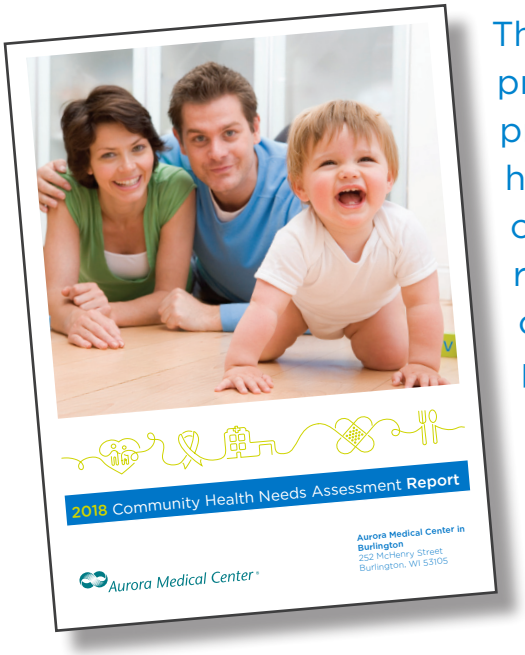
2019 – 2021

Implementation Strategy

As an affiliate of Advocate Aurora Health, the leading not-for-profit healthcare provider in eastern Wisconsin and Illinois, our purpose is to help people live well. We recognize our role in addressing concerns about the accessibility and affordability of health care in Racine County. Further, we recognize 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 Community Health Needs Assessment Report is available here: **www.aurora.org/commbenefits.**

Aurora Medical Center®

Aurora Medical Center in Burlington
252 McHenry Street
Burlington, WI 53105

Our implementation strategies are organized into three main categories aligned with three core principles of community benefit:

Category	Community Benefit Core Principle
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** *Build links between our clinical services and the local health department community health improvement plan (CHIP). In this priority we outline our approach to addressing behavioral health needs, a top finding in our needs assessment.*
Priority #3	**Build a seamless continuum of care** *Address the underlying causes of persistent health challenges in our community:* • *Chronic disease* • *Senior health* • *Sexual assault* • *Newborn health and safety*

In addition to alignment with community benefit principles, our implementation 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 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.

These implementation strategies do not constitute the entirety of the community benefits our hospital provides each year. An annual account of the community benefits we provide can be found by visiting **http://www.aurora.org/commbenefits.**

This Community Benefit Implementation Strategy was adopted by the Aurora Health Care Community Board on November 19, 2018.

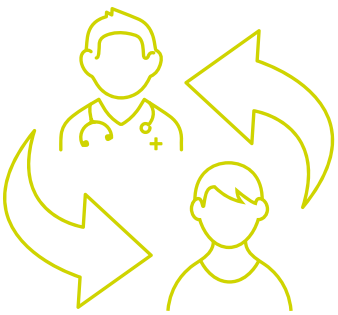
Priority No. 1:
Access, a signature community benefit focus for Aurora Health Care

Target population
Uninsured residents of Central Racine County

Principal partners
- Aurora Health Care Medical Group (AHCMG)
- Aurora Consolidated Laboratories (ACL)

Community partner
- Health Care Network, Inc., of Racine (HCN)

Impact goal
Increased access to care



Current findings
In 2017, 14% of the respondents delayed or did not seek medical care due to costs in the past 12 months. The percentage of adults who receive primary health services through a medical home have decreased steadily from 84% in 2005 to 64% in 2017. In addition, the number of individuals with an unmet medical need remained relatively the same at 9%. Residents and key informants identified access to health care as a top five community health issue (Sources #1 and #3).

Our strategy

For our patients
- Provide appropriate follow-up with non-emergent patients using our emergency department (ED) for primary care
- Actively screen patients for coverage through the Marketplace or financial assistance programs and assist with application processes
- Refer uninsured and self-pay patients using our ED for primary care to HCN

MEASURES, number of:
- Non-emergent ED visits without a primary care physician; seen by an AHCMG primary care provider within 28 days
- Patients referred to HCN

For our community
- Accept vouchers for eligible diagnostic lab and radiology services for HCN patients

MEASURES:
- Number of vouchers accepted, by type

Priority No. 2:
Community Health Improvement Plan, focus on Behavioral Health

Target population
Residents of Central Racine County

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

Community partners
- **Emergency Medical Services (EMS) providers**
- **Law enforcement agencies**

Impact goal
Increased linkages to appropriate screening and care for behavioral health

Current findings
Mental health and alcohol and other drug use (behavioral health) ranked among the top five health issues for Racine County. The percentage of respondents with an unmet mental health care need in the past year increased from less than 1% in 2012 to 3% in 2017. According to the 2016 County Health Rankings, Racine County adults reported an average of 3.5 mentally unhealthy days in the past 30 days, the same as the state average of 3.5 days (Source #2). In 2017, 17% of Central Racine County adults reported a mental health condition (such as depression, anxiety disorder or post-traumatic stress disorder) in the past three years, a significant increase from 12% in 2005 (Source #1). In 2017, 30% of adults in Central Racine County reported binge drinking in past month, a statistically significant increase from 2005 (21%). In Racine County the rate of opioid-related hospital encounters was 480.0 per 100,000 population in 2016.

Our strategy
For our patients
- Provide ABHS nurse in our ED to assess and appropriately expedite referrals for behavioral health services
- Provide behavioral health referrals through ABHS tele-psychiatric program
- 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

MEASURES, number of:
- Patients screening positive for behavioral health issues and referred for additional care

For our community
- 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 overdoses
- Provide medical oversight and training to law enforcement for Narcan administration
- Support and actively engage in local drug Take-Back programs and promote availability of prescription drug collection boxes throughout the county

MEASURES, number of:
- Trainings provided; individuals trained
- Contracts established with local law enforcement
- Take-Back initiatives supported; pounds of drugs collected

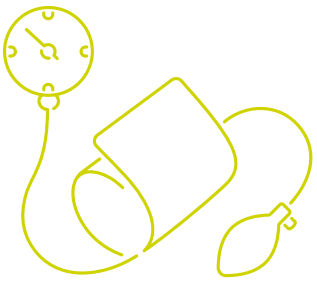
Priority No. 3:
Community benefit hospital focus on chronic disease

Target population
Residents of Central Racine County

Principal partner
- Aurora Health Care Medical Group (AHCMG)

Community partners
- Aging and Disability Resource Center
- Health Care Network
- Central Racine County Health Department

Impact goal
Increased opportunity for identification and management of chronic disease



Current findings
Chronic conditions such as asthma, diabetes, heart disease and cancer can result in health complications, compromised quality of life and burgeoning health care costs. As the most common and preventable of all health issues, chronic diseases account for 86% of health care costs nationwide.[1] In 2017, 25% of adults reported high blood pressure. Additionally, in 2017, 73% of adults in Central Racine County were classified as being overweight, a statistical increase from the baseline of 66% in 2005. Overweight and obesity can increase the risk for high blood pressure, high cholesterol levels, coronary heart disease, type 2 diabetes, stroke, some cancers, low quality of life and other health conditions.[2] Additionally, within Aurora's care population are an estimated 8,000 people with undiagnosed hepatitis C, and over 37,000 in the state.[3]

Our strategy
For our patients
- Continue Care Management strategies to address high blood pressure (BP) within our clinic population by scheduling the patient's 6-month hypertension follow-up visit before they leave the clinic; rechecking any BP 140/90 or higher; scheduling for a 1-2 week nurse visit if BP remains elevated; scheduling with provider if BP remains elevated at nurse visit
- Provide Health Management Resources (HMR), an intensive, medically supervised weight-loss and lifestyle-change program designed to help participants lose weight and build healthy routines
- As part of a system-wide population health strategy, identify and screen clinic patients at risk for hepatitis C; treat those who test positive

MEASURES:
- Improvements in Care Management score: 86% of patients between ages 18 and 85, with diagnosed hypertension, under good control (publicly accessible at www.wchq.org)
- Number of patients participating in HMR Phase 1, Phase 2 and Phase 3
- Hepatitis C data collected regionally as part of Aurora Health Care Burlington & Walworth service area

For our community
- Offer free blood pressure screenings in a variety of community settings and at community events
- Provide educational information on blood pressure, cholesterol, stroke, chest pain, DASH diet and overweight/obesity
- Provide free drop-in blood pressure screenings at AHCMG clinics
- Facilitate Walk with a Doc program, providing primary care physicians one Saturday per month to walk with attendees and provide health education, encouraging physical activity and allowing participants to ask health-related questions in a non-clinical setting

MEASURES, number of:
- Screenings provided
- Attendees and evaluation data including knowledge gain and intent to act
- Information packets distributed
- Walk with a Doc sessions; physicians and individuals participating

[1] *Centers for Disease Control and Prevention - Chronic Disease Prevention and Health Promotion. Available at http://www.cdc.gov/chronicdisease/index.htm. Accessed February 5, 2018.*
[2] *Centers for Disease Control and Prevention – Overweight & Obesity: Adult Obesity Facts. Available at https://www.cdc.gov/obesity/data/adult.html. Accessed February 5, 2018.*
[3] *American Medical Group Association: 2015 Institute for Quality Leadership – New Care Models for the New Healthcare Consumer. Available at https://www.amga.org/docs/Meetings/IQL/2015/AMGA_IQL_brochure.pdf. Accessed August 22, 2017.*

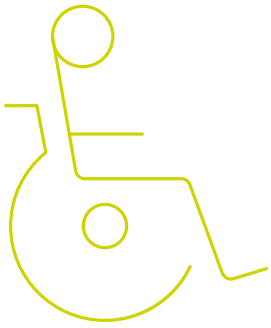
Priority No. 3:
Community benefit hospital focus on senior health

Target population
Residents of Central Racine County aged 65 years and older

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

Community partner
- **Racine Aging and Disability Resource Center (ADRC)**

Impact goal
Increase awareness and management of health issues among seniors



Current findings
In 2016, 16% of the Racine County population was 65 years or older. Falls are a major cause of injury for all ages, but are a particular burden for older persons. Approximately one-third of individuals aged 65 and older will fall each year.[4]

Our strategy

For our patients
- Assure that frail elderly patients and persons referred to our Senior Resource Nurses are assessed 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
- Provide patient education and support for:
  - Advance Directives (Power of Attorney)
  - Family guidance and support services
  - Medication management/safety

MEASURES, number of:
- Patients assessed
- Referrals and services provided, by type
- Outreach and education provided, by type
- Patients completing Advance Directives

For our community
- Provide Stepping On, a high-level, evidence-based program proven to reduce falls and build confidence in older people
- Provide Strong Bodies, a 12-week exercise program including progressive weight training, flexibility, and balance activities designed to improve bone density, reduce falls, improve arthritis symptoms, improve flexibility and strength, and improve sleep quality and energy level
- Provide Chronic Pain Self-Management and Powerful Tools for Caregivers programs on demand, as requested by community organizations

MEASURES:
- Number of sessions held; attendees and evaluation data

[4] *Wisconsin Department of Health Services – Falls Prevention in Older Adults. Available at https://www.dhs.wisconsin.gov/injury-prevention/falls/index.htm. Accessed September 10, 2018.*

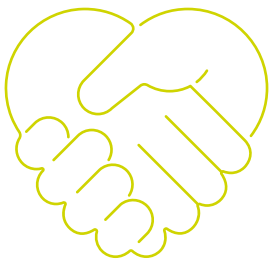
Priority No. 3:
Community benefit hospital focus on sexual assault

Target population
Residents of Central Racine County

Principal partners
- Aurora Health Care Medical Group (AHCMG)
- Aurora Healing and Advocacy Services (AHAS)

Community partners
- Local law enforcement
- Sexual Assault Services of Racine
- Family Advocacy Center
- Local elementary schools

Impact goal
Increased access to care for sexual assault



Current findings
The rate of rape for Racine County was 14.9 reports per 100,000 persons, lower than Wisconsin's overall rate of 24.3 per 100,000 in 2016. 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 Sexual Assuault Nurse Examinier (SANE) program and AHAS, provide:
- Provide 24/7 trauma-informed and victim-sensitive services, including 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
- Provide training for ED nurses on the signs of strangulation and human trafficking, increasing their ability to identify victims

MEASURES, number of:
- Individual served
- Referrals provided
- ED nurses educated

For our community
- Provide community education/prevention/outreach trainings
- Provide SANE monitoring at events held at Alpine Valley amphitheater, ensuring proactive support for individuals at-risk
- Provide the award-winning Healthy Kids Club program, an interactive health education program for kindergarten students that teaches kindergartners about healthy habits, personal safety around strangers, safe touches, and appreciating the differences in individuals

MEASURES, number of:
- Trainings provided; attendees
- Alpine Valley events monitored
- Healthy Kids Club programs provided; schools engaged and kindergarteners educated

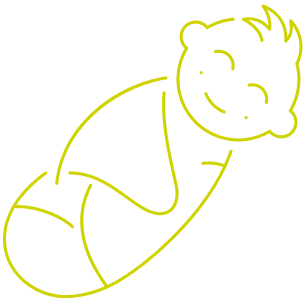
Priority No. 3:
Community benefit hospital focus on newborn health and safety

Target population
Residents of Central Racine County

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

Community partners
- **Hispanic Access Foundation**

Impact goal
Increased knowledge about birth and childcare



Current findings
From 2008 to 2016, the rate of infants dying before their first birthday in Racine County increased from 7.2 deaths per 1,000 live births to 9.6 deaths per 1,000 live births, significantly higher than the statewide rate of 5.7 deaths per 1,000 live births (Source #2).

Our strategy
For our community
- Provide childbirth classes in both English and Spanish
- Provide two reduced-cost babysitting classes annually to area teens, with education on babysitting as a business, baby development, baby safety with CPR and choking, baby care, and including a video by the American Safety & Health Institute

MEASURES, number of:
- Classes provided
- Attendees and evaluation data