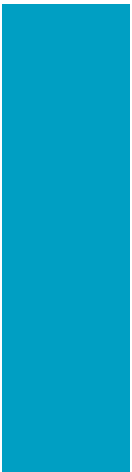


COMMUNITY HEALTH

Needs Assessment and Implementation Strategy | 2017-2019



COMMUNITY HEALTH COMMITMENT



Published Nov. 2016

COMMUNITY HEALTH COMMITMENT 2017-2019

The ThedaCare Health System

Who We Are

ThedaCare[™] is a non-profit, community-owned health system serving a nine-county region in northeastern Wisconsin. For more than 100 years, ThedaCare has been committed to finding a better way to deliver healthcare to patients throughout Northeast Wisconsin. The organization is the third largest healthcare system in Wisconsin, serving more than 200,000 patients annually. It employs more than 7,000 healthcare professionals throughout the region, making it the largest employer in Northeast Wisconsin.

ThedaCare has seven hospitals:

- ThedaCare Regional Medical Center-Appleton
- ThedaCare Medical Center-Berlin
- ThedaCare Regional Medical Center-Neenah
- ThedaCare Medical Center-New London
- ThedaCare Medical Center-Shawano
- ThedaCare Medical Center-Waupaca
- ThedaCare Medical Center-Wild Rose

ThedaCare has a Level II Trauma Center, ThedaCare Cancer Care – a comprehensive program providing care to a 9 county area, stroke and cardiac programs, as well as 33 clinics and a foundation dedicated to community service. It is the first health system in Wisconsin to be a Mayo Clinic Care Network member, giving specialists the ability to consult with Mayo Clinic experts on a patient's care.



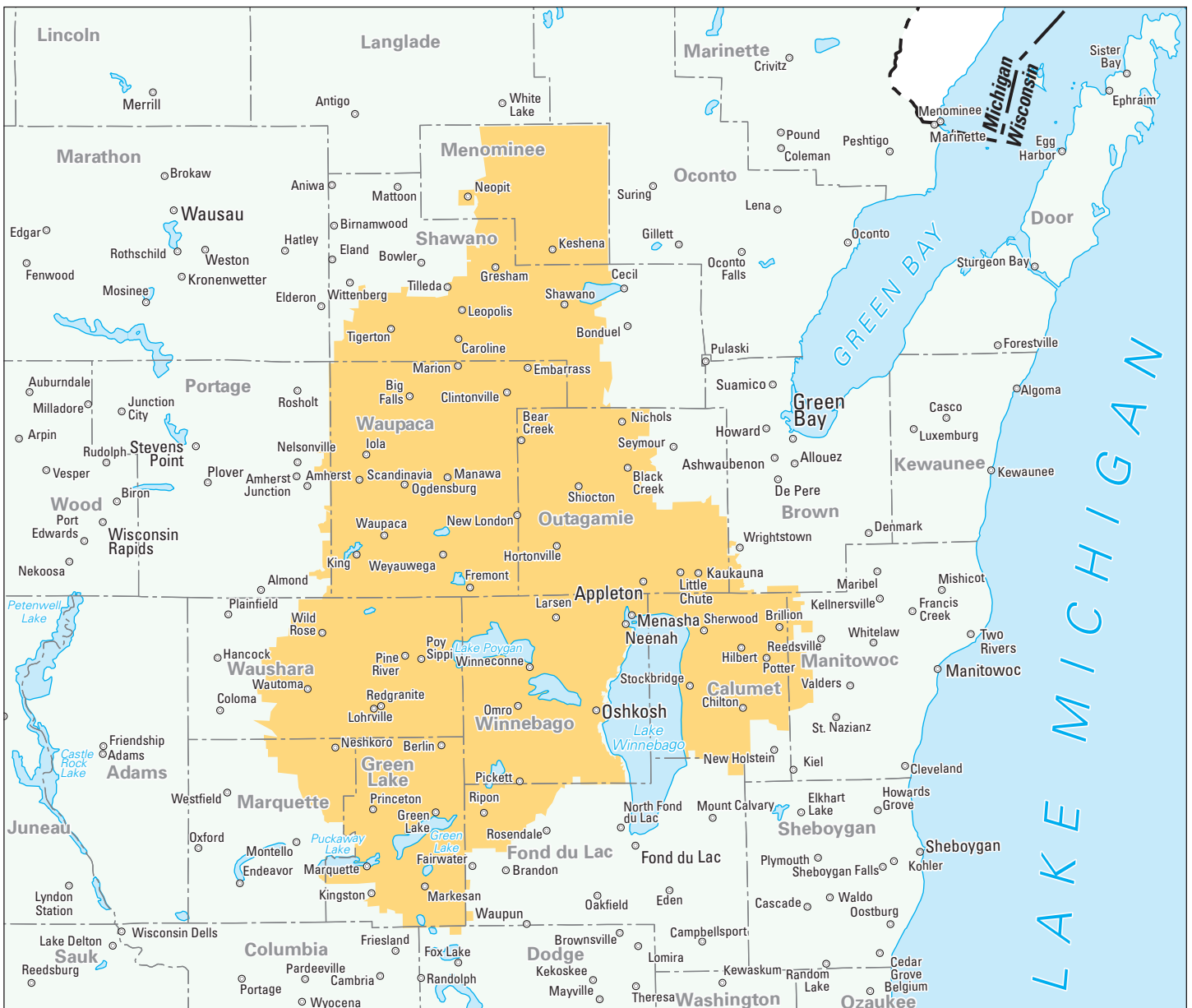
Our Service Areas

ThedaCare's service area consists of nine Northeast Wisconsin counties: Calumet, Green Lake, Marquette, Menominee, Outagamie, Shawano, Waupaca, Waushara and Winnebago. The primary service area is anchored by what is known as the Fox Cities, a cluster of eight communities ranging in size from 6,700 to 74,000 residents and situated along the Fox River 25 miles south of Green Bay. These communities include Appleton, the Town of Grand Chute, Neenah, Menasha, Kaukauna, Little Chute, Kimberly and Combined Locks.

ThedaCare serves other major communities: Oshkosh (nine miles south of Neenah), New London (17 miles northwest of Appleton), Shawano (45 miles north of Appleton), Waupaca (35 miles west of Appleton), Berlin (37 miles southwest of Neenah) and Wild Rose (48 miles west of Neenah). About 543,000 people are served in our geographical service area.

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ThedaCare Service Area



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Our Vision, Mission, and Values

Delivering peace of mind for all we serve is the vision of ThedaCare. ThedaCare’s mission reaches beyond providing excellent healthcare services within our hospitals and clinics. ThedaCare is committed to making all the communities we serve healthy places to live, learn, work and play. Simply stated, ThedaCare’s mission is *“to improve the health of our communities.”*

A set of core values guide ThedaCare employees as they make decisions every day that impact the care provided to our patients and to our communities.

ThedaCare values are:

- **Focus on the customer –**
their needs are our top priority
- **Have a thirst for learning –**
continuously seek out ways to do our work better
- **Be courageous –**
challenge each other’s ideas to come up with the best thinking and solutions
- **Love your work –**
let your passion show every day

Key Components of Our Commitment

Year after year, community surveys identify ThedaCare as the local healthcare system most recognized for giving back to the community. ThedaCare and each of our seven hospitals are committed to improving the health of the communities we serve. We fulfill our community benefit commitment through a variety of efforts including:

A written **mission statement** that places the community first and a **Community Health Needs Assessment and Implementation Strategy** targeting the most critical health needs in our communities.

A **sustainable funding structure** to support innovative and collaborative health projects that have measurably improved health and earned national recognition.

Policies and billing practices that support appropriate financial assistance for those in need.

While ThedaCare’s community health improvement programs address the needs of the overall population we serve, vulnerable groups are a major focus of our efforts.

Organizational Support

ThedaCare is governed by a volunteer **Board of Trustees** comprised of 19 individuals representing broad interests throughout our service area. *(See Appendix A)*

The ThedaCare Board of Trustees approves the Community Health Implementation Strategy for all seven ThedaCare hospitals. In addition, the local Governing Boards of our five rural hospitals in Berlin, New London, Shawano, Waupaca and Wild Rose approve their local plans. *(See Appendix B for ThedaCare Medical Center-New London Board of Directors)*

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Our Board of Trustees and **System Leadership Team (SLT)** (*See Appendix C for list of SLT members*) are engaged in a comprehensive strategic planning process every two years, reaffirming our mission and vision, establishing strategic priorities and monitoring progress in achieving them.

ThedaCare employs a team of community health specialists dedicated to researching and assessing community health needs, as well as implementing strategies to improve them. Each fall, this team reports key strategies to stakeholders at a “*Community Conversation*” event.

Community Health Action Teams (CHAT)

CHAT Teams are the primary resources ThedaCare uses to engage the community in better understanding local health needs and to develop plans for action. CHAT stands for Community Health Action Team. ThedaCare’s Community Health Specialists help facilitate the CHAT efforts for six CHAT teams in the Fox Cities, Berlin, New London, Shawano, Waupaca and Wild Rose.

Each CHAT team is comprised of local community leaders from business, education, public health, area health systems, faith communities, non-profit organizations and government. (*See Appendix D for current CHAT roster*). These leaders select issues to study, organize “plunge” experiences (day-long field trips) to gain in-depth understanding and collaborate in problem-solving initiatives. This results in sustainable, effective community-based solutions to systemic health issues.

ThedaCare providers and staff are integrated into a wide variety of these initiatives as appropriate.

COMMUNITY HEALTH NEEDS ASSESSMENT



COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019



About ThedaCare Medical Center-New London

At the height of The Great Depression, a group of dedicated Canadian nuns living and working in New London, Wisconsin, made a decision that resonates throughout the community to this day. They moved from operating a small hospital out of a house to building a new facility that today serves residents as ThedaCare Medical Center-New London. The change was dramatic for local residents, who appreciated having additional medical services close to home.

As New London grew, the hospital grew along with it. In 2003, ThedaCare Physicians built a clinic adjacent to the hospital, creating an integrated healthcare campus for the community. In 2009, both facilities expanded to create additional space for patients and services.

ThedaCare Medical Center-New London is a 25-bed critical access hospital serving New London and

nearby communities in Outagamie and Waupaca counties. ThedaCare Medical Center-New London offers more than 50 sub-specialties and provides inpatient and outpatient surgery; a 24-hour emergency department; rehabilitation services; diagnostic services, including laboratory and imaging; pain management; and transitional care. The ThedaCare Medical Center-New London Birth Center features a warm and inviting atmosphere, along with a process to help families create the ideal birth experience.

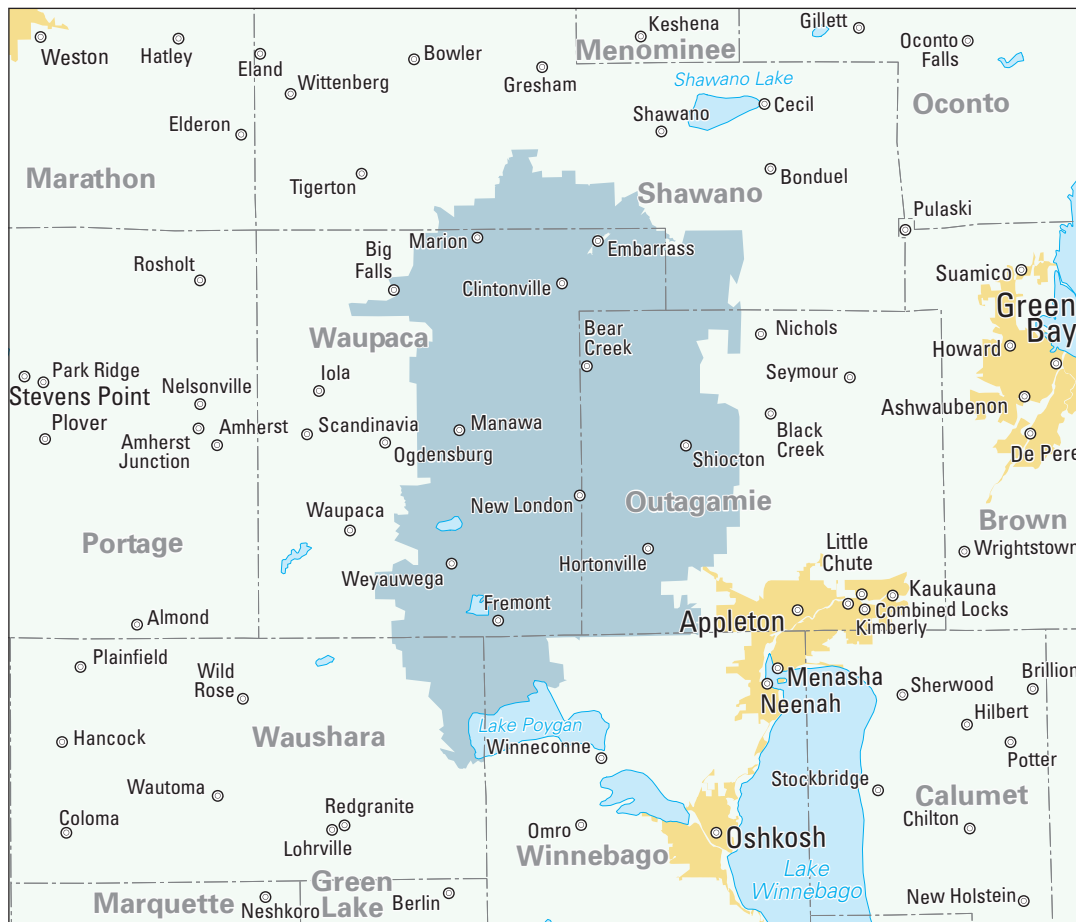
ThedaCare Physicians provide family medicine and on-site surgical access. Medical records are connected across the ThedaCare system, promoting seamless communication among care team members. ThedaCare Medical Center-New London works closely with all other ThedaCare hospitals and facilities to provide a comprehensive team of experts to care for area residents.

COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

ThedaCare Medical Center-New London Service Area

ThedaCare Medical Center-New London provides healthcare services to people throughout Wisconsin's Wolf River region, including New London, Clintonville, Manawa, Hortonville, Marion, Weyauwega, Shiocton, Fremont and Embarrass. New London's service

area sits on the borders of Outagamie and Waupaca counties. From a community health perspective, a portion of this service area is also covered by other ThedaCare hospitals. (see map below). (Map represents zip codes of 80% of inpatient base).



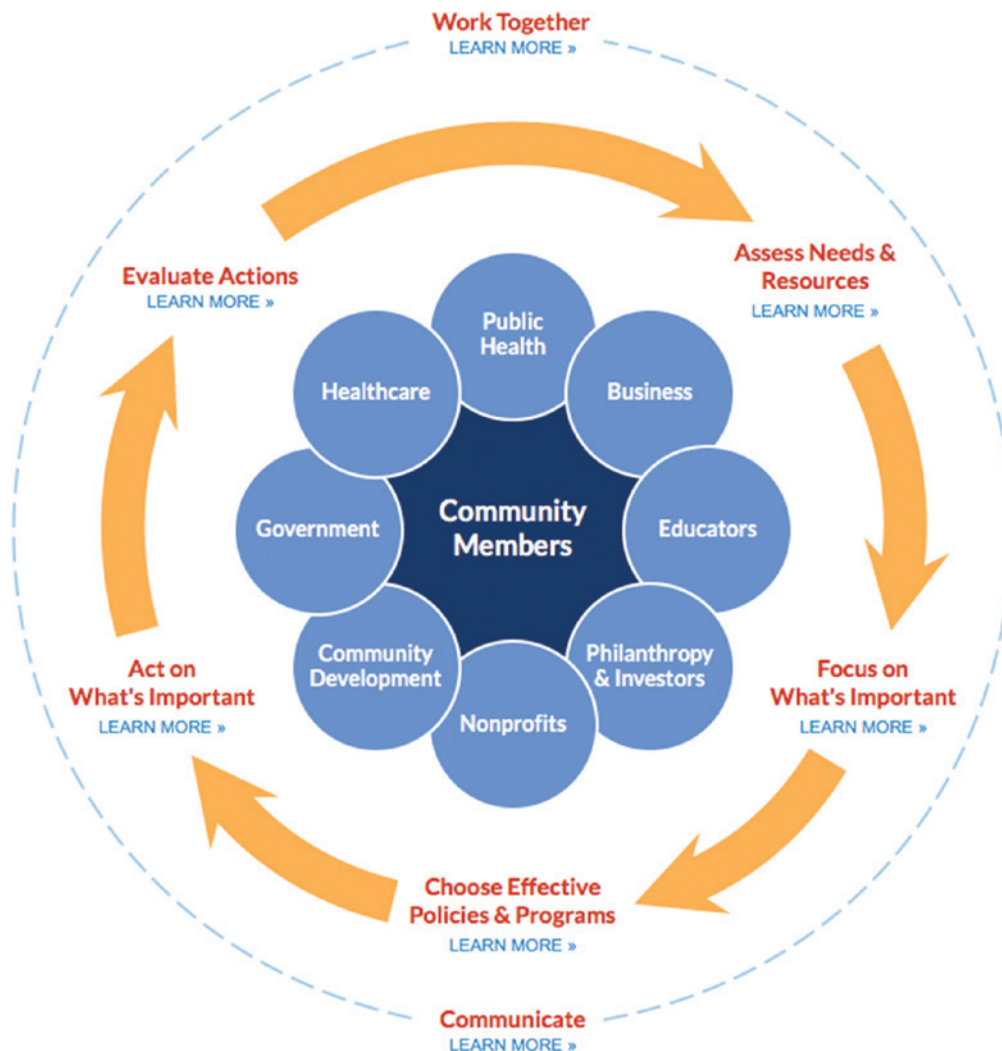
COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

Our Community Health Improvement Model

ThedaCare utilizes models created by the University of Wisconsin Population Health Institute and Robert Wood Johnson Foundation as the framework for our Community Health Needs Assessment and Implementation Strategy.

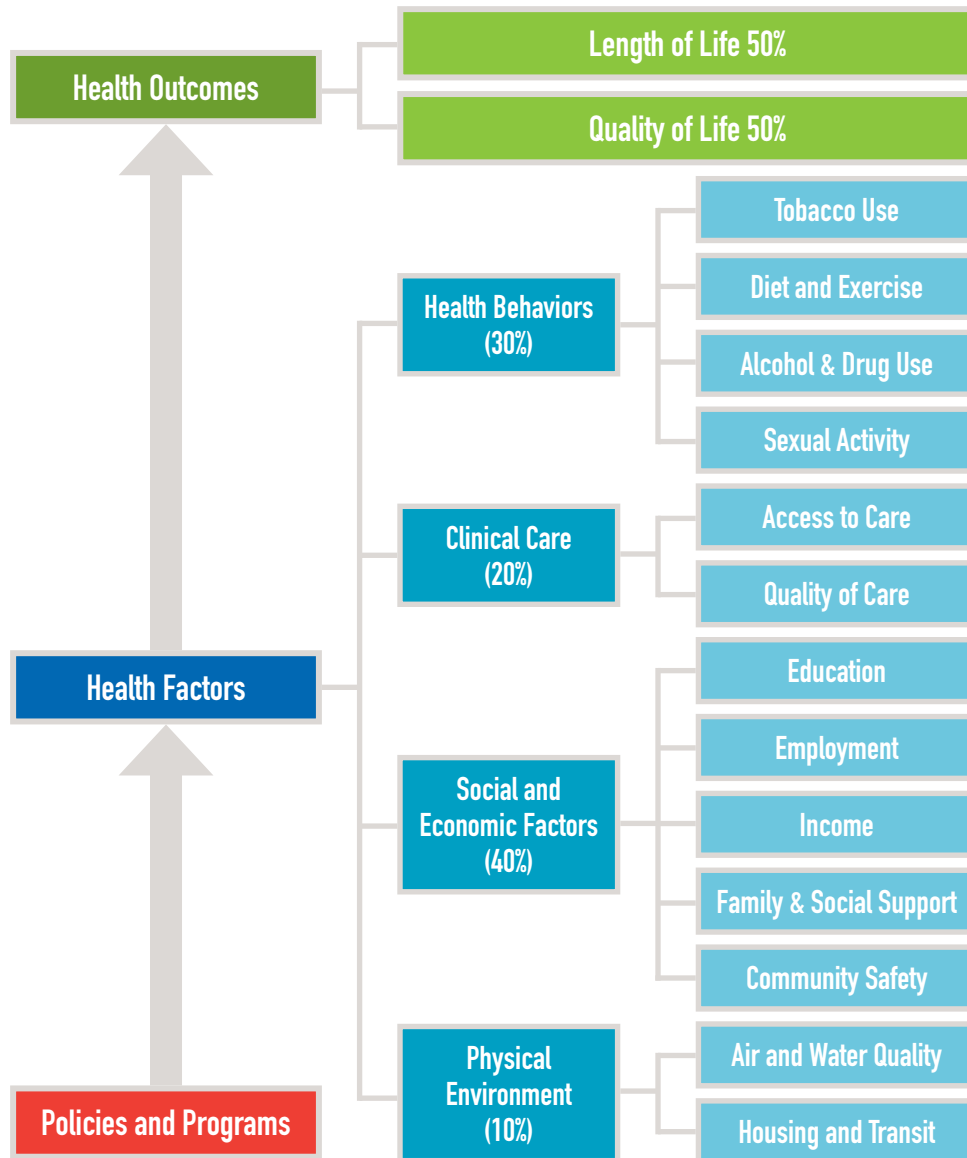
The “Take Action” model below describes the cyclical process used to identify, prioritize, act on and evaluate the health needs of our communities in collaboration with community partners.

Take Action



COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

ThedaCare uses the UW Population Health Institute model below to help our communities understand what creates health and to classify health needs and opportunities. Data collected through the institute's County Health Rankings serve as one of several data sets that help us understand local health needs.



University of Wisconsin Population Health Institute Accessible at <http://www.countyhealthrankings.org/our-approach>

COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

Our Research

Our Research Methodologies

We used a variety of methodologies to gain a comprehensive understanding of the health needs of people throughout our area. These include, but are not limited to:

1. Behavioral Risk Factor Surveillance Surveys (BRFSS)

Where available, BRFSS surveys were used as a primary source of local health data.

2. Public Health Department Interviews

ThedaCare meets regularly with the Waupaca County and Outagamie Public Health directors to identify and address health needs of the two-county region. Public Health is represented on ThedaCare's New London Community Health Action Team. In addition to these formal meetings, we conducted one-on-one interviews with public health officials.

3. Secondary Data Reviews

A ThedaCare Community Health Specialist worked to compile a comprehensive summary of secondary data available to support this assessment. Data collection followed the suggested data collection recommendations set by Wisconsin Association of Local Health Departments and Boards.

4. New London CHAT Discussions

Modeled after the Fox Cities Community Health Action Team (CHAT), the ThedaCare-led New London Community Health Action Team hosted bi-monthly meetings. New London CHAT is a diverse cross section of 16 New London-area community leaders. The team held discussions to identify health needs in the community, determine gaps in needs assessment data, prioritize needs and discuss emerging issues. The New London CHAT team's diverse and passionate group of community leaders continues to identify systemic



health issues, as well as to organize “plunge” experiences to learn about root causes of these issues and facilitate development of collaborative, community-based solutions. The New London CHAT Team has played a critical role in directing the focus of ThedaCare Medical Center-New London community health work.

5. Meetings with Key Informants and Experts Representing Vulnerable Populations

We supplemented our research with individual meetings with local officials, United Way leadership, leaders of ethnic and civic-based organizations, public health directors, law enforcement, school administrators and others who understand the unique needs of vulnerable populations in our community.

6. ThedaCare Medical Center-New London Patient Data

We used hospital emergency department data to help identify common diagnoses that can be addressed upstream, potentially avoiding the need for hospitalization altogether.

COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

Understanding Community Health Needs of Our Service Area

For purposes of this document and to avoid duplication, we will restrict our focus of ThedaCare Medical Center-New London Community Health Needs Assessment and Implementation Strategy to primarily eastern Waupaca County and western Outagamie County.

Key Demographics

Population Growth

The New London service area is located primarily in Waupaca County, but also includes the western part of Outagamie County. The population of Waupaca County is 52,285. The population of Outagamie County is 176,695; however the majority of Outagamie County population is outside of ThedaCare Medical Center-New London service area.

Waupaca County's population is concentrated in the western portion of the city of New London and in the city of Waupaca. Waupaca County is mostly rural with a large farming population in the northeast region. The county's growth has slowed, gaining 1.1 percent in population between 2000 and 2010. Waupaca County ranks as the 27th largest county in the state.

Outagamie County is located in east-central Wisconsin. Outagamie County's population is concentrated in the Fox Cities urban area. Its population growth rate is significant compared to other counties in Wisconsin. The population grew by 2.6 percent since the 2010 census, adding 4,615 residents between 2010 and 2015.

Source: Wisconsin Workforce Profile 2015

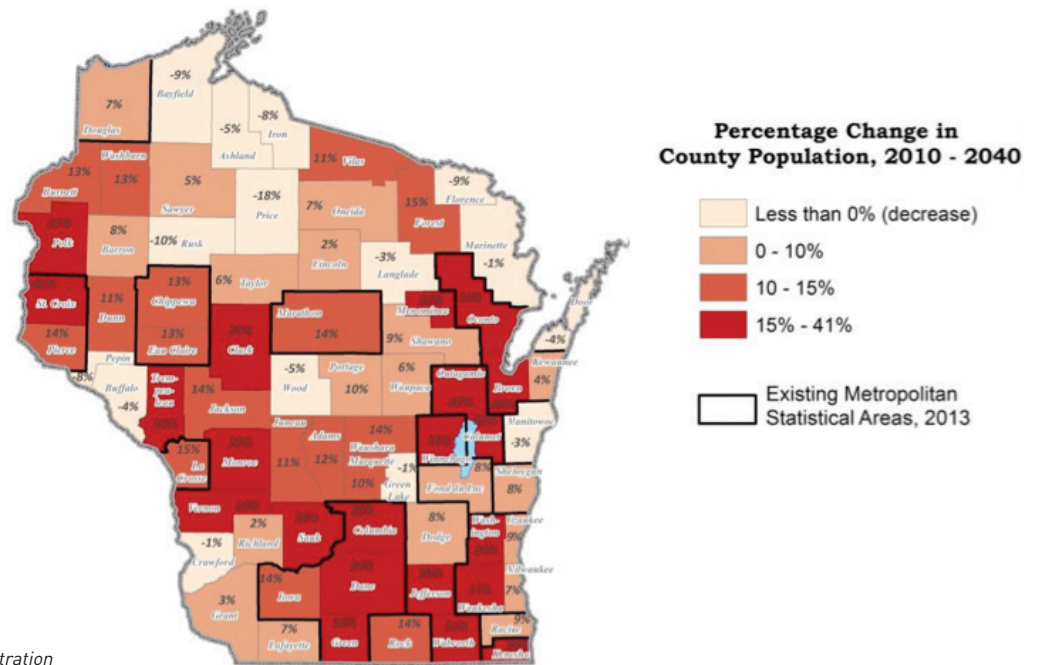


COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

Waupaca and Outagamie County Projections, 2010 - 2040

According to the Wisconsin Department of Administration, Waupaca County's population is predicted to grow slowly and reach peak population growth in 2030.

At the same time, Outagamie County is expected to continue to grow at a significant rate, moving from the 6th to the 5th largest county in the state by 2040.



Source: Wisconsin Department of Administration Demographic Services Center

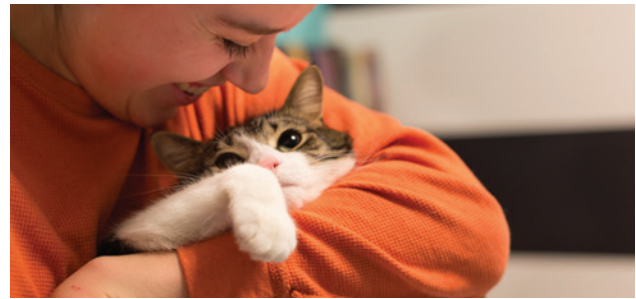
POPULATION PROJECTIONS					
	2010	2020	2030	2040	Net Change
Waupaca	52,410	54,475	57,460	55,670	3,260
Outagamie	176,695	191,635	208,730	215,290	38,595

Department of Administration, State of Wisconsin, 2015

COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

Age

Waupaca County’s population has a fairly even distribution among age groups. In contrast, Outagamie County’s population skews younger, facilitated by growth west of Appleton. Average household size is expected to decline in all Wisconsin counties between 2000 and 2035.



TOTAL POPULATION BY AGE GROUPS								
Ages	0-14	15-24	25-34	35-44	45-54	55-64	65-74	75+
Waupaca	8,733	5,737	5,153	5,771	7,680	7,924	5,631	5,679
Percentage of Total	16.7	11.0	10.0	11.0	14.7	15.1	10.8	10.9
Ages	0-14	15-24	25-34	35-44	45-54	55-64	65-74	75+
Outagamie	35,939	23,124	24,546	23,168	27,363	23,056	13,362	10,555
Percentage of Total	19.8	12.8	13.6	12.8	15.1	12.7	7.4	5.8

Source: Wisconsin Department of Health Services 2014

Education and Occupation

The ThedaCare Medical Center-New London service area includes the school districts of New London, Clintonville, Shiocton, Hortonville, Marion, Manawa and Freedom. High school education levels and poverty rates are strong indicators of future health status. The 2016 Waupaca County high school graduation rate was 91%, higher than the state average of 88%.

In comparison to the state and country, Outagamie and Waupaca counties have a higher percentage of people with at least a high school education and/or undergraduate degree, but fewer people with an advanced degree. This points to the strong manufacturing history of the area, specifically to the paper industry. As the manufacturing sector continues to transition from an industry dominated by standardized, assembly line production to one dominated by technology-driven advanced

manufacturing processes, education requirements will also change. As a consequence, many of the more tenured workers in these industries who may have been able to enter into careers immediately following high school find themselves either needing to upgrade their education or are being replaced by individuals with more advanced postsecondary degrees.

Top industries in Waupaca County include Nursing/ Residential Facilities, Food/Beverage Services, Education, Metal Fabrication and Social Assistance. Top-growing industries in Outagamie County include Education and Health Services, Professional and Business Services, and Construction.

The area has a strong industrial base and stable government.

Source: Wisconsin Worknet 2015

COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

Income and Poverty Levels

The 2015 median household income for Waupaca County was \$51,749. The 2015 median income for Outagamie County was \$57,690. Both are higher than the state average of \$51,474.

Year	WAUPACA COUNTY		OUTAGAMIE COUNTY	
	2000	2015	2000	2015
Median Household Income	\$40,910	\$51,749	\$49,613	\$57,690
Average Household Income	\$48,014	\$62,824	\$56,930	\$72,287
Per Capita Income	\$18,664	\$26,258	\$21,943	\$28,851

Sources: hometownlocator.com, July 2016; Factfinder.census.gov

Twelve percent of the Waupaca County population lives below 100% of the Federal Poverty Level, and 10% are uninsured. Nine percent of the Outagamie County population lives below the Federal Poverty Level, and 9% is uninsured.

Source: *County Health Rankings, 2015*

Ethnicity

Waupaca County is predominately white. This is followed by Hispanic/Latino (3.0%): Asian African American and Native American populations are each at less than 1%. The Hispanic/Latino population is the fastest-growing, having increased one-half of 1 percent since 2010.

Outagamie County is predominately white. This is followed by Hispanic/Latino (4.1%), Asian (3.5%), Native American (1.8%) and African American (1.3%). Both the Asian and Hispanic/Latino populations grew one-half of a percent since 2010.

Year	WAUPACA COUNTY		OUTAGAMIE COUNTY	
	2010	2015	2010	2015
White	97.1%	97.3%	91.3%	91.6%
African American	0.3%	0.4%	1.0%	1.3%
Native American	0.5%	0.7%	1.7%	1.8%
Asian	0.4%	0.5%	3.0%	3.5%
Hispanic/Latino	2.5%	3.0%	3.6%	4.1%

Source: *US Census Bureau, census.gov. 2015*

COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

Most Vulnerable Population Groups

Health disparities exist between those with the highest income levels and the lowest, as well as between the insured and uninsured. Those in the lowest income level without insurance have the greatest health needs and are most challenged in gaining access to high-quality affordable healthcare.

In addition, our Community Health Needs Assessment identified several vulnerable populations, including the following key potential targets for our strategy:

- Grandparents as caretakers of grandchildren
- Single-parents
- Those living with a disability
- Farmers
- The elderly
- Veterans
- The homeless
- Hispanic/Latino population

Our plan addresses health needs of the broader population with a special focus on members of the more vulnerable populations identified above.

Key CHNA Findings by Source

Each of our data collection methods provided unique insights into the needs of the ThedaCare Medical Center-New London service area. Below are the primary needs identified by each source.

1. Behavioral Risk Factor Surveillance Surveys

The results below are from the Outagamie County BRFSS. Waupaca County did not conduct a specific BRFSS.

- Obesity
 - o Consumption of fruits and vegetables
 - o Inactivity/screen time
 - o Sugary drinks
- Asthma
- Mental health/depression
- Alcohol
- Falls
- Social support



2. Public Health

Waupaca County

- Mental Health
 - o Access, stigma, lack of providers
- AODA
 - o Binge drinking, prescription drug abuse, heroin use
- Obesity
 - o Lack of proper nutrition, poor food choices, food insecurity

Source: Terri Brooks, public health officer, Waupaca County, 2015

COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

3. Review of Secondary Health Data

- Waupaca County health factors ranking is 45 (50 in 2012)
- Outagamie County health factors ranking is 8 (13 in 2012)
- Waupaca County health outcomes ranking is 55 (54 in 2012)
- Outagamie County health outcomes ranking is 16 (23 in 2012)
- Waupaca County adult obesity rate declined by 4% between 2012 and 2015
- Outagamie County adult obesity rate increased by 1% between 2012 and 2015
- Excessive drinking rate far surpasses national rate
- Number of motor vehicle crashes exceeds the state average
- Adult smoking rate exceeds state average
- There is a lack of primary care providers, dental and mental health providers
- Fewer residents have completed some college compared to state or national averages
- Unemployment continues to improve
- Poverty rates are stable
- Diabetes is on the rise
- Heroin use and abuse is a great concern
- Wait times to access mental health services ranges from weeks to months (Waupaca County)
- Wait time to mental health services decreased for children (Outagamie County)

Source: County Health Rankings 2015

4. The New London CHAT Team

- AODA
- Mental Health
 - o Depression
 - o Trauma
 - o Single-parent households
 - o Lack of positive supports in the community

- Poverty
 - o Lack of financial education
 - o Employment
 - o Homelessness
 - o Access to services
 - o Food insecurity
- Transportation
- Obesity
 - o Inactivity

5. Meetings with Key Informants and Experts Representing Vulnerable Populations

- AODA including heroin and alcohol
 - o Drug-endangered children
 - o Family not a top priority
- Mental health
 - o Traumatized children
 - o Separation of the family/deterioration of the family
- Lack of insurance and resources
 - o Economy
 - o Homelessness
- Nutrition
 - o Obesity/inactivity
- Chronic health issues
- Youth pregnancy
- Increase in Autism
- Veteran's justice
- Dental care

Sources: Laurie Schmidt, director of Pupil Services, New London School District; Chief Jeffrey Schlueter, New London Police Department; Kelly Wisniewski, clinic administrator, Rawhide Youth & Family Counseling Services; Kim Ebert, director, New London Senior Center/Food Pantry; Brian VanDenLangenberg, ER director, ThedaCare Medical Center-New London; Detective Sgt. Brian Hoelzel, Waupaca Police Department; Aaron Jenson, director, Waupaca County Parks and Recreation; Maureen Markon, director, Pupil Services, Waupaca School District; Robin Madson, executive director, Foundations for Living; Terri Schultz, president, Waupaca Area Chamber of Commerce; Chris Machamer, Economic and Employment Support coordinator, Waupaca County Department of Health and Human Services (DHHS); John Erspamer, principal, Waupaca Learning Center; Mary Lea St. Thomas, victim/witness coordinator, Waupaca County; Jesse Cuff, service officer, Waupaca County Veteran's Service Office; Amber Nikolai, public relations director, Wisconsin Veterans Home at King; Michael Crum, veteran service coordinator, Center for Suicide Awareness; Kasey Kaepernick, Trauma Informed Care coordinator and Healthy Beginnings manager, Waupaca County DHHS

COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

6. Health System Data

Our ThedaCare 2015 Employee Health Risk Assessment of employees and partners showed obesity and smoking continue to be among the most significant health concerns.

We used hospital emergency department data and emergency staff discussions to help identify common diagnoses that can be addressed upstream, potentially avoiding the need for hospitalization.

Top 10 diagnoses for emergency room visits to ThedaCare Medical Center-New London:

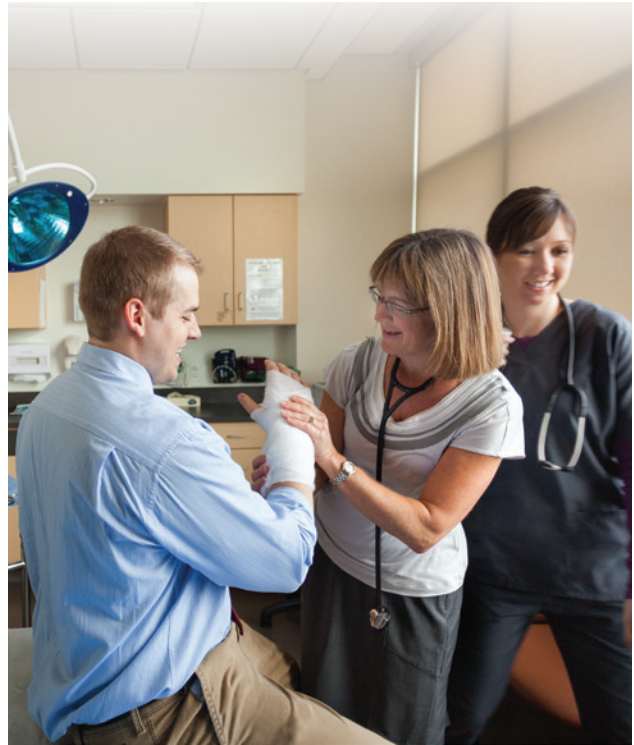
- 1) Open wound on finger
- 2) Head injury
- 3) Ankle sprain
- 4) Acute upper respiratory infection
- 5) Contusion of face, scalp and neck, except eyes
- 6) Dizziness and giddiness
- 7) Chest pain
- 8) Open wound of hand, except fingers
- 9) Syncope and collapse
- 10) Abdominal pain

Source: 2015 ThedaCare Medical Center Emergency Room Qlikview data

Top emergency department issues cited by emergency department staff:

- Mental health issues of any kind
- Elderly – falls and failure to thrive
- AODA issues

Source: Brian VanDenLangenberg, ER director, ThedaCare Medical Center-New London



COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

Information Gaps

While we believe the volume and variety of data gathered to support the Community Health Needs Assessment was comprehensive, a few gaps in available data did exist.

- Not all school districts in our service area participate in the Youth Risk Behavior Survey. This limits information related to school-aged children.



Most Significant Identified Health Needs

	General	Poverty	Farmers	Elderly	Veterans	Youth	Number of Groups Affected
Mental Health	X	X	X	X	X	X	6
Mental Health Access	X	X	X	X	X	X	6
AODA – Excess Drinking/ Opiate/Heroin	X			X		X	3
Chronic Illness	X	X	X	X	X		5
Physical Activity/Nutrition	X	X	X		X	X	5
Early Childhood	X	X				X	3
Transportation		X		X			2
Teen Pregnancy							0
Dental Care		X		X			2
Smoking		X		X			2
Access Affordable Insurance		X	X				2
Homelessness					X	X	2
Poverty/Low Income		X	X	X			3
Violence	X						1
Number of Health Needs by Each Group	7	10	6	8	5	6	

COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019



Methodology for Setting Our Priorities

We identified a wide variety of significant health needs in our Community Health Needs Assessment process. A myriad of healthcare, nonprofit, private sector and governmental organizations have efforts underway to improve most of the needs identified.

In selecting our priorities among the top needs identified above, individuals engaged in our Community Health Needs Assessment process took into consideration the unique strengths of ThedaCare Medical Center-New London as well as the following criteria:

- Number of people affected
- Impact on multiple health issues
- Severity of the problem
- Community passion
- Potential for do-ability and impact
- Evidence-Based Practice
- Addresses disproportionate unmet health needs
- Alignment with Healthiest Wisconsin 2020

Our 2016-2019 Priorities

- Mental Health/AODA
 - Access to mental health and AODA services
 - Suicide prevention
 - Heroin/prescription drug awareness
- Obesity
 - Nutrition
 - Physical activity
- Early Childhood/Youth
- Integration of clinic/patient and Community Health
 - Community Service navigator
 - End-of-life support
- Crosscutting priorities of:
 - Poverty
 - Health disparity

COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019

Existing Healthcare Facilities and Resources

ThedaCare annually contributes a percentage of margin to either/both the CHAT Fund within the Community Foundation for the Fox Valley Region Inc. and the ThedaCare Community Fund within the ThedaCare Family of Foundations to support the organization’s community health improvement initiatives.

Many healthcare facilities and services are available in Waupaca and Outagamie counties to respond to the health needs of the community and help us with our work. Most of these already partner with ThedaCare Medical Center-New London to provide support in some fashion. They include:

- ThedaCare Physicians in New London, Clintonville and Manawa
- Children’s Hospital of Wisconsin
- Catalpa Health
- Options Counseling
- ThedaCare Behavioral Health
- ThedaCare at Home
- ThedaCare at Work
- Mosaic Family Health Residency Center
- Waupaca County Public Health Department
- Affinity Clinic-New London
- Affinity Clinic-Clintonville
- Aurora Clinic-Fremont
- Partnership Community Health Center

ThedaCare Medical Center-New London Resources

In addition to financial resources, ThedaCare Medical Center-New London staff and providers will be engaged on work teams to implement the proposed Community Health Implementation Strategy.

Existing Healthcare Facilities and Resources Available to Support ThedaCare Medical Center-New London Implementation Strategy:

- Sexual Assault Crisis Center
- Harbor House Domestic Abuse Center
- Christine Ann Domestic Abuse Center

- Reach Counseling Services
- New London Food Pantry
- Weymont, Clintonville, Manawa and Marion food pantries
- Rawhide Boys Ranch
- Alcoholics Anonymous
- National Alliance on Mental Illness (NAMI) Fox Valley
- Farmers’ markets
- Law enforcement – City of New London and Waupaca County
- Head Start
- Healthy Beginnings
- Aging and Disability Resource Center
- University of Wisconsin Extension Office – Waupaca County
- Waupaca County Nutrition and Activity Coalition
- New London Community Gardens
- Farm to School Program
- Safe Routes to School Program
- CESAs 5 and 6
- Rural Health Initiative
- City and county government
- Waupaca County Department of Health and Human Services
- Outagamie County Department of Health and Human Services
- Fox Valley Technical College
- Faith communities
- Prenatal Care Coordination
- Women, Infants and Children Program (WIC)
- Waupaca Suicide Coalition
- Goodwill Industries
- Birth to 3 Program
- School districts of New London, Clintonville, Hortonville, Manawa, Marion, Shiocton, Freedom
- Waupaca County Crime Stoppers
- New London Area Chamber of Commerce
- New London Parks and Recreation Department
- New London Homeless Shelter

COMMUNITY HEALTH NEEDS ASSESSMENT 2017-2019



Needs Identified But Not Addressed

Significant needs identified through our assessment that will not be addressed in the current three-year plan are listed below.

Community Needs and Reasons Needs Not Addressed

COMMUNITY NEEDS	WHY NOT ADDRESSED
Youth pregnancy	Other agencies addressing
Autism increase	Beyond scope of resources
Veterans justice	Other agencies addressing
Dental care	Other agencies addressing
Homelessness	Beyond scope of resources
Falls/failure to thrive	Other agencies addressing

COMMUNITY HEALTH IMPLEMENTATION STRATEGY



Published Nov. 2016

COMMUNITY HEALTH IMPLEMENTATION STRATEGY 2017-2019



ThedaCare Medical Center-New London Community Health Implementation Strategy

The following is the ThedaCare Medical Center-New London Community Health Implementation Strategy to address the needs of the communities it serves over the next three years. This plan was developed with significant contributions from ThedaCare staff and providers as well as community members and leaders.

As you have likely gathered in reviewing our Community Health Needs Assessment and our CHAT model for community health improvement, collaboration with the community is the cornerstone

of our process. While there are some elements of this strategy that are solely implemented by ThedaCare Medical Center-New London, the vast majority will be executed in partnership with businesses, non-profits, faith organizations, educational institutions, health organizations, other community partners and individuals to form sustainable solutions that get at the heart of local health issues.

All initiatives will take into consideration the needs of diverse populations and those economically challenged.

Questions may be directed to Paula Morgen, Community Health Manager, at 920.830.5848 or paula.morgen@thedacare.org.

As required by the Affordable Care Act, progress on the 2014-2016 plan is included in Appendix E.

COMMUNITY HEALTH IMPLEMENTATION STRATEGY 2017-2019

Priority: Mental Health/AODA

GOAL: PEOPLE LIVING WITH MENTAL HEALTH OR SUBSTANCE ABUSE NEEDS HAVE ACCESS TO CARE THEY NEED WHEN THEY NEED IT				Wt.
Objective: By 2020, average customer wait times for initial Mental Health or AODA evaluation will be less than 1 week				55%
Performance Metrics:				
<ul style="list-style-type: none"> Number of days to initial Mental Health or AODA evaluation 				
Tactics	Hospital Resources	Partners	Anticipated Impact	
Establish alternative delivery models (i.e. e-Visits through Behavioral Healthcare Partners).	Funding Administration ThedaCare Behavioral Health CHI	TBD	Increased capacity for more people to access mental health services in a more timely fashion.	20%
Enhance capacity of primary care providers to address routine mental health needs.	CHI ThedaCare Behavioral Health Primary Care Education	ThedaCare Family of Foundations Curriculum Vendor	Increased capacity to treat routine mental health needs in primary care setting.	5%
Support spread of Primary Care Integration Pilot beyond Internal Medicine.	ThedaCare Physicians CHI ThedaCare Behavioral Health		Increased capacity to treat routine mental health needs in primary care setting.	5%
Support NEW Mental Health Connection: <ul style="list-style-type: none"> Member funding ThedaCare presence on initiatives <ul style="list-style-type: none"> Mapping of MH/AODA providers/clinicians to assess gaps Zero Suicide No Wrong Door HWPP Grant – Depression & Youth 	Funding ThedaCare Behavioral Health CHI	NEW Mental Health Connection United Way County Health and Human Services Non-Profit Agencies School Districts Health Systems Public Health	More efficient use of local resources to address mental health needs.	5%
Pilot ThedaCare Health Care Professional training in ACES and Trauma Informed Care (Waupaca/New London/Complex Care). Expand as appropriate through system.	Funding PCP ThedaCare Behavioral Health CHI Education	Center for Health Care Strategies	Increased knowledge and capacity of ThedaCare Health Care Professional in treating MH/AODA concerns.	5%

COMMUNITY HEALTH IMPLEMENTATION STRATEGY 2017-2019

Priority: Mental Health/AODA

Objective: By 2020, average customer wait times for initial Mental Health or AODA evaluation will be less than 1 week (continued)				55%
Tactics	Hospital Resources	Partners	Anticipated Impact	
Explore establishment of Mental Health Clinician Residency Program.	Administration TCBH	Medical College of Wisconsin Mosaic Family Health	Increased number of mental health clinicians.	10%
Support community-based access initiatives. (Examples include Drug Court startup, recovery coaches, drug take back programs and naran education efforts.)	CHI Funding	Law Enforcement Department of Health and Human Services Probation and Parole Judiciary System Recovery Coaches	Reduced number of deaths due to heroin/drug use.	5%
Expand use of Vivitrol across primary care.	Primary Care Funding CHI	Probation and Parole	Reduced recidivism among heroin addicts.	5%
Implement US Agriculture Grant to provide telemedicine services in rural areas. (Pilot in Shawano then spread to other rural markets.)	Administration	DHS ADRC Partnership Community Health Center NWTC Menominee Tribe	More people are insured, health literate and have access to specialized services such as ED, Behavioral Health and Cardiac.	5%

Objective: By 2020, 100% of ThedaCare primary care providers consistently screen their patients for mental health/AODA/suicide				25%
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Performance Metrics:

- Number of ThedaCare primary care providers consistently conducting mental health/AODA/suicide screening for all adolescent and adult patients at well visits

Tactics	Hospital Resources	Partners	Anticipated Impact	
Establish mental health screening protocol across primary care for depression (PHQ2)/suicide and AODA.	EMR PCP ThedaCare Behavioral Health Funding CHI		Early detection and treatment of mental health issues. Prevent suicides.	20%
Support CAMS (Collaborative Assessment and Management of Suicidality) training.	CHI ThedaCare Behavioral Health	Zero Suicide	Prevention of suicide through early detection and intervention.	5%

COMMUNITY HEALTH IMPLEMENTATION STRATEGY 2017-2019

Priority: Mental Health/AODA

Objective: By 2020, 50% of ThedaCare service area is designated as Trauma-Sensitive 10%

Performance Metrics:

- # of communities participating in Trauma Informed Care training

Tactics	Hospital Resources	Partners	Anticipated Impact	
Conduct pilot Trauma Sensitive Community education effort in New London including Adverse Childhood Experiences and Trauma Informed Care. Spread throughout service area.	CHI	Community Agencies Schools Catalpa POINT	Increased understanding of what creates MH/AODA issues; less stigma.	10%

Objective: By 2020, 100% of ThedaCare workforce is trained in mental health literacy 10%

Performance Metrics:

- Number of ThedaCare employees who participate in mental health literacy online education

Tactics	Hospital Resources	Partners	Anticipated Impact	
Provide online mandatory employee training in the basics of mental health literacy.	IT ThedaCare Behavioral Health HR/OD CHI Education		Mental health patients feel less stigmatized and more willing to seek treatment.	10%

Existing ongoing Mental Health/AODA initiatives

- Recruit mental health physicians and clinicians
- Support Catalpa Health
- Support Partnership Community Health Center
- Subsidize Mental Health and AODA services
- Support Chemical Free Post Prom/Graduation parties
- Support P.A.R.T.Y. at the P.A.C.

COMMUNITY HEALTH IMPLEMENTATION STRATEGY 2017-2019

Priority: Obesity

GOAL: PEOPLE WITHIN THE COMMUNITIES WE SERVE HAVE EASY ACCESS TO HEALTHY FOOD AND ACTIVITY OPTIONS	Wt.
Objective: By 2020, 100% of ThedaCare facilities comply with a healthy food and beverage policy	15%

Performance Metrics:

- Number of ThedaCare facilities following system-wide healthy food/beverage policy

Tactics	Hospital Resources	Partners	Anticipated Impact	
Establish and implement ThedaCare system-wide healthy food/beverage policy. (Roll out to ThedaCare At Work clients over time.)	Dining Services Facilities CHI ThedaCare At Work	Food Vendors and Suppliers	People make healthy choices more frequently because it's the easy choice.	15%

Objective: By 2020, each ThedaCare market will have an active coalition addressing nutrition and physical activity	40%
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Performance Metrics:

- Number of coalitions within ThedaCare markets

Tactics	Hospital Resources	Partners	Anticipated Impact	
Provide leadership and funding to Weight of the Fox Valley: <ul style="list-style-type: none"> • Employees on 6 Action Teams, Core Team and Leadership Team • Serve as data repository for BMI data from 3 area health systems • Provide annual funding 	CHI ThedaCare Staff ThedaCare Meeting Space Funding IT DR	Area Health Systems United Ways Business Government Non-Profits Schools Daycares	Increase in people living at a healthy weight.	25%
Sponsor one major community event per market that emphasizes healthy eating or activity.	CHI Funding	Local Non-Profits Local Governments	Increased physical activity and consumption of healthy foods.	5%
Host "Good to Go" ThedaCare employee volunteer events in area schools.	CHI ThedaCare Staff Dining Services Facilities	Schools	Increase in knowledge and behaviors related to healthy eating and activity choices.	5%
Support menu labeling initiatives in restaurants.	CHI Health Coaches Funding	Restaurants	People will choose healthy options more often.	5%

COMMUNITY HEALTH IMPLEMENTATION STRATEGY 2017-2019

Priority: Obesity

Objective: By 2020, 100% of ThedaCare primary care providers are consistently advising on healthy eating and physical activity during well visits **35%**

Performance Metrics:

- Number of primary care providers advising patients on healthy eating and/or physical activity during well visits

Tactics	Hospital Resources	Partners	Anticipated Impact	
Provide educational materials about negative effects of sweetened beverages at well visits.	ThedaCare Physicians CHI		Reduction in consumption of sweetened beverages.	20%
Pilot prescriptions for healthy eating and/or physical activity.	ThedaCare Physicians CHI		Increased consumption of fruits and vegetables/ physical activity.	15%

Existing ongoing Obesity initiatives

- ThedaCare cafeterias purchase produce from Riverview Gardens urban farm/job training program
- Offer physical activity and nutrition classes and support groups
- Sponsor local events that encourage physical activity and healthy eating
- Support YMCA Strong Kids Program
- Support local farmer’s markets
- Conduct Health Risk Assessment of ThedaCare employees and partners



COMMUNITY HEALTH IMPLEMENTATION STRATEGY 2017-2019

Priority: Early Childhood/Youth

GOAL: CHILDREN IN OUR SERVICE AREA RECEIVE THE SUPPORT THEY NEED FOR A HEALTHY START TO LIFE				Wt.
Objective: By 2020, 3 of 7 ThedaCare hospitals will provide home visitation services to vulnerable first time parents				25%
Performance Metrics:				
<ul style="list-style-type: none"> Number of hospitals providing home visitation services 				
Tactics	Hospital Resources	Partners	Anticipated Impact	
Pilot home visitation model for vulnerable families. If successful, expand to other markets.	Funding CHI Birth Centers Pediatrics/Family Providers	Public Health DHS Agencies Fundors	Reduction in abuse and neglect. Improvement in developmental, mental health and behavioral readiness.	20%
Expand marketing for parenting classes/support.	Funding Marketing CHI	Parenting Programs/ Agencies Schools Daycares Government Programs	Increase in parenting knowledge about appropriate parenting.	5%
Objective: By 2020, New London will identify and implement a significant system, policy or environmental change that will improve Early Childhood health				40%
Performance Metrics:				
<ul style="list-style-type: none"> Number of community based Policy/System/Environmental initiative(s) identified and implemented 				
Tactics	Hospital Resources	Partners	Anticipated Impact	
Identify Policy/System/Environmental change as result of ACES and Trauma Sensitive Community pilot.	Funding Marketing CHI	Schools Law Enforcement Public Health/DHS Daycares Parent Organizations	Reduction in traumatic childhood experiences. Youth are not re-traumatized through interventions.	40%

COMMUNITY HEALTH IMPLEMENTATION STRATEGY 2017-2019

Priority: Early Childhood/Youth

Objective: By 2020, 100% of Family Practice and Pediatric providers will consistently provide standardized early childhood health information at ThedaCare Well Child visits **35%**

Performance Metrics:

- Number of Family Practice and Pediatric providers consistently providing standardized early childhood health information at well visits

Tactics	Hospital Resources	Partners	Anticipated Impact	
Add Dot.Phrase with critical information/resources to well child summary.	IT/EMR Pediatrics CHI		More consistent sharing of information with parents about appropriate parenting.	5%
Support "Reach Out and Read" book program through clinics.	CHI Pediatrics/FP	Reach Out and Read Initiative Foundations	Improved school readiness including intellectual and social/emotional.	15%
Provide referral tool for nurses (OB, FP and Peds) that includes critical parenting resources.	Pediatrics CHI		Parents better connected to community resources.	5%
Explore use of Community Navigator model in FP/Peds clinic to link families to community resources.	Funding CHI Pediatrics/Family Providers	National Models Local Universities Funders	Parents better connected to community resources.	10%

Existing Early Childhood initiatives

- Support programs and events that strengthen children's health
- Support mentoring programs
- Support reading initiatives



COMMUNITY HEALTH IMPLEMENTATION STRATEGY 2017-2019

Priority: Integration of CHI with Operations

GOAL: PATIENT NEEDS ARE ADDRESSED THROUGH SEAMLESS COORDINATION OF CLINICAL AND COMMUNITY HEALTH RESOURCES				Wt.
Objective: By 2020, 25% of all screened ThedaCare Physicians customers experiencing social determinant barriers to health are connected to community resources				75%
Performance Metrics:				
<ul style="list-style-type: none"> Percent of ThedaCare Physicians patients with social determinant needs successfully connected to community resources 				
Tactics	Hospital Resources	Partners	Anticipated Impact	
Pilot Community Navigator model within system. Extend to additional locations as appropriate.	Funding Primary Care/ED Care Transitions CHI	National Model Marshfield Clinic – Eau Claire Local Universities	Barriers to following through on health issues are reduced/eliminated.	75%
Objective: By 2020, 70% of ThedaCare Physicians patients age 65+ have an Advance Directive in their medical record				25%
Performance Metrics:				
<ul style="list-style-type: none"> Percent of active ThedaCare Physicians patients age 65+ with Advance Directive in EMR 				
Tactics	Hospital Resources	Partners	Anticipated Impact	
Implement FV Advance Care Planning Partnership. Extend to rural hospitals as appropriate.	Transitions of Care CHI EMR	CHAT Fund Ascension Mosaic Family Health	Reduction in medical expenses at end of life. People die with their end of life wishes honored.	25%
Existing ongoing Integration initiatives				
<ul style="list-style-type: none"> Rural Health Initiative NEW Mental Health Connection CHI Participation in Shared Governance Council(s) 				

COMMUNITY HEALTH IMPLEMENTATION STRATEGY 2017-2019

Priority: Poverty

GOAL: PEOPLE IN OUR SERVICE AREA ARE SELF-SUFFICIENT AND ABLE TO PARTICIPATE FULLY IN THE LIFE OF THE COMMUNITY	Wt.
Objective: TBD by POINT	100%

Performance Metrics:

- Number of people moved from below to above 185% FPL in Green Bay through Oshkosh region

Tactics	Hospital Resources	Partners	Anticipated Impact	
Provide financial and leadership support to POINT Initiative and key drivers as appropriate: <ul style="list-style-type: none"> • Education • Job and economic stability • Family support and connectedness • Physical health • Psychological health and addiction support • Adequate human services 	Funding Administration CHI	US Venture JJ Keller Chambers United Ways Community Foundations Bellin Health Oshkosh Corp	More efficient and coordinated agency efforts. People moved out of poverty to self-sustainability.	90%
Participate on Basic Needs Giving Partnership.	CHI	US Venture JJ Keller Community Foundation	Funding is directed to initiatives that have greatest potential to impact poverty.	10%

Existing ongoing Poverty initiatives

- Provide charity care to those unable to pay
- Subsidize Medicaid shortfalls
- Support local Chamber economic develop efforts
- Support programs to help people become insured



COMMUNITY HEALTH APPENDIX



Published Nov. 2016

COMMUNITY HEALTH APPENDIX A 2017-2019

Board of Trustees

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Maria Van Laanen	Fox Cities Performing Arts Center
Cyril Walsh, MD	ThedaCare Regional Medical Center-Appleton

COMMUNITY HEALTH APPENDIX B 2017-2019

ThedaCare Medical Center-New London Board of Directors

NAME	ORGANIZATION	BOARD POSITION
Jim Williams	Retired	Chairman
Paul Ziemer	Tax Specialist	Vice Chairman
John Love	Retired	Treasurer
Scott Bleck	Weyauwega-Fremont School District	Secretary
Doug Noel	Demming-Noel Insurance Agency	Past Chairperson
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Dick McClone	Retired	Board member
Jean Skewes	Presto Products Company	Board member
Lisa Ziemer	The LiLy Pad	Board member

COMMUNITY HEALTH APPENDIX C 2017-2019

System Leadership Team

NAME	POSITION
Keith Livingston	Sr. Vice President, Systems of Care and CIO
James Matheson	Sr. Vice President, Strategy and Marketing
Jenny Redman-Schell	Sr. Vice President, Physician Services, Cancer and Transitions of Care
Brian Burmeister	Sr. Vice President, ThedaCare Medical Centers
Greg Long	CMO and Sr. Vice President, Systems of Care - CV, Ortho, Spine
Tim Olson	Chief Financial Officer
Laura Reed	COO and Chief Nursing Executive
Dean Gruner	President and CEO
Bill Mann	Sr. Vice President, Employer and Payer Strategies
Maureen Pistone	Sr. Vice President, Talent Development and Human Resources

COMMUNITY HEALTH APPENDIX D 2017-2019

New London Community Health Action Team (CHAT)

NAME	REPRESENTS
Laurie Schmidt	New London School District
Bill Schmidt	ThedaCare Medical Center-New London
Tina Bettin	ThedaCare Physicians
Dave Klinzing	Healthy Movements
John Solberg	Rawhide Boys Ranch
Rita Thiel	Retired
Pastor Greg Watling	First Congregational UCC
Chief Kevin Schultz	Marion Police Department
Heidi Dusek	Community Foundation for the Fox Valley Region, Inc.
Karen Duch	Wolf River Community Bank
Ann Hunt	New London Public Library
Ginger Arndt	New London Parks and Recreation
Peggy Taylor	Fox Valley Technical College
Kasey Kaepernick	Waupaca County Department of Health and Human Services
Kaye Thompson	ThedaCare Community Health Improvement

COMMUNITY HEALTH APPENDIX E 2017-2019

2014-2016 Implementation Strategy Progress Report Priority: Obesity

GOAL: INCREASE PERCENTAGE OF PEOPLE LIVING AT A HEALTHY WEIGHT

Long Term:

- Percent of obese adults (County Health Rankings)

Baseline Data 2014		2015 Update		2016 Update	
Outagamie County	31%	Outagamie County	30%	Outagamie County	32%
Waupaca County	30%	Waupaca County	28%	Waupaca County	26%

Short Term:

- Number of ThedaCare engaged initiatives in place

Baseline Data 2014	2016 Update
3 of 12 tactics underway	12 of 12 tactics underway or completed

Objective #1: Improve access to healthy foods

Activity	Target Date	Progress
Increase the number of schools with community/school gardens.	December 2016	<p>Following a New London area plunge on Obesity in June 2013 the New London CHAT Team worked with New London Parks and Recreation and Rawhide Boys Ranch to create two community gardens in 2014, in addition to the New London Schools youth garden. Kaye Thompson is a member of the New London Gardening Partnership.</p> <p>2015/2016 – the number of gardens continues to expand throughout the New London area. There are two community gardens, Ruby’s food pantry has its own garden, schools have gardens and during the summer Parks and Recreation manages a garden as a teaching instrument for children.</p>
Increase the availability of fresh produce and whole grain foods through local food pantries.	December 2015	<p>Following a New London area plunge on obesity in June 2013, the New London CHAT Team provided refrigerators to six Waupaca County food pantries including New London Food Pantry, so the pantries can supply fresh produce for their patrons. Fresh produce is donated from the community gardens, local farmer’s markets and local grocery and convenience stores. In the summer of 2014, the New London Food Pantry received over 500 pounds of fresh produce from the newly built community gardens.</p> <p>2015 – fresh produce from community gardens, local farmer’s markets, local grocery and convenience stores, continues to be provided to the New London Food Pantry. Food pantry manager estimates amount collected in 2015 and 2016 was well above that collected in 2014 as gardens expand.</p>

COMMUNITY HEALTH APPENDIX E 2017-2019

2014-2016 Implementation Strategy Progress Report Priority: Obesity

Objective #1: Improve access to healthy foods (continued)

Activity	Target Date	Progress
Provide funding and expertise for the startup and sustainability of local farmer's markets.	Ongoing	ThedaCare provides a standard annual contribution to all farmer's markets who request support including the New London Farmer's Market. CHAT furnished Waupaca County food pantries with needed storage to increase capacity for acceptance of fresh produce from the local farmer's markets.
Support weekend "Backpack of Food" program for disadvantaged children.	Ongoing	ThedaCare donated \$750 to the New London Project Backpack in 2013 and 2014. 300 low-income families receive a backpack of food sufficient for weekend coverage.
Expand presence at local events where we have an opportunity to educate about healthy foods.	Ongoing	ThedaCare CHI contributed to Mission of Hope held in August 2015. This event was attended by 796 guests and 10,000 pounds of groceries was provided. Mission of Hope was not held in 2016 in New London.
Support school-based healthy lunch/snacks initiatives such as Movin' and Munchin' in New London schools.	December 2016	(See Project Backpack information above.)
Explore implementation of primary care provider "nutrition and exercise" prescription.	December 2016	Not started.

Objective #2: Increase participation in exercise and physical activities

Activity	Target Date	Progress
Offer physical activity/ healthy lifestyle classes and support groups.	Ongoing	ThedaCare offers the CHIP program in New London. New London is in close proximity to the Fox Cities and New London has access to all classes offered in the Fox Cities such as child care, CPR, Family Dynamics, breastfeeding, childbirth preparation, sleep apnea, cardiology and CHIP.
Sponsor local events that encourage physical activity.	Ongoing	ThedaCare sponsors numerous local girls/boys sporting teams. ThedaCare was a major sponsor of the Princess Warrior Mud Run to benefit Harbor House Domestic Abuse Services in 2013, 2014, 2015 and 2016. Other sponsored events that encourage activity include Family Fall Walk/Run, 5K Glow-Walk, Bear Creek Kraut Family Walk/Run, Sturgeon Shuffle, multiple youth sports teams. ThedaCare also sponsored new lanes at the New London Aquatics and Fitness Center.

COMMUNITY HEALTH APPENDIX E 2017-2019

2014-2016 Implementation Strategy Progress Report Priority: Obesity

Objective #2: Increase participation in exercise and physical activities (continued)

Activity	Target Date	Progress
Have a ThedaCare presence on groups that advocate for environmental improvements that promote physical activity.	December 2016	Not started.
Provide financial and in-kind support to develop volunteer-based before and after school exercise program.	December 2015	<p>Following a plunge on obesity in the Fall of 2013, the New London CHAT Team provided \$2,000 to Longfellow Elementary School in Clintonville to help sustain their successful running club of more than 150 children and \$3,000 to New London School District to develop an elementary/middle school running club. Also provided funding to the Clintonville Booster Club.</p> <p>In 2015, \$4,000 provided to New London Elementary School to implement a lunch hour walking program. That continues to grow with two major walking events bringing in dignitaries from the area and families for two days in October 2015.</p>
Provide financial and in-kind support to develop "Corporate Challenge" program that encourages ongoing healthy activity among local business.	December 2015	<p>Following a plunge on obesity in Fall 2013, the New London CHAT Team launched the New London Workplace Wellness Initiative. John Solberg, of Rawhide Boy's Ranch and Kaye Thompson of ThedaCare co-lead. The "kick-off" breakfast was held July 2014 with 30+ people attending. The wellness committee hosted monthly education sessions featuring local experts in 2014. Polly Elrod of ThedaCare At Work was a committee member. In 2016, this no longer exists.</p>
Partner with local school districts and Park and Recreation Department to support physical activity efforts.	December 2016	<p>Sponsored numerous youth sporting teams. Contributed to the purchase of safe playground equipment. Planned and implemented "Good to Go" Week in April 2015 and 2016 in six elementary schools throughout ThedaCare service area including the New London Intermediate School to educate and inspire kids to eat healthy foods and be active. More than 280 ThedaCare staff volunteered. Activities included after school run, healthy snacks, playground games, family fun night, energy breaks during class time, educational sessions related to sugar in drinks and fat in favorite foods, walking school buses, etc. In 2015 and 2016, more than 2,700 kids participated across all six schools. At three of the five schools surveyed, kids reported 7-10% increase in knowing what snacks are unhealthy.</p>
Explore implementation of primary care provider activity prescriptions.	December 2016	Not started.

COMMUNITY HEALTH APPENDIX E 2017-2019

2014-2016 Implementation Strategy Progress Report Priority: Obesity

Objective #3: Engage ThedaCare employees to help address obesity initiatives

Activity	Target Date	Progress
Establish ThedaCare signature event(s) that engage and reward employees for volunteering on efforts that address obesity through Helping Hearts Program.	Ongoing	Planned and implemented "Good to Go" Week in April 2015 and 2016 in six elementary schools throughout ThedaCare service area including the Waupaca Learning Center to educate and inspire kids to eat healthy foods and be active. More than 280 ThedaCare staff volunteered. Activities included after school run, healthy snacks, playground games, family fun night, energy breaks during class time, educational sessions related to sugar in drinks and fat in favorite foods, walking school buses, etc. In 2015 and 2016, more than 2,700 kids participated across all six schools. At three of the five schools surveyed, kids reported 7-10% increase in knowing what snacks are unhealthy.
Provide Health Assessments to all ThedaCare employees and their partners.	Annual	Employees and partners undergo Health Risk Assessments (HAT) annually. Obesity level has declined 2% over past four years despite a trend in opposite direction nationally. 2013 employee HAT – 80.66 2014 employee HAT – 80.97 2015 employee HAT – 81.65



COMMUNITY HEALTH APPENDIX E 2017-2019

2014-2016 Implementation Strategy Progress Report Priority: Obesity

Objective #4: Establish “Weight of the Fox Valley” Initiative in the Tri-County area

Activity	Target Date	Progress
Provide ThedaCare leadership participation on both Weight of the Fox Valley Core and leadership teams.	September 2013	Dean Gruner and Paula Morgen are active members of leadership team Fall 2013-present. Paula Morgen is active member of Core Team Fall 2012-present.
Support establishment of metrics through hospital data systems.	January 2014	After an arrangement with UW Madison for data management fell through in 2015, ThedaCare agreed to be the data repository for area health system data. Aurora, Affinity and ThedaCare completed a MOU in summer of 2016. ThedaCare will be the repository and produce select data reports. An Ethics committee has also been created to determine appropriate and ethical distribution and use of BMI data.
Engage ThedaCare employees on work teams	2014-2016	Seven ThedaCare staff were engaged in the WOTFV Kick Off and six staff currently participate on the Active Communities, Worksite, and Food Systems Action Teams. IT, Privacy, CHI and Decision Resources staff are engaged in data support/metrics efforts.
Provide financial and in-kind support.	Ongoing	ThedaCare made a \$25,000 donation from CHAT in 2013 to start up WOTFV. ThedaCare has since made a 3-year financial commitment of \$10,000 annually. ThedaCare has also committed more than \$1,000 in printing support each year and we are providing metrics support.



COMMUNITY HEALTH APPENDIX E 2017-2019

2014-2016 Implementation Strategy Progress Report Priority: Mental Health

GOAL: IMPROVE ACCESS TO MENTAL HEALTH SERVICES

Long Term:

- Poor mental health days (County Health Rankings)

Baseline Data 2014	2015 Update	2016 Update
Outagamie County 2.3%	Outagamie County 2.3%	Outagamie County 3.1%
Waupaca County 2.1%	Waupaca County 2.5%	Waupaca County 3.4%

Short Term:

- Average wait time to see a provider (ThedaCare reported)

Baseline Data 2014	2015 Update	2016 Update
Psychiatry 47.5 days	Psychiatry 68 days	Psychiatry 161 days
Adult Mental Health 23 days	Adult Mental Health 21 days	Adult Mental Health 17 days average

Objective #1: Mobilize community to action on access to Mental Health Care clinical capacity for patients with mental health needs

Activity	Target Date	Progress
Organize local "Plunge" on access to mental health care for community leaders.	December 2016	A "Plunge into Mental Health" was held on October 8, 2014. The Waupaca CHAT Team joined forces with New London CHAT Team. Debriefings have been completed. Top priorities will go forward to the New London CHAT Team at the December meeting. The Plunge was attended by 62 community leaders throughout the New London and Waupaca area. The group visited Rawhide Boy's Ranch in New London and the Waupaca County Courthouse and King Veteran's Center in Waupaca. Information was provided by Dr. David Mays, a NAMI member, panel of providers, clergy, schools, veterans, non-profits and staff of DHHS. As a result of the Plunge into Mental Health - CHAT, New London Parks and Recreation, Waupaca Schools and Big Brothers/Big sisters of the Fox Valley began a community mentoring initiative which continues to recruit adult mentors. In 2016, a Plunge into the Adverse Effects of Trauma was hosted by the New London CHAT. Jonathan Cloud was hired to produce a trauma sensitive curriculum that can be used to train the general public. Plans are to roll this out in February 2017.

COMMUNITY HEALTH APPENDIX E 2017-2019

2014-2016 Implementation Strategy Progress Report Priority: Mental Health

Objective #2: Create clinical capacity for patients with mental health needs

Activity	Target Date	Progress
Provide financial and in-kind support for Primary Care/Mental Health Integration Initiative aimed at improving the primary care provider's ability to treat basic mental health needs.	December 2016	CHAT provided \$10,000 in funding in 2013. Dr. Doug Moard is on the planning team. Drs. Farrar, Fisher and Panzer conducted training sessions. Three cohorts have completed. 195 providers from ThedaCare and other area health organizations have participated in the trainings since September 2012. The next step is to redesign to include rural providers.
Recruit mental health specialists including psychiatrists, APNP's and mental health therapists.	December 2016	The need is ongoing. In 2014, one psychiatrist was recruited; a search is underway for an additional psychiatrist. Hired one psych-certified APNP in 2015. Still recruiting one more. Hired two mental health clinicians and recruiting more. 2016: Still recruiting for AODA clinicians, IP and OP psychiatrists and mental health clinicians for the system.
Provide board leadership, funding and in-kind support to ensure sustainability of Catalpa Health Pediatric Behavioral Health Services (Fox Cities).	Ongoing	Jean DeKeyser and Dr. John Edwards serve on Catalpa board. Jean is currently treasurer and also serves on Finance and Operations committees. ThedaCare contributed \$300,000 in financial support in 2014, 2015 and 2016. In 2013 ThedaCare contributed \$274,750. In addition, ThedaCare supports Catalpa Health through: <ul style="list-style-type: none"> • Theda Clark Medical Center Foundation provided \$100,000 to support the Catalpa Health Campaign • Supported Race for a Reason 2014 through 2016- \$5,000 each year • Provided consultation/training regarding employee safety • Provided IT support for EPIC Refresh
Subsidize mental health services provided through ThedaCare.	Ongoing	ThedaCare provided \$1,200,000 in subsidized mental health services for the entire service area in 2013, \$1,397,348 in 2014, and \$1,387,091 in 2015.
Explore possibility of psychiatry residency through medical college expansion in Northeast Wisconsin.	December 2016	Not started.

COMMUNITY HEALTH APPENDIX E 2017-2019

2014-2016

Implementation Strategy Progress Report

Priority: Mental Health

Objective #2: Create clinical capacity for patients with mental health needs (continued)

Activity	Target Date	Progress
Explore development of "Primary Care Consult" capability to provide additional support to primary care providers.	December 2016	Ran experiment in 2015 with Dr. Ferrar/OB/Gyn patients. Reduced wait time from 25 weeks to 2 weeks. Plans to expand to New London next.
Develop a Primary Care Provider Education Initiative about the variety of community support services to which they can refer patients.	December 2016	Completed through Call Group meetings where re-introduced 2-1-1 program as the best overall referral option for the majority of community needs.

Objective #3: Close gaps among mental health service providers that allow patients to "fall through the cracks"

Activity	Target Date	Progress
Provide leadership and funding to the NEW Mental Health Connection – a coalition of mental health service providers.	Ongoing	Jean DeKeyser and Brian McGinnis have served on NEW Mental Health Connection board. Jean served as co-chair in 2015. CHAT provided \$75,000 in 2013 to support the Executive Director position over two years. ThedaCare Behavioral Health provides \$15,000 annually since 2012. ThedaCare provided in-kind office space annually to NEW Mental Health Executive Director.
Help establish "No Wrong Door" safety net system.	December 2015	Jean DeKeyser serves and Brian McGinnis served on NEW Mental Health Connection board which is piloting this initiative with six agencies. ThedaCare Behavioral Health will join this pilot in 2016. Initial database vendor changed ownership hampering pace of initiative.

Objective #4: Ensure emergency mental health services are available when needed

Activity	Target Date	Progress
Support 24/7 Crisis Intervention Initiative to improve access to crisis care in the Fox Cities.	December 2016	Jean DeKeyser is a member of the Tri-County Crisis Task Force which is currently working to align processes. Goal is to establish a 24/7 Crisis Center. This is work led under NEW Mental Health Connection.

COMMUNITY HEALTH APPENDIX E 2017-2019

2014-2016 Implementation Strategy Progress Report Priority: Substance Abuse

GOAL: REDUCE INCIDENCE OF ALCOHOL/DRUG ABUSE

Long Term:

- Percent of adults who report excessive drinking (County Health Rankings)

Baseline Data 2014	2015 Update	2016 Update
Outagamie County 28%	Outagamie County 28%	Outagamie County 27%
Waupaca County 26%	Waupaca County 26%	Waupaca County 25%

Short Term:

- Wait times for Substance Abuse Care. January 2016: 17 days, September 2016: 13 days

Objective #1: Mobilize community to action on alcohol and drug use

Activity	Target Date	Progress
Organize local "Plunge" on alcohol/drug use for community leaders.	December 2015	A Waupaca County Heroin Summit was held in November 2015. ThedaCare was the major sponsor. Attended by 125 people. In 2016, a Plunge into the Adverse Effects of Trauma was held. The initiative to be started October 2016 will focus on New London becoming a Trauma Informed Community. Jonathan Cloud has been hired to develop a simple curriculum that can train community members in recognition of trauma.

Objective #2: Reduce underage drinking and drug use

Activity	Target Date	Progress
Explore replication of Shawano area "Binge Drinking" social norms campaign for use in New London area.	December 2015	Campaign was implemented in Shawano in 2014-2015. Contemplating using campaigns in Fox Valley.
Provide financial support for chem-free graduation/prom parties.	Annual	ThedaCare provides a standard contribution of \$100 for all high schools requesting funding for safe post-prom and safe post-graduation parties.
Host "Party at the PAC" to educate teen drivers about risks of alcohol/substance abuse and driving.	Annually	More than 5,100 teens attended PARTY at the PAC in 2014 , 5,460 in 2015. Survey results indicate: <ul style="list-style-type: none"> teens are 23% more likely to ask someone to stop talking on the phone while driving. teens are 33% less likely to ride in a vehicle with a driver under the influence of alcohol or drugs. In October 2015, Party at the PAC educated its 50,000th teenager.

COMMUNITY HEALTH APPENDIX E 2017-2019

2014-2016 Implementation Strategy Progress Report Priority: Substance Abuse

Objective #3: Implement system policy changes that provide for early detection/ prevention of alcohol and drug use

Activity	Target Date	Progress
Explore possibility of implementing SBIRT (Screening, Brief Intervention and Referral for Treatment) clinical protocol to screen for substance abuse and refer for help.	December 2016	Explored model created by Dr. Rich Brown of UW Madison. Decision made not to implement screening specific to AODA at this time. Implementing form of screening in Complex Population Health Model.
Explore establishment of system policy around prescription practices that impact heroin use and other controlled substances.	December 2015	ThedaCare Physicians Waupaca has implemented standard work for monitoring controlled substance prescriptions to reduce “doctor shopping,” diversion and abuse of medications. Includes patient “contracts” and use of a “Narcotics Nurse.” This expanded ThedaCare system-wide in 2016. Kaye Thompson attends the Waupaca County Criminal Justice Committee Meetings. ThedaCare was a supporter of the Waupaca County Heroin Summit on November 7, 2014.
Implement policy regarding sponsorship of community events that negatively endorse alcohol use.	December 2014	Criteria have been added to Charitable Contribution standard work to discourage applications that contribute to excessive or inappropriate use of alcohol. For 2015/2016, each contribution request received by the community Health Improvement Contribution Committee is weighed for the possibility of excessive alcohol use if the money is to support an event.
NEW Build clinical capacity to address substance abuse in rural markets.	December 2016	Not started. Included in Business Plan.

COMMUNITY HEALTH APPENDIX E 2017-2019

2014-2016 Implementation Strategy Progress Report Priority: Access to Primary Care

GOAL: IMPROVE ACCESS TO NEEDED MEDICAL SERVICES

Long Term:

- Percent of adult population uninsured (County Health Rankings)

Baseline Data 2014

Outagamie County 9%; 10% (2016)
Waupaca County 10%; 11% (2016)

Objective #1: Ensure medical care for low-income/uninsured/underinsured individuals

Activity	Target Date	Progress
Maintain system policy of financial assistance to those unable to pay.	Ongoing	Reviewed in 2014. Reviewed and revised in 2015.
Support enrollment assistance in government sponsored programs.	Ongoing	In 2014, ThedaCare provided \$80,000 to Partnership Community Health Center to fund two Certified Application Counselor positions to assist people in getting on Insurance Exchange or Badger Care. Provided \$40,000 in 2015. Held trainings for ThedaCare staff on ACA and how to partner with PCHC. Selected a vendor to enroll uninsured inpatient and ED patients in Badger Care while at hospital. Received a grant to implement CAC in rural markets. 2015: enrollment of uninsured inpatient and ED patients in Badger Care while at hospital: 2,427 clients. Marketplace enrollment – 420.
Provide financial, leadership and in-kind support to Partnership Community Health Center.	Ongoing	Brian Burmeister/Jeff Hacker serve on PCHC board. Hacker is current president. Provided \$350,000 in lab, diagnostic and decision resources support for PCHC in 2013 plus \$70,000 in financial support. In 2014, made \$70,000 financial donation plus \$11,189 in radiology/lab support and \$4,477 in decision resources support. In 2015, donated \$143,250 in radiology/lab, \$5,938 in decision resources support and \$3,184 in dietitian hours.

COMMUNITY HEALTH APPENDIX E 2017-2019

2014-2016

Implementation Strategy Progress Report

Priority: Access to Primary Care

Objective #2: Provide 24/7 access to nurse advice regarding medical issues

Activity	Target Date	Progress
Staff and fund ThedaCare On-Call – 24 hour/7 days a week access to medical advice over the phone.	Ongoing	ThedaCare On-Call received more than 200,000 calls per year for assistance. Annual cost of operations was \$1,338,683 in 2014 and \$1,417,531 in 2015.

Objective #3: Support Rural Health Initiative

Activity	Target Date	Progress
Provide financial and in-kind support to sustain and potentially expand Rural Health Initiative within ThedaCare service area.	Ongoing	ThedaCare Medical Center-New London provided \$5,000 in funding in 2014, 2015 and 2016. ThedaCare provided an additional \$49,000 in financial support plus in-kind support in the form of office space, phone, computer, etc. for Rural Health Initiative. Dorothy Erdmann is a member of Rural Health Initiative board.

Objective #4: Increase supply of medical professionals

Activity	Target Date	Progress
Provide venue and training for medical residents and nursing students.	Ongoing	<p>Provided nurse and physician residency training/hours at Theda Clark valuing \$314,000 in 2013.</p> <p>Provided nurse and physician residency training/hours at Theda Clark valuing \$485,802 in 2014.</p> <p>The value for 2015 was \$747,483 for the entire system.</p>
Provide job shadowing and internship opportunities for high school youth interested in medical careers.	Ongoing	ThedaCare is a partner with the area Medical Mentoring Initiative providing job shadowing experience to area high school youth. In 2015, 265 students job shadowed throughout ThedaCare service area.