

Gundersen Health System – Gundersen Lutheran Medical Center

Community Health Implementation Plan

1/1/2019-12/31/2021

Progress



***Approved by the Board of Trustees/Board of Governors on November 26th, 2018.**

21 County Region	COMPASS Region	Buffalo County	La Crosse County	Monroe County	Trempealeau County	Vernon County	Houston County
Livable wage jobs	Livable wage jobs	Access to public transportation	Livable wage jobs	Livable wage jobs	Livable wage jobs	Livable wage jobs	Livable wages
Improved mental health & access to services	Mental health and access to services	Access to mental health services	Access to mental health services	Access to mental health services	Access to mental health services	Access to mental health services	Access to mental health services
Reduced alcohol and drug misuse/abuse	Drug and alcohol misuse and abuse	Food security	Inclusion of socially diverse people	Food security	Inclusion of socially diverse people	Inclusion of socially diverse people	Access to public transportation
Wraparound support through lifespan-including Adverse Childhood Experiences	Wraparound support throughout the lifespan	Drug and alcohol misuse and abuse	Drug and alcohol misuse and abuse	Drug and alcohol misuse and abuse	Drug and alcohol misuse and abuse	Drug and alcohol misuse and abuse	Drug and alcohol misuse and abuse
Reduced obesity & rates of diabetes	Inclusion of socially diverse people	Number of volunteer EMS and first responders	Well-being of children and youth	Access to high quality childcare	High quality opportunities for teenagers and people in their 20's	Access to affordable healthcare services	Access to affordable, high quality housing
							School and community safety

- Gundersen Health System**
- Population Health Initiatives**
1. Adverse Childhood Experiences (ACEs)/ Trauma Informed Care (TIC)
 2. Homelessness
 3. Substance Abuse/Mental Health
 4. Chronic Illness

Identified Need/Issue: Wraparound support throughout the lifespan to improve quality of life

Goal: Augment and disseminate wrap around services for children and adults that will improve selected outcomes by 5% (determined by dashboard)						
Action	Resource (program)	Partnerships	Measure of Impact	2019	2020	2021
Develop dashboard that will identify monitor impact of services	Population Health Program leaders 211	Better Together County Health CESA 4 United Way	Dashboard with metrics by Q1 2019 Annual update and action based on identified areas of distress	Completed		
Create trauma-informed community	Population Health Pediatrics Behavioral Health	School Districts Better Together Youth serving organizations Government Mental Health Higher education For-profit organizations Health Care	ACE/TIC (plan to be developed)	# participants trained in ACEs/TIC education: 1,520 <ul style="list-style-type: none"> # community members joining collaborative as ACEs/TIC champions: 198 representing about 42 organizations/entities In progress: development of work teams <ul style="list-style-type: none"> Foster care system team Support ACES/TIC efforts with community contribution funds = \$127,669		

<p>Provide education and resources that enhance ability for older adults to stay active and independent for as long as possible (falls prevention, caregiver support, dementia care, healthy aging)</p>	<p>Population Health GMF Tri State Ambulance Nursing Trauma Services Neurology Primary Care Cass Street Pharmacy Winona Sports Medicine</p>	<p>Alzheimer's Assn ADRC Caregiver Coalition Falls Prevention Coalition La Crosse Park and Rec Dept Winona Friendship Center Arthritis Foundation Bethany St. Joseph Corp- Smart Seniors Monroe County Dementia Coalition</p>	<p>Metrics developed by Q1 2019</p> <ul style="list-style-type: none"> • Annual quality of life indicator • Reduced falls in designated geographic location 	<p>2019 Healthy Aging Conference Giving Care, Taking Care:</p> <ul style="list-style-type: none"> • 126 attendees • 94% of survey respondents satisfied/very satisfied with conference • 92% of survey respondents agreed the conference was appropriate for their education/experience <p>Continued participation and involvement in Alzheimer's Committee and Walk to End Alzheimer's, La Crosse County Caregiver Coalition, La Crosse County Falls Prevention Coalition, Livable La Crosse (AARP), Retired Senior Volunteer Program (RSVP), Monroe County Dementia Friendly Coalition, Dementia Friendly Community La Crosse County</p>		
---	---	---	---	---	--	--

				<p>Continue to offer "Stepping On" workshops to teach older adults about fall prevention techniques.</p> <ul style="list-style-type: none"> # participants: 62 <p>Dementia Live Event to increase awareness of dementia in our community: 70</p>		
Continue rollout of coping/resilience program at schools (based on Heartmath methodology) and other locations	Population Health NCPTC	Schools Youth agencies (BGC; Y Teen Center)	<p># children</p> <p>Evaluation metric for specific age groups</p> <ul style="list-style-type: none"> Increased ability to cope with stressors Ability to identify emotions 	<p># of school/youth serving agencies worked with in 2019:</p> <p>UW-L Central High School Sparta H.S. WTC Monroe County HS Custodial Conference Adams-Friendship Viterbo Miller Elementary School Adams-Friendship Tomah Support</p> <p>Evaluation metric:</p> <ul style="list-style-type: none"> Identify 2 ways you will plan to use the quick 		

				<p>coherence technique: 6 were surveyed and 100% of those surveyed met the learning standards of using the QCT</p> <ul style="list-style-type: none"> • How likely are you to recommend this program to your colleagues?: 97.16% of those surveyed would recommend this program to their colleagues <p>499 total people reached in 2019</p>		
Offer programming to meet the needs of disadvantaged students	Global Health	Schools Employee and Community Volunteers	<p># volunteers</p> <p># children mentored for the school year</p> <p>Evaluation metric for Global Partners Mentoring tbd</p>	<p>School District La Crosse Hamilton Early Learning Center:</p> <ul style="list-style-type: none"> • # Mentors: 47 • # Children mentored: 50 • # Mentoring sessions: 1475 (avg. 15 per semester) • Total # mentoring hours: 1181.5 (avg. 50 minutes/session) <p>School District La Crosse: Hintgen Elementary</p> <p># Children mentored:</p> <ul style="list-style-type: none"> • # Mentors: 28 • # Children Mentored: 26 • # Mentoring sessions: 405 • # Total # mentoring hours: 361.25 		

				<p>Sites coordinated by other parties, closely aligned and supported by GHS Global Partners (site in which GP staff served as consultants/trainers for their programs) include: School District La Crosse Northside Elementary, Tomah Area School District, Adams-Friendship Elementary School</p> <p>Survey for mentors, mentees, and teachers developed in 2019. Survey implementation will begin Spring 2020.</p>		
Support social diversity through education and involvement in community organizations/coalitions	HR Employee Relations MEO External Affairs	7 Rivers Alliance Workforce Connections PPH Neighborhood Assn Hmoob Cultural and Community Agency	# of orgs involved \$ Community Contributions	<p>Active Participation/Leadership in the following Community Organizations/Coalitions</p> <p><u>ATODA (Alcohol, Tobacco & Other Drugs)</u> Alliance to HEAL La Crosse County Prevention Network La Crosse Area Health Initiative (LAHI)</p> <p><u>Physical Activity/Obesity</u> Committee on Transit and Active Transportation Grandad Marathon Committee Healthy Living Collaborative</p> <p><u>Senior/Older Adult:</u></p>		

				<p>Alzheimer's Committee and Walk to End Alzheimer's</p> <p>Bethany Lutheran Homes Board of Directors</p> <p>La Crosse County Caregiver Coalition</p> <p>La Crosse County Falls Prevention Coalition</p> <p>Livable La Crosse (AARP)</p> <p>Retired Senior Volunteer Program (RSVP)</p> <p>Monroe County Dementia Friendly Coalition</p> <p>Dementia Friendly Community La Crosse County</p> <p>Hmong Cultural Center (senior education series developed for 2020)</p> <p><u>Injury Prevention:</u></p> <p>Safe Kids Coalition</p> <p><u>Population Health:</u></p> <p>Change Direction</p> <p>Monroe County RTIC</p> <p>Population Health Committee, La Crosse</p> <p>Medical Health Science Consortium</p> <p>United Way</p> <p>United Way COMPASS Steering Committee</p> <p>Wellness Council of America- Wisconsin (WELCOA)</p> <p>Worksite Wellness Network</p> <p>ACE/RTIC Initiative</p> <p><u>Other:</u></p> <p>La Crosse Public Education Foundation</p>	
--	--	--	--	--	--

				<p>Inclusa Member Advisory Committee Powell-Poage-Hamilton Neighborhood Association (neighborhood plan updated; leadership in the JDC; commitment from develop to build market rate apartments with limited retail space on Zahn property; collaboration with Hamilton Elementary School)</p> <p>Support wrap around services and needs related to social determinants of health through community contribution funding = \$215,490</p>		
--	--	--	--	---	--	--

Identified Need/Health Issue: Mental Health and/or Substance Abuse

Goal: Reduce number of deaths due to poor mental health and substance abuse and reduce the number of poor mental health days by 5%						
Action	Resource (program)	Partnerships	Measure of Impact	2019	2020	2021
Develop dashboard that will identify and monitor impact of services	Population Health Program leaders		Dashboard with metrics developed by Q1 2019 Annual update and action based on identified activities	Completed		
Alliance to HEAL (IHI initiative)	Population Health	Mayo Healthcare La Crosse Community Foundation Heroin & Drug Task Force La Crosse County Health Department	Plan developed by Q1 2019 Measures added based on plan \$ community contribution	<p><u>Primary outcomes</u> Overdose deaths in 2019: 22 overdose deaths in La Crosse county in 2019</p> <p>Non-fatal Overdose Cases: 241 non-fatal overdose cases in 2019</p> <p># of "Active Total" clients in medicated assisted treatment by Quarter:</p> <p>Q1:</p> <ul style="list-style-type: none"> • AMS: 356 • GHS: 186 • MCHS: 43 • ISRS: 30 <p>Q2:</p> <ul style="list-style-type: none"> • AMS: 373 • GHS: 184 • MCHS: 43 • ISRS: 12 <p>Q3:</p> <ul style="list-style-type: none"> • AMS: 365 • GHS: 188 • MCHS: 40 		

				<ul style="list-style-type: none"> • ISRS: 35 Q4: <ul style="list-style-type: none"> • AMS: 356 • GHS: 172 • ISRS: 26 Decrease Supply of Opioids prescribed: Decrease opioid prescriptions by 21 % (2017 to 2018) & 11% (2018 Qtr. 2 to 2019 Qtr. 2) See contribution next line		
Continue participation in community collaboratives (i.e.: Change Direction, LCPN, Better Together)		Trane Co LHI County health/human services departments Worksites United Way LAHI 7C's Health Initiative Change Direction LCPN Better Together	# lives impacted \$ contributed	Community contribution funds = \$89,500		
Support community recovery coaches	Trauma Services Providers Social Workers Nurses	Coulee Recovery Center	# of referrals made by Gundersen Health System for recovery coaches	Total Calls: 60 Total outside ED referrals: 4 (2- Gundersen Behavioral Health / 2-Medical Specialties Unit) Total peers Recovery Coaches worked with: 57		
Reduce the number of patients exposed to opioids in the management of pain	Providers Pharmacy Pain Management		# opioid prescriptions per 1000 patients # opioid pills per prescription	22.27 opioid prescriptions per 1000 patients		

				27.35 opioid pills per prescription		
Reduce harmful effects of drug addiction in pregnancy (Gunderkids)	Peds OB Family Medicine	HUB	# of youth still housed with parent(s)	Unable to retrieve data		

Identified Need/Health Issue: Reduce obesity & rate of diabetes

Goal: Leverage community partnerships to address obesity and improve outcomes among patients with diabetes						
Action	Resource (program)	Partnerships	Measure of Impact	2019	2020	2021
Develop dashboard that will identify and monitor impact of services	Population Health Program leaders		Dashboard with metrics developed by Q1 2019 Annual update and action based on identified activities	Completed		
Continue to develop weight loss initiatives (Winning Weighs, LEAP)	Nutrition services Peds Family Medicine Behavioral Health Bariatrics	YMCA	Participants % meeting identified program goals	Winning Weighs program was discontinued in June 2019.		
Deliver or partner with the HLC to implement disease management programs (HLWD, Dig Deep, Diabetes Support Group)	Population Health Physical Medicine Nutrition Services Behavioral Health Physical Therapy Endocrinology	YMCA	Participants HLWD – improved outlook on living with diabetes (post evaluation and overall health improvement) Dig Deep – % goal(s) met	Diabetes Support Group: Planning occurred in 2019. Implementation at HLC in progress in 2020. No HLWD workshops held at HLC.		
Address policies related to offering free or reduced cost services (i.e. anti-kickback, Stark)	External affairs	Federal legislators	Communication with legislators Testimonies Position papers	No progress to report		
Provide education and resources that engage the community (Minutes in Motion, 5210, other wellness challenges, Farm to	Population Health Pediatrics Marketing GMF	Local media School District(s) County Health Departments Worksites	Participation for targeted audience/population % meeting goal of program	Minutes in Motion • Participation: 3,847 including: 598 GHS employees 94 Businesses		

<p>School, Complete Streets)</p>		<p>Monroe Co Nutrition Workgroup Committee on Transit & Active Transportation (CTAT)</p>		<p>832 students</p> <ul style="list-style-type: none"> • 63% of those who reported minutes met program goal (1260 minutes) • 38% of those registered met program goal (1260 minutes) <p>Minutes in Motion School Program at Hamilton Elementary School</p> <ul style="list-style-type: none"> • 8 classrooms (131 students) participated in 6-week program • 100% of teachers responding to survey (n=10) were satisfied or very satisfied with the program and would participate again. <p>Healthy Living with Diabetes:</p> <ul style="list-style-type: none"> • 67 total registered attendees: <ul style="list-style-type: none"> ○ 22 in Onalaska ○ 19 in La Crosse ○ 9 in Sparta ○ 17 in Boscobel • 83% of participants indicated their confidence to manage their own or another's 		
----------------------------------	--	--	--	---	--	--

				diabetes was increased from beginning to end of workshop		
				Support community initiatives with community contribution funding to impact chronic disease = \$76,160		

Identified Need/Health Issue: Livable wage

Goal: Reduce the impact of poverty on poor health by 5% by 2021, by partnering with communities to address SDOH.						
Action	Resource (program)	Partnerships	Measure of Impact	2019	2020	2021
Develop dashboard that will identify and monitor impact of services	Population Health Program leaders		Dashboard with metrics developed by Q1 2019 Annual update and action based on identified activities	Completed		
Continue to support housing needs in La Crosse & Region	Population health Corporate Contributions 211	Collaborative to End Homelessness HUB	# people housed #HUB pathways completed	# people housed: <ul style="list-style-type: none"> • 44 Individuals (32 were chronically homeless individuals, 3 were veterans) • 14 Family Households 		
Continue to support affordable transportation options available throughout the region	External affairs Corporate Contributions HR Services Excellence Purchasing (Use of transportation & cost) Population Health Facilities	SMRT bus Local agencies & services providers (i.e. taxis, Uber, Lyft) Committee on Transit & Active Transportation (CTAT) La Crosse Area Planning Committee (LAPC)	# of riders of SMRT bus <ul style="list-style-type: none"> • Dollars spent on transportation for patients to home or appts <ul style="list-style-type: none"> ○ Payments to service providers ○ Corporate Contributions • Alternative options: <ul style="list-style-type: none"> • On campus #bike shelters/racks • Other goals met 	Riders of SMRT bus: <ul style="list-style-type: none"> • Ridership from 2018 to 2019 increased 29%. Gundersen employees now ride for free (work related). Approximately 50% riders are riding at least one time per week. Most used route is the red/yellow route – Viroqua/La Crosse. Dollars spent on transportation for		

				<p>patients to home or appts</p> <ul style="list-style-type: none"> • Payments to service providers \$13,906 • Corporate Contributions: \$20,000 <p>Alternative options:</p> <ul style="list-style-type: none"> • On campus #bike shelters/racks: 19 • Other goals met: <ul style="list-style-type: none"> ○ Continue programming for alternative transportation (specific to GHS employees) ○ Continue to sponsor community-wide Bike Week ○ Participation in community-wide bike share conversations (no financial commitment) 		
Support Neighborhood Plan (PPH) & JDC	External Affairs Population Health Facilities	City of La Crosse PPH Neighborhood Assn La Crosse Promise Habitat for Humanity Private developers	Identified goals met in the PPH & JDC plans <ul style="list-style-type: none"> • Investments made in PPH • # housing units built • Progress of grocery store 	JDC <ul style="list-style-type: none"> • Groundbreaking for Farnam Flats housing (with small retail) development; MVAC archeological process • Plaid Pantry property purchased by 		

				<p>private party – business dev’t (small deli/restaurant?)</p> <ul style="list-style-type: none"> • Continue investigation for investor/developer for grocery store <p>PPH</p> <ul style="list-style-type: none"> • 3 GHS employees received new home purchase incentive • WAFER Mobile Food Pantry initiated monthly schedule for neighborhood • Community Police continue engagement with neighborhood • Regular meetings with Hamilton School • Regular food drives for Hamilton/little pantry • Summer Meals delivered children at Poage and Powell Parks • La Crosse Promise buy/remodel for scholarships continues • Habitat for Humanity groundbreaking for future build 	
--	--	--	--	--	--

Continue to support and develop the current HUB model	Population Health Trauma Services OB Medical Social Services 211	United Way St Clare Health Mission County health departments Mayo La Crosse Community Foundation	# patients referred #pathways completed <ul style="list-style-type: none">• Decrease in cost• Decrease hospital & TEC visits• Increase office visits	Total # referred: 223 <ul style="list-style-type: none">• # GHS Patients: 45 Total # pathways completed: 1305		
Support the implementation of Social Determinants of Health screening and referral for Gundersen Health System patients and families	Quality Population Health 211 Primary care depts Social Services Nursing	Service agencies	% patients screened % patients with a need referred to service	Pilot program in progress at Gundersen Tri-County Memorial Hospital, Whitehall WI		
Address food insecurity in our service area by increasing screening of patients and partnering with related community organizations	Peds Population Health Nutrition Services	County Health departments Coalitions Food service agencies	Programs/screenings initiated	Partnership with WAFER Mobile Food Pantry to increase access to healthful food for residents living in neighboring Powell-Poage-Hamilton neighborhood. The mobile food pantry stops at the neighborhood center on the second Wednesday of each month. Quarterly GHS food drive to support two local school food pantries (Hamilton Elementary School, and Onalaska Schools Food Pantry). 2,049.5 pounds of food and personal care items		

				was collected and donated in 2019. GHS Summer Food Service Program: 3012 meals provided		
--	--	--	--	---	--	--