Introduction

UW Health completed its first joint 2019-2021 Community Health Needs Assessment (CHNA) with our Healthy Dane partners: UnityPoint Health-Meriter, SSM Health – St. Mary’s, Stoughton Hospital in collaboration with Group Health Cooperative and Public Health Madison Dane County.

We are proud to work collectively with many partners on our implementation strategy to improve health in our community.
Community Health Improvement

CHNA
- Not-for-profit hospitals are required to complete a Community Health Needs Assessment (CHNA) every 3 years to identify priority health issues

CHIS
- Following CHNA, required to complete Community Health Implementation Strategy (CHIS) that includes actions, resources, planned collaboration and anticipated impact

Outcomes
- Implement community health implementation strategies and measure impact
We are committed to addressing health inequities: “types of unfair health differences closely linked with social, economic, or environmental disadvantages that adversely affect a group of people.”

Data Sources:
We are using the framework of the **UW-Madison Population Health Institute County Health Rankings** model to understand what contributes to health outcomes and think broadly about areas for community health improvement.
We are using the framework of the **County Health Rankings & Roadmaps’ Take Action Cycle** to guide us in HOW to create a healthy community that results in community transformation.

Data Source:
Work Together

- Choose Effective Policies & Programs
- Communicate
- Focus on What's Important
- Assess Needs & Resources
- Act on What's Important
- Evaluate Actions
- Work Together

Community Members:
- Public Health
- Business
- Educators
- Philanthropy & Investors
- Nonprofits
- Community Development
- Government
- Healthcare
Dane County Health Council

Vision: All Dane County residents have optimal health and well-being

Mission: Eliminate gaps and barriers to optimal health and reduce disparities in health outcomes

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<thead>
<tr>
<th>Health Care Providers</th>
<th>Government</th>
<th>Nonprofits</th>
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<tbody>
<tr>
<td>Access Community Health Centers</td>
<td>Public Health Madison Dane County</td>
<td>United Way</td>
</tr>
<tr>
<td>Group Health Cooperative</td>
<td>Madison Metropolitan School District</td>
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<tr>
<td>SSM St. Mary’s</td>
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<tr>
<td>UnityPoint Health – Meriter</td>
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<td>UW Health</td>
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Joint 2019-2021 Community Health Needs Assessment

2019 - 2021
DANE COUNTY, WISCONSIN
COMMUNITY HEALTH NEEDS ASSESSMENT

Healthy Dane Collaborative
healthydane.org

UW Hospitals and Clinics Authority Board
Approved: December 20, 2018

Methodology

Qualitative Data
2016
- African American Health Network Focus Group
- Latino Health Council Focus Group
- Voices of our Communities Video Interview Project
- Transgender and Outreach Community Center Email Interviews

2018
- SSM St. Mary’s Community Partner Breakfast
- Housing and Healthcare [H2] Meeting
- SSM DMG Patient Advisory Group
- Stoughton Business Health and Wellness Roundtable
- Centro Hispano Key Informant Interview
- Wisconsin Faith Voices for Justice
- Harambee Village Doula
- Saving Our Babies Public Engagement Sessions
- Black Men’s Health Town Hall

Quantitative Data
- Our main source of secondary data is healthydane.org. This website is maintained by Health Communities Institute and utilizes data available from the National Cancer Institute, the Environmental Protection Agency, U.S. Census Bureau, the U.S. Department of Education, as well as other national, state, and regional sources, to provide a snapshot of the community’s health. Other data sources are cited throughout the report (see footnotes).

Summary Themes

- Generally, Dane County’s health outcomes fair better than many state and national averages. However, the state and national averages do not adequately capture the inequities between populations.
- Community members voiced:
  - A desire for equal opportunity, resources and respect
  - Resiliency and commitment to the community
  - A need for coordinated community resources
  - Importance of connectedness and social cohesion
  - A need for culturally responsive care

Full report can be retrieved from: https://www.uwhealth.org/files/uwhealth/docs/pdf6/UW%20Health%202019-2021%20CHNA_FINAL.pdf
2019-2021 CHNA
Priority Health Outcomes

- Maternal and Child Health
- Substance Use Disorders
- Chronic Conditions
- Mental Health/Behavioral Health
Maternal and Child Health Community Assets

UW Health is working in collaboration with many existing organizations and local champions in Dane County to address maternal and child health. Examples include:

<table>
<thead>
<tr>
<th>Community Based Organizations</th>
<th>Nonprofit Organizations</th>
<th>Government Agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundation for Black Women’s Wellness</td>
<td>March of Dimes</td>
<td>Public Health Madison Dane County</td>
</tr>
<tr>
<td>Harambee Village Doulas</td>
<td>United Way</td>
<td>Dane County Human Services/Joining Forces for Families</td>
</tr>
<tr>
<td>Project Babies/Today Not Tomorrow Family Resource Center</td>
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<tr>
<td>African American Health Network</td>
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<tr>
<td>Meadowood Health Partnership/Neighborhood Connectors</td>
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<tr>
<td>Faith Based Organizations</td>
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</tbody>
</table>
Opioids and Substance Use Disorder
Community Assets

UW Health is working in collaboration with many existing organizations and local champions in Dane County to address opioids and substance use disorder. Examples include:

<table>
<thead>
<tr>
<th>Community Based Organizations</th>
<th>Statewide Nonprofit Organizations</th>
<th>Government Agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe Communities</td>
<td>Rural Wisconsin Health Cooperative</td>
<td>Wisconsin Department of Health Services</td>
</tr>
<tr>
<td>African American Opioid Coalition</td>
<td>Wisconsin Society of Addiction Medicine</td>
<td>Public Health Madison Dane County</td>
</tr>
<tr>
<td>Healthcare Task Force</td>
<td></td>
<td>Dane County Human Services</td>
</tr>
<tr>
<td>ARC Community Services, Inc.</td>
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<tr>
<td>Recovery Coalition of Dane County</td>
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</tbody>
</table>
Focus on What’s Important
2019-2021 CHNA
Priority Health Outcomes

- Maternal and Child Health
- Substance Use Disorders
- Chronic Conditions
- Mental Health/Behavioral Health
Disparities Are Persistent

"There’s something about growing up as a black female in the United States that’s not good for your childbearing health. African American mothers with a college degree have worse birth outcomes than white mothers without a high school education."

Understanding Low Birthweight (LBW)

Life-course Perspective: Birth outcomes are the result of the entire life-course of the mother


The Earlier the Investment, the Greater the Return

“Early investment in preventive programs aimed at disadvantaged children is often more cost effective than later remediation.”

-James Heckman, Nobel Laureate in Economics
Health Impact

Immediate Health Impact

• Babies born with LBW are more likely to have health problems and need treatment in a newborn intensive care unit.
  • Respiratory problems\(^1\)
  • Bleeding in brain\(^1\)
  • Heart problems\(^1\)
  • Cerebral palsy\(^2,3\)
  • Poor growth\(^2\)
  • Increased risk of dying in the first year\(^1\)

Long-Term Health Impact

• Babies born with LBW are more likely than normal weight babies to develop chronic health conditions.\(^1\)
  • Diabetes
  • Heart disease
  • High blood pressure
  • Metabolic syndrome
  • Obesity

Data Sources:
Social & Economic Impact

Social Impact

• Long-term stress on families\(^1\)
• Poorer educational achievement and lower college attendance\(^2\)
• Predictive of lower future socioeconomic status\(^3\)

Economic Impact

• The average medical cost for a premature and/or LBW baby for the first year of life is $50,308 more than a full-term baby ($55,393 compared to $5,085)\(^4\)

Data Sources:
5. WI Dept. of Health Services, Office of Informatics, Division of Interactive Statistics on Health, Division of Public Health, WI Interactive Statistics on Health.
2019-2021 CHNA Priority Health Outcomes

- Maternal and Child Health
- Substance Use Disorders
- Chronic Conditions
- Mental Health/Behavioral Health
Wisconsin Getting Worse

• Nationally, 72,000 people per year are dying from overdoses
• Wisconsin up 109% for suspected overdoses in EDs 2016-17 – Largest increase for any state in the nation

Detecting recent trends in opioid overdose ED visits provides opportunities for action in this fast-moving epidemic.

PERCENT CHANGE
- Decrease
- Increase 1 to 24%
- Increase 25 to 49%
- Increase 50% or more
- Data unavailable

SOURCE: CDC’s Enhanced State Opioid Overdose Surveillance (ESOOS) Program, 16 states reporting percent changes from July 2016 through September 2017
Choose Effective Policies & Programs
“Nothing about us without us”

• African American women will have continued involvement in the decision making for our Maternal and Child Health strategy.

• The Foundation for Black Women’s Wellness and EQT by Design contracted with UW Health and the Dane County Health Council to lead 23 community discussions with more than 250 African American participants to address the root causes of low birth weight for babies born to African American women as well as possible solutions.

• Input from these conversations and a process of shared decision-making determined the strategies in this implementation plan.
SAVING OUR BABIES

Public Engagement Sessions for Black Mothers & Fathers on Improving Birth Outcomes for Black Moms & Babies in Dane County

Participant Requirements

• Dane County residents, Ages 18 and older
• Have given birth to a low birth weight baby, or know a Black woman who has
• Have lost a child between 0 - 1 year old or know a Black woman who has

Funded by the Dane County Health Council

JOIN US!

To Participate, Contact: info@ffbww.org or call (608) 709-8840
Though African Americans see Dane County as a place of opportunity, that opportunity does not translate consistently into success or stability for them and their families despite their efforts.

Root causes of Black low infant birthweight stem from the backdrop of racial and economic inequality in Dane County that goes unchanged.

The dual impact of economic insecurity and racial inequality on the Black family system, past and present, has created a toxic cycle of stress and pressure that is driving Black infant low birthweight and other health disparities.

Black mothers and families, though hopeful, resilient and persevering, are in far too many cases, living under a state of duress and chronic stress in Dane County.

Data Source:
1. Preliminary Observations of the DCHC Low Birthweight Engagement, Dec. 19th, 2018
Key factors cited by Black women (and men) that heavily impact their quality of life and health in Dane County, including the quality of their pregnancies and the health of their babies:

<table>
<thead>
<tr>
<th>Factors</th>
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</thead>
<tbody>
<tr>
<td>Racism, discrimination and institutional bias</td>
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<tr>
<td>Bias and cultural disconnect in healthcare delivery and experiences</td>
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<tr>
<td>Economic insecurity</td>
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<tr>
<td>Housing insecurity and high cost of living</td>
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<tr>
<td>Poor access to health-supporting assets</td>
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</table>

<table>
<thead>
<tr>
<th>Factors</th>
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</thead>
<tbody>
<tr>
<td>Inadequate social supports</td>
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<tr>
<td>Gaps in health literacy, education and support</td>
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<tr>
<td>Disconnected and hard-to-navigate community resources</td>
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<tr>
<td>Systemic barriers to individual and family advancement</td>
</tr>
<tr>
<td>Chronic Stress</td>
</tr>
</tbody>
</table>

Data Source:
1. Preliminary Observations of the DCHC Low Birthweight Engagement, Dec. 19th, 2018
## Community Engagement

### Recommendations

#### Internal Health System Actions
- Expanding promising Initiatives
- Prioritize cultural competence and workforce diversity
- Root out racial bias and invest deeply in efforts that embed equity
- Root Solutions
- Continue to invest in and partner deeply with existing community-based efforts and organizations
- Align efforts, initiatives, and CHNAs across systems for greater systemic impact

#### Community Investments Staff Team Recommendations
- Create a Black Maternal and Child Health Dashboard
- Care Coordination
- Expand African American Doulas
- Fund the Annual Wisconsin Black Maternal and Child Health Summit
- Establish the Black Maternal and Child Health Task Force
- Fund Neighborhood Based education in high needs zip codes

#### System and Policy Actions
- Reframe and tie “healthcare” to economic and regional advancement
- Include and Engage Black Men /Fathers/Partners/and Family Support
- Cross-Sector Partners
- Advocacy and Alliances for Public Policy
- Prioritize DEI Commitment

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Data Source:
Strategy Selection

Strategies were selected using:

- Evidence-based strategies\(^1\)

- Recommendations from community members

- Review by UW Health experts of community recommendations and evidence-based practices, prioritized based on feasibility and potential impact

Data Source:
Opioid and Substance Use Disorder Strategies

Act on What’s Important
## Maternal and Child Health Strategies

<table>
<thead>
<tr>
<th>Initiatives</th>
<th>UW Health Resources</th>
<th>Partners</th>
<th>Anticipated Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tobacco Cessation</td>
<td>• Ob-Gyn</td>
<td>• Wisconsin Women’s Health Foundation: First Breath</td>
<td>Reduce smoking rates by optimizing tobacco cessation screening, counseling and referral for pregnant patients</td>
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<td></td>
<td>• Family Medicine</td>
<td>• Redox</td>
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<td></td>
<td>• Information Services</td>
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<tr>
<td>Group Well-Child Visits (Centering Parenting)</td>
<td>• Pediatrics</td>
<td>• Centering Healthcare Institute</td>
<td>Increase attendance for postpartum visits, breastfeeding rates, and rates of well-child visits during first 2 years of life</td>
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<td></td>
<td>• Family Medicine</td>
<td></td>
<td></td>
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<tr>
<td>Neighborhood-Based Education</td>
<td>• Ob-Gyn</td>
<td>• Dane County Health Council</td>
<td>Provide health education and social support in collaboration with community partner organizations for zip codes in Dane County facing the highest health disparities</td>
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<tr>
<td></td>
<td>• Family Medicine</td>
<td>• Foundation for Black Women’s Wellness</td>
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<tr>
<td></td>
<td>• Internal Medicine</td>
<td>• Community Agencies</td>
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<tr>
<td></td>
<td>• Pediatrics</td>
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<tr>
<td>Group Prenatal Visits (Centering Pregnancy)</td>
<td>• Ob-Gyn</td>
<td>• Neighborhood Connectors/Meadowood Health Partnership</td>
<td>Provide prenatal care, health education and social support by expanding Centering Pregnancy to additional sites in collaboration with community partner organizations</td>
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<tr>
<td></td>
<td>• Family Medicine</td>
<td>• Joining Forces for Families</td>
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### MCH Strategies Continued

<table>
<thead>
<tr>
<th>Initiatives</th>
<th>UW Health Resources</th>
<th>Partners</th>
<th>Anticipated Impact</th>
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</thead>
<tbody>
<tr>
<td>17-Alpha-Hydroxy progesterone</td>
<td>• Ob-Gyn</td>
<td>• UPH - Meriter</td>
<td>Reduce rates of preterm labor for babies born to African American women by offering 17P when clinically indicated</td>
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<td></td>
<td>• Family Medicine</td>
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<td></td>
<td>• Internal Medicine</td>
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<tr>
<td>Breastfeeding Support</td>
<td>• Ob-Gyn</td>
<td>• UPH-Meriter</td>
<td>Provide education and support to increase initiation and exclusive breastfeeding rates for African American women</td>
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<tr>
<td></td>
<td>• Family Medicine</td>
<td>• Harambee Village Doulas</td>
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<td></td>
<td></td>
<td>• African American Breastfeeding Alliance</td>
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<tr>
<td>Reproductive Life Plans</td>
<td>• Ob-Gyn</td>
<td>• Wisconsin Contraceptive Access Network</td>
<td>Improve women’s preconception and interconception care, Manage chronic conditions prior to pregnancy</td>
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<td></td>
<td>• Family Medicine</td>
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<td>• Internal Medicine</td>
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<td></td>
<td>• Pediatrics</td>
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<tr>
<td>Healthy Moms, Healthy Babies</td>
<td>• Government Affairs</td>
<td>• Dane County Health Council</td>
<td>Support economic security and regional advancement of African American doulas by establishing reimbursement models, expand postpartum coverage</td>
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<tr>
<td></td>
<td></td>
<td>• Foundation for Black Women’s Wellness</td>
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<td></td>
<td></td>
<td>• Harambee Village Doulas</td>
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<td>Initiatives</td>
<td>UW Health Resources</td>
<td>Partners</td>
<td>Anticipated Impact</td>
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<tr>
<td>Diversity, Equity and Inclusion in Workforce</td>
<td>• Diversity, Equity and Inclusion staff</td>
<td>• UPH-Meriter</td>
<td>Reduce bias within healthcare, diversify workforce and expand employment opportunities, and improve patient care and satisfaction</td>
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<tr>
<td>Care Coordination System (Doulas + Community Health Workers)</td>
<td>• Ob-Gyn</td>
<td>Dane County Health Council</td>
<td>Streamline social determinants of health screening, referral, and navigation processes for patients</td>
</tr>
<tr>
<td></td>
<td>• Family Medicine</td>
<td>Foundation for Black Women’s Wellness</td>
<td>Address patients’ social needs by facilitating referral and navigation to community resources</td>
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<td></td>
<td>• Internal Medicine</td>
<td>EQT by Design</td>
<td>Provide education, support, and empowerment to patients and families receiving care</td>
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<td>• Pediatrics</td>
<td>Harambee Village Doulas</td>
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<td></td>
<td>• Information Systems</td>
<td>Meadowood Health Partnership</td>
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<td></td>
<td>• Population Health</td>
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Maternal and Child Health Implementation Timeline

**FY20**
- Tobacco Cessation
- Group Prenatal Visits
- 17P
- Healthy Women, Healthy Babies
- Diversity, Equity and Inclusion in Workplace
- Care Coordination System (including Doulas + Community Health Workers)

**FY21**
- Neighborhood-Based Education
- Group Well-Child Visits
- Breastfeeding Support
- Diversity, Equity and Inclusion in Workplace
- Care Coordination System (including Doulas + Community Health Workers)

**FY22**
- Reproductive Life Plans
- Diversity, Equity and Inclusion in Workplace
- Care Coordination System (including Doulas + Community Health Workers)
# Opioid and Substance Use Disorder Strategies

<table>
<thead>
<tr>
<th>Initiatives</th>
<th>UW Health Resources</th>
<th>Partners</th>
<th>Anticipated Impact</th>
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</thead>
<tbody>
<tr>
<td>Safe Storage and Disposal</td>
<td>• Pharmacy</td>
<td></td>
<td>Expand access to safe storage and disposal resources, increase patient awareness of safe disposal and secure storage options</td>
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<td></td>
<td>• Pain Management</td>
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<td></td>
<td>• Security</td>
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<tr>
<td>Hub &amp; Spoke Model</td>
<td>• Behavioral Health and Recovery</td>
<td></td>
<td>Increase capacity and ability to provide Medication Assisted Treatment to patients</td>
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<td></td>
<td>• Family Medicine</td>
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<td></td>
<td>• General Internal Medicine</td>
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<td></td>
<td>• Information Services</td>
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<tr>
<td>Project ECHO: A.C.C.E.P.T</td>
<td>• Addiction Medicine</td>
<td>• DHS Division of Care and Treatment</td>
<td>Increase access to educational network for providers caring for marginalized or underserved populations with substance use disorders</td>
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<tr>
<td></td>
<td>• Behavioral Health and Recovery</td>
<td>• Rural Wisconsin Health Cooperative</td>
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<td></td>
<td></td>
<td>• WI Society of Addiction Medicine</td>
<td></td>
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<tr>
<td>Initiatives</td>
<td>UW Health Resources</td>
<td>Partners</td>
<td>Anticipated Impact</td>
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<tr>
<td>Provider Prescribing and Feedback</td>
<td>• Pharmacy • Center for Clinical Knowledge Management (CCKM) • Enterprise Analytics</td>
<td>• UW Dept of Industrial &amp; Systems Engineering • Institute for Clinical and Translational Research • Health Innovation Program</td>
<td>Increase percent of patients at or under the recommended morphine milligram equivalent per day and decrease the number of patients on opioids and benzodiazepines concurrently</td>
</tr>
<tr>
<td>Naloxone Education &amp; Distribution</td>
<td>• Pharmacy • Center for Clinical Knowledge Management (CCKM)</td>
<td>• Safe Communities • UW-Madison School of Pharmacy</td>
<td>Increase percent of appropriate patients prescribed and dispensed naloxone</td>
</tr>
<tr>
<td>Coverage for Treatment</td>
<td>• Government Affairs • Managed Care Contracting</td>
<td></td>
<td>Increase access to non-opioid pain management, naloxone, and substance use disorder treatment options</td>
</tr>
<tr>
<td>Recovery Coaches</td>
<td>• Emergency Medicine • Behavioral Health and Recovery • Social Work</td>
<td>• UPH-Meriter • Safe Communities • WI Voices for Recovery</td>
<td>Increase referrals for eligible patients to recovery coaches and increase provider satisfaction with support for opioid addiction treatment</td>
</tr>
</tbody>
</table>
Opioid Implementation Timeline

**FY20**
- Hub & Spoke-Test of Change and Business Planning
- Safe Storage and Disposal
- UW Project ECHO: A.C.C.E.P.T
- Provider Prescribing – Academic Detailing and Practice Facilitation
- Naloxone
- Recovery Coaches - ED

**FY21**
- Hub & Spoke
- Provider Prescribing – Physician Peer Coaching
- Coverage for Treatment
- Recovery Coaches

**FY22**
- Hub & Spoke
- Provider Prescribing – Evaluation and Dissemination
## Behavioral Health Strategies

<table>
<thead>
<tr>
<th>Initiatives</th>
<th>UW Health Resources</th>
<th>Partners</th>
<th>Anticipated Impact</th>
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</thead>
<tbody>
<tr>
<td>Workforce</td>
<td>• Behavioral Health Services</td>
<td></td>
<td>Continue comprehensive three-year plan to add more than 60 positions to behavioral health services</td>
</tr>
<tr>
<td>Collaborative Care Model</td>
<td>• Behavioral Health Services</td>
<td>• Family Medicine</td>
<td>Integrate Collaborative Care model for depression and anxiety in all primary care sites by 2021</td>
</tr>
<tr>
<td></td>
<td>• Behavioral Health Services</td>
<td>• Internal Medicine</td>
<td></td>
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<tr>
<td></td>
<td>• Behavioral Health Services</td>
<td>• Pediatrics</td>
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<tr>
<td>Coordinated Delivery System</td>
<td>• Behavioral Health Services</td>
<td>• UPH-Meriter</td>
<td>Enhance access to services across the care continuum through Joint Operating Agreement with UnityPoint Health - Meriter</td>
</tr>
<tr>
<td>Suicide Prevention</td>
<td>• Behavioral Health Services</td>
<td>• Safe Communities</td>
<td>Implement suicide prevention clinical guidelines in alignment with community-wide Zero Suicide Initiative</td>
</tr>
<tr>
<td></td>
<td>• Behavioral Health Services</td>
<td>• UPH-Meriter</td>
<td></td>
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<tr>
<td>Recovery Coaches</td>
<td>• OB-Gyn</td>
<td>• Safe Communities</td>
<td>Expand the scope of Recovery Coach program to prenatal care and inpatient units</td>
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<td></td>
<td>• Family Medicine</td>
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<td></td>
<td>• Inpatient units</td>
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## Chronic Conditions Strategies

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<tr>
<th>Initiatives</th>
<th>UW Health Resources</th>
<th>Partners</th>
<th>Anticipated Impact</th>
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<tbody>
<tr>
<td>Safe Routes to School</td>
<td>• Healthy Kids Collaborative</td>
<td>• MMSD Community Schools</td>
<td>Increase number of children biking and walking to schools</td>
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<td>• American Family Children’s Hospital</td>
<td>• MSCR</td>
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<td>• Tri4Schools</td>
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<td></td>
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<td>• Safe Kids</td>
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<td>• WI Bike Fed</td>
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<tr>
<td>Healthy Kids Healthy Schools</td>
<td>• Healthy Kids Collaborative</td>
<td>• Madison Metropolitan School District</td>
<td>Increase number of policy and practices that support health in a school building</td>
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<td></td>
<td>• American Family Children’s Hospital</td>
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<tr>
<td>Active Communities</td>
<td>• Healthy Kids Collaborative</td>
<td>• Madison</td>
<td>Increase number and level of designation of Bike Friendly Communities in Dane County</td>
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<tr>
<td></td>
<td>• American Family Children’s Hospital</td>
<td>• Verona</td>
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<td>• Middleton</td>
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<td>• Fitchburg</td>
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<td>• Sun Prairie</td>
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<td>• Cross Plains</td>
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<tr>
<td>Care Coordination Programs</td>
<td>• Primary Care/Ambulatory Operations</td>
<td>• Health Innovation Program</td>
<td>Improve health outcomes through care coordination and implementation of appropriate interventions utilizing the right resources to maintain the patient’s optimal level of health</td>
</tr>
</tbody>
</table>
Strong Investments and Partnerships

- Sustain investments in community
- UW Health realigned existing funding to support CHNA strategic priorities
- Transitioned from supporting events to supporting programs
- Collaborative approach among health systems
Aligning Investments for Maximum Impact

**Traditional Partners**
- Boys & Girls Club
- Centro Hispano
- Urban League

**Diversity, Equity & Inclusion**
- Foundation for Black Women’s Wellness
- YWCA

**Community Health Improvement**
- African American Breastfeeding Alliance
- Harambee Village Doulas
- Project Babies

**Max Impact**
- Agrace
- Ronald McDonald House
- Second Harvest
Community Investment Strategy
Next Steps

- Review national best practices for leading health systems
- Determine UW Health approach/role in addressing social determinants of health
- Collaborate with partners for maximum impact
Culturally Responsive Health Care

- UW Health is committed to fostering a culture of inclusion and respect among our patients, employees, learners and the communities we serve.
- UW Health collects race, ethnicity and language data for all patients; this enhances our ability to identify health inequities.
- We provide robust language interpretation services (in-person, phone and video).
- Employees and learners receive cultural competency training:
  - Access to online computer-based training modules on implicit bias.
  - Access to Microlearning Resources.
  - In-person training on implicit bias for Family Medicine, OB/GYN, Perinatal Services related to maternal and child health priority.
  - Mandatory employee training through Safety & Infection Control module.
  - Resident training: pediatrics, family medicine, emergency medicine and OB/GYN through rotations and seminars.
Evaluate Actions
Maternal and Child Health Goal

- Healthy birth outcomes for African American women
  - **Initial Objective:** Eliminate inequities in low birth weight births between African American and White women in Dane County
  - **Initial Measure:** Number and percentage of low birth weight births by maternal race/ethnicity

Achieving objective will:
- Take multiple years
- Involve many partners, across sectors, with shared commitment
- Require multiple, simultaneous, strategies and tactics
Opioid and Substance Use Disorder

Goal

• Prevent and treat opioid and substance use disorders
  – **Initial Objective:** Increase access to Medication Assisted Treatment (MAT) for medically-homed adults with substance use disorders
  – **Initial Measures:**
    • Number of primary care clinics with providers waivered to prescribe MAT
    • Percentage of patients with an opioid use disorder who were referred to or prescribed MAT
Our Commitment to the Community

UW Health remains committed to improving health outcomes in Dane County. We will:

- Continue community engagement as we develop and implement community health improvement initiatives
- Implement activities in alignment with the needs that were voiced by the community in the Community Health Needs Assessment
- Address social determinants of health in conjunction with clinical care
- Measure community health improvement
- Communicate our progress