"Organized delivery systems have embarked on journeys of integration - efforts to create coordinated continuums of care for defined populations. In the process, a new type of entity, the "holographic" organization - one in which the whole system is contained and reflected in each of its parts - is emerging as a prototype for the twenty-first century delivery system."

Stephen M. Shortell, Ph.D., et al
Healthcare Forum Journal
President’s Message

Aurora Health Care continued its transformation into a broad-based health care system during 1992 and 1993. Aurora’s focus remains on providing high quality care in the most cost-effective settings. Organizationally there is a much broader understanding of what is required to accomplish this, and recognition of how interdependent the various parts of Aurora must become if we are to continue to follow our vision.

Aurora Health Care now has a presence in over 70 locations throughout eastern Wisconsin with a rich diversity of settings in which care is provided. This has been achieved in three ways: the addition of strong new partners, including premier physician groups, an additional visiting nurse association, and selected hospitals; the creation of strategic alliances with organizations such as Novus Health Group in the Fox Valley; and the establishment of new health centers in Pewaukee and Kewaunee.

An outstanding achievement of the management, board and medical staff at Sinai Samaritan Medical Center is merging three hospitals into the sole remaining downtown hospital needs to be mentioned. Sinai Samaritan Medical Center is vital to the health of Milwaukee’s central city, both in a service and in an economic sense. The Medical Center also provides certain distinguished tertiary services to a broader area. Sinai Samaritan and the State of Wisconsin have forged a strong partnership to assure essential services are available in Milwaukee.

Educationally, Aurora Health Care collaborates with various colleges and universities to provide extensive graduate medical education, clinical research, and community health education. A restructuring of Aurora’s affiliation with the University of Wisconsin has been accomplished and positive results are beginning to be evident.

While much has been done, much more needs to be done in the near future. Physicians throughout Aurora, including the full spectrum of practice models, have begun planning how to most effectively come together within a unified network for the delivery of health care services. Various models of how best to contract with employers, coalitions, employees, insurance companies and others are being piloted.

Aurora Health Care in conjunction with Ameritech has developed a nationally leading prototype of an electronic highway to move both clinical and administrative data. We must develop a system which integrates information on patients across services, entities, and time, to help create a basic patient health care record.

Aurora continues to develop and refine quality and cost measurement to assure movement toward achieving top quartile quality with cost in the lower third.

The marketplace is rapidly changing the way health care is organized and delivered, both in Wisconsin and throughout America. In contrast, the Capital Expenditure Review process, which was reinstated in Wisconsin during 1993, now threatens Wisconsin’s leadership position in health care reform in our country. CER severely hampers the development of a continuum of care. It needs to be repealed. At the same time a package of insurance reform initiatives needs passage to help maintain the momentum of reform.

Aurora Health Care intends to continue to lead the way in health care as we prepare ourselves for the 21st century.

G. Edwin Howe, president
Aurora Health Care
Developing a Continuum of Care

One of the primary goals of Aurora Health Care in 1992 and 1993 was to expedite the growth and development of the organization as a health care system, in order to provide a full spectrum of care throughout eastern Wisconsin. Substantial progress in this most important endeavor came both as a result of a dedicated team-building effort and as an outcome of strategic planning.

Expansion in 1992

Early in 1992, a phased approach was developed to expand Aurora into a regional system serving eastern Wisconsin. A formal program for affiliation was designed, the Aurora “Partnership Program,” and contacts were initiated with potential hospital and clinic partners in a geographic area stretching several counties north, south and west of Milwaukee. During the year, discussions took place with numerous hospitals, two of which completed formal affiliations with Aurora. The Aurora Medical Group affiliation program was also presented to numerous clinics in the region, with one completed acquisition and active discussions begun with several other clinics to explore affiliations.

During 1992, two Sheboygan County acute care facilities, Sheboygan Memorial Medical Center, in the city of Sheboygan, and Valley View Medical Center with a hospital and nursing home in Plymouth, affiliated with Aurora Health Care. The goal of both boards of directors was to achieve cost savings that would conserve patient care resources and enhance their delivery of high quality, cost effective care. Together in 1993, these two hospitals began to work with other local providers toward a more collaborative healthcare delivery system for Sheboygan County.

Later that year, The Sheboygan Clinic, a 56-physician group practice serving Sheboygan County and neighboring communities since 1922, joined Aurora Medical Group. With goals of cost containment and enhanced health care service value for area residents, this affiliation was another important step for the Aurora system toward a broader continuum of care.

TRANSFORMATION DYNAMICS

Breaking Out of the Old Paradigms

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Diversification in 1993

In 1993, Aurora Health Care continued to expand rapidly, both in size and in geographic scope. Early in the year, Milwaukee Psychiatric Hospital, a leading provider of psychiatric and addiction treatment services in the Milwaukee region, joined our system. Established in 1884, and affiliated with the Medical College of Wisconsin, Milwaukee Psychiatric Hospital considered joining a larger system critical to its ability to preserve the value of patient services in the challenging environment of health care reform.

Also in 1993, the Sheboygan Visiting Nurse Association completed an affiliation with the VNA of Milwaukee, thereby joining the Aurora system. Sheboygan VNA was founded in 1952 and provides a wide range of skilled nursing and other home health care services, through its offices in Sheboygan and Plymouth.

Aurora Medical Group contributed significantly to the system’s growth in 1993. By mid-year, three additional affiliations with existing clinics were announced, as well as plans to build two major ambulatory diagnostic and treatment centers. The first affiliation announcement came in April when the seven-group Wauwatosa-based practice, Clinic of Internal Medicine, formed in 1946, joined the Aurora system.

By May of 1993, plans for two new Aurora Medical Group diagnostic and treatment centers with adjoining medical office buildings had been unveiled in Kenosha and Waukesha Counties. The Kenosha facility, expected to open in the summer of 1994, and the Waukesha facility, by year-end 1994, will not only expand access to primary care, but offer a wide range of advanced diagnostic and outpatient treatment services.

In the summer of 1993, officials of two more large multi-site clinics announced their intention to affiliate with Aurora Health Care. First, Burlington Clinic, founded in 1952 and serving nine communities in Racine, Walworth and Kenosha Counties with 34 physicians made their decision to join Aurora Medical Group. Then, Hartford Parkview Clinic, a group practice serving Hartford and surrounding communities in Washington and Dodge Counties since 1976, and staffed by 14 full-time and 19 part-time physicians announced their decision to affiliate.

The Aurora system had grown by two additional hospital affiliations by mid-year 1993, as well. Hartford Memorial Hospital, founded in 1916, and currently operating 71 inpatient beds, chose to join Aurora Health Care in order to enhance its services to the community with the help of a strong partner. Two Rivers Community Hospital, operating 33 inpatient beds and a nursing home in Manitowoc County, joined Aurora to improve its cost-effectiveness through the benefits a large system can provide.

Formation of Alliances and Networks

Also last year, the Aurora Pharmacy, Inc. was formed as a commercial project of Aurora Health Care Ventures, our only for-profit subsidiary. Pharmacy operations were initiated at Newtowne Medical Group and Franklin Medical Center and planned for numerous other ambulatory and outpatient locations within the Aurora Health Care system, in order to improve convenience for our patients.

In August of 1993, Aurora Health Care formed a strategic alliance with several Fox Valley health care organizations. United Health
HMO of Wisconsin, Fox Valley Medical Enterprises and Novus Health Group linked with Aurora in order to develop the infrastructure necessary for an "accountable health plan" for Eastern Wisconsin, which could improve access to quality health care at a lower cost. Under anticipated state and national health care reform, such health plans are expected to play a lead role in contracting with employers and government purchasing pools to meet employee and member health care needs.

A joint venture was developed with Ameritech to operationalize an innovative health care information system community-wide. The Wisconsin Health Information Network (WHIN) was launched in May of 1992, and by mid 1993 had contracts in place with numerous hospitals and physician groups, both within and outside the Aurora system, in communities throughout Wisconsin. (Full description of WHIN appears on page 17.)

Another important accomplishment of 1992-93 was the development of a physician network designed to function as a preferred provider organization for employees of the Aurora Health Care system. Implemented in August of 1993, the Aurora Employee Health Network has already served to significantly increase employee usage of Aurora hospitals and clinics and the private practice physicians in the network. The more success we can have with cost saving initiatives like this, the more value we can provide to our patients across the system. Like other employers, we need to manage our health care costs effectively in order to reduce their impact on the price of our services.

As 1993 drew to a close, Aurora continued to find health care providers interested in forming partnerships that would enable them to better serve their communities. One such provider was General Clinic, with 19 physicians in West Bend and Jackson, preparing to join Aurora Medical Group in order to preserve the quality and accessibility of their services in a challenging healthcare marketplace.

Focus on Health Care Value

We have chosen to limit the scope of the Aurora Health Care system to Eastern Wisconsin, where we expect there to be a reasonable amount of price competition in each community. In these areas, market forces can work to produce vigorous competition for contracts with employers and purchasing pools, and greater value for the consumer. As the system continues to grow, significantly greater economies of scale are achieved and a greater percentage of the health care dollar can be spent on direct patient care to improve its quality.

"Change brings feelings of excitement, anticipation, fear of an uncertain future. With our industry in the midst of one of the greatest upheavals in the history of modern health care, this is especially true today.

"To provide cost-effective care for the consumer; and long-term stability for health care providers, the acute care and tertiary parts of the system need to have close relationships. We want to provide convenient access to high quality, reasonably priced care at the local level, and a critical mass of tertiary care at the regional level in order to achieve the highest quality and lowest cost possible. It's exciting to be working within the Aurora system to improve the value of our services here in Sheboygan County."

Patrick J. Trotter, president
Sheboygan Memorial Medical Center and Valley View Medical Center

In the St. Luke's Medical Center Tender Loving Care program, specialized day care is provided for children with minor illnesses.
Today, the organizations that form Aurora HealthCare remain dedicated not only to the promotion of health, the prevention of illness and the provision of state-of-the-art diagnostic and treatment services, but also to the advancement of medical education and clinical research. We are working together to provide innovative and responsible health care delivery, and to improve the quality of life for the people of Wisconsin.

Improving Access to Primary Care

Providing convenient access to primary care is another essential element of delivering health care on a regional basis. To accomplish this goal, a system must strengthen its outreach in both urban and rural areas.

Increasing the Supply of Primary Care Doctors

Crucial to improving access to primary care is the training of primary care physicians. The effort underway at the national level to shift more of our limited resources into the provision of cost saving preventive care must be supported at the regional level by significantly increased availability of primary care practitioners to deliver that care.

In 1992, we set as one of Aurora’s goals the strengthening of our graduate medical education programs, and that goal was met. In 1993, Aurora’s three primary care residency programs exceeded the national average in match rates, filling all of their resident positions with top ranked medical school graduates. In the Family Practice program, where the national average match rate is 77%, Aurora’s match was 100%. In Internal Medicine, where the national average is 83%, and in OB/GYN, where the national rate is 98%, Aurora’s matches were still higher at 100%. All three programs also received full accreditation in 1993 from the Accreditation Council of Graduate Medical Education.

Focusing on the Central City

When the issue of access to care is raised, we think first of people in underserved geographic areas or population groups. Indeed, an urban medical center must work particularly hard on program development, reimbursement issues, physician recruitment, and community service, in order to effectively serve people in its surrounding neighborhoods.

At Sinai Samaritan Medical Center, the appointment of a new medical director for the primary care center of excellence, and the recruitment of a number of primary care physicians in 1992 and 1993 were key steps toward improving the primary care base at the Medical Center.

Staff of the Milwaukee Heart Institute are actively engaged in outreach to local businesses, providing screenings and wellness education to their employees in the workplace.
Also in 1992, work began on obtaining a “Health Provider Shortage Area” designation for the area east of 12th Street in the city of Milwaukee. This effort continued to successful completion early in 1993, thereby improving Medicare reimbursement for the physicians serving in the central city.

Throughout its long history, Sinai Samaritan Medical Center has provided primary care and preventive services in Milwaukee. New initiatives are launched every year, and 1992 and 1993 were no exceptions. Highlights from the past two years include the following:

- OB/GYN faculty and midwives from Sinai Samaritan provided obstetrical care for patients at the Isaac Coggs and Johnston Clinics. The prenatal care coordination program was also very successful with over 1,200 patient visits in 1993.

- Women’s Health Services received grants to assist sexual assault victims and developmentally disabled infants. The department also won the Community Service Award from the March of Dimes for its Stork Nest Program activities.

- The Parish Nursing Program provided health care information, screenings and referral to six inner city parishes. Sinai Samaritan was also actively involved in the city-wide Start Smart Program, the First Time Parent Project and the city’s Healthy Start program.

"System integration is critical today because of the socioeconomic conditions and demographics of our patients. Populations are mobile and resources are limited. To the extent we can address affordability and efficiency issues, we have a better chance of improving the health status of the communities we serve."

William Jenkins, president
Sinai Samaritan Medical Center
Aurora HealthCare

Mammography, as offered at the Coleman-Soref Breast Diagnostic Center, is an excellent example of a preventive health care service that saves lives.

• Aurora Medical Group expanded its primary care sites dramatically and launched the development of new access locations in Kenosha and Waukesha Counties.

• Valley View Medical Center expanded and upgraded its services including the outpatient surgical area, laboratory, CT, rehabilitation, and nuclear medicine services, all enabling the medical staff to better serve patients in Plymouth and the surrounding rural area.

• Milwaukee Psychiatric Hospital restructured its patient service delivery system to improve access to mental health care, adding outpatient counseling sites in New Berlin, Franklin and Glendale.

• The Visiting Nurse Association expanded its outreach in the metro area, opening home health care offices in Hartford and Cedarburg in 1993.

A System-Wide Priority

While large urban areas present some of the greatest challenges in assuring adequate access to care, a central city is by no means the only place primary care needs to be a priority.

Throughout the Aurora system, increased emphasis is being placed on providing convenient access to primary care. Examples of our commitment to community outreach and providing care in cost-effective local settings are numerous:

• Under a $176,000 grant from the Bader Foundation, Sinai Samaritan provided care in its Russian immigrants health program.

• A $30,000 grant through the Ryan White Fund enabled the medical center to support a Spanish-speaking nurse working with AIDS patients.

• With Bader Foundation support, Sinai Samaritan served as a participant in a consortium with Jewish Community Services, Jewish Federation, and Milwaukee Jewish Home which developed an adult day care program for the frail elderly.

A newborn gets plenty of cuddling at Two Rivers Community Hospital, where 392 of the 7331 births in the Aurora system occurred in 1993.

• St. Luke's Medical Center last year began offering an outreach program to congregations on Milwaukee's south side, employing parish nurses to improve access to health care.

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A newborn gets plenty of cuddling at Two Rivers Community Hospital, where 392 of the 7331 births in the Aurora system occurred in 1993.
Managing Resources to Improve Quality and Control Costs

In a regional health care system, it is essential for medical centers that provide acute and critical care services to focus on delivering high quality, state-of-the-art patient care. That goal cannot be reached, however, without a serious commitment to expense control, technological advancement and facility development. Both St. Luke's Medical Center and Sinai Samaritan Medical Center, Aurora's major urban medical centers, have demonstrated these commitments in significant ways over the past two years.

In 1992, St. Luke's had its best year in recent years in managing costs, with expenses increasing only two-thirds as much as volume increased during the year. Again in 1993 expenses were kept under budget, exceeding targets by nearly $4 million.

Increasing numbers of contracts with insurers and employers have resulted from St. Luke's ability to control its costs. In 1992 and 1993 numerous large St. Luke's Heart Plan contracts and several smaller ones were signed, providing packaged pricing of hospital and physician services for cardiac treatment. Moreover, the Medical Center was awarded the Blue Cross Center of Excellence designation for its high quality and cost-effective heart transplant program.

During 1992 St. Luke's expanded its facilities by completing the cardiovascular area, the Medical Respiratory Intensive Care Unit, the Knisely cardiac bed tower, and the outpatient services project. In addition, plans were completed for the St. Luke's-New Berlin Health Care Center, which opened in November of 1993, to better serve St. Luke's patients in the wider metro area.

By expanding its emergency department, St. Luke's reduced emergency diversion hours in 1993 to less than 1% of the 1992 level. Total diversion hours declined from 717 in 1992 to a mere 5 hours in 1993, thereby providing far greater access to emergency care.

"The shared management information and support staff resources available within the Aurora system enable us to perform community needs assessment on a much more extensive and timely basis than we ever could as an individual hospital. As a result, we're able to carefully match our services to the needs of the community as we develop programs and facilities.

"Combining our efforts within a system also enables us to offer much stronger medical education programs than we could if St. Luke's offered programs as a solo hospital. Together we can attract better residents and provide better training."

Mark Ambrosius, president
St. Luke's Medical Center
Emergency personnel rushed more than 132,000 patients to the emergency departments of Aurora’s six acute care hospitals last year.

St. Luke’s also continued its technological advancement in numerous areas. Its cardiac services were strengthened, for example, with the expansion of electrophysiology facilities, the offering of radio-frequency catheter ablation, and the use of stents, transmyocardial revascularization, and lasers in angioplasty treatment.

At Sinai Samaritan, clinical consolidation continued in 1992 with the financial goal of $400,000 savings being not only met, but exceeded. A master facility plan was developed and helped shape decisions regarding facility improvements and capital acquisitions during 1992 and 1993. Several antiquated and inefficient buildings were razed in 1992, six areas of the medical center underwent renovation, and a second electrophysiology laboratory was constructed.

The Medical Center’s West Hudson Project resulted in documented savings of $4 million through productivity improvements and service consolidations throughout Sinai Samaritan. Productivity standards and flexible staffing systems were implemented to reduce the cost per patient day. Although some downsizing occurred as a result of the project, the affected employees found new positions within other Aurora affiliates, and layoffs were avoided.

Technological advancements have enabled delicate, less invasive procedures to replace surgery in many cases, as in the electrophysiology labs at Sinai Samaritan.

“Physicians have to be major players in a truly integrated health care system. They will become key decision makers about the care required and where it can best be delivered. Being part of a large network within a system, physicians will have far greater access to the information systems and outcome measures needed to improve the quality and cost-effectiveness of patient care.

“Physicians in all practice models are interested now in aligning with regional systems that will thrive under health care reform. In Eastern Wisconsin, Aurora Health Care is on the cutting edge, and a growing number of physicians believe that ours is the system to join.”

Eliot Huxley, M.D., president Aurora Medical Group
Aurora Health Care can be described as a “vertically integrated” system with “holographic” qualities. A vertically integrated system provides health care services along the whole continuum of care from disease prevention through treatment and rehabilitation, depicted here as a set of gears driven by the needs of a community.

At each of these points along the continuum, Aurora Health Care also demonstrates holographic qualities. Focus your attention on any one part, and you will see the essential elements of the entire system reflected.

**Primary Care** is provided not only by the physician service network and ambulatory care centers as you would expect, but also by the community hospitals, major medical centers, nursing homes and home care agencies. Every entity within the Aurora system shares in the mission to promote health and prevent disease.

**Acute Care** is provided by the hospitals in cooperation with services at other points along the continuum. Recognizing there is a limit to the resources available, Aurora’s acute care facilities work with other providers to reduce hospital admissions and lengths of stay, and to insure that care is delivered in the most appropriate, convenient and affordable settings possible.

**Tertiary Care** is an important focus of the major medical centers, where specialized treatment is provided to meet patients’ most critical needs, often at advanced stages of disease. Even at that point along the continuum, however, patient and family education brings prevention and rehabilitation into the picture.

**Extended Care**, provided in the rehabilitation centers, home health programs and skilled nursing facilities, helps people to regain maximum function and quality of life. These services often follow tertiary care episodes, may include acute level treatments, and always stress prevention of further injury or disease.

Over time, vertical integration creates a “seamless” system, which can eliminate the troublesome gaps between levels of care. By maximizing information links among providers, and minimizing unnecessary duplication of services, we can not only improve care for patients, but also hold down costs for payers — for the benefit of every community we serve.
In 1993 the Milwaukee Heart Institute opened providing a modern, efficient facility for the delivery of outpatient cardiac services and state-of-the-art diagnostics. Also last year, construction began on the new outpatient center at 12th and State Streets. This facility will house all of Sinai Samaritan's many on-site clinics, significantly improving the community's access to primary care and specialized outpatient services.

On the Aurora system level, many efforts were underway to support the Medical Centers' cost savings and quality improvements. A few of the many examples are cited below:

- Through the American Healthcare Systems purchasing contracts, Aurora Health Care affiliates significantly reduced medical supply costs. On one product alone, contrast media, St. Luke's Medical Center saved more than half a million dollars on its annual $2.6 million purchase.

- Aurora's Linen Services Department, through the replacement of disposable linens with reusables, helped Aurora Health Care facilities achieve considerable savings in the cost of surgical and patient care linens. Sinai Samaritan, for example, saved $124,000 in 1992, and $192,000 in 1993.

- Job restructuring was implemented in various affiliates in order to reduce costs and provide increased flexibility in key departments. Strategies were also implemented to reduce the use of overtime, temporary agencies, and costly contracting relationships. Part-time hires, per diem pools, summer employees, and intensive recruitment were used to reduce personnel costs.

A variety of computer system innovations and improvements have also been implemented within the Aurora Health Care system in order to improve the flow of information associated with efficient and effective patient care delivery. Those improvements include:

- high speed, wide area networks to provide voice and data communications;

- integrated data systems to facilitate scheduling, pre-certification, pre-admission, admission, ordering and billing, in order to eliminate the duplication of data;

Some of our most advanced levels of care are needed by our youngest patients, including this premature baby being treated in Sinai Samaritan's Neonatal Intensive Care Unit.

More than 2,000 heart surgeries were performed in each of the last two years at Aurora's tertiary care hospitals, St. Luke's and Sinai Samaritan.

Bone marrow transplant is one of several new cancer treatments offered at tertiary centers like St. Luke's to improve outcomes at advanced stages of the disease.
• a comprehensive patient orders database to improve the efficiency of radiology and lab test orderings;

• decentralized printing infrastructures to allow for real-time on-demand printing of information such as medication administration records and physician orders at the nursing units.

Throughout Aurora Health Care, cost and quality benchmarking has also begun in earnest. Not only the hospitals, but the Visiting Nurse Association, Aurora Medical Group and other entities within the system, are identifying regional or national benchmarks, in order to measure their quality and cost positions against emerging standards. It is Aurora’s goal to achieve quality levels in the upper quartile against established benchmarks, and cost positions below the 35th percentile.

Young and old alike take advantage of Sinai Samaritan's Easy Street Environments to speed their rehabilitation after an injury or stroke.

Building Healthier Communities

Across the nation, health care systems are contributing in many different ways to the building of stronger, healthier communities. Here in eastern Wisconsin, Aurora Health Care’s commitment to strengthening communities has been most evident during the past two years in the heart of Milwaukee, and 50 miles to the north in Sheboygan County.

Revitalizing a Central City Neighborhood

In Milwaukee, Aurora has provided significant support to the Campus Circle Project, a massive effort launched by Marquette University to redevelop the central city neighborhood which surrounds its campus. When the project was initiated, Aurora signed on as a partner, to help improve the safety and quality of life in the Avenues West neighborhood.

During the previous decade Sinai Samaritan Medical Center had spearheaded and then steadfastly supported the work of the Avenues West Association - an extensive group of local businesses and agencies dedicated to strengthening the neighborhood they served. Sinai Samaritan, and later Aurora, provided board leadership, staff time and resources to help the Association communicate and accomplish its objectives.

“Eight years ago our board of directors initiated a planning process for Hartford Memorial Hospital that involved analysis of national health care delivery trends as well as local and regional alliance options. Ultimately we wanted to become part of a system that would be one of the major players in southeastern Wisconsin.

“During our discussions, Aurora expressed a philosophy and values similar to ours. After the affiliation, everything has been as we envisioned. Aurora’s approach is very decentralized and yet offers us advantages like group purchasing, debt refinancing and information systems, which as a small hospital we otherwise would not be able to afford.”

Mark Schwartz, president
Hartford Memorial Hospital
In May of 1992, Aurora became the first Campus Circle partner to make a financial contribution, to the non-profit housing arm of the project, as a statement of confidence in its potential to create a thriving residential community. Our involvement in the Campus Circle Project is an expression of our commitment to being involved in the health of a community far beyond providing medical care to its residents.

**Promoting Health in Sheboygan County**

In mid-1992, Sheboygan Memorial Medical Center sought the support of Aurora Health Care in conducting an analysis of the health status of the population of Sheboygan County. With a goal of first comparing Sheboygan County residents' health statistics with state and national data, and then identifying and addressing areas of concern, the team set to work.

The Sheboygan County Department of Human Services played a key role in the planning process, eager to find new ways to help community residents adopt healthier lifestyles. A public and private sector partnership was launched within several months.

The data analysis specifically examined how the health of Sheboygan County residents measured up to Healthy People 2000 goals which had been set by the Wisconsin Department of Health and Social Services and at the national level as well. Five focus areas were identified in which the disease incidence was above recommended targets or trending upward in Sheboygan:

- Cardiovascular Disease - heart disease and stroke
- Cancer - lung, skin, colorectal and prostate
- Suicide
- Communicable Disease - hepatitis B and chlamydia
- Maternal/Child Health - first trimester prenatal care usage, and lead poisoning among children.

In May of 1993, Healthy Sheboygan County 2000 was officially launched at a community-wide meeting of public and private health and social service professionals, and concerned citizens. Objectives of the county-wide project included:

- Increasing community awareness of public health issues specific to Sheboygan County.
- Identifying existing organizations, agencies, citizen groups and health care providers currently addressing specific public health issues.
Staff from Milwaukee Psychiatric Hospital simulate a family conference held on the tranquil grounds of their campus, now the site of a full spectrum of outpatient, partial hospital, residential and inpatient programs.

- Forming a meaningful, action-oriented coalition of existing resources to insure all efforts made at addressing Sheboygan County quality of life issues would be well coordinated.

- Mobilizing community residents to take personal responsibility for adopting healthier lifestyles.

To help accomplish these goals, a community leader was approached to voluntarily assume the Community Coordinator role, and lead the Steering Committee comprised of public health professionals and private providers, including the three local hospitals. Five Community Health Committees were formed to address the focus areas.

Since the well-attended kick-off last May, the committees of Healthy Sheboygan County 2000 have been hard at work, bringing the combined skills of dozens of local experts to bear on challenging health issues in their community. Co-sponsorship of the County Mental Health Association's first Depression Screening Day; promotion of Smoke-Free Class of 2000 to sixth graders with the American Cancer Society, Heart Association and Lung Association, and a joint educational presentation at the School Administrators meeting are just three examples of the project's accomplishments.

While the benefits achieved thus far are just small steps toward a much larger goal, a major positive outcome has been the coalition-building among health care providers finding a common ground. With the help of area media and countless volunteer hours, the message of Healthy Sheboygan County 2000 is being heard.

If this momentum continues as the years pass, and individuals and families act upon the message, a healthier community should indeed emerge in Sheboygan by the year 2000.

“A health care system needs vision combined with common sense and compassion in order to succeed in its mission. It’s not by accident that we have common values expressed throughout the Aurora system. Those beliefs and values about how we work together result in a shared commitment to put the patient’s needs first.

“In the home environment we see very realistically what the patient is able to do, what the patient is facing. There is great value in being able to communicate that from the VNA to the hospital and the physician involved in the patient’s care.”

Mary Jane Mayer, president Visiting Nurse Association

While most of their home care clients are elderly, the Visiting Nurse Association - Sheboygan also cares for some very young patients.
Wisconsin Health Information Network

"To see the future of electronic communication in healthcare, where do you go? Silicon Valley? Boston's Route 128? North Carolina's Research Triangle? Try Milwaukee. By the end of this year, the biggest city in Wisconsin might be the first live site for a communications network exclusively devoted to healthcare-related transactions of all types. The proposed Wisconsin Health Information Network would handle any type of transaction using a common set of equipment and software: physician-hospital links, claims submission, funds transfer, insurance eligibility, utilization and preauthorization review and, eventually, image transmission."

So began a Modern Healthcare article appearing in May of 1992, two weeks after Ameritech announced a new business venture called Wisconsin Health Information Network (WHIN), believed to be the most extensive electronic health care network of its kind in the nation. The integrated WHIN system would allow Wisconsin firms in the health care community to electronically send and receive patient information, Ameritech's news release promised. WHIN would link proprietary systems of hospitals, physicians, laboratories, employers, insurance firms and others who access this electronic highway through the Ameritech telephone network.

Today that venture is a reality. An authorized specialist can use WHIN to get a patient's medical records in a matter of minutes. An insurance company or employer can use the network to streamline and expedite insurance claims processing. A hospital can use the network to dramatically reduce the creation and transmission of paper records and health care claims.

WHIN is a network that the health care community can use to improve patient care and reduce administrative costs, by electronically integrating patient information that is often fragmented among providers and payers. About one-fourth of today's health care costs are administrative. WHIN is expected to reduce those costs by 20 percent or more for its participants.

Concept Origin

The Wisconsin Health Information Network actually represents the second phase of a project begun by Aurora Health Care in 1985 to enhance electronic communications between its hospitals and its physicians. The initial phase involved a computerized link between a personal computer in the physician's office and the Hospital Information System. In 1992 this network was serving over 300 physicians and processing over 10,000 electronic clinical data requests per month.

Planning and Development

A 1990 planning effort identified the need for the network to be enhanced and expanded in three areas if it was to achieve its full potential. It had to take advantage of improved technology to make it faster and easier to use, it had to be opened up to include the entire community so that a complete patient medical record could be accessed, and it had to integrate other types of information such as patient insurance eligibility, library services, and electronic claims submission. A joint project involving
Aurora Health Care and Ameritech was begun in 1991 for the purpose of developing the necessary hard-
ware and software as well as the organization to implement and operate it.

**Incorporation of WHIN**

Wisconsin Health Information Network was incorporated in April of 1992 as a for-profit corpora-
tion. The WHIN staff is responsible for all aspects of marketing, implementing, operating and
supporting the network. The cost of operation is shared by all participants in the form of fees which are
based upon the value received. The corporation is currently owned by Aurora and Ameritech, but
additional investment by other providers, payors and employers is being encouraged.

**December, 1993 Status**

The network began pilot operation in October of 1992 and became commercially available in March
of 1993. By December 31 there were nine hospitals, five of which are not affiliated with Aurora,
and 586 physicians under contract. Letters of Intent have been signed by four additional hospitals out-
side the Aurora system, and several insurance companies. All-payor claims submission is currently
provided through a clearing house.

As the system exists today, it is capable of making a significant favorable impact on the reduction of
administrative costs. It can also allow for the reduction in diagnostic testing by allowing easy access to a
more complete patient record and facilitating the communication of this information throughout the
continuum of care. WHIN is unique in that it has integrated multiple forms of information; e.g. clinical
and insurance, from multiple sources into a single system to maximize the value to physician
participants. It has also demonstrated with the recent addition of five hospitals not affiliated with
Aurora, that electronic communications is one area where competitors will collaborate for the purpose of
reducing expensive duplication.

**Future Applications**

Future applications of WHIN will include radiographic images, prescriptions, library services, and a
fully automated patient record. Access and data entry will be improved through the use of technolo-
gies such as smart cards and cellular communication. Access will be extended as close to the patients as
their homes, and a clinical data base will be included so that the quality of care delivered can be
monitored and the utilization of resources can be managed throughout the Aurora network.

“**At the point of deliberating about an affiliation, we concluded that a free-standing psychiatric hospital
would be very vulnerable in the health care system of the future. We now believe that we made the
absolute right choice by joining Aurora Health Care.**

“**Through our affiliation, Milwaukee Psychiatric Hospital has saved in excess of $250,000 this
year in back room services, such as phone, laboratory, and insurance. We’ve been welcomed so warmly
that it feels as though we have been part of the Aurora system for many years.**”

Gerald Schley, president
Milwaukee Psychiatric Hospital
### AURORA HEALTH CARE

**Patient Service Statistics**

<table>
<thead>
<tr>
<th></th>
<th>1992*</th>
<th>1993**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Admissions</td>
<td>45,338</td>
<td>51,438</td>
</tr>
<tr>
<td>Inpatient Days</td>
<td>277,334</td>
<td>308,633</td>
</tr>
<tr>
<td>Average Length of Stay (days)</td>
<td>6.1</td>
<td>6.0</td>
</tr>
<tr>
<td>Physicians on Staff</td>
<td>1,822</td>
<td>2,130</td>
</tr>
<tr>
<td>Residents and Fellows</td>
<td>146</td>
<td>149</td>
</tr>
<tr>
<td>Allied Health Staff</td>
<td>156</td>
<td>242</td>
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<tr>
<td>Registered Nurses</td>
<td>2,039</td>
<td>2,265</td>
</tr>
<tr>
<td>Total Employees</td>
<td>8,432</td>
<td>10,718</td>
</tr>
<tr>
<td>Ambulatory Care Center Visits</td>
<td>106,255</td>
<td>698,194</td>
</tr>
<tr>
<td>Emergency Care Visits</td>
<td>109,755</td>
<td>132,761</td>
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<tr>
<td>Hospital Outpatient Visits</td>
<td>440,538</td>
<td>538,169</td>
</tr>
<tr>
<td>Outpatient Dialysis Treatments</td>
<td>31,902</td>
<td>39,236</td>
</tr>
<tr>
<td>Home Care Visits</td>
<td>94,424</td>
<td>150,012</td>
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<tr>
<td>Nursing Home Days</td>
<td>21,609</td>
<td>52,060</td>
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<tr>
<td>Cardiac Cath Lab Diagnostic and EP Procedures</td>
<td>10,260</td>
<td>10,737</td>
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<tr>
<td>Coronary and Peripheral Angioplasties</td>
<td>3,755</td>
<td>3,602</td>
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<tr>
<td>Heart Surgeries</td>
<td>2,102</td>
<td>2,103</td>
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<tr>
<td>Total Surgical Procedures</td>
<td>31,526</td>
<td>36,924</td>
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<tr>
<td>Births</td>
<td>6,497</td>
<td>7,331</td>
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<tr>
<td>Radiation Treatments for Cancer Patients</td>
<td>27,820</td>
<td>27,452</td>
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<tr>
<td>Inpatient Psychiatric and AODA Days</td>
<td>23,808</td>
<td>36,747</td>
</tr>
<tr>
<td>Inpatient Rehabilitation Treatments</td>
<td>332,979</td>
<td>369,371</td>
</tr>
</tbody>
</table>

* 1992 data includes information on St. Luke's Medical Center, Sinai Samaritan Medical Center, Sheboygan Memorial Medical Center, Valley View Medical Center, Visiting Nurse Association, Newton's Medical Group, Franklin Medical Center, Greater Milwaukee Dialysis Center, Partners In Care, Aurora Credit Union, and Aurora Health Care, Inc.

** 1993 statistics include all of the above and Milwaukee Psychiatric Hospital, Two Rivers Community Hospital, Hartford Memorial Hospital, Hartford Parkview Clinic, The Sheboygan Clinic, Burlington Clinic, and Visiting Nurse Association - Sheboygan.

---

**In the Greater Milwaukee Dialysis Center, patients with chronic kidney disease are being taught a new method of continuous dialysis that frees them from lengthy treatments at the Center several times a week.**

---

**Hospice care is a vital service of the VNA in Milwaukee, providing terminally ill patients with skilled nursing care in the comfort of their homes.**
AURORA HEALTH CARE, INC.

Years Ended December 31, 1992 and 1993

SOURCE OF FUNDS

<table>
<thead>
<tr>
<th></th>
<th>1992*</th>
<th>1993**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Services</td>
<td>$ 322,713</td>
<td>$ 382,143</td>
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<tr>
<td>Outpatient Services</td>
<td>104,333</td>
<td>162,374</td>
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<tr>
<td>Non-Patient Care Services</td>
<td>37,121</td>
<td>47,727</td>
</tr>
<tr>
<td>Total Net Service Revenue*</td>
<td>$ 464,167</td>
<td>$ 592,244</td>
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USE OF FUNDS

<table>
<thead>
<tr>
<th></th>
<th>1992*</th>
<th>1993**</th>
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</thead>
<tbody>
<tr>
<td>Salaries, Fees, and Fringe Benefits</td>
<td>$ 250,329</td>
<td>$ 331,215</td>
</tr>
<tr>
<td>Supplies</td>
<td>93,140</td>
<td>107,573</td>
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<tr>
<td>New Equipment and Facility Improvements</td>
<td>94,990</td>
<td>102,246</td>
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<tr>
<td>Maintenance, Rental, Insurance, Utilities and Other Business Expenses</td>
<td>53,761</td>
<td>70,755</td>
</tr>
<tr>
<td>Interest and Principal on Long-term Debt</td>
<td>13,731</td>
<td>102,016</td>
</tr>
<tr>
<td>Change in Working Capital and Borrowed Funds Expended</td>
<td>(41,784)</td>
<td>(121,722)</td>
</tr>
<tr>
<td>Total Funds Applied</td>
<td>$ 464,167</td>
<td>$ 592,244</td>
</tr>
</tbody>
</table>

*Includes Aurora Health Care, Inc.; Aurora Medical Group, Inc.; St. Luke’s Medical Center, Inc.; Sinai Samaritan Medical Center, Inc.; Visiting Nurse Association, Inc.; Aurora Foundation, Inc.; Franklin Medical Center, Inc.; Aurora Health Care Ventures, Inc.; Sheboygan Memorial Medical Center, Inc.; and Valley View Medical Center, Inc.

** Includes all entities listed above, and Milwaukee Psychiatric Hospital, Inc.; Hartford Memorial Hospital, Inc.; Two Rivers Community Hospital, Inc.; and Visiting Nurse Association - Sheboygan.

*** This figure is net after subtraction of charity care; and Medicare, Medicaid, and other third party allowances. Uncompensated care provided by the Aurora system totaled $191 million in 1992, and $241 million in 1993.

“The opportunity to return to Wisconsin this year to fill the role of president at Two Rivers Community Hospital was all the more appealing to me because of the hospital’s affiliation with Aurora Health Care in 1993. Aurora has assembled a very competent management team, composed of people who excel in their fields and are well respected by their colleagues in the health care industry.

“Being able to tap these resources at the system level will benefit not only our local administrative team, but also the community we serve in Manitowoc County.”

Steve Spencer, president
Two Rivers Community Hospital

Occupational health services are provided in many Aurora facilities including this St. Luke’s Rehabilitation Center where an occupational therapist encourages a patient in his work hardening program.
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AURORA HEALTH CARE VENTURES

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Marlin Stein
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Donald J. Nestor, Senior Vice President
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Victoria O'Brien, Vice President
Robert O'Keefe, Vice President
Leen D. Rakowski, Vice President
Thomas J. Sheehan, Vice President
John A. Steinman, Jr. Vice President
Tony M. Torres, Vice President
Lorel E. Walsh, Vice President
<table>
<thead>
<tr>
<th>Newtowne Medical Group</th>
<th>Visiting Nurse Association of Milwaukee</th>
<th>St. Luke's Medical Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinics in Milwaukee, Fox Point and Wauwatosa. Includes: Coleman Soef Breast Diagnostic Center</td>
<td>Offices in Milwaukee, Hartford and Cedarburg</td>
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</tr>
<tr>
<td>The Sheboygan Clinic</td>
<td>Visiting Nurse Association of Sheboygan</td>
<td>Sinai Samaritan Medical Center</td>
</tr>
<tr>
<td>Hartford Parkview Clinic</td>
<td>St. Luke's Medical Center services</td>
<td>Sheboygan Memorial Medical Center</td>
</tr>
<tr>
<td>Clinics in Hartford, Hustisford and Slinger</td>
<td>Includes: Franklin Medical Center, Family Practice Center, New Berlin Health Care Center, Surgery Center and four Rehabilitation Centers</td>
<td></td>
</tr>
<tr>
<td>Burlington Clinic</td>
<td>Sinai Samaritan Medical Center services</td>
<td>Valley View Medical Center</td>
</tr>
<tr>
<td>Clinics in Burlington, Delavan, East Troy, Genoa City, Lake Geneva, Paddock Lake, Twin Lakes, Waterford and Wind Lake</td>
<td>Includes: Milwaukee Heart Institute, Family Care Clinic, Johnston Primary Care Clinic, Sports Medicine Clinic and two Mental Health Clinics</td>
<td>Includes: Valley Manor Nursing Home</td>
</tr>
<tr>
<td>Aurora Health Center - Kenosha</td>
<td>Milwaukee Psychiatric Hospital services</td>
<td>Milwaukee Psychiatric Hospital</td>
</tr>
<tr>
<td></td>
<td>Offices in Franklin, Glendale, New Berlin, and Madison</td>
<td></td>
</tr>
<tr>
<td>Aurora Health Center - Pewaukee</td>
<td>Aurora Health Care Ventures services</td>
<td>Hartford Memorial Hospital</td>
</tr>
<tr>
<td></td>
<td>Includes: Bayshore Clinical Laboratories and three Greater Milwaukee Dialysis Centers</td>
<td></td>
</tr>
<tr>
<td>General Clinic</td>
<td>Two Rivers Community Hospital</td>
<td></td>
</tr>
<tr>
<td>Clinics in West Bend and Jackson</td>
<td>Includes: Hamilton Memorial Home</td>
<td></td>
</tr>
</tbody>
</table>
Mission Statement
The Aurora Medical Group is a network of ambulatory facilities providing physician, diagnostic, and treatment services which are dedicated to high quality, personalized, and cost-effective care for the residents of eastern Wisconsin.

The Aurora Medical Group is committed to improving and maintaining the health status of the population, to providing health care services in geographically convenient facilities, and to meeting the medical, emotional, and personal needs of patients.

The Aurora Medical Group will be the preferred workplace for physicians desiring employment in the group practice setting. It will be structured to accommodate the addition of individual physicians, small physician groups, clinics, and start-up sites.

The Aurora Medical Group will provide opportunities for physicians to participate in medical education and community service.

The Aurora Medical Group will be the preferred workplace for all staff desiring employment in the medical group setting. The Aurora Medical Group will maintain an ethnically and racially diverse staff sufficient to meet quality, volume, and growth needs.

The Aurora Medical Group will contribute to the mission of Aurora Health care as a comprehensive and integrated regional health care system.

History
Aurora Medical Group was incorporated in 1990 as a not-for-profit physician services entity within the Aurora Health Care system. By 1993, Aurora Medical Group employed more than 150 physicians located in 25 primary care facilities throughout eastern Wisconsin.

The network is organized into geographic divisions. By 1993, Aurora Medical Group encompassed:

- Newtowne Medical Group division, with three locations in Milwaukee County, one of which houses the Coleman Soref Breast Diagnostic Center;
- The Sheboygan Clinic division, with ten sites in Sheboygan, Ozaukee and Manitowoc Counties;
- Burlington Clinic division, with nine locations in Racine, Walworth and Kenosha Counties; and
- Hartford Parkview Clinic division, with three sites in Washington County.

In addition, Aurora Medical Group has launched the development of two Ambulatory Health Care Centers, to be located in Kenosha County and Waukesha County. These two facilities will geographically broaden the network, and help meet the need for additional primary care physicians in two of the fastest growing areas of southeastern Wisconsin.

- Newtowne Medical Group
  Downtown Milwaukee location: 1575 RiverCenter Drive
  Northshore location: 8675 N. Port Washington Road in Fox Point
  Wauwatosa location: 6745 W. Wells Street
• The Sheboygan Clinic
  Robert T. Willis, M.D. — President
  James Gularek — Administrator
  Main clinic location:
  2414 Kohler Memorial Drive, Sheboygan

  Branch facilities:
  Calumet Eye Center, Chilton
  The Cedar Grove Clinic, Cedar Grove
  Eye Care Center of Manitowoc
  Eye Care Center of Two Rivers
  The Kiel Clinic, Kiel
  The Plymouth Medical Group, Plymouth
  Port Eye Center, Port Washington
  The Sheboygan Clinic - South
  The Random Lake Clinic

  • Burlington Clinic
  Lief Erickson, M.D. — President
  Thomas Grossman — Administrator
  Main clinic location:
  248 McHenry Street, Burlington

  Branch facilities located in:
  Delavan
  East Troy
  Genoa City
  Lake Geneva
  Paddock Lake
  Twin Lakes
  Waterford
  Wind Lake

  • Hartford Parkview Clinic
  Saleem Bakhtiar, M.D. — President
  Andrew J. Safranski — Administrator
  Main clinic location:
  1004 E. Sumner Street, Hartford

  Branch facilities:
  Slinger Parkview Clinic, Slinger
  Hustisford Parkview Clinic, Hustisford

  Corporate Offices
  Aurora Medical Group
  3000 West Montana Street
  P.O. Box 343910
  Milwaukee, Wisconsin 53234-3910
  (414) 647-3000

  Physician specialties
  Allergy
  Asthma
  Cardiology
  Dermatology
  Family Practice
  Gastroenterology
  Hematology
  Immunology
  Internal Medicine
  Neurology
  Obstetrics & Gynecology
  Occupational Medicine
  Oncology/Hematology
  Ophthalmology
  Orthopedic Surgery
  Otolaryngology, Head & Neck Surgery
  Pediatrics & Adolescent Medicine
  Psychiatry
  Pulmonology
  Radiology
  Rheumatology
  General Surgery
  Chest & Vascular Surgery
  Skin Surgery
  Urology & Urological Surgery

  Professional services
  Audiometry
  Hearing Aids
  Optometry
  Clinical Laboratory
  Oral Surgery
  Community Health Education
  Outpatient Oncology
  Dental Services
  Intravenous Therapy Services
  Diagnostic Imaging
  Pathology Consultant
  Dietitians
  Pharmacy
  Impotency & Sexual Dysfunction Clinic
  Physical Therapy Services
  Infertility Clinic
  Physician Referral Service
  Mammography
  Podiatry
  Mental Health Services
  Social Workers
  Nurse Practitioners
  Walk-In Clinic
  Occupational Health
  Occupational Medicine
  Optical Department
1992-93 Fact Sheet

VISITING NURSE ASSOCIATION OF MILWAUKEE, INC.

Patricia Dalton — Board Chairman
Mary Jane Mayer — President
Denise Augustin — Vice President, Business Development
John Beran — Vice President, Finance
Mary Beth Marciniak — Vice President, Nursing Services

1992 Patient Service Statistics

<table>
<thead>
<tr>
<th>Service</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Home Care Visits</td>
<td>106,000</td>
</tr>
<tr>
<td>Private Duty Nursing Hours</td>
<td>35,000</td>
</tr>
<tr>
<td>New Admissions</td>
<td>3,790</td>
</tr>
<tr>
<td>Total Patients Cared For</td>
<td>5,000</td>
</tr>
<tr>
<td>Mobile Meals Served</td>
<td>170,000</td>
</tr>
<tr>
<td>Total Employees</td>
<td>230</td>
</tr>
<tr>
<td>Volunteer Hours</td>
<td>8,500</td>
</tr>
</tbody>
</table>

Our History & Heritage

The Visiting Nurse Association (VNA) of Milwaukee was founded in 1907 to provide and teach proper care of the sick. For over 80 years the VNA has distinguished itself as a quality provider of home health care services and a voice for those underserved by the health care system.

An affiliation with Aurora Health Care was formed in 1988 to facilitate expansion into new areas of home health care service, and to achieve cost savings and greater collaboration with area hospitals to better address unmet healthcare needs. In 1992, the VNA of Milwaukee provided over 100,000 home care visits by nurses, therapists, aides and homemakers to patients discharged from 23 area hospitals.

Mission Statement

The Visiting Nurse Association is the leading home health provider in Wisconsin dedicated to personalized, high quality, cost-effective care. VNA's services allow the patient and his/her family to achieve and maintain their maximum level of independence in the community.

Patient Services

- High tech nursing services (Intravenous therapy)
- VNA Community Hospice
- Long term care
- Rehabilitation
- Preventive service

Accreditations

- Joint Commission on Accreditation of Healthcare Organizations
- Medicare and Medicaid Licensed by State of Wisconsin
- Charter Member of VNAs of America
- Member of Wisconsin Homecare Organization

Community Service

Shoo the Flu Program

In 1992 and 1993 the VNA of Milwaukee provided influenza vaccines to 35,000 people in 120 clinic sites located in shopping centers throughout southeastern Wisconsin.
VISITING NURSE ASSOCIATION OF SHEBOYGAN, INC.
Dennis L. Ohi — Board President
Robert Walters — Executive Director

Mission Statement
We are a leading advocate for quality independent living in the least restrictive environment. We provide comprehensive health, rehabilitative and supportive home care services through caring and well-trained staff, both paid and volunteer. As a non-profit United Way agency, we provide these services in a cost effective manner in Sheboygan and surrounding communities.
The Visiting Nurse Association of Sheboygan provides a variety of home care services to Sheboygan county and bordering counties: Ozaukee, Calumet, Fond du Lac, Washington and Manitowoc. We are certified by Medicare and Medicaid and licensed by the State of Wisconsin. Services are available 24 hours a day.

1992 VNA Highlights
• Celebrated of 40 years of service to the Sheboygan Area
• Implemented Quality Improvement Program
• First Medicare Certified Hospice in Sheboygan Area; over 70 clients served in the first year
“1992 was a celebration of our first forty (40) years as a leader in the lakeshore area home health care industry. Its challenges and accomplishment have helped to prepare us for the important role home health care will play in the total health care arena of the future. Our celebration theme accurately described us as ‘Masters at Caring - Celebrating the Past and Designing the Future.’”
Rachel Jackson, R.N.

Patient Services
Skilled Nursing Services
• Patient Education, Family Instruction, Medication Supervision & Guidance, Heart & Blood Pressure Monitoring, Wound Care, Injections, Bladder & Bowel Management, Ostomy and/or Catheter Care
• IV Therapy, Chemotherapy, Nutrition Counseling
• Enteral Feeding

Home Health Aides
• Personal care
• Temperature, Pulse & Weight Monitoring
• Monitoring of Food Intake & Elimination
• Exercise Program Management

Visiting Nurse Association of Sheboygan, Inc.
307 Lincoln Avenue
Sheboygan, WI 53081
(414) 458-4314 (Sheboygan)
(414) 893-4314 (Plymouth)
1992-93 Fact Sheet

Mission Statement
Valley View Medical Center is a private, not-for-profit organization which strives to provide high quality, efficient health care services through innovative leadership. This is accomplished with the support and dedication of our valued employees, prudent use of technology, and meeting the evolving needs of our area's patients, physicians, and payers. We are an organization dedicated to healing the complete person in mind, body and spirit in a manner reflecting concern and respect for the dignity of the individual.

Our History and Heritage
Plymouth Hospital opened its door on October 1, 1917 as a 24 bed facility, expandable to 35 beds in times of crisis.
1927 — the hospital expanded, adding 12 more beds, a laboratory and x-ray room with limited emergency facilities.
1957 — a $500,000 renovation provided a new Obstetrics Department and nursery, a major surgery suite, new front entrance, lobby, office and conference space.
February, 1970 — a new 48 bed acute care hospital was dedicated.
1982 — the 60 bed Valley Manor Nursing Home and 32 unit South Horizon Apartments for the elderly were added.
1984 — Plymouth Hospital expanded to include day care for children, and a professional office building, and subsequently changed its name to Valley View Medical Center.
1990 — a new Emergency Services Department was dedicated which allows Valley View Medical Center to offer enhanced and expanded services to our community and outlying areas.

Accreditations
• Joint Commission on Accreditation of Healthcare Organizations
• College of American Pathologists Laboratory Accreditation
• Mammography Program Accreditation through the American College of Radiology

Patient Services
Patient Care
Critical Care Unit
Obstetrics
Outpatient Services
Respiratory Therapy
Surgery
Chemotherapy
Medical/Surgical Services
Same Day Surgery

Diagnostic Services
Laboratory Services
Nuclear Medicine
Radiology Department

Rehabilitation Services
Cardiac Rehabilitation
Occupational Therapy
Physical Therapy
Speech Pathology
Sub-Acute Care Unit (Swing Bed)

Emergency Services
Staffed with a 24 Hour In-House Physician
Primary Care Walk-In Clinic
Drug Screening
1992 Patient Service Statistics

Adult Inpatient Admissions 836
Swing Bed Admissions 68
Pediatric Inpatient Admissions 142
Days of Adult and Pediatric Care 3,574
Swing Bed Patient Days 665
Average Length of Stay (days excluding swing bed) 3.7
Emergency Visits 3,662
Primary Care, Pediatric & Family Care Visits 592
Operating Room Cases (Inpatient) 265
Same Day Surgeries 889
Rehabilitation & Sports Medicine Treatments 7,368
Women’s Health Assessment & OB/GYN Visits 943
Births 120

Health Education Programs
- Babysitting Classes
- Infant/Child CPR Classes
- Birthing Classes
- Nutritional Counseling Classes
- Cancer Screening Programs (Prostate & Skin Cancer)
- Diabetic Screening
- Diabetic Education
- Needle Box Exchange Program
- Hepatitis B Education & Vaccination
- Freedom 55/65 Program
- Lifestream Women’s Health Center
- Support Groups/Classes
- Cardiac Rehabilitation & Education

Medical Staff
Active Staff 12
Courtesy Staff 34
Consulting Staff 37
Medical Affiliate Staff 10
Dental Staff 8
Honorary Staff 6

Community Partnerships
Healthy Sheboygan County 2000

“Our strength as a primary care hospital comes from a strong foundation of dedicated physicians and employees. Our role in the community extends beyond the inpatient hospital to include long term care, independent living for retired persons and ambulatory care. Together with our community, we are looking forward to serving the needs of western Sheboygan County for this decade and into the next century.”

Jim Williams, executive vice president

Valley View Medical Center
901 Reed Street
Plymouth, Wisconsin 53073
1992-93 Fact Sheet

Frank E. Pringle — Chairman of the Board
Patrick J. Trotter — President
Donald D. Ohme, M.D. — Chief of Staff
Sheila R. Simenz — Vice President Patient Care Services
Rae Ellen S. Stager — Vice President Business & Community Services
T. Gregg Watson — Vice President Quality & Resource Management

Mission Statement
Sheboygan Memorial Medical Center is a community sponsored, non-profit organization providing innovative leadership through high quality, cost-effective, health care services. This is accomplished by the dedication of our valued employees, prudent use of technology and meeting the evolving needs of our patients, physicians and payers.

Our healing process is dedicated to the complete person in mind, body and spirit through diagnosis, treatment, surgical intervention, rehabilitation, counseling and education. Our patient care philosophy is to provide personalized, compassionate care reflecting concern and respect for the dignity of the individual.

Patient Services
Patient Care
Cancer Treatment Services
Chemical Dependency Treatment Services
Critical Care and Cardiovascular Services
Hospice Care
Mental Health Services
Obstetrics
Occupational Health Services
Orthopaedic Unit
Pediatrics
Social Services
Surgical Services with Outpatient Treatment offered through the Surgi-Center
Weight Management Services
Diagnostic Services
Breast Cancer Screening Program
Cardiac Catheterization Lab
CT Diagnostic Scanning

Laboratory Services
Lithotripsy Unit for Kidney Stone Removal
MRI Diagnostic Scanning
Nuclear Medicine
Radiology
Respiratory Therapy
Ultrasound Imaging
Vascular Laboratory
Rehabilitation Services
Cardiac Care/Rehabilitation
Hand Injuries Management
Industrial Rehabilitation Services
Occupational Therapy
Outpatient Clinics- Orthotics, Prosthetics, Wheelchair and Adaptive Seating
Physical Therapy
Pulmonary Rehabilitation Services
Rehabilitation Unit at Memorial, in cooperation with St. Luke’s Medical Center, Milwaukee
Speech and Language Pathology
Emergency Services
Lifeline
Orange Cross Ambulance
Poison Control Center/Micromedex CCIS Poison Information Center
Sexual Assault Treatment Services
Trauma Room
24 hour physician coverage
Other
Chaplaincy Program
Community Education Programs
Employee Assistance Program
Freedom 55/65 Elderly Benefits Club
Health Screenings
Kids’ Care Center
LifeStream Women’s Health Center
Occupational Injury and Case Management Services
Support Groups
Pharmacy
Tumor Registrar
Volunteer Services
Work Hardening Program
Accreditations

- Joint Commission on Accreditation of Healthcare Organizations
- Commission on Accreditation of Rehabilitation Facilities
- Cancer Program Accreditation through the American College of Surgeons
- Accreditation Council for Continuing Medical Education of the American Medical Association
- State of Wisconsin Department of Health and Social Services Certification for AODA Inpatient Emergency Care, AODA Outpatient, AODA Day Treatment, AODA Inpatient, and Medical Health Outpatient Services
- College of American Pathologists Laboratory Accreditation
- C.L.A.
- American Association of Blood Banks
- U.S. Food and Drug Administration
- Mammography Program Accreditation through the American College of Radiology

Medical Staff/Faculty

Active: 136
Consulting: 16
Courtesy: 18
Honorary: 34

Professional Education Programs

Sheboygan Memorial Medical Center has clinical education contracts with Marquette University, University of Wisconsin-Madison and LaCrosse, MATC, and NE Technical College for physical therapy; with University of Wisconsin-Milwaukee, MATC, Mount Mary College, Western Michigan University and the Medical College of Ohio for occupational therapy.

Sheboygan Memorial Medical Center has the following clinical affiliations: Lakeshore Technical College - medical secretary, nursing and medical assistant programs, associate degree registered nurses, student training program for radiologic technologist; Moraine Park Technical College - medical record technician program; Silver Lake College - associate degree registered nurses.

Sheboygan Memorial Medical Center/Orange Cross Ambulance has clinical affiliations with Lakeshore Technical college for paramedic training program.

Community Partnerships and Memberships

- American Hospital Association
- Wisconsin Hospital Association
- Wisconsin Association for Women's Health
- Sheboygan County Mental Health Association
- National Hospice Organization
- American Heart Association of Wisconsin
- American Diabetes Association of Wisconsin
- Sheboygan County Chamber of Commerce

Community Projects

- Healthy Sheboygan County 2000
- Salvation Army

Cooperative Educational Programs

- Partnership in Education with Jefferson Elementary School
- Lakeshore Technical College
- Sheboygan School System Shadow/Mentor Program

Our History & Heritage

1933 — Sheboygan's new 94-bed hospital opens thanks to substantial funding from the Lutheran Community and the Eliza Prange Estate.

1950 — Psychiatric service opens making Memorial one of three acute care Wisconsin hospitals offering inpatient psychiatric care.

1970 — Following several renovations and additions, bed total expands to 250; Memorial introduces first Intensive Coronary Care Unit in county.

1974 — South Wing completed with county's first designated emergency center with 24-hour in-house physicians.

1986 — Community Health Systems formed to provide shared management for Sheboygan Memorial Medical Center and Valley View Medical Center.

1992 — Sheboygan Memorial Medical Center becomes affiliate of Aurora Health Care.

Health Education/Programs

- Women's Health Information Line 459-5536
- Lifestream Library Resource Center
- Lifestream Women of the Year Program
- Healthline Radio Show
- HEALTHLINES Phone-in Information System - 459-5514

Sheboygan Memorial Medical Center
2629 N. 7th Street
Sheboygan, Wisconsin 53083-4998
(414)457-5033
**Mission/Vision Statement**

Our mission is to responsibly provide quality, cost effective mental health and addiction medicine services to our patients and community, in a caring manner that reflects the dignity and individuality of each person.

Milwaukee Psychiatric Hospital will be the provider-of-choice for psychiatric and addiction medicine care for Southeastern Wisconsin and beyond. Leadership will be focused on inpatient, residential, partial and outpatient services for children, adolescents and adults. Select specialty services will include affective disorders, eating disorders and for the impaired professional. Milwaukee Psychiatric Hospital will maintain a fully accredited primary through secondary school, and will continue to provide clinical training to healthcare professionals.

**History**

1884 — Dr. James McBride established Milwaukee Sanitarium in the Village of Wauwatosa.

1895 — Dr. Richard Dewey inaugurated the first program for in-service training of psychiatric attendants in the Midwest.

Early 1900’s — Under the Guidance of Dr. Rock Sleyster, the standards of patient care and development raised the hospital’s image to a nationally recognized level.

1954 — The board of the Ada P. Kradwell Foundation purchased the assets of Milwaukee Sanitarium, creating a non-profit hospital known as the Milwaukee Sanitarium Foundation, Inc.

1955 — Milwaukee Sanitarium Foundation entered into an agreement with the Marquette University School of Medicine (now the Medical College of Wisconsin) to establish an educational program for medical students in psychiatry.

1962 — Department of Social work was organized to increase involvement and participation of families.

1963 — Kradwell High School for adolescents was established and services to meet the specific need of young people 12 through 18 years of age were expanded to include outpatient and day hospital services.

1964 — Milwaukee Sanitarium was renamed Milwaukee Psychiatric Hospital. Outpatient clinic services were expanded through a grant provided by the Allen Bradley Foundation.

1972 — Dewey Center was established to treat alcohol and chemical dependency.

1984 — New 105 bed hospital facility is opened during Milwaukee Psychiatric’s Centennial year.

1993 — February 1, Milwaukee Psychiatric Hospital became the first specialty hospital to affiliate with Aurora Health Care.

**Patient Services**

**Adult Mental Health Services**

- Assessment, Diagnosis, Evaluation
- Center for Specialty Programs
  - Mood Disorders
  - Eating Disorders
  - Anxiety Disorders
  - Dual Diagnosis
  - Post-Traumatic Stress Disorder
- Inpatient, partial hospitalization and outpatient services

**Adult Addiction Medicine Services**

- Assessment, Diagnosis, Evaluation
- Comprehensive treatment for alcohol and other drug addictions
- McBride Center for the Impaired Professional
- Compulsive Gambling/Spending Program
- Herrington Recovery Homes
- Inpatient, residential, partial hospitalization and outpatient services

**Child and Adolescent Services**

- Assessment, Diagnosis, Evaluation
- Inpatient Psychiatric Program
- Inpatient Dual Diagnosis Program
- Eating Disorders
- Adolescent Partial Hospital
- Outpatient Child and Family Center
- Kradwell School (k-12) for inpatient and day hospital students
Accreditations
- Joint Commission on Accreditation of Healthcare Organizations.
- American Association of Psychiatric Services for Children.

Health Education Programs
- Outpatient and Community Services Center Education/Prevention Programs - 454-6500.
- School Support Program: Educational and training services for school personnel and parent groups - 454-6489.

Professional Education Programs
Milwaukee Psychiatric Hospital is affiliated with the Medical College of Wisconsin for fellowship programs in child and adolescent psychiatry and addiction medicine. Milwaukee Psychiatric Hospital is an undergraduate teaching facility of the Medical College of Wisconsin in psychiatry and addiction medicine.
Milwaukee Psychiatric Hospital has a clinical affiliation with St. Luke's and St. Mary's Family Practice Residency Program for residents in attendance in mental health and addiction medicine.
Milwaukee Psychiatric Hospital is affiliated with the Medical College of Wisconsin, Department of Internal Medicine through rotations in psychiatry and addiction medicine.
Milwaukee Psychiatric Hospital is a clinical learning site for student nurses from Marquette University, University of Wisconsin-Milwaukee, Cardinal Stritch College, Carroll-Columbia, and Milwaukee Area Technical College (MATC).

Community Partnerships and Memberships
Member of:
- National Association of Psychiatric Health Systems
- American Hospital Association
- Wisconsin Hospital Association
- Medical College of Wisconsin Affiliated Hospitals
- Hospital Council of Greater Milwaukee
- American Society of Addiction Medicine
- State Medical Society on Alcohol and Other Drug Abuse
- Osteopath Society for Impaired Physicians Board
- National Association of Medical Staff Services
- Wauwatosa Chamber of Commerce

Home to:
- McBride Center for the Impaired Professional
- Kradwell School
- Child & Family Center

Associations:
- Mental Health Association of Milwaukee County
- Alliance for the Mentally Ill

Community Affiliations:
- West Allis-West Milwaukee Alliance Against Drugs
- Tosa United

Medical Staff
Members 105
Active 70
Consulting 28
Honorary 2
House 5
Allied Health 70

Locations
Main Hospital Campus
1220 Dewey Avenue, Wauwatosa, WI
(414) 454-6600

Main Campus includes:
Bugbee Outpatient Community Services Center
454-6500
Child and Family Center
454-6500
Herrington Recovery Homes
454-6690
Kradwell School
454-6590
Lorton Professional Building
454-6610
Village Center
454-6690

Satellite Offices:
North Shore Clinic
Suite 209, 5205 N. Ironwood Road
Glendale, WI 53214
964-2828

New Berlin Community Counseling Center
14555 W. National Avenue
New Berlin, WI 53151
796-8426

West Allis Counseling Center
8800 W. Lincoln Avenue
West Allis, WI 53227
(414) 541-4300

McBride Center - Madison
1050 Regent Street
Madison, WI 53715
(608) 253-1116
1992-93 Fact Sheet

Mission Statement
Sinai Samaritan Medical Center, an integral part of the Aurora Health Care system, is a major community teaching hospital committed to our location in the heart of the city and dedicated to improving the health status of the diverse people we serve. We provide access to comprehensive health care services emphasizing established values, education, and continuous improvement in quality and cost effectiveness. Our Medical Staff and health care practitioners work together to provide primary, specialty and select tertiary care services delivered in an individualized, personalized and holistic manner.

1992 Patient Service Statistics

- Adult inpatient admissions: 16,646
- Days of adult care: 82,463
- Average length of stay (days): 4.95
- Emergency visits: 58,180
- Primary Care and Pediatric Visits: 40,012
- Geriatrics Institute visits: 11,861
- Same day surgeries: 8,237
- Total invasive heart procedures: 2,170
- Psychiatry outpatient service hours: 26,421
- Sports Medicine Institute visits: 12,153
- Women's Health Assessment & OB/GYN clinic visits: 33,893
- Midwife visits: 11,000
- Babies: 4,600
- Neonatal Intensive Care admissions: 385
- Sexual Assault Treatment Center visits: 1,112
- Women's Information Line calls: 32,522

Accreditations
- Joint Commission on Accreditation of Healthcare Organizations
- Commission on Accreditation of Rehabilitation Facilities
- Cancer Program Accreditation through the American College of Surgeons
- Accreditation Council for Continuing Medical Education of the American Medical Association
- College of American Pathologists Laboratory Accreditation
- Mammography Program Accreditation through the American College of Radiology
- American Association of Blood Banking Laboratory Accreditation

Patient Services

Cardiovascular Medicine
- Milwaukee Heart Institute
- Prevention/Rehabilitation
- Diagnosis/Treatment
- Research/Education
- Milwaukee Heart Research Project
- Mobile Cardiac Pulmonary Testing

Gastroenterology
- Comprehensive Diagnostics
- Advanced Therapeutic Endoscopy
- Clinical Gastrointestinal Research Center
- Center for Inflammatory Bowel Disease

Mental Health
- Alcohol and Other Drug Abuse (AODA)
- Anxiety Disorders Therapy
- Diagnostic/Evaluation Services
- Behavioral Medicine Services
- Inpatient/Outpatient Services

Oncology
- Medical Oncology Clinic
- Radiation Oncology Program

Orthopaedics/Rehabilitation
- Physical/Occupational Therapy
- Speech/Audiology Services
- Inpatient Rehabilitation Program
- Sports Medicine Institute

Primary Care
- Geriatrics Institute
- Primary Care Clinic
- Family Care Center
- Pediatric Clinic
- Johnston Primary Care Clinic
- Young Adult Program

Women's Health
- Inpatient Obstetrics Unit
- OB/GYN Clinic
- Neonatal Intensive Care Unit
- Sexual Assault Treatment Center
Our History & Heritage
1863 — Reverend William A. Passavant, Sr., opened Milwaukee Hospital, which became Lutheran Hospital of Milwaukee.
1902 — The Jewish Hospital Association founded Mount Sinai Hospital.
1910 — An order of German Protestant nursing sisters founded Deaconess Hospital.
1980 — Deaconess and Lutheran Hospitals merged, forming Good Samaritan Medical Center.
1984 — Good Samaritan Medical Center affiliated with St. Luke’s Medical Center, forming St. Luke’s Samaritan Health Care.
1987 — Good Samaritan merged with Mount Sinai, forming Sinai Samaritan Medical Center. Aurora Health Care became the new name of the parent company.
1993 — Milwaukee Heart Institute grand opening.

Health Education/Programs
• CALL-A-NURSE — 342-7676
• Sports Medicine Hotline — 283-7776
• Women’s Information Line — 344-0233
• Freedom 55/65 Program
• Health Matters — WISN-TV Channel 12
• Health screenings
• MasonCare
• Support groups/classes

Advisory Boards
• Milwaukee Heart Institute
• WomenSource Advisory Council

Physician Training Affiliations
• The University of Wisconsin Medical School for residency programs in internal medicine, obstetrics, gynecology and psychiatry; and for fellowships in cardiology, gastroenterology and geriatrics
• The Medical College of Wisconsin graduate program through rotations in anesthesiology, orthopaedics and surgery

Clinical Affiliations
• Marquette University, the University of Wisconsin (UW) - Milwaukee, the UW-Stevens Point, Cardinal Stritch College, Marion College and Milwaukee Area Technical College (MATC) for student nurses
• The UW-Madison and the UW-Oshkosh for graduate nursing students
• The UW-Milwaukee, the UW-Madison and Mount Mary College for occupational therapy
• Marquette University, the UW-LaCrosse and the UW-Madison for physical therapy
• Marquette University, the UW-Madison and the UW-Stevens Point for speech pathology

Community Partnerships and Memberships
Founding organizations:
• Lutheran Church
• Milwaukee Jewish Community
• United Church of Christ
Member of:
• American Hospital Association (Aurora Health Care)
• Variety Club of Wisconsin
• Wellness Council of Southeastern Wisconsin
• West End Community Association
• Westown Association
• Wisconsin Hospital Association
• Association of American Medical Colleges
• National Association of Rehabilitation Facilities
Home to:
• American Liver Foundation
• Milwaukee Heart Research Project
• Wisconsin Chapter of the Crohns & Colitis Foundation
Associations:
• Arthritis Foundation
• International Foundation of Bowel Dysfunction
• Grand Lodge Free and Accepted Masons of Wisconsin
• Indian Health Board
• Johnston Community Health Center
• Milwaukee Admirals • Milwaukee Kickers • Milwaukee Wave
Neighborhood development projects:
• Avenues West • Campus Circle • Johnson Square
Cooperative educational programs:
• Inroads Intern Program
• Jewish Community Center
• Milwaukee Public Schools • North Division High School
• Sarah A. Scott Middle School • Mentor Program

Medical Staff/Faculty
Active 307
Consulting 38
Courtesy 228
Emeritus 78
Provisional 83
Senior 47

Sinai Samaritan Medical Center
East Campus: 945 North 12th Street:
West Campus: 2000 West Kilbourn Avenue
Milwaukee, Wisconsin 53233
(414) 345-3400
Health care is the most personal service that anyone will ever receive. It must be provided in an environment that is sensitive to the physical, emotional and spiritual needs of each patient. It must also be sensitive to the economic constraints of patients and the community as a whole. It is within this framework that St. Luke's Medical Center maintains a firm commitment to providing the very best in high-quality diagnostic and treatment services.

As a pioneer in many areas of medical frontiers, the hospital continues to seek to expand its horizons. Only through the dedication and innovation of its employees, medical staff, board members and volunteers is St. Luke's able to fill the demanding role as the busiest hospital in the state. The quality of health care provided at St. Luke's Medical Center is a testament to their dedication, commitment to excellence, compassion and caring.

1992 Patient Service Statistics

<table>
<thead>
<tr>
<th>Category</th>
<th>Statistics</th>
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<tbody>
<tr>
<td>Inpatient Admissions</td>
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<tr>
<td>Days of Care</td>
<td>167,452</td>
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<tr>
<td>Average Length of Stay (days)</td>
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<tr>
<td>Intensive Care Days</td>
<td>19,713</td>
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<tr>
<td>Emergency Visits</td>
<td>39,473</td>
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<tr>
<td>Outpatients Visits</td>
<td>229,907</td>
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<tr>
<td>Family Practice Center Visits</td>
<td>16,082</td>
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<tr>
<td>Total Invasive Heart Procedures</td>
<td>13,525</td>
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<tr>
<td>Includes cardiac catheterizations, coronary angioplasty, electrophysiology &amp; ablation procedures, and heart surgeries</td>
<td>21,566</td>
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<tr>
<td>Cardiac Rehabilitation Visits</td>
<td>41,908</td>
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<tr>
<td>Radiation Therapy and Chemotherapy Treatments for Cancer Patients</td>
<td>11,992</td>
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<tr>
<td>Hospital Same Day Surgeries</td>
<td>4074</td>
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<tr>
<td>St. Luke's Surgery Center Cases</td>
<td>2114</td>
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<td>Inpatient Rehabilitation Days</td>
<td>14,572</td>
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<td>Hyperbaric Medicine Treatments</td>
<td>2485</td>
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<td>Births</td>
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</tbody>
</table>

1992 Highlights

To consolidate outpatient care delivery and simplify access to medical services, St. Luke's completed construction of a 3-story Outpatient/Main Entrance Facility in December 1992.

Outpatient cancer services, featuring the Vince Lombardi Cancer Clinic, the Radiation Oncology Department and Immunotherapy Program, were brought together in the new addition. The Lombardi Clinic, supported in part by funds raised by Lombardi Classic, nearly tripled in size.

A new Emergency Department opened in the Fall with one-third greater patient capacity and offering improved access to both surgery and radiology. Healthcare officials from throughout the Midwest have visited to observe the area's unique design and patient care structure.

A new cardio-vascular recovery unit, a refurbished medical-respiratory intensive care unit and a four story addition to the hospital's cardiac and medical/surgical patient care facility helped meet the growing demand for St. Luke's advanced cardiac and medical specialties.

St. Luke's Immunotherapy Program, one of the few community hospital-based programs in the country, received a $1 million contribution from Security Bank to help establish a new biological research laboratory. The Immunotherapy program also became the first site in Wisconsin to participate in the clinical trial of a cancer vaccine for melanoma skin cancer.

Two new electrophysiology labs with complete support services opened to address the needs of patients with problems in the electrical conduction of their hearts. New interventional cardiology equipment was installed that allows physicians to perform peripheral vascular and coronary procedures simultaneously.

Outpatient Rehabilitation Services continued to rapidly grow in 1992 with the number of treatments provided up 17% over 1991. The Work Injury Program achieved accreditation from the Commission on Accreditation of Rehabilitation Facilities, and is now one of only five such accredited programs in the state.

St. Luke's Autologous Bone Marrow Program focused on the treatment of breast cancer and tripled its patient volume over the previous year.

St. Luke's was one of four hospitals in the United States approved by FDA to conduct Phase II clinical trials of Transmyocardial Laser Revascularization (TMLR). This procedure, developed after 20 years of research by a cardiovascular surgeon on staff at St. Luke's, uses a high-powered laser to create new channels of blood flow through the beating heart. The procedure attracted media interest across the nation.
Accreditations

- Joint Commission on Accreditation of Healthcare Organizations
- Commission on Accreditation of Rehabilitation Facilities
- Cancer Program Accreditation through the American College of Surgeons
- Accreditation Council for Graduate Medical Education
- College American Pathologists Laboratory Accreditation
- Mammography Program Accreditation through the American College of Radiology
- American Association of Blood Banking Laboratory Accreditation
- Committee on Allied Health Education and Accreditation
- Nuclear Medicine Regulatory Commission
- American College of Nuclear Physicians
- American Sleep Disorders Association Accreditation
- Joint Review Committee on Education in Diagnostic Medical Sonography
- Intersocial Commission for the Accreditation of Vascular Laboratories
- Joint Review Committee on Education in Radiologic Technology
- American Accreditation of Tissue Banks

Medical Staff

Active: 312
Consulting: 16
Courtesy: 199
Associate: 179
Honorary: 87

Centers of Excellence

Cardiac Care:
More heart surgeries, heart transplants, cardiac catheterization and angioplasties are performed at St. Luke’s than at any other hospital in Wisconsin. Innovation and dedication to excellence have placed St. Luke’s on the leading edge of cardiac care for decades.
- Comprehensive diagnostic, medical and surgical care
- Complete vascular and heart surgery program
- Medicare-approved heart transplant program, and UNOS-approved heart, lung and heart-lung transplant program
- Experienced cardiac intensive and medical-surgical nursing care
- Practical cardiac wellness and prevention programs, including Heart Disease Reversal Program

Cancer Care:
St. Luke’s offers the very latest cancer treatment techniques from surgery and chemotherapy to radiation therapy, autologous bone marrow transplantation and immunotherapy. In 1992, the hospital treated the highest volume of cancer patients of any hospital in southeastern Wisconsin.
- Advanced technology, treatments and rehabilitation
- Vince Lombardi Cancer Clinic for outpatient services
- Comprehensive prevention, screening and education
- Comforting hospice care
- Understanding and knowledgeable support groups

Women’s Healthcare:
St. Luke’s is responding to the growing demand for women’s health care services and offers a full range of diagnostic, medical, surgical, therapeutic and educational health service specifically for women throughout the different phases of their lives. Total maternity care, family care, lifestyle programs, personal health care, infertility services, membership program and physician referral are all components of St. Luke’s growing Women’s Healthcare Services.
- Birthing Center offering one-room maternity care and 24-hour anesthesiology
- Nursery Center to care for infants with special needs
- Dedicated Women’s Health Unit for women’s surgery
- Childlife specialist on Pediatric Unit
- Sick-child care service
- Educational lectures and classes, and support groups

Rehabilitation Services:
As the largest hospital-based rehabilitation center in Milwaukee, St Luke’s helps people from all walks of life, of all ages. Recreational and physical therapists, speech and language pathologists, social workers, and registered nurses specially trained in caring for rehabilitation patients all work together to assist patients in putting their lives back together.
- Individually tailored stroke, orthopedic, ampute, brain injury and pediatric rehabilitation programs
- Dedicated physician specialists
- Comprehensive Work Injury Program and Sports Medicine Clinic
- Four convenient outpatient locations

Emergency Services:
Teams of highly skilled, board-certified physicians and nurses specially trained in emergency care are available around the clock at St. Luke’s Emergency Department. State-of-the-art technology is essential for treating medical emergencies, and St. Luke’s is equipped with some of the most advanced technologies in Wisconsin for treating patients of carbon monoxide poisoning and smoke inhalation.
- Renowned receiving center for cardiac emergencies
- Physician-monitored critical care interhospital transport service
- Trained and experienced crisis-intervention team
- International Travel Clinic

St. Luke’s Medical Center has a full complement of medical and surgical specialties to meet the needs of the community, including:
- ear, nose and throat • endocrine-diabetes • gastroenterology
- hyperbaric medicine • kidney stone therapy • laser and endoscopic specialty treatment • mental health • neurology
- neurosurgery • ophthalmology • orthopedics • pulmonary medicine • sleep disorders • weight management. The hospital also offers a Doctor Referral Service with access to nearly 400 physicians in the Milwaukee area. A registered nurse answers each call at 414-649-6565.

St. Luke’s Medical Center
2900 West Oklahoma Avenue
Milwaukee, Wisconsin 53215
(414) 649-6000