic Response

Current findings
On April 4, 2020, Governor Tony Evers declared all counties in the State of Wisconsin as a disaster area in response to the outbreak of COVID-19. Since then, cases have been reported in every county in the Advocate Aurora Health Wisconsin service area. Advocate Aurora Health has implemented several initiatives aimed at increasing the amount of available outreach and education resources in Wisconsin during the Coronavirus/COVID-19 pandemic.

Our strategy
For our patients
• NEW: Test patients scheduled for elective procedures as supplies allow
• NEW: Provide increased number of virtual and telephone visits in order to provide necessary care for patients while minimizing the transmission risk of COVID-19
• NEW: Launch the Safe Care Promise, which includes extra steps we are taking to keep our patients, visitors and team members safe. This includes virtual check-ins, universal masking and screening for all who enter our locations, encouraging social distancing through rearranged furniture and staggering appointment times, and enhanced cleaning in all areas, including additional disinfectant for high-touch spaces.
• NEW: Provide COVID-19 vaccine to patients and community members

MEASURES:
• Process milestones to establish testing for hospital patients
• Number of patients tested within our hospital
• Number of virtual and telephone visits provided
• Number of patients vaccinated; number of community members vaccinated

For our community
• NEW: Increase community member access to reliable COVID-19 information with our system-wide COVID-19 Resource Center
  - Online Symptom Checker
  - COVID-19 Symptom Checker Hotline (866) 443-2584
• NEW: Provide education to community members and local organizations to help them update operations in response to the COVID-19 pandemic so they may continue to provide services safely
• NEW: Collaborate with appropriate community partners to increase access to community testing

MEASURES:
• Number of community organizations our team members work with to update operations
• Process milestones related to establishing or increasing local community testing

Note: Plans to address selected priorities are dependent upon resources and may be adjusted on an annual basis to best address the health needs of our community during the COVID-19 pandemic.

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