

# Ascension Columbia St. Mary's Hospital Milwaukee

**Implementation Strategy for the 2021 CHNA  
Milwaukee County, WI**



**Ascension**

The purpose of this implementation strategy is to describe how the hospital plans to address prioritized health needs from its current Community Health Needs Assessment. The significant health needs the hospital does not intend to address are identified and a rationale is provided. Special attention has been given to the needs of individuals and communities who are more vulnerable, to unmet health needs or gaps in services and to input gathered from the community.

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d/b/a Ascension Columbia St. Mary's Hospital Milwaukee  
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The 2021 Implementation Strategy was approved by the Board of Directors of Ascension Columbia St. Mary's Hospital Milwaukee on July 26, 2022 (2021 tax year) and applies to the following three-year cycle: July 2022 to June 2025. This report, as well as the previous report, can be found at our public website.

**We value the community's voice and welcome feedback on this report. Please visit our public website at <https://healthcare.ascension.org/chna> to submit your comments.**

## Table of Contents

<b>Table of Contents</b>	<b>3</b>
<b>Introduction</b>	<b>4</b>
Ascension Columbia St. Mary's Hospital Milwaukee	4
<b>Overview of the Implementation Strategy</b>	<b>4</b>
Purpose	4
IRS 501(r)(3) and Form 990, Schedule H Compliance	4
Needs That Will Be Addressed	5
Needs That Will Not Be Addressed	5
Acute Community Concern Acknowledgement	6
Written Comments	6
Approval and Adoption by the Board of Directors of Ascension Columbia St. Mary's Hospital Milwaukee	7
<b>Action Plans</b>	<b>8</b>
Evaluation	15

## Introduction

As one of the leading non-profit and Catholic health systems in the United States, Ascension is committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable.

### **Ascension Columbia St. Mary's Hospital Milwaukee**

As a ministry of the Catholic Church, Ascension Columbia St. Mary's Hospital Milwaukee (Ascension Columbia St. Mary's) is a non-profit hospital governed by a local board of directors and provides medical care to Milwaukee County and the surrounding communities. In Wisconsin, Ascension operates 17 hospital campuses, more than 100 related healthcare facilities and employs more than 1,200 primary and specialty care clinicians from Racine to the Fox Valley.

Serving Wisconsin for about 150 years, Ascension is continuing the long and valued tradition of addressing the health of the people in our community. Following in the footsteps of our founders, Ascension Wisconsin was formed in 2016 when sponsorship transitioned from four health systems: Wheaton Franciscan Healthcare, Ministry Health Care, Columbia St. Mary's and Affinity Health System.

For more information about Ascension Columbia St. Mary's, visit:

<https://healthcare.ascension.org/locations/wisconsin/wimil/milwaukee-ascension-columbia-st-marys-hospital-milwaukee>

## Overview of the Implementation Strategy

### **Purpose**

This implementation strategy (IS) is the hospital's response to the health needs prioritized from its current Community Health Needs Assessment (CHNA). It describes the actions the hospital will take to address prioritized needs, allocate resources and mobilize hospital programs and community partners to work together. This approach aligns with Ascension Columbia St. Mary's commitment to offer programs designed to address the health needs of a community, with special attention to persons who are underserved and vulnerable.

### **IRS 501(r)(3) and Form 990, Schedule H Compliance**

The CHNA and IS satisfy certain requirements of tax reporting, pursuant to provisions of the Patient Protection and Affordable Care Act of 2010, more commonly known as the Affordable Care Act (ACA). As part of the ACA, all non-profit hospitals are required to conduct a CHNA and adopt an implementation strategy every three years. Requirements for 501(c)(3) Hospitals Under the Affordable Care Act are described in Code Section 501(r)(3), and include making the CHNA report (current and previous) widely available to the public. In accordance with this requirement, electronic reports of both the CHNA and the current implementation strategy can be found at <https://healthcare.ascension.org/CHNA> and paper versions can be requested at the hospital.

## Needs That Will Be Addressed

Following the completion of the current CHNA, Ascension Columbia St. Mary's has selected the prioritized needs outlined below for its 2021 Implementation Strategy. Ascension has defined "prioritized needs" as the significant needs which have been prioritized by the hospital to address through the three-year CHNA cycle:

- Access to Care was selected because access to affordable, quality health care is important to physical, social and mental health. Ascension Wisconsin is committed to addressing all aspects of access to care, which includes affordability, geographic access and culturally competent care with trustworthy providers. As a Catholic healthcare system, improving access to care for all, regardless of ability to pay, is a foundational principle for Ascension Wisconsin.
- Chronic Disease and Prevention was selected because prevention is an important step toward a healthier community. For those with chronic diseases, proper treatment through healthcare can help improve quality of life. A healthy lifestyle through access to healthy foods, increase in activity and decreased stress can reduce the risk of several chronic diseases, lessening the need for medication or other treatments. This priority especially focuses on communities disproportionately affected by structural barriers relating to poverty. Ascension Wisconsin is committed to quality treatment of chronic diseases and focusing on prevention efforts.
- Mental Health was selected because mental health challenges are increasing during the pandemic and the community has clearly expressed the need for more support and resources. Mental health issues can lead to numerous physical health complications. Ascension Wisconsin is committed to expanding access to mental health providers and partnering with community organizations to address this health priority.

In alignment with these priorities and the voice of the community, strategies addressing these health issues will focus on equity, working to address the root social causes of health disparities in our communities and giving special attention to those that have been made vulnerable by historic disadvantages.

Ascension Columbia St. Mary's understands the importance of all the health needs of the community and is committed to playing an active role in improving the health of the people in the communities it serves. For the purposes of this implementation strategy, Ascension Columbia St. Mary's has chosen to focus its efforts on the priorities listed above.

## Needs That Will Not Be Addressed

The following needs were not selected for the 2021 CHNA cycle: Alcohol and Drug Use, Community Safety, Infectious Diseases and Safe and Affordable Housing. However, Ascension Columbia St. Mary's

is committed to participating with partners in addressing these needs and will continue to look for opportunities to do so. Below is the rationale behind not prioritizing these issues.

For alcohol abuse and illegal drug use, a community response is necessary. Ascension Columbia St. Mary's does refer patients to numerous internal and community programs for treatment when needed and will actively participate in further collaborative efforts. Some efforts may be incorporated under the Mental Health priority as these issues are often interrelated.

While Infectious Diseases was identified as a top need, Ascension Columbia St. Mary's stakeholders did not select it as a priority because the primary data report suggested that most people were concerned with COVID-19. Responding to this acute community concern is our duty as healthcare providers and should not be considered as community health improvement. Instead, all strategies should be created through the lens of the pandemic to consider the social impacts and further health disparities it has created.

Community Safety and Safe and Affordable Housing are indeed important social issues for Milwaukee County's health, particularly for survey respondents from high-need zip codes and those who identified as Black/African American. These social issues require a systems approach led by experts in these respective areas. Ascension Columbia St. Mary's has been partnering with community organizations to improve community safety and increase access to safe and affordable housing in various ways. We will continue to support these community efforts and look for future opportunities.

This report does not encompass a complete inventory of everything Ascension Columbia St. Mary's does to support health within the community. To find a list of resources for each need not being addressed, please refer to the Ascension Columbia St. Mary's 2021 CHNA:  
<https://healthcare.ascension.org/CHNA>.

## **Acute Community Concern Acknowledgement**

A CHNA and IS offer a construct for identifying and addressing needs within the community(s) it serves. However, unforeseen events or situations, which may be severe and sudden, may affect a community. At Ascension, this is referred to as an acute community concern. This could describe anything from a health crisis (e.g., COVID-19), water poisoning, environmental events (e.g., hurricane, flood) or other event that suddenly impacts a community. If adjustments to an IS are necessary, the hospital will develop documentation to notify key stakeholders of possible adjustments.

## **Written Comments**

This IS has been made available to the public and is open for public comment. Questions or comments about this report can be submitted via the website: <https://healthcare.ascension.org/chna>.

## **Approval and Adoption by the Board of Directors of Ascension Columbia St. Mary's Hospital Milwaukee**

To ensure Ascension Columbia St. Mary's efforts meet the needs of the community and have a lasting and meaningful impact, the 2021 Implementation Strategy was presented and adopted by the Board of Directors of Ascension Columbia St. Mary's on July 26, 2022. Although an authorized body of the hospital must adopt the IS to be compliant with the provisions in the Affordable Care Act, adoption of the IS also demonstrates the board is aware of the IS, endorses the priorities identified and supports the action plans developed to address prioritized needs.

## Action Plans

The IS below is based on prioritized needs from the hospital's most recent CHNA. These strategies and action plans represent where the hospital will focus its community efforts over the next three years. While these remain a priority, the hospital will continue to offer additional programs and services to meet the needs of the community, with special attention to people who are living in poverty/with low income or otherwise made vulnerable.

As part of this implementation strategy, several of the tactics designed to address the prioritized needs also incorporate targeted responses to the social determinants of health that were identified by the community. Both community safety and housing have a significant influence on the health of individuals and communities, particularly affecting chronic disease and mental health.

### Priority 1: Access to Care

#### Background

Access to health care includes affordability, accessibility and acceptability. Access to preventive health care can prevent both disease and early death ([Healthy People 2030](#)). People who can't get the care they need may have more preventable complications, hospitalizations, emotional stress and higher costs. Furthermore, delaying medical care can have a negative effect on health, including years of potential life lost. While the number of people getting preventive services has increased in recent years, there are disparities by age and race/ethnicity for many health care factors and health outcomes ([Healthy People 2030](#)). For example, the rate of preventable hospital stays for American Indian & Alaska Natives (12,488) and Black/African Americans (7,714) are much higher than the rates for Whites (4,432). Additionally, in Milwaukee County, Black babies (18/1,000) die over four times more often before their first birthday than White babies (4/1,000) ([CHRR, 2021](#)). Prenatal care (PNC) can help prevent and address health problems in both pregnant people and their babies and is most effective when it starts early and continues throughout pregnancy ([Healthy People 2030](#)). A smaller percentage of Black/African American (62%) and Hispanic (64%) people who are pregnant enter PNC early compared to White people who are pregnant (79%) ([Health Compass Milwaukee, 2022](#)). As this disparity is one of the most concerning and preventable facing our county, the hospital has decided to add a focus on maternal and child health within the Access to Care priority.

#### Objectives

By 2025, the number of preventable hospital stays in Milwaukee County will decrease (baseline: 5,196). By 2025, the percentage of Black/African American and Hispanic people entering PNC early will increase (baseline: Black/African American 62% and Hispanic 64%).

<b>Healthy People 2030 Alignment</b> <ul style="list-style-type: none"> <li>AHS-04 - Reduce the proportion of people who can't get prescription medicines when they need them</li> <li>AHS-07 - Increase the proportion of people with a usual primary care provider</li> <li>AHS-08 - Increase the proportion of adults who get recommended evidence-based preventive health care</li> <li>MICH-08 - Increase the proportion of pregnant women who receive early and adequate prenatal care (<a href="#">Healthy People 2030</a>)</li> </ul>	
<b>Collaborative Partners</b> <ul style="list-style-type: none"> <li>Current: Milwaukee Health Care Partnership, Ascension Wisconsin Foundation, schools, Ascension Pharmacies, Dispensary of Hope national program, Lyft, R1 RCM, Inc., faith groups</li> <li>Potential: Health departments, additional schools, various community based organizations (CBOs)</li> </ul>	
<b>Strategy 1: Expand Access to Care in the Community</b>	
<b>Anticipated Impact</b> Increased access to health care services for community members in Milwaukee County.	
<b>Priority Populations</b> <ul style="list-style-type: none"> <li>Families and individuals living in poverty and/or with low income; Black/African American individuals and families; older adults; people who are pregnant</li> </ul>	
<b>Resources Committed</b> <ul style="list-style-type: none"> <li>Staff time, funding, education materials, IT infrastructure for tracking, Ascension Wisconsin Foundations</li> </ul>	
INITIATIVES	TACTICS
Support Community Access to Care Initiatives	<ul style="list-style-type: none"> <li>-Provide funding to important access initiatives and associate support towards these initiatives</li> <li>-Conduct mobile health screenings within the community</li> <li>-Work closely with community Emergency Medical Services (EMS) on health education and mobile health resources outside of the traditional health system</li> <li>-Partner with schools to administer oral health and other health care services for students</li> </ul>
Expand Maternal and Child Health Outreach for Care	<ul style="list-style-type: none"> <li>-Offer maternal and child health programs such as Blankets of Love in community spaces</li> <li>-Partner with community organizations for improved outcomes</li> <li>-Provide education outreach to populations that are more at-risk for poor maternal, infant and child outcomes to connect them with necessary perinatal care</li> </ul>
<b>Measures</b> <ul style="list-style-type: none"> <li>Process outcomes of community engagement activities to respective tactics</li> </ul>	

<b>Strategy 2: Provide Initiatives to Patients for Improved Access to Care</b>	
<b>Anticipated Impact</b> Increased access to healthcare services and quality holistic care for Ascension Wisconsin patients in Milwaukee County.	
<b>Priority Populations</b> <ul style="list-style-type: none"> <li>Ascension Wisconsin patients experiencing barriers to healthcare, particularly those with low-income; patients who are under/uninsured; Black/African American individuals and families; people who are pregnant</li> </ul>	
<b>Resources Committed</b> <ul style="list-style-type: none"> <li>Staff time, funding, education materials, IT infrastructure for tracking, transportation resources</li> </ul>	
<b>INITIATIVES</b>	<b>TACTICS</b>
Increase Access to Health Care Services by Providing Holistic Support for Ascension Patients	<ul style="list-style-type: none"> <li>-Support patients in engaging in a usual place of care by assisting patients in accessing financial assistance</li> <li>-Screen patients to determine if they have social related barriers to access to care and connect these individuals with local resources</li> <li>-Remove barriers to prescription medications for those with low income or other access barriers</li> </ul>
Administer High-Quality Maternal and Child Health Clinical Care to Address Disparities	<ul style="list-style-type: none"> <li>-Enhance health education for expectant families to contribute to improved birth outcomes</li> <li>-Address social needs of expectant families</li> <li>-Offer and partner on innovative models of care to improve maternal and infant health outcomes</li> </ul>
<b>Measures</b> <ul style="list-style-type: none"> <li>Percent of patients screened</li> <li>Number of patients referred to support services</li> <li>Number of patients utilizing services</li> <li>Process outcomes to respective tactics</li> </ul>	

## Priority 2: Chronic Disease and Prevention

### Background

Chronic conditions are responsible for the majority of deaths in the United States ([CDC, 2022](#)). A healthy lifestyle reduces risk of several chronic diseases, risk factors and illnesses. However, not all people have equal access to healthy opportunities. For example, individuals with low income and some racial and ethnic minorities live farther from supermarkets, limiting their access to affordable and nutritious food ([Healthy People 2030](#)), and/or have built environments that otherwise worsen their quality of life ([AJMC, 2022](#)). This can contribute to disparities in chronic disease morbidity and mortality. Individuals with low income and some racial and ethnic minorities have higher rates of obesity and chronic diseases such as diabetes, heart disease, high cholesterol and blood pressure and stroke. For example, the Black/African American death rate due to heart disease is 30%\* higher than the overall rate and 14% of Hispanic adults report diabetes compared to 9% of White adults ([Health Compass Milwaukee, 2022](#)). Older adults are also disproportionately affected by chronic conditions, with 80% managing at least one chronic condition ([CDC, 2011](#)).

### Objective

By 2025, the percentage of the population who lack adequate access to food in Milwaukee County will decrease (baseline: 13%).

### Healthy People 2030 Alignment

- NSW-01 - Reduce food insecurity and hunger
- NSW-03 - Reduce the proportion of adults with obesity
- HDS-01 - Improve cardiovascular health
- HDS-04 - Reduce the proportion of adults with high blood pressure ([Healthy People 2030](#))

### Collaborative Partners

- Current: Faith groups, Ascension Medical Group Wisconsin, PRISM, TouchPoint Support Services
- Potential: Schools, local food pantry, hospital volunteers, various community based organizations (CBOs), Hunger Task Force

## Strategy 1: Implement Prevention and Detection Activities Within the Community

### Anticipated Impact

Increased access to healthy foods and increased education on the benefits of healthy eating for patients and community members in Milwaukee County.

### Priority Populations

- Families and individuals living in poverty and/or with low income; Black/African American individuals and families; older adults

### Resources Committed

- Staff time donated to numerous organizations, cash donations to community organizations, education collateral, [Neighborhood Resource](#)

INITIATIVES	TACTICS
Engage and Educate Community Members about Health and Prevention	-Contribute to community education sessions on healthy foods within the community, focusing on early interventions, particularly with children

	-Provide chronic disease support and prevention to groups that have historically been marginalized
Expand Opportunities for Community Members to be Engaged in Healthy Living Activities	-Donate fresh produce and other healthy foods through various channels -Partner with/support community-based organizations (CBOs) to positively influence the social determinants of health related to chronic conditions
<b>Measures</b> <ul style="list-style-type: none"> <li>Process outcomes of community engagement activities to respective tactics</li> </ul>	
<b>Strategy 2: Provide Initiatives to Patients for Improved Chronic Disease Care and Prevention</b>	
<b>Anticipated Impact</b> Increased access to healthy foods and increased education on the benefits of healthy eating for Ascension Wisconsin patients and associates.	
<b>Priority Populations</b> <ul style="list-style-type: none"> <li>Patients experiencing barriers to healthy foods, particularly those with low-income; patients who are under/uninsured; Black/African American individuals and families</li> </ul>	
<b>Resources Committed</b> <ul style="list-style-type: none"> <li>Staff time, rooming standard updates, IT infrastructure for tracking, funding as needed for food support, education collateral</li> </ul>	
<b>INITIATIVES</b>	<b>TACTICS</b>
Promote Screenings and Interventions for Chronic Disease Support and Prevention	-Develop a food insecurity screening, tracking and referral program for patients -Connect food insecure patients with chronic conditions to condition-specific food, education and support -Improve standardized processes statewide for healthy weight/BMI screenings and provide referrals to nutritionists and other resources as needed
Educate Patients and Associates about Healthy Living and Resources	-Hold healthy living demonstrations within Ascension Wisconsin healthcare facilities, particularly around specific chronic conditions -Identify and address social factors that influence chronic conditions through screening and referral to mitigate social-related barriers
<b>Measures</b> <ul style="list-style-type: none"> <li>Percent of patients screened</li> <li>Number of patients referred to support services</li> <li>Process outcomes to respective tactics</li> </ul>	

*\*This measure has been corrected from the previously published report.*

Priority 3: Mental Health	
<b>Background</b> <p>In the most recent CHNA for Milwaukee County, mental health was identified as a significant health issue by key stakeholders and community members. The average reported number of unhealthy mental health days is nearly five out of 30 days and 14% percent of the county's population report mental distress (<a href="#">2021, CHRR</a>). Mental health issues are associated with increased rates of smoking, physical inactivity, obesity and substance abuse. As a result, these physical health problems can lead to chronic disease, injury, disability and death (including overdose or suicide) (<a href="#">Healthy People 2020</a>). At Ascension Wisconsin, mental health includes prevention, treatment and access to mental health care services.</p>	
<b>Objective</b> <p>By 2025, fewer individuals will report frequent mental distress in Milwaukee County (baseline: 14%).</p>	
<b>Healthy People 2030 Alignment</b> <ul style="list-style-type: none"> <li>• MHMD-07 - Increase the proportion of people with substance use and mental health disorders who received treatment for both</li> <li>• MHMD-08 - Increase the proportion of primary care visits where adolescents and adults are screened for depression</li> <li>• MHMD-01 - Decrease the suicide rate (<a href="#">Healthy People 2030</a>)</li> </ul>	
<b>Collaborative Partners</b> <ul style="list-style-type: none"> <li>• Current: Ascension Medical Group Wisconsin, Milwaukee Health Care Partnership, emergency medical services, health departments, Ascension Wisconsin Employee Assistance Program</li> <li>• Potential: Schools, CBOs, faith communities</li> </ul>	
Strategy 1: Support Positive Mental Health in the Community	
<b>Anticipated Impact</b> <p>Increased access to mental health services, support on the social needs that contribute to mental health issues and reduced stigma on behavioral issues for community members in Milwaukee County.</p>	
<b>Priority Populations</b> <ul style="list-style-type: none"> <li>• Families and individuals living in poverty and/or with low income; Black/African American individuals and families; older adults</li> </ul>	
<b>Resources</b> <ul style="list-style-type: none"> <li>• Staff time donated to numerous organizations, cash donations to community organizations, education collateral</li> </ul>	
INITIATIVES	TACTICS
Support Community-Based Initiatives that Create an Environment for Mental Wellbeing and Increased Access to Care	<ul style="list-style-type: none"> <li>-Actively participate in suicide prevention initiatives and promote other bystander interventions</li> <li>-Support collective impact programs that address social factors that influence mental health wellbeing, particularly for those who have been historically marginalized</li> </ul>

Partner on Substance Misuse Prevention in the Community	<ul style="list-style-type: none"> <li>-Work closely with coalitions to support stigma reduction around substance use disorders</li> <li>-Direct efforts to important prevention activities in the community</li> <li>-Support Prescription Drug Take Back events to reduce opioids within the community</li> </ul>
<b>Measures</b> <ul style="list-style-type: none"> <li>• Process outcomes of community engagement activities to respective tactics</li> </ul>	
<b>Strategy 2: Improve Mental Health Programs and Services for Patients and Associates</b>	
<b>Anticipated Impact</b> Increased access to mental health services, support on the social needs that contribute to mental health issues and reduced stigma on behavioral issues for Ascension Wisconsin patients and associates.	
<b>Priority Populations</b> <ul style="list-style-type: none"> <li>• Patients experiencing behavioral health conditions; patients who are under/uninsured; patients and associates who have underlying trauma; Black/African American individuals and families</li> </ul>	
<b>Resources Committed</b> <ul style="list-style-type: none"> <li>• Staff time, quality improvement initiatives, IT infrastructure for tracking, funding</li> </ul>	
INITIATIVES	TACTICS
Deliver Comprehensive, Compassionate Care and Treatment for Patients and Associates with Mental Health Conditions, Particularly Those Who Have Experienced Trauma	<ul style="list-style-type: none"> <li>-Implement and evaluate different models of care to increase access and timeliness to outpatient mental health providers and prescribers, including telehealth</li> <li>-Assist patients and associates with social needs and spiritual care that encourage healing and mental wellbeing</li> <li>-Coordinate Sexual Assault Nurse Examiner (SANE) and Human Trafficking response programs to expand capacity for trauma-informed care</li> </ul>
Integrate Timely Interventions in All Care Settings for Substance Misuse	<ul style="list-style-type: none"> <li>-Increase access to a variety of substance use treatment including medication-assisted treatment and innovative models of care</li> <li>-Provide support groups/programs for those in treatment</li> <li>-Reduce healthcare stigma by encouraging associate awareness on nonjudgmental compassionate care for those struggling with substance misuse disorder</li> </ul>
<b>Measures</b> <ul style="list-style-type: none"> <li>• Percent/number of patients screened</li> <li>• Number of patients referred to/served by support services</li> <li>• Process outcomes to respective tactics</li> </ul>	

## **Evaluation**

Ascension Columbia St. Mary's will develop a comprehensive measurement and evaluation process for the implementation strategy. The ministry will monitor and evaluate the action plans outlined in this plan for the purpose of reporting and documenting the impact these action plans have on the community. Ascension Columbia St. Mary's uses a tracking system to capture community benefit activities and implementation. To ensure accountability, data will be aggregated and reported on in the next CHNA.