



A shared community health needs assessment

2013 *Community Health Needs Assessment* **Report**

Milwaukee County

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Part I | Aurora Health Care

A shared community health needs assessment

In 2012, Aurora Health Care, aligned resources to conduct a shared Community Health Needs Assessment (CHNA) with four health systems headquartered in Milwaukee County (and their respective hospitals), the Milwaukee Health Department and the other 11 municipal health departments within Milwaukee County.

Completed in 2013 and supported by additional analysis by the Center for Urban Population Health, this robust community-wide CHNA includes findings from a community health survey of over 1,900 adults, key informant interviews and a secondary source data report.

With Milwaukee County as the unit of analysis, these documents provided an overarching framework to supplement the CHNA reports completed by each of our five hospitals in Milwaukee County and guided the development of their respective community benefit implementation strategies.

Aurora Health Care is an integrated health care system with 15 hospitals spanning nearly the entire “east coast” of the state of Wisconsin. Five of those Aurora hospitals are located in Milwaukee County. They are:

- **Aurora St. Luke’s Medical Center** – Aurora’s flagship quaternary hospital is internationally known for its expertise in heart care, is the site of the majority of Aurora’s clinical research, and is home to the second-largest hyperbaric chamber in the world and a biorepository called ORBIT that is open to researchers around the world, streamlining medical research and discovery.
- **Aurora St. Luke’s South Shore** -- Formerly known as Trinity Memorial Hospital, the community-centered Cudahy campus of Aurora St. Luke's Medical Center was created 50 years ago at the request of citizens. It continues to serve the community with the latest in medical care.
- **Aurora Sinai Medical Center** – Milwaukee’s last remaining downtown hospital, Aurora Sinai includes the nationally recognized Acute Care for the Elderly unit, which works to decrease the risk of functional decline that sometimes occurs during hospitalization of patients who are frail or have memory loss. Aurora Sinai also offers outstanding services in orthopedics and bariatric surgery, provides excellent care for women’s services, and is home to the Regional Parkinson Center.
- **Aurora West Allis Medical Center** – This hospital offers a complete range of care programs as well as the Aurora Women's Pavilion, where women at all stages of life receive comprehensive care in a relaxed, healing environment. Note: *This hospital is uniquely situated in the second-largest city within Milwaukee County.*
- **Aurora Psychiatric Hospital** – This innovative hospital has been providing quality behavioral health care since 1884. People of all ages are served with inpatient and residential programs as well as out-patient offerings during the day and evenings. Aurora Psychiatric Hospital also hosts Kradwell School, one of Southeastern Wisconsin’s only specialty schools for children and adolescents who have behavioral health issues.

Aurora’s economic impact in Milwaukee County

A report by the University of Wisconsin-Milwaukee found that Aurora Health Care’s economic impact is substantial in every county in which its hospitals, clinics and other ambulatory facilities operate.¹

Aurora’s combined operations rank as number one in Milwaukee County with 14,957 jobs (9,664 in the city of Milwaukee, where Aurora is also ranked as number one; pg. 13). When taking into account the additional employment generated in the county through the ripple effects of Aurora’s operations on other business, the number grows to 28,044 jobs (pg. 25).

When all multiplier effects are calculated, Aurora’s economic impact accounts for an estimated 6.3 percent of all employment and 7.3 percent of total payroll in Milwaukee County (pg. 26).

When all multiplier effects are calculated, Aurora’s share of employment and payroll in hospitals and ambulatory facilities in Milwaukee County are estimated at 27.2 percent of all employment and 34.8 percent of total payroll in Milwaukee County (pg. 26).

Aurora’s business output/input revenue for Milwaukee County has a total impact of \$3,593.37 million (pg. 24).

Aurora Health Care hospitals produced 18,368 jobs, which are a vital contribution to the economic well-being of the many communities in Metro Milwaukee (pg. 42).

Economic Impact of Aurora Hospitals on Employment (number of jobs)

Hospital	Direct Effect	Indirect/Induced	Total Impact in Metro
ASLMC	5,284	5,700	10,984
ASLSS	565	610	1,175
ASMC	1,337	1,442	2,779
APH	275	297	572
AWAMC	1,375	1,483	2,858
TOTAL	8,836	9,532	18,368

“...Aurora is not only an important employer of historically-excluded minorities in Wisconsin, but ... it also provides a significantly higher proportion of full-time jobs to minorities than is generally the case in the Wisconsin (and Milwaukee) labor markets (page 15).”

As anchor institutions, in 2012 Aurora Health Care hospitals in Metro Milwaukee provided the following:

Hospital	Community Benefit	Uncompensated Care
ASLMC/ASLSS	\$4,937,279	\$88,587,000
ASMC	\$4,925,053	\$36,893,000
APH	\$2,206,541	\$3,083,000
AWAMC	\$905,355	\$17,956,000
TOTAL	\$12,974,228	\$146,519,000

*Community Benefit Reports 2012 Aurora St. Luke’s Medical Center, Aurora Sinai Medical Center, Aurora Psychiatric Hospital, Aurora West Allis Medical Center

¹ Levine, M.V. (2013). The Economic Impact of Aurora Health Care in Wisconsin. *University of Wisconsin-Milwaukee Center for Economic Development* (<http://www.ced.uwm.edu>). Report available at <http://www.aurora.org/commbenefits>

Part II | Assessing community health needs in Milwaukee County – past and present

2003-2009

Every three years since 2003, Aurora Health Care partnered with 12 local health departments in Milwaukee County to survey residents on their health status. The surveys were conducted through a grant provided by Aurora Health Care as part of a comprehensive survey of eastern Wisconsin commissioned in partnership with the municipal health departments located in our service areas to identify greatest needs. These surveys have served as the foundation of the Community Health Improvement Plans developed by our municipal health department partners within Milwaukee County and the City of Milwaukee Health Department.

The Community Health Surveys are archived and available at <http://www.aurora.org/commhealth>.

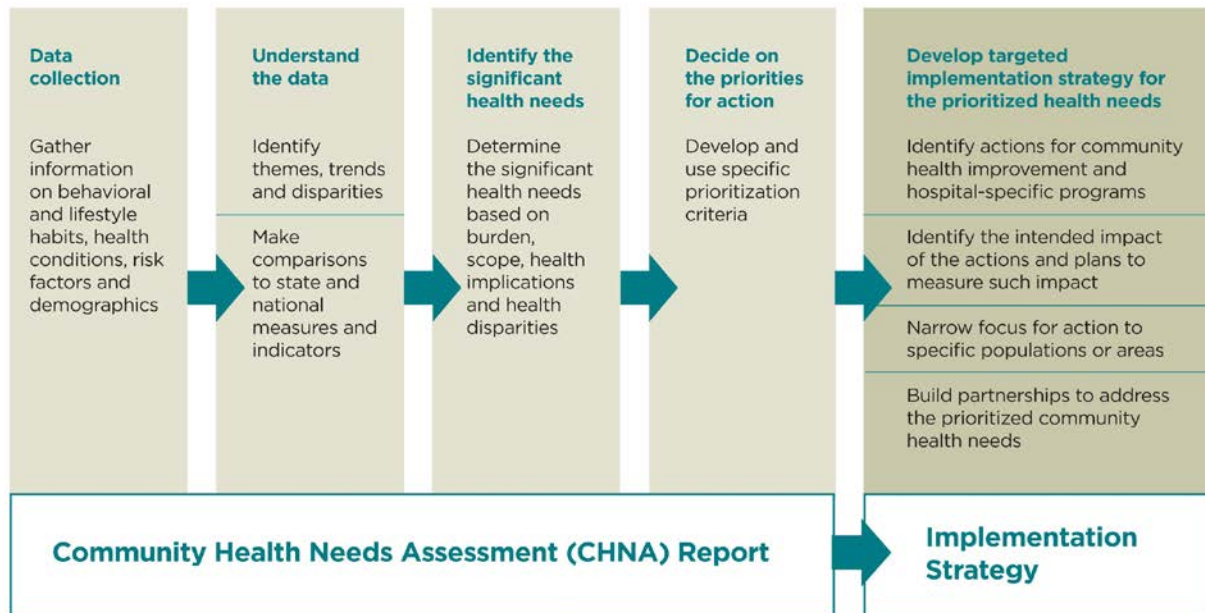
This CHNA Report builds upon those previous Milwaukee County surveys.

2012/2013 Shared Community Health Needs Assessment (CHNA)

Aurora Health Care is a founding member of the Milwaukee Health Care Partnership (the Partnership) <http://www.mkehcp.org>, a public private consortium established in 2007, dedicated to improving care for underserved populations in Milwaukee County. Through the Partnership, Milwaukee’s five health systems and their respective hospitals, the Milwaukee Health Department and 12 municipal health departments within Milwaukee County, aligned resources to conduct a shared community health needs assessment (CHNA). Completed in 2013 and supported by additional analysis from the Center for Urban Population Health, this robust community-wide CHNA includes findings from a community health survey of over 1,900 adults, 41 key informant interviews and five focus groups, and a secondary source data analysis. Together, these CHNA reports serve as the overarching unit of analysis to guide the development of the Partnership’s collaborative implementation strategies to improve health outcomes and reduce disparities within Milwaukee County.

Likewise, they serve as the overarching framework for further analysis by our five Aurora hospitals and their resultant implementation strategies for 2014.

Community Health Needs Assessment Process



Part III | Unit/level of analysis: Milwaukee County

Geographic

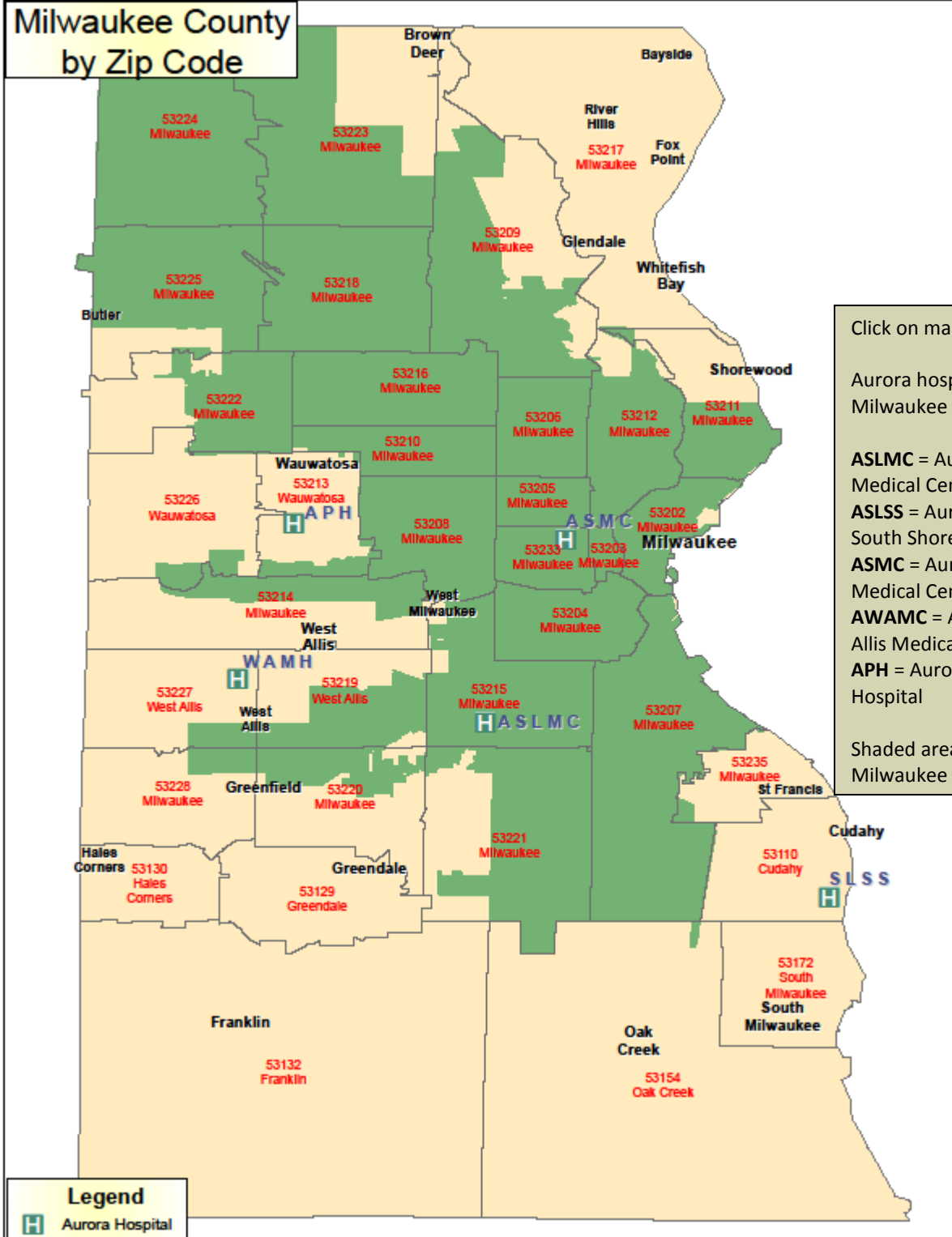
Milwaukee County is located in the southeastern quadrant of the state of Wisconsin. The city of Milwaukee is the county seat. Milwaukee County is bounded to the east by Lake Michigan, to the south by Racine County, to the west by Waukesha County and to the north by Ozaukee County.

Milwaukee County is approximately 90 miles north of the Chicago metropolitan area and has the largest airport in the state of Wisconsin. The county is served by Interstate highways 94 and 43 as well as the I-894 bypass, which connects to U.S. Highway 41/45. I-794 connects downtown Milwaukee to the airport. These transportation corridors link Milwaukee County to its neighboring counties as well as to other parts of the states of Wisconsin, Illinois, Minnesota and the Upper Peninsula of Michigan.

Milwaukee County is further characterized by its 19 unique cities and villages:

Bayside (partial)	Glendale	Oak Creek	Wauwatosa
Brown Deer	Greendale	River Hills	West Allis
Cudahy	Greenfield	Shorewood	West Milwaukee
Fox Point	Hales Corners	South Milwaukee	Whitefish Bay
Franklin	Milwaukee (city)	St. Francis	

**Milwaukee County
by Zip Code**



Click on map to enlarge

Aurora hospitals in Milwaukee County:

- ASLHC** = Aurora St. Luke's Medical Center
- ASLSS** = Aurora St. Luke's South Shore
- ASMC** = Aurora Sinai Medical Center
- AWAMC** = Aurora West Allis Medical Center
- APH** = Aurora Psychiatric Hospital

Shaded area is the City of Milwaukee

Legend
 Aurora Hospital

2013 Community Health Needs Assessment Report

Demographic Characteristics of Milwaukee County and Wisconsin

Characteristics	Milwaukee County	Wisconsin
Total Population*	947,735	5,686,986
Median Age (years)*	33.6	38.5
Race*		
White (non-Hispanic)	60.6%	86.2%
Black or African American (non-Hispanic)	26.8%	6.3%
Asian	3.4%	2.3%
American Indian and Alaska Native	0.7%	1.0%
Some other race	5.4%	2.4%
Hispanic or Latino (of any race)	13.3%	5.9%
Age*		
0-14 years	20.8%	19.4%
15-44 years	43.7%	39.2%
45-64 years	24.1%	27.7%
65 years and older	11.5%	13.8%
Education level of adults 25 years and older**		
Less than high school degree	14.8%	10.2%
High school degree	30.0%	33.6%
Some college/associates	28.1%	30.1%
Bachelor degree or higher	27.1%	26.1%
Unemployment Rate Estimate***	10.0%	7.1%
Median household income (estimate)**** (2011 inflation-adjusted dollars)	\$43,397	\$52,374
Percent below poverty estimate in the last 12 months (estimate)****	19.9%	12.0%

Note: Some totals may be more or less than 100% due to rounding or response category distribution

* U.S. Census Bureau 2010 Demographic Data, DP-1

** American Community Survey. 2007-2011 5-year Estimates, DP02

*** American Community Survey. 2007-2011 5-year Estimates, DP03

**** American Community Survey. 2007-2011 5-year Estimates, S2301

Of note

Aging population

Based on key trends outlined in *The Face of Aging in Milwaukee County: Milwaukee County Department on Demographic Report*, <http://county.milwaukee.gov/ImageLibrary/User/lcieslik/Face-of-Aging/2012FaceofAgingExecutiveSummar.pdf>, the percentage of older adults (ages 60 years and over) has remained steady at 16% of the total population of Milwaukee County since the 2000 Census. The U.S. Census Bureau projects that the total Milwaukee County population will decrease while the older adult population is expected to increase. Milwaukee County's 55-59 population increased 49% and the 60-64 population increased 41% from 2000 to 2010. This increase is generally considered to be driven by the fact that the "baby boomer" generation (those born between 1946 – 1964) will be crossing into older adult categories during this next decade.

County health ranking

In 2012, *the County Health Rankings*, <http://www.countyhealthrankings.org>, compared Milwaukee County's health outcomes and health determinants with the rest of the state. Milwaukee County ranked 71 out of 72 counties in overall health outcomes, and 72 out of 72 counties in health determinants, or risk factors for future health.

Poverty

Metro Milwaukee ranks 9th among the nation's 100 largest metro areas in the percentage of its poor population living in "extreme poverty" (neighborhoods with poverty rates higher than 40 percent).² Over 45 percent of the region's poor African American residents live in extreme poverty neighborhoods.³

² Kneebone, E., Nadeau, C., Berube, A. (2011). The Re-Emergency of Concentrated Poverty: Metropolitan Trends in the 2000s. *Metropolitan Policy Program at Brookings*: Washington D.C.

³ Levine, M. (2013). Perspectives on the Current State of the Milwaukee Economy. *University of Wisconsin-Milwaukee Center for Economic Development*: Milwaukee, WI.

Part IV | Description of the process and methods used to conduct the shared Community Health Needs Assessment (CHNA) and input from persons who represent the broad interests of Milwaukee County

The CHNA process was sponsored by the health system members of the Milwaukee Health Care Partnership (Aurora Health Care, Children's Hospital of Wisconsin, Columbia St. Mary's, Froedtert Health, Wheaton Franciscan Healthcare) and in collaboration with the City of Milwaukee and 12 municipal health departments in Milwaukee County.

The Center for Urban Population Health (CUPH) was engaged to provide additional support and analysis for the shared CHNA. CUPH facilitates and supports quantitative and qualitative research with expertise in epidemiology, biostatistics, methodology, community-based participatory research and program evaluations.

The five hospital systems provided roughly equal financial and in-kind support for the CHNA process. Importantly, because of the breadth of information, the individual documents should be consulted for details. They can be found at <http://www.aurora.org/commhealth> or <http://www.mkehcp.org>.

The complete community health needs assessment consists of four parts; full copies of all documents referenced below can be found at <http://www.mkehcp.org>:

1. Milwaukee County Community Health Survey
2. Key Informant Interview Report
3. Secondary Data Report
4. Roll-up summary/analysis produced by the Center for Urban Population Health (significant health needs and issues)

1. Milwaukee County Community Health Survey

The community health survey, a comprehensive phone-based survey, gathers specific data on behavioral and lifestyle habits of the adult population and select information about the respondent's household. In addition, this report collects data on the prevalence of risk factors and disease conditions existing within the adult population, and compares, where appropriate and available, health data of residents to state and national measurements. Conducted every three years, the survey can be used to identify community trends and changes over time.

Respondents were scientifically selected so that the survey would be representative of all adults 18 years old and older. The sampling strategy was two-fold. 1) A random-digit-dial landline sample of telephone numbers which included listed and unlisted numbers. The respondent within each household was randomly selected by computer based on the number of adults in the household (n=1,428). 2) A cell phone-only sample where the person answering the phone was selected as the respondent (n=542). At least 8 attempts were made to contact a respondent in both samples. Screener questions verifying location were included.

A total of 1,970 telephone interviews were completed between June 20 and November 7, 2012, and analyzed and posted in 2013. With a sample size of 1,970, we can be 95% sure that the sample percentage reported would not vary by more than ± 2 percent from what would have been obtained by interviewing all persons 18 years old and older who lived in Milwaukee County. When applicable, the data was compared with measures from the *Behavioral Risk Factor Surveillance System* (BRFSS) and indicators established by *Healthy People 2020*.

This shared report is sponsored by the Milwaukee Health Care Partnership and Milwaukee's five health systems, in collaboration with the City Health Department and other municipal health departments in Milwaukee County. The survey was conducted and analyzed by JKV Research, LLC, <http://www.jkvresearch.com>. JKV Research offers qualitative and quantitative research through project consultation, questionnaire design, data analysis, final report and presentation. Data collection was conducted by Management Decisions Incorporated.

Additional municipal health department community health surveys

Within Milwaukee County there are twelve municipal health departments for which health surveys also were conducted to account for input from persons who represent the broad interests of the community. The health officers of each municipal health department were among those interviewed for the Key Informant Interviews to account for those with special knowledge of or expertise in public health.

Milwaukee County Municipal Health Departments

- City of Milwaukee Health Department
- Cudahy
- Franklin
- Greendale
- Greenfield
- Hales Corners
- North Shore Health Department (serving the communities of Bayside, Brown Deer, Fox Point, Glendale, River Hills, Shorewood, and Whitefish Bay)
- Oak Creek
- St. Francis
- South Milwaukee
- Wauwatosa
- West Allis-West Milwaukee

2. Key Informant Interview Report: A summary of key informant and focus groups in Milwaukee County (2012 – 2013)

Forty-one individual key informant interviews and five focus groups were conducted between August and December 2012 (Appendix A). Each key informant was asked to rank order the top 3 to 5 major health-related issues for Milwaukee County, based on the focus areas presented in Wisconsin’s State Health Plan, *Healthiest Wisconsin 2020*. For each top-ranked health topic the informant was asked to specify existing strategies to address the issue, barriers or challenges to addressing the issue, additional strategies needed, and key groups in the community that hospitals should partner with to improve community health. Among the key informants were the health officers for the twelve local health departments, as well as leaders of academic centers, health coalitions, health systems, social service agencies, foundations and community organizations focused on a range of public health issues and/or health disparities. These key informants represent the broad interest of the community served, including medically underserved, low income and minority populations.

The Key Informant Interview Report presents the results, including cross-cutting themes, summaries of the top five health issues, comparison of results across jurisdictions (city of Milwaukee versus other Milwaukee County municipalities), and summaries for additional identified health issues. Moreover, the Key Informant Interview Report compiles an extensive listing of community assets and potential resources and partnerships to address an array of community health issues (Appendix A). The report was prepared by the Center for Urban Population Health.

Qualitative analysis of responses focused on relationships between issues, with emerging themes used to inform the final rankings. This report presents the results of this process.

Key findings from the key informant interviews:

The top five health issues that emerged as key priorities for Milwaukee County were:

1. Behavioral health
2. Access to health care
3. Health insurance coverage
4. Physical activity/overweight and obesity/nutrition
5. Infant mortality

The respondents were then asked to offer their thoughts about the existing strategies to address the top issues they identified, the barriers/challenges to addressing the issues, existing strategies and additional strategies needed, and community groups to partner with. In general, the findings were:

Existing Strategies | Providing health education, increasing health literacy, providing early detection and prevention services, and increasing social marketing efforts, noting both challenges (multiple competing messages regarding chronic diseases) and advantages (suitable for supporting “public awareness campaign” for alcohol and drug use)

Barriers | Poverty was cited as a factor across all topic areas, along with race, in relation to health disparities

Challenges | Health literacy is a challenge for some residents and respondents cited a need to work with community members and providers to make health information more comprehensible

Partners | A number of strong community assets were identified by key informants, such as Federally Qualified Health Centers, the Milwaukee County Behavioral Health Redesign project, and over 30 community organizations or programs aimed at improving health for Milwaukee County residents and addressing health disparities. Other partners cited as existing or potential strategies and partnerships included schools, school districts, school programs, school-community partnerships and parent-teacher organizations

3. Secondary Data Report: A summary of secondary data sources related to health in Milwaukee County (2012 – 2013)

In spring 2012, the Center for Urban Population Health (CUPH) was enlisted to compile secondary-source data to supplement the community health survey and key informant interviews. This report summarizes the demographic and health-related information for Milwaukee County. Data used in the report came from publicly available data sources, including the US Census Bureau and the American Community Survey, Wisconsin Interactive Statistics on Health (WISH) and other Wisconsin Department of Health Services resources, and County Health Rankings & Roadmaps. Additional data sources include the 2012 Milwaukee Health Report Summary and Socioeconomic Status (SES) zip code map, Milwaukee County high hospital utilization corridor, and the Milwaukee health professional shortage area maps.

Data for each indicator is presented by race, ethnicity and gender when the data is available. In some cases data is not presented by the system from which it was pulled due to internal confidentiality policies which specify that data will not be released when the number is less than five. When applicable, *Healthy People 2020* objectives are presented for each indicator. The objectives were not included unless the indicator directly matched with a *Healthy People 2020* objective.

4. Milwaukee County Community Health Needs Assessment (CHNA) roll-up summary prepared by Center for Urban Population Health

This report summarizes the three main assessments conducted by the members of the Milwaukee Health Care Partnership for the shared Milwaukee County CHNA (as described above). To see the executive summary or read the full report, go to <http://www.mkehcp.org>. The findings of this roll-up summary are outlined in Part V of this document.

Part V | Summary of significant health needs identified through the shared Community Health Needs Assessment (CHNA) for Milwaukee County

As noted in Section 3, the Center for Urban Population Health was asked to produce a roll-up summary of the three main assessments conducted as part of the Milwaukee Health Care Partnership’s shared Community Health Needs Assessment:

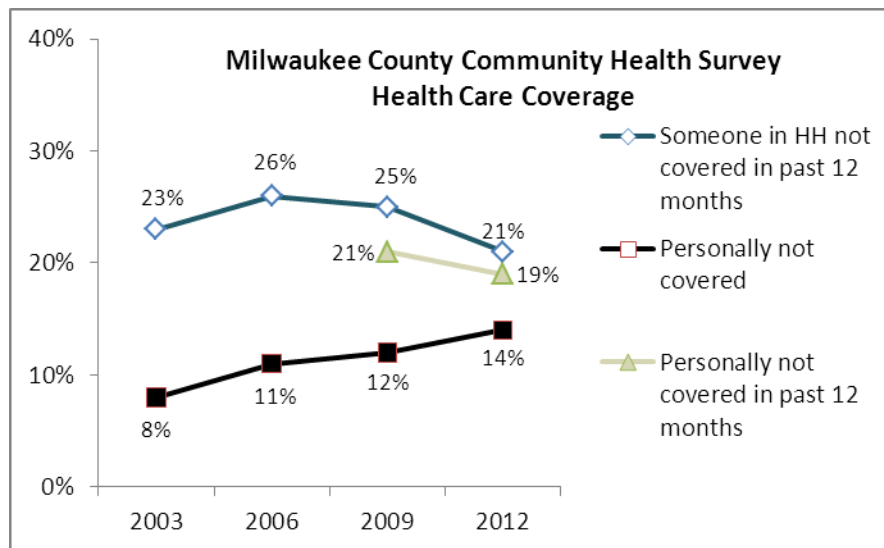
1. Milwaukee County Community Health Survey
2. Key Informant Interview Report (Milwaukee County)
3. Secondary Data Report (Milwaukee County)

Based on the findings from the three main assessments, the roll-up summary presents the significant health issues for Milwaukee County. It is further summarized below in three parts. The individual reports should be consulted for additional depth, precision and opportunities for change related to specific health issues. The reports are available at <http://www.mkehcp.org>.

1. Top issues in health care delivery

- Health care access
- Health insurance coverage
- Specific health care services including oral health, behavioral health services and prenatal services

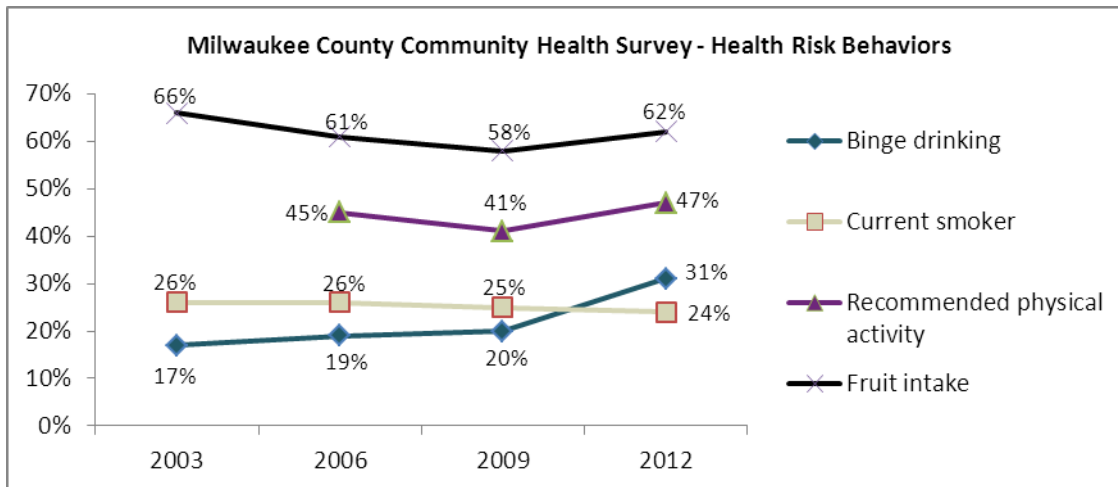
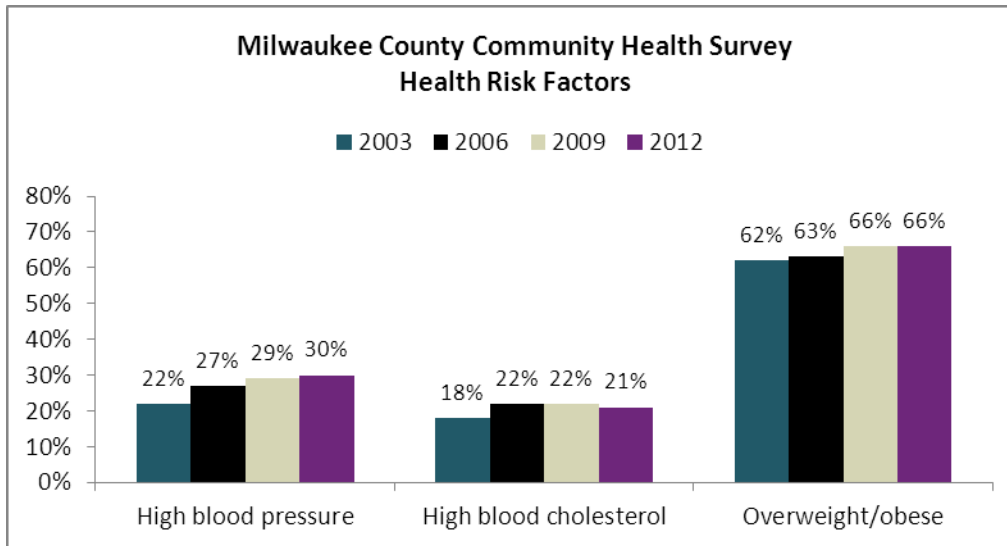
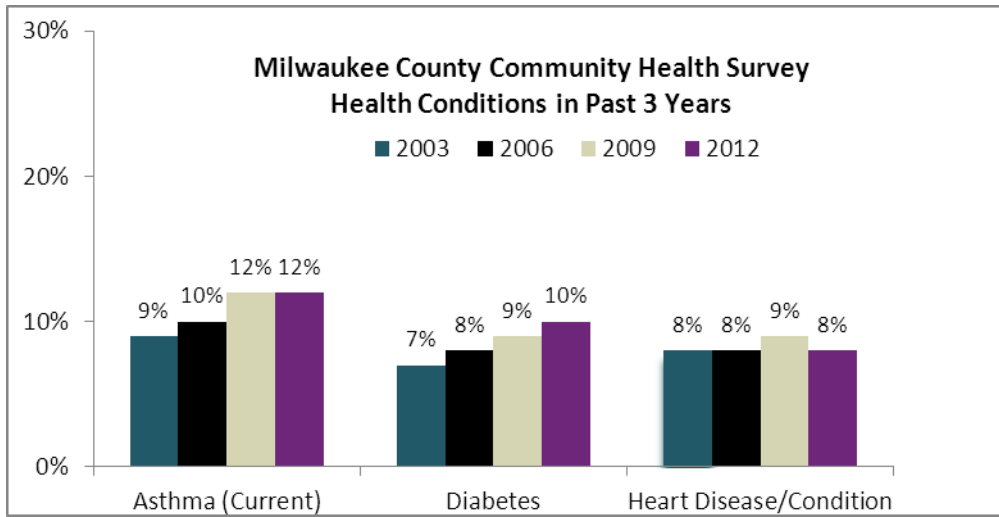
Note: The Secondary Data Analysis identified access and coverage related to prenatal care








2. Broad public health summary

A number of other public health issues emerged as key challenges for Milwaukee County. These are issues that require a broader range of partners, including but not limited to health care delivery systems. These issues include:

- Behavioral health
- Obesity, nutrition and physical activity
- Chronic disease
- Infant mortality
- Sexual health
- Health literacy



<p>Milwaukee Infant Mortality (2010)  Infant mortality rate (>365 days) 8.1</p> <p>Related disparities for infant mortality Infant Mortality Rate by Race/Ethnicity of Mother</p> <p> Non-Hispanic White 4.6  Non-Hispanic Black 14.2  Hispanic 5.3  Laotian/Hmong 6.1</p> <p>All data are per 1,000 live births Source: Wisconsin Interactive Statistics on Health (WISH), infant mortality module. Presented in the secondary data report.</p>	<p>Linking to city and state community health improvement plan The reduction of infant mortality, and specifically the reduction of racial disparities in infant mortality, is a goal of the City of Milwaukee Health Department. http://city.milwaukee.gov/Infant-Mortality</p> <p>Healthiest Wisconsin 2020 (HW 2020) identified significant racial and ethnic disparities in birth outcomes in Wisconsin. A greater proportion of infants born to Black/African American women than those born to White women are low birth weight or preterm. HW 2020 Objectives:</p> <ul style="list-style-type: none"> • Improve women’s health for healthy babies • Reduce disparities in health outcomes <p>http://www.dhs.wisconsin.gov/hw2020/pdf/healthygrowth.pdf</p>
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3. Cross-cutting issues identified in the CUPH roll-up summary

- Health literacy
- Poverty
- Racism
- Social determinants

Part VI | Prioritizing significant health needs in Milwaukee County: a health system framework

Prioritization of needs for leveraging health-system resources and expertise

This Milwaukee County CHNA Report builds upon previous Milwaukee County community health surveys conducted by Aurora Health Care (2003 to 2009) to prioritize significant health needs at a county-wide level.

Criteria used in identifying certain health needs as significant health needs

- Burden of the health issue on individuals and families, including illness, complications, cost and death
- Burden of the health issue on health care system and facilities
- Scope of the health issue within the county and local municipalities
- Health disparities associated with the health issue
- Aligns community benefit to organizational purpose and service commitment to coordinate care across the continuum

Aligning forces for population health research and collaborative implementation strategies

Aurora Health Care has a history of leveraging its health system resources through its well-coordinated network of affiliated health care facilities, providers and service sites within Milwaukee County, and through community-wide partnerships and collaborations. One example is the **Center for Urban Population Health**, which was established in April 2001 as a pioneering collaboration between Aurora Health Care, the University of Wisconsin School of Medicine and Public Health and UW–Milwaukee (UWM). Housed on the campus of Aurora Sinai Medical Center, this Center is focused on identifying what determines health, well-being and disease in certain groups, forging partnerships with community health and academic experts to design and implement preventive interventions, and measuring the effectiveness of those interventions. Accordingly, Aurora provides financial and in-kind resources to the collaborative efforts listed below to address significant community health needs in Milwaukee County identified through community health research.

Prioritized significant needs in Milwaukee County	Multi-Partner Initiatives		
	Milwaukee Health Care Partnership ⁴	Lifecourse Initiative ⁵	United Way ⁶
Health care access	✓	✓	✓
Health insurance coverage	✓		
Behavioral health	✓	✓	✓
Obesity, nutrition and physical activity		✓	✓
Chronic disease	✓		✓
Infant mortality	✓	✓	✓
Sexual health			✓
Health literacy	✓	✓	✓
Poverty		✓	✓
Racism		✓	✓
Social determinants		✓	✓

⁴ The Milwaukee Health Care Partnership is a public/private consortium dedicated to improving health care coverage, access and care coordination for underserved populations in Milwaukee County. View <http://mkehcp.org/>

⁵ The goals of the Lifecourse Initiative are: 1) Strengthen father involvement in African-American families; 2) Reduce poverty among African-American families; 3) Expand access to health care. View http://www.planningcouncil.org/PDF/LIHF_Milw_CAP_final_w_cover.pdf

⁶ For United Way of Greater Milwaukee initiatives, view <http://www.unitedwaymilwaukee.org/home>

2013 Community Health Needs Assessment Report

Prioritization of significant needs for leveraging hospital resources and expertise

By applying the following criteria, our five Aurora hospital facilities in Milwaukee County used this shared 2013 Milwaukee County Health Needs Assessment Report to further refine their targeted implementation strategies:

- Meets a defined critical human need: Access for underserved populations
- Hospital strategic priorities and expertise
- Estimated feasibility for the hospital facility to effectively implement actions to address health issue
- Existing or potential partnership collaborations within the communities served to address the health issue
- Alignment of hospital resources and expertise to support strategies identified in municipal health department Community Health Improvement Plans
- Improves the health of people in the communities we serve by providing high-quality preventive and primary care
- Reduces hospital costs by redirecting people to less costly forms of care and expands the care continuum
- Has evidence-basis in a cross-section of the literature for management of chronic diseases in defined populations
- Leverages existing partnerships with free and community clinics to expand the care continuum
- Extends the reach of our investment by combining it with external resources and collaborative partnerships with others in the community
- Resonates with key stakeholders as a meaningful priority for the Aurora hospital to address

Each hospital implementation strategy is organized into three main categories in alignment with three core principles of community benefit:

Category	Community Benefit Core Principle
Priority #1: Access and Coverage	<ul style="list-style-type: none"> • Access for persons in our community with disproportionate unmet health needs
Priority #2: Community Health Improvement Plan	<ul style="list-style-type: none"> • Build links between our clinical services and local health department community health improvement plan (CHIP)
Priority #3: Hospital focus	<ul style="list-style-type: none"> • Address the underlying causes of persistent health problems

As well, each hospital reviewed the Community Health Improvement Plans for the following municipal health departments within Milwaukee County to prepare their respective 2014 implementation strategies:

Municipal Health Departments in Milwaukee County	Aurora St. Luke's Medical Center	Aurora St. Luke's South Shore	Aurora Sinai Medical Center	Aurora West Allis Medical Center	Aurora Psychiatric Hospital
City of Milwaukee Health Department	✓		✓		✓
Cudahy Health Department		✓			✓
Franklin Health Department	✓				✓
Greendale Health Department	✓				✓
Greenfield Health Department	✓				✓
Hales Corners Health Department	✓				✓
North Shore Health Department					✓
Oak Creek Health Department		✓			✓
St. Francis Health Department		✓			✓
South Milwaukee Health Department		✓			✓
Wauwatosa Health Department					✓
West Allis-West Milwaukee Health Department				✓	✓

Summary

Aurora Health Care is an integrated health system serving eastern Wisconsin with a well-coordinated network of healthcare facilities, providers and service sites within Milwaukee County.

Since 2003, Aurora Health Care has partnered with 30 local health departments, including those within Milwaukee County, to survey residents on their health status and habits, as part of a comprehensive survey of eastern Wisconsin to identify significant health needs.

In 2012, Aurora Health Care aligned its resources with four other health care systems in Milwaukee County, the Milwaukee Health Department and 12 municipal health departments within Milwaukee County to conduct a shared community health needs assessment. Completed in 2013 and supported by additional analysis from the Center for Urban Population Health, this robust shared CHNA includes findings from a community health survey of over 1,900 adults, significant key informant interviews and a secondary source data report.

An additional roll-up report of all three assessments was produced by the Center for Urban Population Health to complete this Community Health Needs Assessment Report.

Within Milwaukee County, Aurora Health Care assesses and addresses significant community health needs from both a health-system and individual hospital level.

To learn more about Aurora's Community Benefit programs in Milwaukee County, see our 2012 Community Benefit Report: <http://www.aurorahealthcare.org/aboutus/community-benefits/art/2012-system-report.pdf>

This Community Health Needs Assessment (CHNA) Report was adopted by the Social Responsibility Committee of the Aurora Health Care Board of Directors on December 19, 2013.

To submit written comments about the Community Health Needs Assessment (CHNA) report or request a paper version of the report, [click here](#).

Appendix A | Key Informant Interview Report: A summary of key informant interviews and focus groups in Milwaukee County (2012 – 2013)

The report is available at www.aurora.org/commbenefits

Data Collection and Analysis: Forty-one individual interviews and five focus group interviews were conducted between August and December 2012. Members of the Milwaukee Health Care Partnership, in collaboration with the City of Milwaukee Health Department, identified various organizations to participate in the key informant interview. The organizations were selected based on the following criteria:

- Provided a broad interest of the community and the health needs in Milwaukee County, as well as the local municipalities within Milwaukee County,
- Comprised of leaders within the organization with knowledge or expertise relevant to the health needs of the community, health disparities or public health, and/or
- Served, represented, partnered or worked with members of the medically underserved, low income and/or minority populations

Key informant interviews were conducted with the health officer for each local health department as well as leaders of academic centers, foundations, health coalitions, health systems, social service agencies and community organizations. Cumulatively, these organizations focus on a range of public health issues and represent the broad interests of community, including medically underserved, low-income and/or minority populations.

Summary of the organizations representing the broad interest of the community

Organization	Description of the organizations <i>The description is based on information provided on the organization's website, accessed July 5, 2013</i>
12 Local Health Departments	Milwaukee County has twelve local municipal health departments: City of Milwaukee, Cudahy, Franklin, Greendale, Greenfield, Hales Corners, North Shore, Oak Creek, St. Francis, South Milwaukee, Wauwatosa, and West Allis-West Milwaukee. Since 1993, Wisconsin State Statutes have required communities throughout Wisconsin to develop and implement local health plans to address health conditions impacting their residents.
AIDS Resource Center of Wisconsin (ARCW)	The AIDS Resource Center of Wisconsin is home to the ARCW Medical Center - Wisconsin's largest and fastest growing HIV health care system with a location in Milwaukee. Through its integrated medical, dental and mental health clinics along with its pharmacy and dedicated social services that include food pantries, a legal program, and social work case management, more than 3,300 HIV patients in Wisconsin gain the health care and social services they need for long-term survival with HIV disease from ARCW. ARCW is also a leading provider of "innovative and aggressive prevention services to help at-risk individuals stay free of HIV."
Black Health Coalition of Wisconsin	The mission of the Black Health Coalition of Wisconsin, Inc. is to "improve the health status of African Americans in the state of Wisconsin and to insure equitable and comprehensive health for all people." The Black Health Coalition of Wisconsin, Inc. (BHC) adopted the concerns of the Health and Human Services' Secretary Task Force on Black and Minority Health as its basis for concentration.
Children's Health Alliance of Wisconsin	The Alliance was established in 1994 by the following founding partners: state government, Children's Hospital of WI and UW Children's Hospital. United around a common desire: "quality health care for all children and families." Main focus is on collaboration, advocacy, mobilization, and support; and programming for asthma, grief and bereavement, injury prevention and death review, lead poisoning, oral health, and Reach Out and Read Wisconsin.
Children's Hospital and Health System, Community Services	Children's Hospital of Wisconsin Community Services provides community health services, foster and adoption services, child and family counseling, child advocacy services, family resource centers and education services.
Columbia St. Mary's, Milwaukee Oral Health Task force	The task force is committed to improving oral health for children in Milwaukee. One such initiative, is Smart Smiles School-based Oral Health, at Columbia St. Mary's Health System. The program provides dental screening exams, fluoride treatments, teeth cleanings, dental sealants, oral health instruction, and referrals for additional dental care to children with BadgerCare insurance coverage, as well as those without insurance at 44 inner city schools. The State of Wisconsin, corporations, and private foundations provide funding for the program's operational expenses.
Community Advocates	Community Advocates "helps people meet their most basic needs -- like a roof over their heads, the lights and heat on at night, and healthcare for their kids." In addition to basic needs advocacy, Community

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	Advocates provides case management, advocacy services to individuals seeking Social Security Disability benefits, and services for individuals and families with domestic violence, substance addiction, and mental health issues.
Greater Milwaukee Foundation	Since the Greater Milwaukee Foundation began in 1915, they've been guided by three tenets – helping donors create personal legacies of giving that last beyond their lifetimes; investing donor funds for maximum return with minimum risk; and playing a leadership role tackling the community's most challenging needs. These guiding principles continue to serve the Foundation, their donors, and the community well.
Helen Bader Foundation	The Helen Bader Foundation, Inc. strives to be a philanthropic leader in improving the quality of life of the diverse communities in which it works. The Foundation makes grants, convenes partners, shares knowledge to affect emerging issues in key areas, “from providing safe places for Milwaukee youth to go after school, to bringing the public and private sectors together to help people get back to work during difficult economic times, the groups we fund are focused on finding innovative solutions to the challenges people face.”
Latino Health Coalition	The Latino Health Coalition (LHC) in Milwaukee works within a “social justice framework to organize the Latino community to address the social determinants of health affecting all of us.” LHC defines social justice as the “equitable distribution of resources to ensure that everyone has opportunities in all aspects of health for complete physical, mental and social well-being.”
Lindsay Heights Neighborhood Health Alliance	The Lindsay Heights Neighborhood Health Alliance (LHNHA) is a gathering of “community-anchored groups, neighbors, friends and partners that promote and serve as a resource for health.” The Alliance works to “reduce health disparities and create a deep and sustained culture of health and community sufficiency” for families and the neighborhood.
Medical College of Wisconsin, Institute for Health and Society	The Institute for Health and Society is to “improve health and advance health equity through community and academic partnerships.” In recent years, there has been an increased emphasis on public and community health and clinical and translational sciences at the Medical College of Wisconsin (MCW). One example is the Advancing a Healthier Wisconsin endowment funds, which provide support for three complementary programs, each of which “encompasses public and community health and certain translational activities that aim to improve the health of the people of Wisconsin.”
Milwaukee Common Council	The Common Council “exercises all policy-making and legislative powers of the city, including the adoption of ordinances and resolutions, the approval of the city's annual budget, and the enactment of appropriation and tax levy ordinances.” The Council also has approval over the mayor's appointments of cabinet heads to direct day-to-day operations of city departments. In addition to “their powers as legislators, council members serve as district administrators, responsible to the citizens in their districts for city services.” The seven standing committees of the Milwaukee Common Council are Community and Economic Development, Finance & Personnel, Judiciary & Legislation, Licenses, Public Safety, Public Works, and Zoning, Neighborhoods & Development.
Milwaukee County Department of Health & Human Services	The Department of Health & Human Services consists of the following divisions: delinquency & court services, management services, behavioral health, disabilities services, housing, and emergency medical services. The mission of the Milwaukee County Department of Health & Human Services is to secure human services for individuals who need assistance living a healthy, independent life in the community.
Milwaukee Health Care Partnership	The Milwaukee Health Care Partnership is a public / private partnership dedicated to improving health care for underserved populations in Milwaukee County. The Partnership includes Milwaukee's five healthcare systems, four Federally Qualified Health Centers, the Medical College of Wisconsin, and the City, County and State health departments. These organizations have committed their leadership as well as financial and in kind resources to “support the implementation of a community-wide plan that will improve health outcomes, reduce health disparities and reduce the total cost of care,” by focusing on three priority areas: coverage, access and care coordination.
The Faye McBeath Foundation	The Faye McBeath Foundation is a private, independent foundation providing grants to tax-exempt nonprofit 501 (c) (3) organizations in the metropolitan Milwaukee area. The major areas of interest are: children, aging and elders, health, health education, and civic and governmental affairs.
United Community Center	The United Community Center is a comprehensive social service agency serving the families of Milwaukee's south side. Programs range from education to elder programs, meeting the needs of three year olds to 93 year olds, and everyone in between.
United Neighborhood Centers of Milwaukee (UNCOM)	UNCOM is a 501(c)(3) non-profit organization working in collaboration with Milwaukee neighborhood centers to create model programs, build organizational capacity, and share expertise and best practices across agencies. The mission of the United Neighborhood Centers of Milwaukee is to “strengthen city neighborhoods by combining and enhancing the assets of our partner agencies to improve the quality of life for urban families.” Together UNCOM agencies work to “utilize the assets of Milwaukee's diverse

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	communities supporting the growth of healthy, wholesome, and empowered neighborhoods.”
United Way of Greater Milwaukee	United Way of Greater Milwaukee is an independently-governed 501(c)3 nonprofit organization connected to a network of more than 1,400 local United Ways through United Way Worldwide. It has its own board of directors and focus on local solutions for local problems. United Way advances the common good as Greater Milwaukee’s largest community-based investor in Education, Income and Health – the building blocks for a good quality of life. After all, “everyone deserves opportunities for a quality education that leads to a stable job, family-sustaining income through all of life’s stages, good health and a safe home.”
UW-Milwaukee Joseph J. Zilber School of Public Health	The University of Wisconsin-Milwaukee Joseph J. Zilber School of Public Health “conducts rigorous public health research and scholarship; educates the current and future public health workforce; and influences the development of strategies and policies that promote health among diverse populations.” The school is focused on addressing the “environmental hazards and complex health disparities whose solutions go beyond medicine, we are responding with innovative, interdisciplinary education that prepares leaders for effective practice and policy.”
Wisconsin Department of Health Services	The Wisconsin Department of Health Services’ mission is to “support economic prosperity and quality of life, the Department of Health Services exercises multiple roles in the protection and promotion of the health and safety of the people of Wisconsin.” The six divisions includes (1) enterprise services, (2) health access and accountability, (3) long term care, (4) mental health and substance abuse services, (5) public health, and (6) quality assurance. There are five regions within the state. The Southeastern regional office is located in Milwaukee.
Wisconsin Medical Society	The Wisconsin Medical Society (Society) is the largest physician advocacy organization in Wisconsin, representing nearly 12,500 physicians and their patients. The mission is to “improve the health of the people of Wisconsin by supporting and strengthening physicians’ ability to practice high-quality patient care in a changing environment.”
YMCA of Metro Milwaukee	The YMCA of Metro Milwaukee is a cause-driven organization that is for youth development, healthy living and social responsibility; “that’s because a strong community can only be achieved when we invest in our kids, our health and our neighbors.”

The key informant interviews were conducted by Milwaukee Health Care Partnership members and graduate students supervised by the City of Milwaukee Health Department. The interviewers used a standard interview script that included the following elements:

- 1) Each key informant was asked to rank order the top 3 to 5 major health-related issues for Milwaukee County, which is based on the focus areas presented in Wisconsin’s State Health Plan, *Healthiest Wisconsin 2020*.
- 2) For each top-ranked health topic the informant was asked to specify existing strategies to address the issue, barriers or challenges to addressing the issue, additional strategies needed, and key groups in the community that hospitals should partner with to improve community health. *Healthiest Wisconsin 2020* focus areas include alcohol and drug, chronic disease, communicable disease, environmental and occupational health, growth and development, mental health, nutrition, oral health, physical activity, reproductive & sexual health, tobacco, access, and injury and violence.

Qualitative analysis of responses focused on relationships between issues, with emerging themes used to inform the final rankings. The report presents the results of this process, including cross-cutting themes, summaries of top five health issues, and a comparison of results across jurisdictions (City of Milwaukee versus other Milwaukee County municipalities). Additional summaries of each health issue are also reported, as well as potential resources and partnerships to address each of the community health issues.

Community assets, potential resources and partnerships identified through the CHNA (key informants) for the top five issues that emerged as key health priorities for Milwaukee County

The top five health issues that emerged as key priorities for Milwaukee County were behavioral health (mental health and alcohol/drug use), access to health care services, physical activity/overweight and obesity/nutrition, health insurance coverage and infant mortality. The key community partners:

- **Access to health care services:** Nonprofit organization, corporate leaders, health departments, and funders were noted as key participants needed to address Access issues. Specifically, the Milwaukee Health Care Partnership, FQHCs, the mayor, 211 Impact, United Way, Greater Milwaukee Foundation, Black Health Coalition, the United Neighborhood Centers of Milwaukee member organizations, Zilber School of Public Health, Health Watch, United Community Center and the Medical Society. Key community partners to improve dental health partners include Marquette University Community Dental Clinics, St. Elizabeth Ann Seton Dental Clinic, and Sixteenth Street Community Health Center, and programs to train new dentists, work with retired dentists and build new clinics.
- **Behavioral Health (mental health and alcohol and drug use):** **For mental health:** Community nonprofits such as Meta House, National Alliance on Mental Illness (NAMI), Bread of Healing, Community Advocates, and AIDS Resource Center of Wisconsin (ARCW), pastors and churches, school districts, Warmline, County programs (such as the Behavioral Health Division and Mental Health Task Force), and police and emergency services. The importance of health systems commitment to this issue was also noted. **For alcohol and drug use:** schools, law enforcement, pharmacies, Medicaid, community agencies such as Meta House, Community Advocates, WCS, YMCA, and UCC, faith-based organizations, and the Department on Aging.
- **Health insurance coverage:** FQHCs and free clinics, HMOs, Common Ground, AARP, charitable foundations, faith-based organizations, legislative advocacy groups, and refugee settlement agencies.
- **Infant mortality:** United Way, City of Milwaukee, the Lifecourse Initiative for Healthy Families, childcare providers, faith communities, W-2 agencies, health departments, schools, the Black Health Coalition, and the Milwaukee Health Care Partnership Access Initiative.
- **Physical activity, overweight and obesity/nutrition:** private partners, community organizations, social service agencies, women's organizations, employers, health departments, policymakers, YMCA, school districts, park systems, gardens and farmer market initiatives, the Sodexo Foundation, and local food establishments and retailers.

Partners & Contracts: This shared key informant interview report is sponsored by the Milwaukee Health Care Partnership and Milwaukee's five health systems, in collaboration with the City of Milwaukee and other municipal health departments in Milwaukee County, and prepared by the Center for Urban Population Health.

Appendix B | Aurora University of Wisconsin Medical Group Clinics

Collectively, this group of clinics serves underserved communities in Milwaukee County and, during 2012, completed over 36,700 patient visits. The clinics are located at Aurora Sinai Medical Center (except as noted).

- Aurora Walker's Point Community Clinic – the largest free clinic in Wisconsin, freestanding and community based, open 48 hours a week with evening and Saturday hours to serve a neighborhood with the highest percentage of uninsured persons in the state, providing urgent care, family medical and specialist services including behavioral health.
- Aurora Internal Medicine Clinic
- Family Practice Clinics (one each at Aurora Sinai Medical Center and Aurora St. Luke's Medical Center)
- Aurora Family Care Center
- Aurora Midwifery and Wellness Center
- Aurora Women's Health Center
- ExclusivelyForWomen
- Center for Senior Health and Longevity
- Aurora Comprehensive Breast Care Center
- Aurora Wiselives
- Aurora Center for Senior Health and Longevity